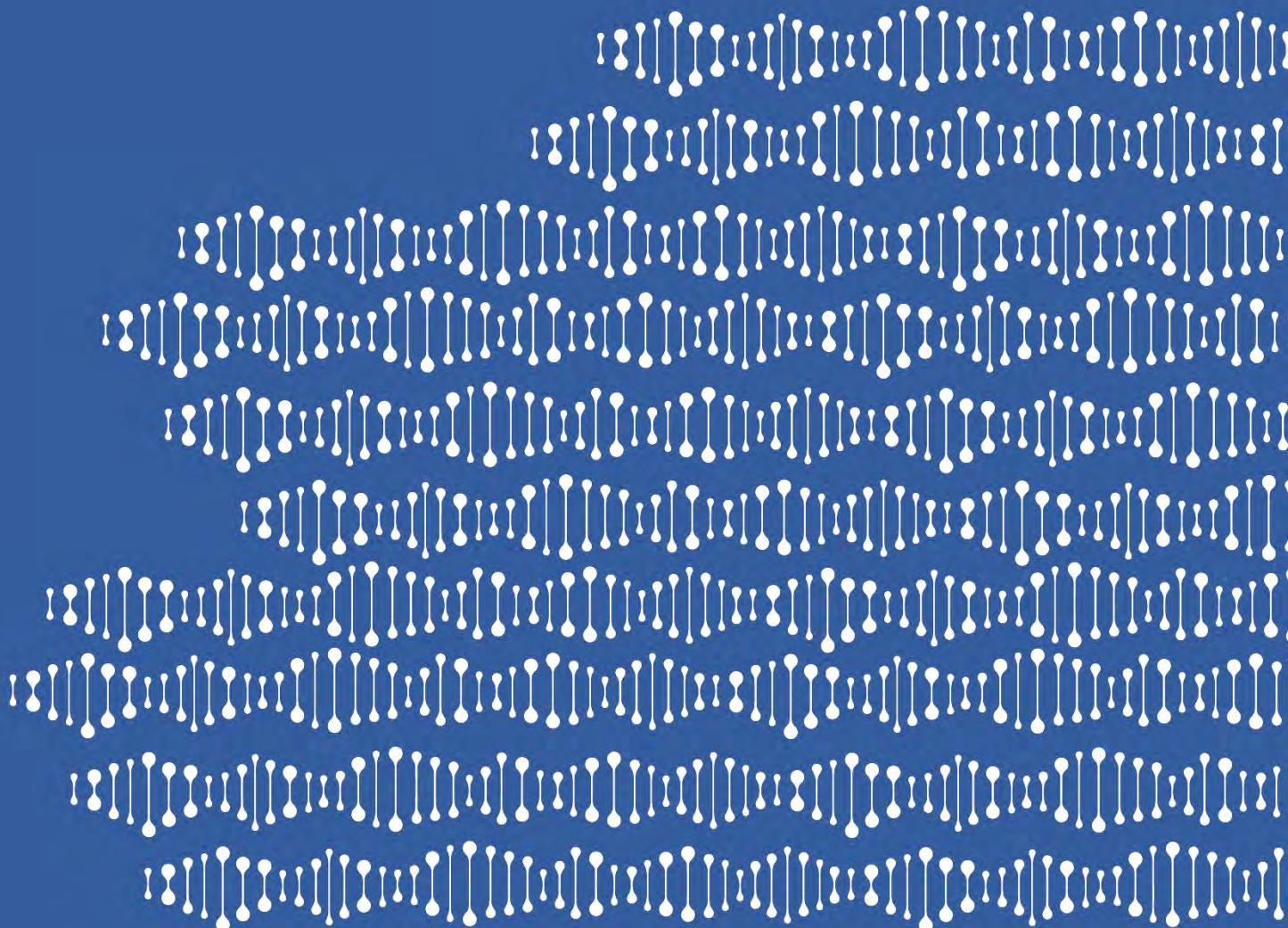




# Proposed Grant Awards

February 15, 2017



*Information in this packet is confidential until announced at the  
February 15, 2017, Oversight Committee meeting.*

Academic Research Program Priorities Addressed by Recommended Awards							
Recruitment of outstanding cancer researchers to Texas	Investment in Core Facilities	A broad range of innovative, investigator-initiated research projects	Prevention and early detection	Computational biology and analytic methods	Childhood Cancers	Cancers of Importance in Texas	Disparities

\$22,000,000  
5 Awards

## Program Priorities

\*Some grants awards address more than one program priority and will be double counted.

Prevention Program Priorities Addressed by Recommended Awards February 15, 2017		
Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk prevalence	Prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk prevalence	Prioritize underserved populations
<b>\$7,530,197</b> <b>6 projects</b> <ul style="list-style-type: none"> <li>PP170004 – TTUHSC El Paso (cervix) (\$1,499,993)</li> <li>PP170010 – UTSW (cervix) (\$1,499,816)</li> <li>PP170012 – U of N TX HSC (breast, cervix, colorectal, liver, HPV) (\$1,491,550)</li> <li>PP170015 – Texas A&amp;M (All cancers) (\$300,000)</li> <li>PP170023 – UTMDACC (All cancers) (\$1,494,530)</li> <li>PP170036 – BCM (All cancers) (\$1,500,000)</li> <li>PP170039 – MHHMR Tarrant County (tobacco) (\$1,500,000)</li> <li>PP170042 – University Health System (liver) (\$1,238,838)</li> <li>PP170046 – UTHSC at Houston (HPV) (\$1,499,969)</li> </ul>	<b>\$6,038,616</b> <b>5 projects</b> <ul style="list-style-type: none"> <li>PP170004 – TTUHSC El Paso (cervix) (\$1,499,993)</li> <li>PP170010 – UTSW (cervix) (\$1,499,816)</li> <li>PP170012 – U of N TX HSC (breast, cervix, colorectal, liver, HPV) (\$1,491,550)</li> <li>PP170015 – Texas A&amp;M (All cancers) (\$300,000)</li> <li>PP170023 – UTMDACC (All cancers) (\$1,494,530)</li> <li>PP170036 – BCM (All cancers) (\$1,500,000)</li> <li>PP170039 – MHHMR Tarrant County (tobacco) (\$1,500,000)</li> <li>PP170042 – University Health System (liver) (\$1,238,838)</li> <li>PP170046 – UTHSC at Houston (HPV) (\$1,499,969)</li> </ul>	<b>\$12,024,696</b> <b>9 projects</b> <ul style="list-style-type: none"> <li>PP170004 – TTUHSC El Paso (cervix) (\$1,499,993)</li> <li>PP170010 – UTSW (cervix) (\$1,499,816)</li> <li>PP170012 – U of N TX HSC (breast, cervix, colorectal, liver, HPV) (\$1,491,550)</li> <li>PP170015 – Texas A&amp;M (All cancers) (\$300,000)</li> <li>PP170023 – UTMDACC (All cancers) (\$1,494,530)</li> <li>PP170036 – BCM (All cancers) (\$1,500,000)</li> <li>PP170039 – MHHMR Tarrant County (tobacco) (\$1,500,000)</li> <li>PP170042 – University Health System (liver) (\$1,238,838)</li> <li>PP170046 – UTHSC at Houston (HPV) (\$1,499,969)</li> </ul>

Note: Grant awards are listed under each program priority addressed and the full amount of the award is included to calculate the total amount dedicated to the priority. Some grant awards address more than one program priority and will be double counted.

## Program Priorities



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

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**MEMORANDUM**

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**TO:**           **OVERSIGHT COMMITTEE MEMBERS**  
**FROM:**        JAMES WILLSON, MD, CHIEF SCIENTIFIC OFFICER  
**SUBJECT:**      ACADEMIC RESEARCH RECRUITMENT AWARD  
                  RECOMMENDATIONS FY CYCLES 17.3, 17.4, 17.5 AND 17.6.  
**DATE:**        FEBRUARY 1, 2017

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**Summary and Recommendation:**

The CPRIT Scientific Review Council (SRC) and the Program Integration Committee (PIC) reviewed and recommend funding 5 Academic Research Recruitment awards totaling \$22,000,000 for FY Cycles: 17.3, 17.4, 17.5 and 17.6.

The recommendations are presented in two slates corresponding to grant mechanisms. Please note the SRC approved application RR170007 "*The Recruitment of Rising STAR Dr. Andrea Ventura*", nominated by the University of Texas M.D. Anderson Cancer Center, was subsequently declined by the candidate.

Grant Type		SRC Recommendations
3	Recruitment of Established Investigators	\$18,000,000
2	Recruitment of First Time -Tenure Track Faculty Members	\$4,000,000
<b>5</b>	<b>Total</b>	<b>\$22,000,000</b>

**Program Priorities Addressed:**

The applications proposed address the Academic Research Program priority, Recruitment of outstanding cancer researchers to Texas.

Program Priorities Addressed by Grant Recommendations		
# Awards	Program Priorities	Funding
5	Recruitment of outstanding cancer researchers to Texas	\$22,000,000

## **1. RECRUITMENT OF ESTABLISHED INVESTIGATORS SLATE FY17.3, 17.4, 17.5 and 17.6**

### **Peer Review Recommendations**

The applications were evaluated and scored by the Scientific Review Council (SRC) to determine the candidates' potential to make a significant contribution to the cancer research program of the nominating institution. Review criteria focused on the overall impression of the candidate and his/her potential for continued superb performance as a cancer researcher, scientific merit of the proposed research program, his/her long-term contribution to and impact on the field of cancer research, and strength of the institutional commitment to the candidate.

### **Purpose of Recruitment of Established Investigators Awards:**

The aim is to recruit outstanding senior research faculty with distinguished professional careers and established cancer research programs to academic institutions in Texas.

### **Funding levels for Recruitment of Established Investigators Awards:**

Up to \$6 million over a period of 5 years.

### **Recommended Projects:**

Three candidates are being recommended for Established Investigator Awards:

- 3 at The University of Texas M.D. Anderson Cancer Center

Below is a listing of the candidates with their associated expertise.

**RR170013**

**Candidate: Pier Giuseppe Pelicci, MD, PhD**

**Funding Mechanism:** Recruitment of Established Investigators

**Applicant Organization:** The University of Texas MD Anderson Cancer Center

**Original Organization of Nominee:** European Institute of Oncology (IEO) in Milan, University of Milan

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 1.0

**Recommended Total Budget Award and Duration:** \$6,000,000.

**CPRIT Priorities addressed:** Recruitment of outstanding cancer researchers to Texas

### **Description:**

Pier Giuseppe Pelicci, MD, PhD is an internationally renowned investigator who has made seminal contributions to the study of leukemia biology and therapeutics. He is currently Director of Research and Chairman of the Department of Experimental Oncology at the European Institute of Oncology (IEO) in Milan, and Full Professor of General Pathology at the University of Milan. Dr. Pelicci is being recruited as the inaugural chair of the Department of Hematopoietic Biology and Malignancy within the Division of Cancer Medicine at The University of Texas MD Anderson Cancer Center. CPRIT's Scientific Review Council noted that Dr. Pelicci is a creative scientist and skilled leader whose talents are exactly what is needed to orchestrate a translational research program that will take full advantage of the large leukemia care program at MD Anderson and propel it to one of international renown.

**RR170011**

**Candidate:** Gerard Evan, PhD

**Funding Mechanism:** Recruitment of Established Investigators

**Applicant Organization:** The University of Texas MD Anderson Cancer Center

**Original Organization of Nominee:** University of Cambridge & Cambridge Cancer Center

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 1.6

**Recommended Total Budget Award and Duration:** \$6,000,000.

**CPRIT Priorities addressed:** Recruitment of outstanding cancer researchers to Texas

**Description:**

Gerard I. Evan, Ph.D., FMedSci, FRS is being recruited from the University of Cambridge, United Kingdom, to The University of Texas MD Anderson Cancer Center as Professor in the Department of Cancer Biology. Dr. Evan is currently the Sir William Dunn Professor of Biochemistry & Head of Department of Biochemistry at the University of Cambridge & co-director of the Molecular and Cell Biology Program of the Cambridge Cancer Center. Dr. Evan is one of the world's foremost experts in the study of oncogenes - the genes that drive the development of cancer. In recognition of his accomplishments, Dr. Evan was elected to the European Molecular Biology Organization in 1996, the UK Academy of Medical Sciences in 1999, the Royal Society of UK in 2004, the European Academy of Sciences in 2005 and the European Academy of Cancer Sciences in 2015. CPRIT's Scientific Review Council noted that Dr. Evan's basic research focus on the Myc oncogene will complement existing drug discovery and disease focused research at MD Anderson.

**RR170008**

**Candidate:** Yair Reisner, PhD

**Funding Mechanism:** Recruitment of Established Investigators

**Applicant Organization:** The University of Texas MD Anderson Cancer Center

**Original Organization of Nominee:** Weizmann Institute of Science in Israel.

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 1.8

**Recommended Total Budget Award and Duration:** \$6,000,000.

**CPRIT Priorities addressed:** Recruitment of outstanding cancer researchers to Texas

**Description:**

Yair Reisner, PhD is being proposed for the CPRIT Established Investigators Award to support his recruitment to the University of Texas MD Anderson Cancer Center from the Weizmann Institute of Science in Israel. Dr. Reisner is an internationally recognized investigator whose work has fundamentally transformed the standards of care for hematopoietic transplantation. His recruitment will enhance MD Anderson's abilities to make further improvements in the efficacy of hematopoietic stem cell transplantation for treatment of cancer and to develop novel approaches for cellular cancer immunotherapy.

**2. RECRUITMENT FIRST-TIME TENURE TRACK FACULTY MEMBERS  
SLATE FY17.1 and 17.2**

**Peer Review Recommendations**

The applications were evaluated and scored by the Scientific Review Council (SRC) to determine the candidates' potential to make a significant contribution to the cancer research program of the nominating institution. Review criteria focused on the overall impression of the candidate and his/her potential for continued superb performance as a cancer researcher, his/her scientific merit of the proposed research program, his/her long-term contribution to and impact on the field of cancer research, and strength of the institutional commitment to the candidate.

### **Purpose of First Time Tenure Track Faculty Recruitment**

The aim is to recruit and support very promising emerging investigators, pursuing their first faculty appointment in Texas, who have the ability to make outstanding contributions to the field of cancer research.

### **Funding levels for First Time Tenure Track Faculty Members Recruitment**

Up to \$2 million over a period of 4 years.

#### **Recommended Projects:**

Two candidates are being recommended for First-time Tenure Track Faculty Member Awards:

- 1 at The University of Texas Southwestern Medical Center
- 1 at Rice University

Below is a listing of the candidates with their associated expertise.

#### **RR170010**

**Candidate: Ram Madabhushi, PhD**

**Funding Mechanism:** Recruitment of First Time Tenure Track Faculty Member

**Applicant Organization:** University of Texas Southwestern Medical Center

**Original Organization of Nominee:** MIT

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.0

**Recommended Total Budget Award and Duration:** \$2,000,000.

**CPRIT Priorities addressed:** Recruitment of outstanding cancer researchers to Texas

#### **Description:**

Dr. Madabhushi obtained his PhD from Weill Cornell Medical Center and postdoctoral training at MIT with Dr. Li-Huei Tsai. At MIT he made important observations about genomic stability and DNA repair and plans to extend this work to investigation of the mechanisms underlying oncogenic gene fusions in prostate cancer and will collaborate with UT Southwestern prostate cancer experts to identify new targets for therapeutic intervention.

#### **RR170014**

**Candidate: Han Xiao, PhD**

**Funding Mechanism:** Recruitment of First Time Tenure Track Faculty Member

**Applicant Organization:** Rice University

**Original Organization of Nominee:** The Scripps Research Institute

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.0

**Recommended Total Budget Award and Duration:** \$2,000,000.

**CPRIT Priorities addressed:** Recruitment of outstanding cancer researchers to Texas

#### **Description:**

Dr. Xiao is a protein chemist who has trained in two of the world's most prominent labs in Chemical Biology: that of Prof. Peter Schultz at The Scripps Research Institute where he completed his Ph.D. and that of Prof. Carolyn Bertozzi at Stanford where he is completing a Life Sciences Research Foundation postdoctoral fellowship. At Rice he will establish a drug discovery program and will collaborate with Texas Medical Center Immunotherapists, Dr. Malcolm Brenner at Baylor and Texas Childrens Cancer Center and James Allison at MD Anderson to design novel antibodies to control and modify critical cell-cell interactions which mediate immune cell killing. CPRITs Scientific Review Council commented that the proposed work is innovative and holds tremendous promise for impact.

**Attachment #1**

Academic Research Program Priorities Addressed by Recommended Awards							
Recruitment of outstanding cancer researchers to Texas	Investment in Core Facilities	A broad range of innovative, investigator-initiated research projects	Prevention and early detection	Computational biology and analytic methods	Childhood Cancers	Cancers of Importance in Texas	Disparities

\$22,000,000  
5 Awards

\*Some grants awards address more than one program priority and will be double counted.



CANCER PREVENTION & RESEARCH  
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**Attachment #2**  
RFA Descriptions

- **Recruitment of Established Investigators (RFA R-17-1 REI):**  
Recruits outstanding senior research faculty with distinguished professional careers and established cancer research programs to academic institutions in Texas.  
Award: Up to \$6 million over a period of five years.
- **Recruitment of First-Time Tenure Track Faculty Members (RFA R-17-1. RFT):**  
Supports very promising emerging investigators, pursuing their first faculty appointment in Texas, who have the ability to make outstanding contributions to the field of cancer research.  
Award: Up to \$2 million over a period of four years.



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## CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

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### MEMORANDUM

**TO:** CPRIT OVERSIGHT COMMITTEE  
**FROM:** REBECCA GARCIA, PH.D., CHIEF PREVENTION AND COMMUNICATIONS OFFICER  
**SUBJECT:** PREVENTION GRANT RECOMMENDATIONS  
**DATE:** FEBRUARY 1, 2017

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#### **Summary and Recommendation:**

The Program Integration Committee (PIC) has reviewed the rank ordered list of applications submitted by the CPRIT Prevention Review Council and recommends awarding 9 projects totaling \$12,024,696. The PIC voted to defer one project, PP170037 until a future FY17 meeting, pending sufficient funding. The grant recommendations are presented in 3 slates.

Number	Grant Type	Amount
5	<i>Competitive Continuation/Expansion for Evidence-Based Cancer Prevention Services</i>	\$ 7,486,073
3	<i>Evidence-Based Cancer Prevention Services</i>	\$ 4,238,623
1	<i>Dissemination of CPRIT-Funded Cancer Control Interventions</i>	\$ 300,000

#### **Background:**

##### Cycle 17.1 RFAs

Four RFAs were released May 26, 2016 and applications were due August 30. Thirty-six (36) prevention grant applications were submitted in response to the RFAs. Six (6) were submitted in response to the Cancer Prevention Promotion and Navigation to Clinical Services mechanism; however, no applications are being recommended in this mechanism. Peer review was conducted in December 2016 and the programmatic review by the Prevention Review Council was conducted January 20, 2017.

#### Program Priorities Addressed

All of the recommended applications address one or more of the Prevention Program priorities. Some applications address more than one priority. See Attachment 1 for additional detail.

<b>Number of Applications Addressing Priorities</b>	
6	Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk prevalence
5	Prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk prevalence
9	Prioritize underserved populations

## ***Competitive Continuation/Expansion Grants***

**Mechanism:** This mechanism is intended to fund the continuation or expansion of currently or previously funded projects that have demonstrated exemplary success as evidenced by progress reports and project evaluations. The award ranges from \$150,000 to \$1.5 million up to three years, depending on the type of project proposed.

### **Recommended projects (5): \$7,486,073**

Eleven (11) applications were submitted in this mechanism. Five (5) competitive continuation/expansion projects are recommended. The Committee is recommending the use of the award deferral process to defer the decision to recommend one project, PP170037 until a future FY17 meeting, pending sufficient funding.

### **Project Descriptions**

**PP170036**, Expansion and Continuation of Web-based Clinical Decision Support to Disseminate Tailored Screening Recommendations for Survivors of Pediatric Cancer

**Program Director:** David G. Poplack

**Applicant Organization:** Baylor College of Medicine

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 1.3

**Recommended Total Budget Award and Duration:** \$1,500,000/3 years

**CPRIT Priorities addressed:** Prioritize underserved populations

The project is a Survivor-Centered Service System (SCSS), which includes two Passport For Care (PFC) Websites providing decision support—one for clinicians and one for survivors. The SCSS provides survivor navigation services to facilitate enrollment in the PFC and assist those deciding to seek follow-up screening for late effects. The SCSS provides direct access to their treatment information, follow-up screening recommendations and other health information. The Clinician Website (PFC-CW) uses an algorithm to generate a set of potential late effects tailored to the survivor's treatment history and a set of guideline-based recommendations for follow-up screening.

**PP170004**, DE Casa 2: Cervical Cancer Prevention in El Paso and West Texas

**Program Director:** Navkiran K Shokar

**Applicant Organization:** Texas Tech University Health Sciences Center at El Paso

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.1

**Recommended Total Budget Award and Duration:** \$1,499,993/3 years

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

The project expands to include 105 rural, frontier and border counties in West Texas. Screening services will initially be provided to 19 counties that contain half of the population of the area: 10 within the Big Bend Country region and 9 counties in the Panhandle plains region. The enhanced program incorporates new outreach strategies, education, expanded access to cervical cancer screening, and a training curriculum for nursing students and community health workers.

**PP170023**, Active Living After Cancer: Combining a Physical Activity Program with Survivor Navigation

**Program Director:** Karen M Basen-Enquist

**Applicant Organization:** The University of Texas M.D. Anderson Cancer Center

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.1

**Recommended Total Budget Award and Duration:** \$1,494,530/3 years

**CPRIT Priorities addressed:** Prioritize underserved populations

The majority of cancer survivors do not adhere to physical activity recommendations for survivors. The project will expand to include El Paso in addition to Houston. The 12-session program will teach behavioral and cognitive skills to help cancer survivors increase their physical activity by incorporating moderate intensity physical activity into daily life. The program also will provide support related to health and quality of life issues, including fatigue, psychological distress, nutrition, and communication with health care providers, and will navigate participants to appropriate services. The program will use telementoring to train implementation partners.

**PP170012**, Building Bridges: Cancer Prevention Education and Screening for Refugees

**Program Director:** Amy L Raines-Milenkov

**Applicant Organization:** University of North Texas Health Science Center at Fort Worth

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.3

**Recommended Total Budget Award and Duration:** \$1,491,550/3 years

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

The project's priority refugee populations include the Chin, Karen, Bhutanese, Somali, Central African, Congolese and Arabic-speaking/Middle Eastern adults and adolescents (9-17) living in Denton and Tarrant County. Project approach includes: Refugee community leader support and guidance, lay health educator outreach, education, and navigation to preventive and follow-up services for cervical, breast, colorectal cancer and Hepatitis B screening and HPV vaccination.

**PP170039**, Nicotine Recovery Program (NRP)

**Program Director:** Gina Hollis

**Applicant Organization:** Mental Health Mental Retardation of Tarrant County

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 3.4

**Recommended Total Budget Award and Duration:** \$1,500,000/3 years

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

The project proposes to address high tobacco use and related cancer risks for individuals with behavioral health disorders. The project strategy is to (1) train MHMR Tarrant behavioral health staff in tobacco cessation education; (2) provide comprehensive tobacco treatment to individuals with behavioral health disorders, including those who are also homeless; (3) provide comprehensive tobacco treatment to behavioral health treatment staff; and (4) targeted outreach through schools, community events and those referred to juvenile justice system to provide education to youth 10 to 24 about tobacco use behaviors.

## **Evidence-Based Cancer Prevention Services Slate**

**Mechanism:** This mechanism funds projects that provide the delivery of evidence-based prevention services (e.g., screening, survivorship services). The maximum grant award is up to \$1.5 million for up to three years.

### **Recommended projects (3): \$4,238,623**

Eighteen (18) applications were submitted in this mechanism. Three (3) new evidence-based cancer prevention services projects are recommended.

**PP170046**, Using social marketing and mobile school-based vaccination clinics to increase HPV vaccination uptake in high-risk geographic areas

**Program Director:** Paula Cuccaro

**Applicant Organization:** The University of Texas Health Science Center at Houston

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 1.8

**Recommended Total Budget Award and Duration:** \$1,499,969/3 years

**CPRIT Priorities addressed:** Prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

This project will include a 3-prong strategy to increase vaccine uptake among minority youth in medically underserved areas (MUAs) in Houston, Texas: 1) A parent-focused social marketing campaign to increase knowledge, positive attitudes, and intentions regarding the HPV vaccine, 2) partnering with Texas Children's Mobile Clinic Program to provide adolescent school-based vaccination clinics held in public middle schools and 3) continuing nursing education to increase school nurses' knowledge, positive attitudes, and effective communication with parents regarding HPV vaccine.

**PP170010**, Cervical Cancer Screening and Patient Navigation (X-SPAN)

**Program Director:** Keith E Argenbright

**Applicant Organization:** The University of Texas Southwestern Medical Center

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.1

**Recommended Total Budget Award and Duration:** \$1,499,816/3 years

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

This program proposes to support a centralized clinical service delivery model that meets local medical capabilities and the demand for comprehensive cervical cancer screening. This project consists of outreach and health promotion, delivery and navigation, and centralized reimbursement. The specific goals are to (1) demonstrate effective cervical cancer prevention within the 35-county service area that meets nationally established guidelines and reduces the time between diagnosis and start of treatment and (2) ensure prevention services reach women who are not likely to participate in cervical cancer screening and follow-up care in rural and medically underserved communities. The program partners with local community organizations and clinical providers and further supplements capacity with a mobile clinic as needed.

**PP170042**, University Health System Hepatitis Viral Infection and Systematic Treatment Program (HepVISTA)

**Program Director:** Roberto Villarreal

**Applicant Organization:** University Health System

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.5

**Recommended Total Budget Award and Duration:** \$1,238,838

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

South Texas has the highest incidence of Hepatocellular Carcinoma (HCC) in the United States, about 5% higher than the rest of the country. This proposal, HepVISTA, will focus on preventing HCC in baby boomers through expanded hepatitis C virus (HCV) screening, patient and provider education, and culturally and linguistically tailored patient navigation. Patient navigators will connect HCV positive patients to their primary care providers (PCPs) for further medical evaluation and monitoring, including referral to anti-viral treatment, hepatitis education, referrals to a hepatologist, telemedicine consults, and other specialists as needed.

### ***Dissemination of CPRIT-Funded Cancer Control Interventions***

**Mechanism:** This mechanism is intended to fund projects that will facilitate the dissemination and implementation of successful CPRIT-funded, evidence-based cancer prevention and control interventions across Texas. The maximum award is up to \$300,000 with a maximum duration of 24 months.

#### **Recommended projects (1): \$300,000**

One (1) application was submitted to this mechanism and one is being recommended for funding.

**PP170015**, Disseminating Evidence-Based Cancer Genomics Training to Community Health Workers

**Program Director:** Lei-Shih Chen

**Applicant Organization:** Texas A&M University

**Overall Evaluation Score [Rating Scale 1.0 (highest merit) to 9.0 (lowest merit)]:** 2.4

**Recommended Total Budget Award and Duration:** \$300,000/2 years

**CPRIT Priorities addressed:** Prioritize populations disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize geographic areas of the state disproportionately affected by cancer incidence, mortality or cancer risk incidence; prioritize underserved populations

This project proposes to adapt and disseminate the evidence-based cancer genomics training program they developed for health educators (HEs) to Texas community health workers (CHWs). The specific goals are to (1) revise, adapt, translate, and pilot test the cancer genomics training program materials developed in previous CPRIT awards for CHWs; (2) implement, evaluate, and finalize the cancer genomics training materials developed; (3) develop a cancer genomics training dissemination website; and (4) disseminate and promote the website to individual CHWs, CHW programs, and CHW training centers.



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

February 1, 2017

Dear Oversight Committee Members:

I am pleased to present the Program Integration Committee's (PIC) unanimous recommendations for funding 14 grant applications totaling \$34,024,696. The PIC recommendations for five academic research grant awards and nine prevention awards are attached.

Dr. Jim Willson, CPRIT's Chief Scientific Officer, and Dr. Becky Garcia, CPRIT's Chief Prevention Officer, have prepared overviews of the academic research and prevention slates to assist your evaluation of the recommended awards. The overviews are intended to provide a comprehensive summary with enough detail to understand the substance of the proposals and the reasons endorsing grant funding. In addition to the full overviews, all of the information considered by the Review Councils is available by clicking on the appropriate link in the portal. This information includes the application, peer reviewer critiques, and the CEO affidavit for each proposal.

*The PIC used the award deferral process set by CPRIT administrative rule § 703.7(d) to defer the decision of one Competitive Continuation/Expansion Evidence-Based Cancer Prevention Services application until a future FY 2017 meeting. No Oversight Committee action is necessary at this time.*

The approval of these grant recommendations is governed by a statutory process that requires two-thirds of the members present and voting to approve each recommendation. Vince Burgess, CPRIT's Chief Compliance Officer, will certify that the review process for the recommended grants followed CPRIT's award process prior to any Oversight Committee action.

The award recommendations will not be considered final until the Oversight Committee meeting on February 15, 2017. Consistent with the non-disclosure agreement that all Oversight Committee members have signed, the recommendations should be kept confidential and not be disclosed to anyone until the award list is publicly announced at the Oversight Committee meeting. I request that Oversight Committee members not print, email or save to your computer's hard drive any material on the portal. I appreciate your assistance in taking all necessary precautions to protect this information.

If you have any questions or would like more information on the review process or any of the projects recommended for an award, CPRIT's staff, including myself, Dr. Willson, and Dr. Garcia are always available. Please feel free to contact us directly should you have any questions. The programs that will be supported by the CPRIT awards are an important step in our efforts to mitigate the effects of cancer in Texas. Thank you for being part of this endeavor.

Sincerely,  
Wayne R. Roberts  
Chief Executive Officer

## **Academic Research Award Recommendations –**

The PIC unanimously recommends approval of five academic research grant proposals totaling \$22,000,000. The recommended grant proposals were submitted in response to two grant mechanisms: Recruitment of First-Time, Tenure-Track Faculty Members and Recruitment of Established Investigators. The PIC followed the recommendations made by the Scientific Review Council (SRC). The SRC provided the prioritized list of recommendations for the Recruitment awards to the presiding officers on January 25, 2017.

The PIC is required to give funding priority, to the extent possible, to applications that meet one or more criteria set forth in V.T.C.A., TEX. HEALTH & SAFETY CODE § 102.251(a)(2)(C). The PIC determined that these academic research proposals met the following CPRIT funding priorities:

- could lead to immediate or long-term medical and scientific breakthroughs in the area of cancer prevention or cures for cancer;
- strengthen and enhance fundamental science in cancer research;
- ensure a comprehensive coordinated approach to cancer research and cancer prevention;
- are interdisciplinary or interinstitutional;
- address federal or other major research sponsors' priorities in emerging scientific or technology fields in the area of cancer prevention or cures for cancer;
- are matched with funds available by a private or nonprofit entity and institution or institutions of higher education;
- are collaborative between any combination of private and nonprofit entities, public or private agencies or institutions in this state, and public or private institutions outside this state;
- have a demonstrable economic development benefit to this state;
- enhance research superiority at institutions of higher education in this state by creating new research superiority, attracting existing research superiority from institutions not located in this state and other research entities, or enhancing existing research superiority by attracting from outside this state additional researchers and resources;
- address the goals of the Texas Cancer Plan.

### Academic Research Recruitment Grant Award Recommendations

Rank	App ID	Candidate	Mechanism	Organization	Budget	Overall Score
1	RR170013	Giuseppe Pelicci	REI	The University of Texas M.D. Anderson Cancer Center	\$6,000,000	1.2
2	RR170011	Gerard Evan	REI	The University of Texas M.D. Anderson Cancer Center	\$6,000,000	1.6
3	RR170008	Yair Reisner	REI	The University of Texas M.D. Anderson Cancer Center	\$6,000,000	1.8
4	RR170010	Ram Madabhushi	RFTFM	The University of Texas Southwestern Medical Center	\$2,000,000	2.0
5	RR 170014	Han Xiao	RFTFM	Rice University	\$2,000,000	2.0

REI: Recruitment of Established Investigators

RFTFM: Recruitment of First-Time Tenure Track Faculty Members

### **Prevention Award Recommendations –**

The PIC unanimously recommends approval of nine prevention grant proposals totaling \$12,024,696. The recommended grant proposal was submitted in response to the following RFAs: Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services, Evidence-Based Cancer Prevention Services, and Dissemination of CPRIT-Funded Cancer Control Interventions. The PIC unanimously voted to defer one of the applications recommended by the Prevention Review Council (PRC). The PRC provided its recommendation to the presiding officers of the PIC and Oversight Committee on January 24, 2017.

The PIC is required to give funding priority, to the extent possible, to applications that meet one or more criteria set forth in V.T.C.A., TEX. HEALTH & SAFETY CODE § 102.251(a)(2)(C). The PIC determined that these product development proposals met the following CPRIT funding priorities:

- ensure a comprehensive coordinated approach to cancer research and cancer prevention;
- are interdisciplinary or interinstitutional (the PIC chose this factor for Established Company Awards);
- are collaborative between any combination of private and nonprofit entities, public or private agencies or institutions in this state, and public or private institutions outside this state;
- have a demonstrable economic development benefit to this state; and
- address the goals of the Texas Cancer Plan.

### Prevention Grant Award Recommendations

App ID	Mech.	Application Title	PD	Organization	Score	Rank Order	Rec Budget
PP170036	CCE	Expansion and Continuation of Web-based Clinical Decision Support to Disseminate Tailored Screening Recommendations for Survivors of Pediatric Cancers	Poplack, David G	Baylor College of Medicine	1.3	1	\$ 1,500,000
PP170046	EBP	Using social marketing and mobile school-based vaccination clinics to increase HPV vaccination uptake in high-risk geographic areas	Cuccaro, Paula	The University of Texas Health Science Center at Houston	1.8	2	\$ 1,499,969
PP170004	CCE	DE Casa 2: Cervical Cancer Prevention in El Paso and West Texas	Shokar, Navkiran K	Texas Tech University Health Sciences Center at El Paso	2.1	3	\$ 1,499,993
PP170023	CCE	Active Living After Cancer: Combining a Physical Activity Program with Survivor Navigation	Basen-Engquist, Karen M	The University of Texas M. D. Anderson Cancer Center	2.1	4	\$ 1,494,530
PP170010	EBP	Cervical Cancer Screening and Patient Navigation (X-SPAN)	Argenbright, Keith E	The University of Texas Southwestern Medical Center	2.1	5	\$ 1,499,816
PP170012	CCE	Building Bridges: Cancer Prevention Education and Screening for Refugees	Raines-Milenkov, Amy L	University of North Texas Health Science Center at Fort Worth	2.3	6	\$ 1,491,550
PP170015	DI	Disseminating Evidence-Based Cancer Genomics Training to Community Health Workers	Chen, Lei-Shih	Texas A&M University	2.4	7	\$ 300,000
PP170042	EBP	University Health System Hepatitis Viral Infection and Systematic Treatment	Villarreal, Roberto	University Health System	2.5	8	\$ 1,238,838
PP170039	CCE	Nicotine Recovery Program (NRP)	Hollis, Gina	Mental Health Mental Retardation of Tarrant County	3.4	9	\$ 1,500,000

CCE: Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services

DI: Dissemination of CPRIT-Funded Cancer Control Interventions

EBP: Evidence-Based Cancer Prevention Services



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

February 1, 2017

Dear Oversight Committee Members:

Pursuant to Texas Administrative Code § 703.7(d), the Program Integration Committee (PIC) unanimously voted to defer PP170037 that was recommended by the Prevention Review Council (PRC). The deferred application is in response to the Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services Request for Applications.

While a meritorious project that received a favorable score, the PIC deferred the application due to Prevention Program budget concerns for the remaining of FY2017. The PIC may consider and recommend the deferred application at a later date in the fiscal year. No Oversight Committee action is necessary at this time.

Sincerely,

A handwritten signature in black ink that reads "Wayne R. Roberts".

Wayne R. Roberts  
Chief Executive Officer



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

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## MEMORANDUM

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**TO:** OVERSIGHT COMMITTEE MEMBERS  
**FROM:** VINCE BURGESS, CHIEF COMPLIANCE OFFICER  
**SUBJECT:** COMPLIANCE CERTIFICATION – FEBRUARY 2017 AWARDS  
**DATE:** FEBRUARY 1, 2017

---

### **Summary and Recommendation:**

As CPRIT's Chief Compliance Officer, I am responsible for reporting to the Oversight Committee regarding the agency's compliance with applicable statutory and administrative rule requirements during the grant review process. I have reviewed the compliance pedigrees for the grant applications submitted to CPRIT for the:

- Recruitment of Established Investigators
- Recruitment of First-Time, Tenure-Track Faculty Members
- Evidence-Based Cancer Prevention Services
- Competitive Continuation/Expansion for Evidenced-Based Cancer Prevention Services
- Dissemination of CPRIT-Funded Cancer Control Interventions

I have conferred with staff at CPRIT and SRA, International (SRA), CPRIT's contracted third-party grants administrator, regarding academic research and prevention awards and studied the supporting grant review documentation, including third-party observer reports for the peer review meetings. I am satisfied that the application review process that resulted in the above mechanisms recommended by the Program Integration Committee (PIC) followed applicable laws and agency administrative rules. I note that the following mechanisms received applications; however, none were recommended by the Review Councils: Recruitment of Rising Stars (Academic Research) and Cancer Prevention Promotion and Navigation to Clinical Services (Prevention). I certify the academic research and prevention award recommendations for the Oversight Committee's consideration.

I note that the Product Development Research Program received 12 applications for the Texas Company Product Development Research Award RFA and seven applications for the Company Relocation Product Development Research Award RFA, but none were recommended by the Product Development Review Council.

### **Background:**

CPRIT's Chief Compliance Officer must report to the Oversight Committee regarding compliance with the statute and the agency's administrative rules. Among the Chief Compliance Officer's

responsibilities is the obligation “to ensure that all grant proposals comply with this chapter and rules adopted under this chapter before the proposals are submitted to the oversight committee for approval.” Texas Health & Safety Code § 102.051(c) and (d).

CPRIT uses a compliance pedigree process to formally document compliance for the grant award process. The compliance pedigree tracks the grant application as it moves through the review process and documents compliance with applicable laws and administrative rules. A compliance pedigree is created for each application; the information related to the procedural steps listed on the pedigree is entered and attested to by SRA employees and CPRIT employees. CPRIT relies on SRA to accurately record a majority of the information on the pedigree from the pre-receipt stage to final Review Council recommendation. To the greatest extent possible, information reported in the compliance pedigree is imported directly from data contained in CPRIT’s Application Receipt System (CARS), the grant application database managed by SRA. This is done to minimize the opportunity for error caused by manual data entry.

#### **No Prohibited Donations:**

Although CPRIT is statutorily authorized to accept gifts and grants pursuant to Texas Health & Safety Code § 102.054, the statute prohibits CPRIT from awarding a grant to an applicant who has made a gift or grant to CPRIT or a nonprofit organization established to provide support to CPRIT. I note that Texas Health & Safety Code § 102.251(a)(3) specifically addresses “donors from any nonprofit organization established to provide support to the institute compiled from information made available under § 102.262(c).” To the best of my knowledge, there are no nonprofit organizations that have been established to provide support to CPRIT on or after June 14, 2013, the effective date of this statutory change. The only nonprofit organization established to provide support to the Institute was the CPRIT Foundation; however, the CPRIT Foundation ceased operations and changed its name and its purpose prior to June 14, 2013. The institute has received no donations from the CPRIT Foundation made on or after June 14, 2013.

*I have reviewed the list of donors to CPRIT maintained by CPRIT’s accountant and compared the donors to the list of applicants. No donors to CPRIT have submitted applications for grant awards during the award cycles that are the subject of this report.*

#### **Pre-Receipt Compliance:**

The activities listed on a compliance pedigree in the pre-receipt stage cover the period beginning with CPRIT’s approval and issuance of the Request for Applications (RFA) through the submission of grant applications. For the period covering these RFAs, CPRIT published the RFAs on the Texas.gov eGrants website. The RFA specifies a deadline and mandates that only those applications submitted electronically through CARS are eligible for consideration. CARS blocks an application from being submitted once the deadline passes. Occasionally, an applicant may have technical difficulties that prevent the applicant from completing the application

submission. When this occurs, the applicant may appeal to CPRIT (through the CPRIT Helpdesk that is managed by SRA) to allow for a submission after the deadline. The program officer considers any requests for extension and may approve an extension for good cause. When a late filing request is approved, the applicant is notified and CARS is reopened for a brief period – usually two to three hours – the next business day.

**Academic Research:**

*For Cycles 17.3, 17.4, 17.5 and 17.6, five applications were received for the Recruitment of Established Investigators RFA, three applications were received in response to the Recruitment of First-Time, Tenure Track Faculty members RFA, and two applications were received in response to the Recruitment of Rising Stars RFA. One application was administratively withdrawn prior to Peer Review and one application recommended by the Scientific Review Council (SRC) was subsequently withdrawn by the nominating institution after the SRC meeting.*

*I reviewed the application pedigrees for the nine recruitment applicants that were recommended for full review. All academic research RFAs were posted on the Texas.gov eGrants website and all applications were submitted through CARS.*

**Prevention:**

*A total of 36 applications were received for Cycle 17.1: eleven applications were received in response to the Competitive Continuation/Expansion – Evidence-Based Cancer Prevention Services RFA, 18 applications were received in response to the Evidence-Based Prevention Services RFA, one application was received in response to the Dissemination of CPRIT-Funded Cancer Control Interventions RFA, and six applications were received in response to the Cancer Prevention Promotion and Navigation to Clinical Services RFA. Five applications were administratively withdrawn prior to Peer Review.*

*The RFAs were published on the Texas.gov eGrants website and all applications were submitted through CARS. Three applicants requested an extension to submit the application after the deadline. The program officer determined that good cause supported the request for one extension and the deadline was extended. The application that received the extension was not recommended for a grant award.*

**Receipt, Referral, and Assignment Compliance:**

Once applications have been submitted through CARS, SRA staff reviews the applications for compliance with RFA directions. If an applicant does not comply with the directions, SRA notifies the program officer and the program officer makes the final decision whether to administratively withdraw the application. Recruitment grant applications are assigned to the Scientific Review Council members for peer review. All other academic research, product development research, and prevention applications are assigned by the peer review panel chair to their respective peer review

panels. Prior to distribution of the applications, reviewers are given summary information about the applicant, including the Project Director and collaborators. Reviewers must sign a conflict of interest agreement and confirm that they do not have a conflict of interest with the application before they are provided with the full application.

*The pedigrees attest that a conflict of interest statement was signed by each primary reviewer for each Grant Application.*

**Academic Research:**

*One application was administratively withdrawn prior to Peer Review and one application recommended by the Scientific Review Council (SRC) was subsequently withdrawn by the nominating institution after the SRC meeting.*

**Prevention:**

*Five applications were administratively withdrawn prior to Peer Review.*

**Peer Review:**

Primary reviewers (typically three) must submit written critiques for each of their assigned applications prior to the peer review meeting. After the peer review meetings, a final score report from the review committee is delivered to the Review Council for additional review. Following the peer review meeting, each participating peer reviewer must sign a post-review peer review statement certifying that the reviewer knew of and understood CPRIT's conflict of interest policy and followed the policy for this review process.

**Academic Research:**

*For the Recruitment Awards, the applications are reviewed by the Scientific Review Council (SRC), which assigns two members of the SRC to be primary reviewers. I reviewed the peer reviewer summary statements and supporting documentation, such as the sign-out sheets, third-party observer reports, and post-review peer reviewer statements. Sign out sheets are used to document when a reviewer with a conflict of interest associated with a particular application leaves the room (or disengages from the conference call) during the discussion and scoring of the application. A conflict of interest was declared for one recruitment application reviewed by the SRC. The reviewer disengaged from the conference call and did not participate in the discussion of the application.*

*I reviewed and confirmed that the post review conflict of interest statements were signed by the six SRC members that attended the Recruitment Review Panel meeting on November 10, 2016 and by the six SRC members that attended the Recruitment Review Panel meeting on January 12, 2017.*

**Prevention:**

*Prevention applications are reviewed by peer review panels and then sent to the Prevention Review Council (PRC). Five conflicts of interest were declared for four applications reviewed by Prevention Panel 1. One of these applications was not discussed during the meeting. Two conflicts were declared for one application reviewed by Prevention Panel 2. Reviewers with a conflict of interest did not participate in review of that application, which is documented by SRA.*

*I reviewed and confirmed that the post review conflict of interest statements were signed by peer review members for Prevention Panel 1 on December 5-6, 2016 and Prevention Panel 2 on December 7-8, 2016, as well as the three PRC members that attended the PRC meeting on January 20, 2017.*

#### **Programmatic Review:**

Programmatic review is conducted by the Scientific Review Council, Prevention Review Council, and Product Development Review Council for their respective awards. Each review council creates a final list of grant applications it will recommend to the PIC for grant award slates.

*To the extent that any Review Council member identified a conflict of interest, I reviewed documentation confirming that the review council member did not participate in the discussion or vote on the application(s).*

*I also reviewed the third-party observer reports for each review panel and Review Council meeting. The third-party observer reports document that the panel and Review Council discussions were limited to the merits of the applications and established evaluation criteria and that conflicted reviewers exited the room or the conference call when the application was discussed.*

*For the Academic Research awards and Prevention awards, I reviewed and confirmed that the Review Council recommendations corresponded to RFAs that have been released. I also confirmed that the pedigrees reflect the date of the Review Council meeting and that the applications were recommended by the Review Council.*

#### **Academic Research:**

Because recruitment applications are assigned to the SRC, programmatic and peer review occur simultaneously when applications are reviewed by the SRC.

#### **Prevention:**

*Some applications with more favorable or equivalent scores to applications that were recommended for awards did not move forward to the PIC. As allowed in 25 T.A.C § 703.6(d)(1), the Prevention Review Council's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The Prevention Review Council's recommendations considered geographical impact, cancer type, project type,*

*and cost. The letter and rank order list from the Prevention Review Council's Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

**Product Development Research:**

*As noted earlier, the Product Development Research program received 12 applications in response to the Texas Company Product Development Research RFA and seven applications in response to the Company Relocation Product Development Research RFA. Of the 19 applications received, only three applications made it through to the due diligence evaluation phase. The Product Development Review Council met on January 17, 2017 to review the three applications and none were recommended to the PIC. After reviewing the supporting documentation, I am satisfied that the review process for the Product Development Research applications followed applicable laws and agency administrative rules.*

**Program Integration Committee (PIC) Review:**

Texas Health & Safety Code § 102.051(d) requires the Chief Compliance Officer to attend and observe the PIC meetings to ensure compliance with CPRIT's statute and administrative rules. CPRIT's statute requires that, at the time the PIC's final Grant Award recommendations are formally submitted to the Oversight Committee, the Chief Executive Officer shall prepare a written affidavit for each Grant Application recommended by the PIC containing relevant information related to the Grant Application recommendations.

*I attended the January 31, 2017, PIC meeting as an observer and confirm that the PIC review process complied with CPRIT's statute and administrative rules. The PIC considered 15 applications; 14 were recommended to move forward to the Oversight Committee. One application was deferred until a subsequent PIC meeting in FY2017. A review of the CEO affidavits confirms that such affidavits were executed and provided for each Grant Application recommendation.*

**Ludwig Institute for  
Cancer Research Ltd**

**Richard D. Kolodner  
Ph.D.**

Director, San Diego Branch

Head, Laboratory of  
Cancer Genetics  
San Diego Branch

Distinguished Professor of  
Cellular & Molecular  
Medicine, University of  
California San Diego School  
of Medicine

[rkolodner@ucsd.edu](mailto:rkolodner@ucsd.edu)

**San Diego Branch**  
UC San Diego School of  
Medicine  
CMM-East / Rm 3058  
9500 Gilman Dr - MC 0669  
La Jolla, CA 92093-0669

T 858 534 7804  
F 858 534 7750

January 17, 2017

Mr. Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Mr. Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

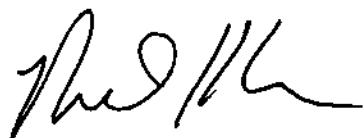
Dear Mr. Geren and Mr. Roberts,

The Scientific Review Council (SRC) is pleased to submit this list of recruitment grant recommendations. The SRC met on Thursday, November 10, 2016 and Thursday January 12, 2017 to consider the applications submitted to CPRIT under the Recruitment for First-Time Tenure Track Faculty Members, Recruitment of Rising Stars and Recruitment of Established Investigators requests for applications for Recruitment Cycle REC 17.3, 17.4, 17.5 and 17.6 respectively. Please note one application (RR170007) recommended by the SRC, was subsequently withdrawn by the nominating institution.

The projects on the attached list are numerically ranked in the order the SRC recommends the applications be funded. Recommended funding amounts and the overall evaluation scores are stated for each grant applications. There were no recommended changes to funding amounts, goals, timelines, or project objectives requested. The total amount for the applications recommended for all cycles is \$22,000,000.

These recommendations meet the SRC's standards for grant award funding. These standards include selecting candidates at all career levels that have demonstrated academic excellence, innovation, excellent training, a commitment to cancer research and exceptional potential for achieving future impact in basic, translational, population based or clinical research.

Sincerely yours,



Richard D. Kolodner, Ph.D.  
Chair, CPRIT Scientific Review Council

Attachment

**SRC Letter**

Rank	App ID	Candidate	Mechanism	Organization	Budget	Overall Score
<b>1</b>	RR170013	Giuseppe Pelicci	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.2
<b>2</b>	RR170011	Gerard Evan	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.6
<b>3</b>	RR170008	Yair Reisner	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.8
<b>4</b>	RR170010	Ram Madabhushi	RFTFM	The University of Texas Southwestern Medical Center	\$2,000,000	2.0
<b>5</b>	RR 170014	Han Xiao	RFTFM	Rice University	\$2,000,000	2.0

REI: Recruitment of Established Investigators

RRS: Recruitment of Rising Stars

RFTFM: Recruitment of First-Time Tenure Track Faculty Members

Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

Dear Mr. Roberts and Mr. Geren,

On behalf of the Prevention Review Council (PRC), I am pleased to provide the PRC's recommendations for CPRIT Prevention grant awards. The applicants on the attached list of submitted proposals responded to CPRIT requests for applications (RFA) released for the first review cycle of FY2017.

The projects are numerically ranked in the order the PRC recommends the applications be funded. Recommended funding amounts and the overall evaluation score are provided for each grant application. The PRC did not make changes to the goals, timelines, or project objectives requested by the applicants. When the PRC did not follow the rank ordered scores in developing its recommended funding order a justification, based upon established programmatic priorities outlined in the RFAs, is provided.

The projected funding available for this fiscal year is \$26,171,122. With the second funding cycle for the fiscal year underway, the PRC opted for a conservative approach to its recommendations for this cycle. Recommendations are provided at two levels: (1) initially fund 9 projects totaling \$12,024,696 and (2) depending upon the availability of funds later in the fiscal year, fund an additional project, PP170037 for \$1,500,000.

Our recommendations meet the PRC's standards for grant award funding of projects that are evidence-based, deliver programs or services to underserved populations, and focus on primary, secondary or tertiary prevention. In making these recommendations the PRC also considered the available funding, the composition of the current portfolio, and the programmatic priorities in the RFA which include potential for impact and return on investment, geographic distribution, cancer type and type of program. All of the recommended grants address one or more of the Prevention Program priorities.

Sincerely,

Stephen W. Wyatt, DMD, MPH  
Chair, CPRIT Prevention Review Council

App ID	Mec h.	Type	Application Title	PD	Organization	Req. Budget	Score	PRC Funding Recommendation	Rank Order	Comments	Rec Budget
PP170036	CCE	Resubmission	Expansion and Continuation of Web-based Clinical Decision Support to Disseminate Tailored Screening Recommendations for Survivors of Pediatric Cancers	Poplack, David G	Baylor College of Medicine	\$ 1,500,000	1.3	Yes	1		\$ 1,500,000
PP170046	EBP	Resubmission	Using social marketing and mobile school-based vaccination clinics to increase HPV vaccination uptake in high-risk geographic areas	Cuccaro, Paula	The University of Texas Health Science Center at Houston	\$ 1,499,969	1.8	Yes	2		\$ 1,499,969
PP170004	CCE	New	DE Casa 2: Cervical Cancer Prevention in El Paso and West Texas	Shokar, Navkiran K	Texas Tech University Health Sciences Center at El Paso	\$ 1,499,993	2.1	Yes	3		\$ 1,499,993
PP170023	CCE	New	Active Living After Cancer: Combining a Physical Activity Program with Survivor Navigation	Basen-Engquist, Karen M	The University of Texas M. D. Anderson Cancer Center	\$ 1,494,530	2.1	Yes	4		\$ 1,494,530
PP170010	EBP	New	Cervical Cancer Screening and Patient Navigation (X-SPAN)	Argenbright, Keith E	The University of Texas Southwestern Medical Center	\$ 1,499,816	2.1	Yes	5		\$ 1,499,816
PP170012	CCE	New	Building Bridges: Cancer Prevention Education and Screening for Refugees	Raines-Milenkov, Amy L	University of North Texas Health Science Center at Fort Worth	\$ 1,491,550	2.3	Yes	6		\$ 1,491,550
PP170015	DI	Resubmission	Disseminating Evidence-Based Cancer Genomics Training to Community Health Workers	Chen, Le-Shih	Texas A&M University	\$ 300,000	2.4	Yes	7	Recommended due to Type of project	\$ 300,000
PP170042	EBP	New	University Health System Hepatitis Viral Infection and Systematic Treatment	Villarreal, Roberto	University Health System	\$ 1,238,838	2.5	Yes	8	Recommended due to Geography and CancerType	\$ 1,238,838
PP170039	CCE	Resubmission	Nicotine Recovery Program (NRP)	Hollis, Gina	Mental Health Mental Retardation of Tarrant County	\$ 1,500,000	3.4	Yes	9	Recommended due to Cancer type and Type of project	\$ 1,500,000
PP170037	CCE	New	Continuation/Expansion of Texas A&M's Breast and Cervical Cancer Prevention Program for Underserved Women through a Family Medicine Residency	McClellan, David A	Texas A&M University System Health Science Center	\$ 1,500,000	3.4	Yes, see comments	10	Recommend for potential funding later in the fiscal year depending on available funding	\$ 1,500,000
										Total Recommended for funding in cycle 17.1	\$ 12,024,696
										Recommended depending on available funds later in the fiscal year	\$ 1,500,000
											\$ 13,524,696



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

## **CEO Affidavit Supporting Information**

**FY 2017—Cycles 17.3 through 17.6**  
*Recruitment of Established Investigators*

# **Request for Applications**

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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**REQUEST FOR APPLICATIONS**

**RFA R-17.1-REI**

**Recruitment of  
Established Investigators**

**Please also refer to the Instructions for Applicants document,  
which will be posted on June 21, 2016**

**Application Receipt Dates:**

June 21, 2016-June 20, 2017

**FY 2017**

Fiscal Year Award Period

September 1, 2016-August 31, 2017

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## **RFA VERSION HISTORY**

Rev 6/21/16 RFA release

Rev 7/21/16 Revised Section 4 – Funding Information and Section 7.2.2- Institutional Commitment- Endowment Equivalents to clarify information regarding institutional matching funds.

## **1. ABOUT CPRIT**

The state of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$3 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 in enhancing 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. Research Program Priorities**

The Texas Legislature has charged the CPRIT Oversight Committee with establishing program priorities on an annual basis. These priorities are intended to provide transparency in how the Oversight Committee directs the orientation of the agency's funding portfolio. The principles and priorities of the Scientific Research Program will guide CPRIT staff, peer reviewers, and the Scientific 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 program priorities for research adopted by the Oversight Committee include funding projects that address the following:

- A broad range of innovative, investigator-initiated research projects;
- Prevention and early detection;
- Rare and intractable cancers, including childhood cancers;
- Cancers of importance in Texas;
- Computational biology and analytic methods; and
- Infrastructure development.

## **2. RATIONALE**

The aim of this award mechanism is to bolster cancer research in Texas by providing financial support to attract world-class research scientists with distinguished professional careers to Texas universities and cancer research institutes to establish research programs that add research talent to the state. This award will support established academic leaders whose body of work has made an outstanding contribution to cancer research. Awards are intended to provide institutions with a competitive edge in recruiting the world's best talent in cancer research, thereby advancing cancer research efforts and promoting economic development in the state of Texas. The recruitment of outstanding scientists will greatly enhance programs of scientific excellence in cancer research and will position Texas as a leader in the fight against cancer.

Applications may address any research topic related to cancer biology, causation, prevention, detection or screening, or treatment. However, special consideration will be given to candidates with research programs addressing CPRIT's priority areas for research. These include Prevention and Early Detection; Computational Biology and Analytic Methods; Intractable Cancers (brain, lung, liver, pancreas) and Rare Cancers (less than 15,000 new cases per year), including Childhood, Adolescent, and Young Adult Cancers; Population Disparities; and Cancers of Particular Importance in Texas (eg, liver, cervical, and lung).

## **3. RECRUITMENT OBJECTIVES**

The goal of this award mechanism is to recruit exceptional faculty to universities and/or cancer research institutions in the state of Texas. This award honors outstanding senior investigators with proven track records of research accomplishments combined with excellence in leadership and teaching. All candidates should be recognized research or clinical investigators, held in the highest esteem by professional colleagues nationally and internationally, whose contributions have had a significant influence on their discipline and, likely, beyond. They must have clearly established themselves as exemplary faculty members with exceptional accomplishments in teaching and advising and/or basic, translational, population-based, or clinical cancer research activities. It is expected that the candidate will contribute significantly to and have a major impact on the institution's overall cancer research initiative. Candidates will be leaders capable of initiating and developing creative ideas leading to novel solutions related to cancer detection,

diagnosis, and/or treatment. They are also expected to maintain and lead a strong research group and have a stellar, high-impact publication portfolio, as well as continue to secure external funding. Furthermore, recipients will lead and inspire undergraduate and graduate students interested in pursuing research careers and will engage in collegial and collaborative relationships with others within and beyond their traditional discipline in an effort to expand the boundaries of cancer research.

Funding will be given for exceptional candidates who will continue to develop new research methods and techniques in the life, population-based, physical, engineering, or computational sciences and apply them to solving outstanding problems in cancer research that have been inadequately addressed or for which there may be an absence of an established paradigm or technical framework. Ideal candidates will have specific expertise in cancer-related areas needed to address an institutional priority. Candidates should be at the career level of a full professor or equivalent. This funding mechanism considers expertise, accomplishments, and breadth of experience as vital metrics for guiding CPRIT's investment in that person's originality, insight, and potential for continued contribution. Relevance to cancer research and to CPRIT's priority areas are important evaluation criteria for CPRIT funding.

Unless prohibited by policy, the institution is also expected to bestow on the newly recruited faculty member the prestigious title of "CPRIT Scholar in Cancer Research," and the faculty member should be strongly encouraged to use this title on letterhead, business cards, and other appropriate documents. The title is to be retained as long as the individual remains in Texas.

#### **4. FUNDING INFORMATION**

This is a 5-year award and is not renewable. Grant support will be awarded based upon the breadth and nature of the research program proposed. Grant funds of up to \$6 million (total costs) for the 5-year period may be requested. Exceptions to this limit will be entertained only if there is compelling written justification. The award request may include indirect costs of up to 5% of the total award amount (5.263% of the direct costs). CPRIT will make every effort to be flexible in the timing for disbursement of funds; recipients will be asked at the beginning of each year for an estimate of their needs for the year. Funds may not be carried over beyond 5 years. In addition, funds for extraordinary equipment needs may be awarded in the first year of the grant if

very well justified. **Grant funds may be used for salary support of this candidate but may not be used to construct or renovate laboratory space.** No annual limit on the number of potential award recipients has been set.

**Note:** Depending on the availability of funds, nominations submitted in response to this RFA during the current receipt period may be announced and awarded either in the current fiscal year (prior to August 31) or in the first quarter of the next fiscal year (starting September 1).

## 5. ELIGIBILITY

- The applicant must be a Texas-based entity. Any not-for-profit institution that conducts research is eligible to apply for funding under this award mechanism. A public or private company is not eligible for funding under this award mechanism.
- Candidates must be nominated by the president, provost, vice president for research, or appropriate dean of a Texas-based public or private institution of higher education, including academic health institutions. The application must be submitted on behalf of a specific candidate.
- A candidate may be nominated by only 1 institution. If more than 1 institution is interested in a given candidate, negotiations as to which institution will nominate him or her must be concluded before the nomination is made. There is no limit to the number of applications that an institution may submit during a review cycle.
- A candidate who has already accepted a position at the recruiting institution prior to the time that the Scientific Review Council reviews the candidate for a recruitment award is not eligible for a recruitment award, as an investment by CPRIT is obviously not necessary. No award is final until approved by the Oversight Committee at a public meeting. However, in recognition of the timeline involved with recruiting highly sought-after candidates who are often considering multiple offers, CPRIT's Academic Research program staff will notify the nominating institution of the Scientific Review Council's review decision following the Review Council meeting. If a position is offered to the candidate during the period following the Scientific Review Council's review decision but prior to the Oversight Committee's final approval, the institution does so at its own

risk. There is no guarantee that the recruitment award will be approved by the Oversight Committee.

- The candidate must have a doctoral degree, including MD, PhD, DDS, DMD, DrPH, DO, DVM, or equivalent, and reside in Texas for the duration of the appointment. The candidate must devote at least 70% time to research activities. Candidates whose major responsibilities are clinical care, teaching or administration are not eligible.
- At the time of the application, the candidate should hold an appointment at the rank of professor (or equivalent) at an accredited academic institution, research institution, industry, government agency, or private foundation not primarily based in Texas. The candidate must not reside in Texas at the time the application is submitted.
- An applicant is eligible to receive a grant award only if the applicant certifies that the applicant institution or organization, including the nominator, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's institution or 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 specifically created to benefit CPRIT.
- An applicant is not eligible to receive a CPRIT grant award if the applicant nominator, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's institution or organization is related to a CPRIT Oversight Committee member.
- The applicant must report whether the applicant institution or organization, the nominator, or other individuals who contribute to the execution of the proposed project in a substantive, measurable way, whether or not the individuals will receive salary or compensation under the grant award, are currently ineligible to receive federal grant funds 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. 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 10](#) and [section 11](#). All statutory provisions and relevant administrative rules can be found at [www.cprit.texas.gov](http://www.cprit.texas.gov).

## **6. RESUBMISSION POLICY**

Resubmissions will not be accepted for the Recruitment of Established Investigators award mechanism. Any nomination for the Recruitment of Established Investigators that was previously submitted to CPRIT and reviewed but was not recommended for funding may not be resubmitted. If a nomination was administratively rejected prior to review, it can be resubmitted in the following cycles.

## **7. RESPONDING TO THIS RFA**

### **7.1. Application Submission Guidelines**

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 applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application is submitted.

Candidates must be nominated by the institution's president, provost, vice president for research, or appropriate dean. The individual submitting the application (Nominator) must create a user account in the system to start and submit an application. Furthermore, the Authorized Signing Official (ASO), who is the person authorized to sign and submit the application for the organization, and the Grants Contract/Office of Sponsored Projects Official, who is the individual who will manage the grant contract if an award is made, also must create a user account in CARS.

Applications will be accepted on a continuous basis throughout FY17. In order to manage the timely review of nominations, it is anticipated that applications submitted by 11:59 PM central time on the 20<sup>th</sup> day of each month will be reviewed by the 15<sup>th</sup> day of the following month. For an application to be considered for review during the monthly cycle, that application must be submitted on or before 11:59 PM central time. In the event that the 20<sup>th</sup> falls on Saturday or Sunday, applications may be submitted on or before 11:59 PM central time the following

Monday. CPRIT will not extend the submission deadline. During periods when CPRIT does not receive an adequate number of applications, the review may be extended into the following month. **Submission of an application is considered an acceptance of the terms and conditions of the RFA.**

## 7.2. Application Components

Applicants are advised to follow all instructions to ensure accurate and complete submission of all components of the application. Please refer to the *Instructions for Applicants* document for details that will be available when the application receipt system opens. Submissions that are missing 1 or more components or do not meet the eligibility requirements listed in [section 5](#) will be administratively withdrawn without review.

### 7.2.1. Summary of Nomination (2,500 characters)

Provide a brief summary of the nomination. Include the candidate's name, organization from which the candidate is being recruited, and also the department and/or entity within the nominator's organization where the candidate will hold the faculty position.

### 7.2.2. Institutional Commitment (3 pages)

Describe the institutional commitment to the candidate, including total salary, institutional support of salary, endowment or other support, space, and all other agreements between the institution and the candidate. **The institutional commitment must state the total award amount requested.** Provide a brief job description for the candidate should recruitment be successful. This information should be supplied in the form of a letter signed by the applicant institution's president, provost, or appropriate dean.

The letter of institutional commitment must demonstrate the organization's commitment to bringing the candidate to Texas. The following guidelines should be used when outlining the institutional commitment in the letter. This information may be provided as part of paragraph text or as a tabular summary that states the approximate amounts assigned to each item.

**Start-up Package:** Complete details including salary and fringe benefits, dedicated personnel, amounts for equipment and supplies, and/or infrastructure that will be offered to the candidate as part of the recruitment award.

**Endowment Equivalents:** To the extent that the institution's federal indirect cost rate credit specified by chapter 703, section 703.11 does not fulfill the entire institutional match, the principal of an endowment may not be included as part of the institutional match, but endowment income over the lifetime of the award may be included.

**Rent:** Amount for recovery of occupying facility space (ie, "rent") is not a permitted institutional commitment item.

### **7.2.3. Letter of Support from Department Chair (1 page)**

Provide the letter of support from and signed by the chair of the department to which the candidate is being recruited. The following information should be included in the letter:

**Recruitment Activities:** The letter should provide a description of the recruitment activities, strategies, and priorities that have led to the nomination of this candidate.

**Caliber of Candidate:** The letter should include a description of the caliber of the candidate and justification of nomination of the candidate by the institution.

### **Description of Candidate Duties and Certification of 70% Time Commitment to Research.**

While scholars may engage in direct patient care activities and/or have some administrative or teaching duties, at least 70% of the candidate's time must be available for research. Breach of this requirement will constitute grounds for discontinuation of funding. The certification that 70% time will be spent on research must be included.

### **7.2.4. Curriculum Vitae (CV)**

Provide a complete CV and list of publications for the candidate.

### **7.2.5. Summary of Goals and Objectives (2,000 characters)**

List very broad goals and objectives to be achieved during this award. **This section must be completed by the candidate.**

### **7.2.6. Research (4 pages)**

Summarize the key elements of the candidate's research accomplishments and provide an overview of the proposed research by outlining the background and rationale, hypotheses and aims, strategies, goals, and projected impact of the focus of the research program. Highlight the innovative aspects of this effort and place it into context with regard to what pressing problem in

cancer will be addressed. **This section of the application must be prepared by the candidate. References cited in this section must be included within the stated page limit. Any appropriate citation format is acceptable; official journal abbreviations should be used.**

Candidates for CPRIT Scholar Awards must include the following signed statement at the end of this section. **Applications that do not contain this signed statement will be returned without review.**

“I understand that I do not need to have made a commitment to <*nominating institution*> before this application has been submitted. However, I also understand that only 1 Texas institution may nominate me for a CPRIT Recruitment Award, and this is the nomination that I have endorsed. Requests to change the recruiting institution during the recruitment process are inappropriate.”

#### **7.2.7. Publications**

Provide the 5 most significant publications that have resulted from the candidate’s research efforts. Publications should be uploaded as PDFs of full-text articles. Only articles that have been published or that have been accepted for publication (“in press”) should be submitted.

#### **7.2.8. Timeline (1 page)**

Provide a general outline of anticipated major award outcomes to be tracked. Timelines will be reviewed during the evaluation of annual progress reports. If the application is approved for funding, this section will be included in the award contract. Applicants are advised not to include information that they consider confidential or proprietary when preparing this section.

#### **7.2.9. Current and Pending Support**

State the funding source, duration, and title of all current and pending research support held by the candidate. If the candidate has no current or pending funding, a document stating this must be submitted.

#### **7.2.10. Research Environment (1 page)**

Briefly describe the research environment available to support the candidate’s research program, including core facilities, training programs, and collaborative opportunities.

### **7.2.11. Descriptive Biography (Up to 2 pages)**

Provide a brief descriptive biography of the candidate, including his or her accomplishments, education and training, professional experience, awards and honors, publications relevant to cancer research, and a brief overview of the candidate's goals if selected to receive the award.

**This section of the application must be prepared by the candidate.** If the application is approved for funding, this section will be made publicly available on CPRIT's website. Candidates are advised not to include information that they consider confidential or proprietary when preparing this section.

**Applications that are missing 1 or more of these components, exceed the specified page, word, or budget limits, or do not meet the eligibility requirements listed above will be administratively withdrawn without review.**

## **8. APPLICATION REVIEW**

### **8.1. Review Process**

All eligible applications will be evaluated and scored by the CPRIT Scientific Review Council using the criteria listed in this RFA. Applications may be submitted continuously in response to this RFA, but will generally be reviewed on a monthly basis by the CPRIT Scientific Review Council. Council members may seek additional ad hoc evaluations of candidates. Scientific Review Council members will review applications and provide an individual Overall Evaluation Score that conveys the members' recommendation related to the proposed recruitment.

Applications recommended by the Council will be forwarded to the CPRIT Program Integration Committee (PIC) for review, prioritization, and recommendation to the CPRIT Oversight Committee for approval and funding. Approval is based on an application receiving a positive vote from at least two-thirds of the members of the Oversight Committee. The review process is described more fully in CPRIT's Administrative Rules, [chapter 703, sections 703.6 to 703.8.](#)

The decision of the Scientific Review Council not to recommend an application is final, and such applications may not be resubmitted for a recruitment award. Notification of review decisions is sent to the nominator.

## **8.2. Confidentiality of Review**

Each stage of application review is conducted confidentially, and all CPRIT Scientific 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 Scientific 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, or a Scientific 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 the Department 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. Intentional, serious, or frequent violations of this rule may result in the disqualification of the grant applicant from further consideration for a grant award.

## **8.3. Review Criteria**

Applications will be assessed based on evaluation of the quality of the candidate and his or her potential for continued superb performance as a cancer researcher. Also of critical importance is the strength of the institutional commitment to the candidate. Recruitment efforts are not likely to be successful unless there is a strong commitment from CPRIT and the host institution. It is not necessary that a candidate agree to accept the recruitment offer at the time an application is

submitted. However, applicant institutions should have some reasonable expectation that recruitment will be successful if an award is granted by CPRIT.

Review criteria will focus on the overall impression of the candidate, his/her proposed research program, and his/her long-term contribution to and impact on the field of cancer research. Questions to be considered by the reviewers are as follows:

**Quality of the Candidate:** Has the candidate made significant, transformative, and sustained contributions to basic, translational, clinical or population-based cancer research? Is the candidate an established and nationally and/or internationally recognized leader in the field? Has the candidate demonstrated excellence in leadership and teaching? Has the candidate provided mentorship, inspiration, and/or professional training opportunities to junior scientists and students? Does the candidate have a strong record of research funding? Does the candidate have a publication history in high-impact journals? Does the candidate show evidence of collaborative interaction with others?

**Scientific Merit of Proposed Research:** Is the research plan comprehensive and well thought out? Does the proposed research program demonstrate innovation, creativity, and feasibility? Will it expand the boundaries of cancer research beyond traditional methodology by incorporating novel and interdisciplinary techniques? Does the research program integrate with and/or increase collaborative research efforts and relationships at the nominating institution?

**Relevance of Candidate's Research:** Is the proposed research likely to have a significant impact on reducing the burden of cancer in the near term? Does the research contribute to basic, translational, clinical, or population-based cancer research?

**Research Environment:** Does the institution have the necessary facilities, expertise, and resources to support the candidate's research program? Is there evidence of strong institutional support? Will the candidate be free of major administrative/clinical responsibilities so that he or she can focus on maintaining and enhancing his or her research program?

## **9. KEY DATES**

### **RFA**

RFA Release

June 21, 2016

## **Application Receipt and Review Timeline**

<b>Application Receipt System opens 7 AM CT</b>	<b>Application Receipt</b>	<b>Anticipated Application Review</b>	<b>Application Closing Date</b>
June 21, 2016	Continuous	Monthly by the 15 <sup>th</sup> day of the month	June 20, 2017

## **10. 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. Awards made under this RFA are not transferable to another institution. 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, which are available at [www.cprit.texas.gov](http://www.cprit.texas.gov).

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 award recipients to submit an annual progress report. These reports summarize the progress made toward the research goals and address plans for the upcoming year. In

addition, fiscal reporting, human studies reporting, and vertebrate animal use reporting will be required as appropriate. 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. Forms and instructions will be made available at [www.cprit.texas.gov](http://www.cprit.texas.gov).

## **11. REQUIREMENT TO DEMONSTRATE AVAILABLE FUNDS**

Texas law requires that prior to disbursement of CPRIT grant funds, the award recipient must demonstrate that it has an amount of funds equal to one-half of the CPRIT funding dedicated to the research that is the subject of the award. The demonstration of available matching funds must be made at the time the award contract is executed and annually thereafter, not when the application is submitted. Grant applicants are advised to consult CPRIT's Administrative Rules, [chapter 703, section 703.11](#), for specific requirements regarding the demonstration of available funding.

## **12. CONTACT INFORMATION**

### **12.1. 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 members are not in a position to answer questions regarding scientific aspects of applications.

**Hours of operation:** Monday, Tuesday, Thursday, Friday, 7 AM to 4 PM central time

Wednesday, 8 AM to 4 PM central time

**Tel:** 866-941-7146

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

### **12.2. Scientific and Programmatic Questions**

Questions regarding the CPRIT Program, including questions regarding this or other funding opportunities, should be directed to the CPRIT Senior Program Manager for Research.

**Tel:** 512-305-8491

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

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

## **Third Party Observer Reports**

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# CPRIT Recruitment Scientific Review Council Meeting Observation Report

Report #2016-11-10-RES

Program Name: Academic Research

Panel Name: FY17.3 & 17.4 Recruitment Review Panel

Panel Date: November 10, 2016

Report Date: November 14, 2016

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## **Background**

As part of CPRIT's on-going emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, the Chief Compliance Officer will act as an independent observer of all Peer Review Panel and Review Council meetings where Grant Applications are discussed.

## **Introduction**

The subject of this report is the Cancer Prevention Research peer review of applications for FY17 funding. The meeting was chaired by Richard Kolodner and held via teleconference on November 10, 2016.

## **Panel Observation Objectives and Scope**

The Chief Compliance Officer's observation was limited to observing whether the following objectives were met:

- CPRIT's established procedures for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers leave room or do not participate in the telephone conference if they have a conflict);

- CPRIT program staff participation is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications;
- The peer review panel discussion is focused on the established scoring criteria.

### **Observation Results Summary**

The Chief Compliance Officer observed the Recruitment Scientific Review Council meeting held via teleconference. The meeting was facilitated by SRA International, CPRIT's contracted third-party grant application administrator, and chaired by Richard Kolodner on November 10, 2016.

The Chief Compliance Officer noted the following during the observation:

- Five applications were discussed within the Recruitment Scientific Review Council meeting to determine which applications would be recommended for funding.
- Six peer review panelists, three CPRIT staff members and three SRA employees were present for the meeting.
- One conflict of interest was identified prior to or during the meeting. One application for the one conflict was discussed during the peer review panel. The reviewer with the conflict of interest did not participate telephonically and did not participate in the review of the conflicted application.
- CPRIT program staff participation was limited to answering procedural questions and clarifying policies.
- SRA program staff did not participate in the discussions around the merits of the applications.
- The panelists' discussions were limited to the application evaluation criteria.

This observation did not include the following:

- An evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical or programmatic aspects of the applications.



## Cancer Prevention and Research Institute of Texas (CPRIT) Research Peer Review Observation Report

*Report No.* 2017-01-12-REC\_17.5-6  
*Program Name:* Academic Research  
*Panel Name:* Recruitment Review Panel 17.5 and 17.6 (REC\_17.5-6)  
*Panel Date:* January 12, 2017  
*Report Date:* January 17, 2017

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions, LLC (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Recruitment Review Panel 17.5 and 17.6. The meeting was chaired by Richard Kolodner and conducted telephonically on January 12, 2017.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when an application with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by Academic Research Recruitment panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The Academic Research Recruitment panel discussion is focused on the established scoring criteria and/or making recommendations.

### *Summary of Observation Results*

The BFS independent observer participated in the Academic Research Recruitment teleconference. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observer noted the following during the recruitment meeting:

- Four applications were discussed to score applicants for recruitment funding;
- Participants: six peer review panelists including the Panel Chairperson;
- Two CPRIT staff members and four CSRA employees participated in the meeting;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the evaluation criteria.

None of the four discussed applications presented a conflict of interest (COI). A list of all attendees, sign in log, and informational materials were provided by CSRA staff to aid in the observation of these objectives.

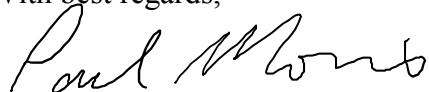
### *Conclusion*

In conclusion; we observed that the activities of the Academic Research - Recruitment Peer Review panel were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA

Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

January 12, 2017

## **Conflicts of Interest Disclosure**

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**Conflicts of Interest Disclosure**  
**Academic Research Recruitment Cycle 17.3-17.6 Applications**  
**(Academic Research Recruitment Cycle 17.3-17.6 Awards Announced at February 15,  
 2017, Oversight Committee Meeting)**

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 17.3-17.6 include *Recruitment of First-Time, Tenure-Track Faculty Members*, *Recruitment of Rising Stars*, and *Recruitment of Established Investigators*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by SRA International, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
<b>Applications considered by the PIC and Oversight Committee</b>			
RR170008	Dmitrovsky, Ethan	The University of Texas M. D. Anderson Cancer Center	O'Reilly, Richard
<b>Applications not considered by the PIC or Oversight Committee</b>			
No conflicts reported.			

## **De-Identified Overall Evaluation Scores**

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## Recruitment of Established Investigators

Academic Research Recruitment Cycles 17.3-17.6

Application ID	Final Overall Evaluation Score
RR170013*	1.2
RR170011*	1.6
RR170008*	1.8
ea	4.0
eb	4.0

\* = Recommended for funding

## **Final Overall Evaluation Scores and Rank Order Scores**

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**Ludwig Institute for  
Cancer Research Ltd**

**Richard D. Kolodner  
Ph.D.**

Director, San Diego Branch

Head, Laboratory of  
Cancer Genetics  
San Diego Branch

Distinguished Professor of  
Cellular & Molecular  
Medicine, University of  
California San Diego School  
of Medicine

[rkolodner@ucsd.edu](mailto:rkolodner@ucsd.edu)

**San Diego Branch**  
UC San Diego School of  
Medicine  
CMM-East / Rm 3058  
9500 Gilman Dr - MC 0669  
La Jolla, CA 92093-0669

T 858 534 7804  
F 858 534 7750

January 17, 2017

Mr. Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Mr. Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

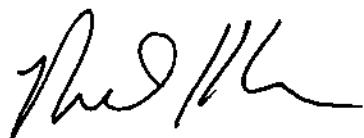
Dear Mr. Geren and Mr. Roberts,

The Scientific Review Council (SRC) is pleased to submit this list of recruitment grant recommendations. The SRC met on Thursday, November 10, 2016 and Thursday January 12, 2017 to consider the applications submitted to CPRIT under the Recruitment for First-Time Tenure Track Faculty Members, Recruitment of Rising Stars and Recruitment of Established Investigators requests for applications for Recruitment Cycle REC 17.3, 17.4, 17.5 and 17.6 respectively. Please note one application (RR170007) recommended by the SRC, was subsequently withdrawn by the nominating institution.

The projects on the attached list are numerically ranked in the order the SRC recommends the applications be funded. Recommended funding amounts and the overall evaluation scores are stated for each grant applications. There were no recommended changes to funding amounts, goals, timelines, or project objectives requested. The total amount for the applications recommended for all cycles is \$22,000,000.

These recommendations meet the SRC's standards for grant award funding. These standards include selecting candidates at all career levels that have demonstrated academic excellence, innovation, excellent training, a commitment to cancer research and exceptional potential for achieving future impact in basic, translational, population based or clinical research.

Sincerely yours,



Richard D. Kolodner, Ph.D.  
Chair, CPRIT Scientific Review Council

Attachment

Rank	App ID	Candidate	Mechanism	Organization	Budget	Overall Score
<b>1</b>	RR170013	Giuseppe Pelicci	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.2
<b>2</b>	RR170011	Gerard Evan	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.6
<b>3</b>	RR170008	Yair Reisner	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.8
<b>4</b>	RR170010	Ram Madabhushi	RFTFM	The University of Texas Southwestern Medical Center	\$2,000,000	2.0
<b>5</b>	RR 170014	Han Xiao	RFTFM	Rice University	\$2,000,000	2.0

REI: Recruitment of Established Investigators

RRS: Recruitment of Rising Stars

RFTFM: Recruitment of First-Time Tenure Track Faculty Members



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

## **CEO Affidavit Supporting Information**

**FY 2017—Cycles 17.3 through 17.6**  
*Recruitment of First-Time, Tenure-  
Track Faculty Members*

# **Request for Applications**

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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**REQUEST FOR APPLICATIONS**  
**RFA R-17.1-RFT**

**Recruitment of First-Time  
Tenure Track Faculty Members**

Please also refer to the Instructions for Applicants document,  
which will be posted on June 21, 2016

**Application Receipt Dates:**

June 21, 2016-June 20, 2017

**FY 2017**

Fiscal Year Award Period

September 1, 2016-August 31, 2017

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## **RFA VERSION HISTORY**

Rev 6/21/16 RFA release

Rev 7/21/16 Revised Section 4 – Funding Information; removed information regarding institutional matching funds.

## **1. ABOUT CPRIT**

The state of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$3 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 in enhancing 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. Research Program Priorities**

The Texas Legislature has charged the CPRIT Oversight Committee with establishing program priorities on an annual basis. These priorities are intended to provide transparency in how the Oversight Committee directs the orientation of the agency's funding portfolio. The principles and priorities of the Scientific Research Program will guide CPRIT staff, peer reviewers, and the Scientific 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 program priorities for research adopted by the Oversight Committee include funding projects that address the following:

- A broad range of innovative, investigator-initiated research projects;
- Prevention and early detection;
- Rare and intractable cancers, including childhood cancers;
- Cancers of importance in Texas;
- Computational biology and analytic methods; and
- Infrastructure development.

## **2. RATIONALE**

The aim of this award mechanism is to bolster cancer research in Texas by providing financial support to attract very promising investigators who are pursuing their first faculty appointment at the level of assistant professor (first-time, tenure track faculty members). These individuals must have demonstrated academic excellence, innovation during predoctoral and/or postdoctoral research training, commitment to pursuing cancer research, and exceptional potential for achieving future impact in basic, translational, population-based, or clinical research. Awards are intended to provide institutions with a competitive edge in recruiting the world's best talent in cancer research, thereby advancing cancer research efforts and promoting economic development in the state of Texas.

The recruitment of outstanding scientists will greatly enhance programs of scientific excellence in cancer research and will position Texas as a leader in the fight against cancer. Applications may address any research topic related to cancer biology, causation, prevention, detection or screening, or treatment. However, special consideration will be given to candidates with research programs addressing CPRIT's priority areas for research. These include Prevention and Early Detection; Computational Biology and Analytic Methods; Intractable Cancers (brain, lung, liver, pancreas) and Rare Cancers (less than 15,000 new cases per year), including Childhood, Adolescent and Young Adult Cancers; Population Disparities, and Cancers of Particular Importance in Texas (eg, liver, cervical, and lung).

## **3. RECRUITMENT OBJECTIVES**

The goal of this award mechanism is to recruit exceptional faculty to universities and/or cancer research institutions in the state of Texas. All candidates are expected to have completed their doctoral and fellowship training and to have clearly demonstrated truly superior ability as evidenced by their accomplishments during training, proposed research plan, publication record, and letters of recommendation. This CPRIT-supported initiative is designed to enhance innovative programs of excellence by providing research support for promising, early-stage investigators **seeking their first tenure track position**. CPRIT will provide start-up funding for newly independent investigators, with the goal of augmenting and expanding the institution's efforts in cancer research. Candidates will be expected to develop research projects within the sponsoring institution. Projects should be appropriate for a newly independent investigator and

should foster the development of preliminary data that can be used to prepare applications for future independent research project grants to further both the investigator's research career and the CPRIT mission. The institution will be expected to work with each newly recruited research faculty member to design and execute a faculty career development plan consistent with his or her research emphasis. Relevance to cancer research and to CPRIT's priority areas are important evaluation criteria for CPRIT funding.

Unless prohibited by policy, the institution is also expected to bestow on the newly recruited faculty member the prestigious title of "CPRIT Scholar in Cancer Research," and the faculty member should be strongly encouraged to use this title on letterhead, business cards, and other appropriate documents. The title is to be retained as long as the individual remains in Texas.

#### **4. FUNDING INFORMATION**

This is a 4-year award and is not renewable, although individuals may apply for other future CPRIT funding as appropriate. Grant funds of up to \$2,000,000 (total costs) for the 4-year period may be requested. Funding is to be used by the candidate to support his or her research program. The award request may include indirect costs of up to 5% of the total award amount (5.263% of the direct costs). CPRIT will make every effort to be flexible in the timing for disbursement of funds; recipients will be asked at the beginning of each year for an estimate of their needs for the year. In addition, funds for extraordinary equipment needs may be awarded in the first year of the grant if very well justified.

**Grant funds may not be used for salary support of this candidate or to construct or renovate laboratory space..** No annual limit on the number of potential award recipients has been set.

**Note:** Depending on the availability of funds, nominations submitted in response to this RFA during the current receipt period may be announced and awarded either in the current fiscal year (prior to August 31) or in the first quarter of the next fiscal year (starting September 1).

## **5. ELIGIBILITY**

- The applicant must be a Texas-based entity. Any not-for-profit institution that conducts research is eligible to apply for funding under this award mechanism. A public or private company is not eligible for funding under this award mechanism.
- Candidates must be nominated by the president, provost, vice president for research, or appropriate dean of a Texas-based public or private institution of higher education, including academic health institutions. The application must be submitted on behalf of a specific candidate.
- A candidate may be nominated by only 1 institution. If more than 1 institution is interested in a given candidate, negotiations as to which institution will nominate him or her must be concluded before the nomination is made. There is no limit to the number of applications that an institution may submit during a review cycle.
- A candidate who has already accepted a position as assistant professor tenure track at the recruiting institution prior to the time that the Scientific Review Council reviews the candidate for a recruitment award is not eligible for a recruitment award, as an investment by CPRIT is obviously not necessary. No award is final until approved by the Oversight Committee at a public meeting. However, in recognition of the timeline involved with recruiting highly sought-after candidates who are often considering multiple offers, CPRIT's Academic Research program staff will notify the nominating institution of the Scientific Review Council's review decision following the Review Council meeting. If a position is offered to the candidate during the period following the Scientific Review Council's review decision but prior to the Oversight Committee's final approval, the institution does so at its own risk. There is no guarantee that the recruitment award will be approved by the Oversight Committee.
- The candidate must have a doctoral degree, including MD, PhD, DDS, DMD, DrPH, DO, DVM, or equivalent, and reside in Texas for the duration of the appointment. The candidate must devote at least 70% time to research activities. Candidates whose major responsibilities are clinical care, teaching, or administration are not eligible.
- At the time of the application, the candidate **must not** hold an appointment at the rank of assistant professor or above (or equivalent) at an accredited academic institution, research

institution, industry, government agency, or private foundation not primarily based in Texas. Candidates holding non-tenure track appointments at the rank of assistant professor are not eligible for this award. Examples of such appointments include Research Assistant Professor, Adjunct Research Assistant Professor, Assistant Professor (Non-Tenure Track), etc. The candidate may or may not reside in Texas at the time the application is submitted and may be nominated for a faculty position at the Texas institution where he or she is completing postdoctoral training.

- Successful candidates will be offered tenure track academic positions at the rank of assistant professor.
- An applicant is eligible to receive a grant award only if the applicant certifies that the applicant institution or organization, including the nominator, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's institution or 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 specifically created to benefit CPRIT.
- An applicant is not eligible to receive a CPRIT grant award if the applicant nominator, any senior member or key personnel listed on the grant application, or any officer or director of the grant applicant's institution or organization is related to a CPRIT Oversight Committee member.
- The applicant must report whether the applicant institution or organization, the nominator, or other individuals who contribute to the execution of the proposed project in a substantive, measurable way, whether or not the individuals will receive salary or compensation under the grant award, are currently ineligible to receive federal grant funds 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. 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 10](#) and [section 11](#). All statutory provisions and relevant administrative rules can be found at [www.cprit.texas.gov](http://www.cprit.texas.gov).

## **6. RESUBMISSION POLICY**

Resubmissions will not be accepted for the Recruitment of First-Time, Tenure Track Faculty Members award mechanism. Any nomination for the Recruitment of First-Time, Tenure Track Faculty Members that was previously submitted to CPRIT and reviewed but was not recommended for funding may not be resubmitted. If a nomination was administratively rejected prior to review, it can be resubmitted in the following cycles.

## **7. RESPONDING TO THIS RFA**

### **7.1. Application Submission Guidelines**

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 applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application is submitted. Candidates must be nominated by the institution's president, provost, vice president for research, or appropriate dean. The individual submitting the application (Nominator) must create a user account in the system to start and submit an application. Furthermore, the Authorized Signing Official (ASO), who is the person authorized to sign and submit the application for the organization, and the Grants Contract/Office of Sponsored Projects Official, who is the individual who will manage the grant contract if an award is made, also must create a user account in CARS.

Applications will be accepted on a continuous basis throughout FY17. In order to manage the timely review of nominations, it is anticipated that applications submitted by 11:59 PM central time on the 20<sup>th</sup> day of each month will be reviewed by the 15<sup>th</sup> day of the following month. For an application to be considered for review during the monthly cycle, that application must be submitted on or before 11:59 PM central time. In the event that the 20<sup>th</sup> falls on Saturday or Sunday, applications may be submitted on or before 11:59 PM central time the following Monday. CPRIT will not extend the submission deadline. During periods when CPRIT does not receive an adequate number of applications, the review may be extended into the following

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

## **7.2. Application Components**

Applicants are advised to follow all instructions to ensure accurate and complete submission of all components of the application. Please refer to the *Instructions for Applicants* document for details that will be available when the application receipt system opens. Submissions that are missing 1 or more components or do not meet the eligibility requirements listed in [section 5](#) will be administratively withdrawn without review.

### **7.2.1. Summary of Nomination (2,000 characters)**

Provide a brief summary of the nomination. Include the candidate's name, organization from which the candidate is being recruited, and also the department and/or entity within the nominator's organization where the candidate will hold the faculty position.

### **7.2.2. Institutional Commitment (3 pages)**

Describe the institutional commitment to the candidate, including total salary, institutional support of salary, endowment or other support, space, and all other agreements between the institution and the candidate. **The institutional commitment must state the total award amount requested.** Provide a brief job description for the candidate should recruitment be successful. This information should be supplied in the form of a letter signed by the applicant institution's president, provost, or appropriate dean. The letter of institutional commitment must demonstrate the organization's commitment to bringing the candidate to Texas. The following guidelines should be used when outlining the institutional commitment in the letter. This information may be provided as part of paragraph text or as a tabular summary that states the approximate amounts assigned to each item.

**Start-up Package:** Complete details including salary and fringe benefits, dedicated personnel, amounts for equipment and supplies, and/or infrastructure that will be offered to the candidate as part of the recruitment award.

**Rent:** Amount for recovery of occupying facility space (ie, "rent") is not a permitted institutional commitment item.

### **7.2.3. Letter of Support from Department Chair (1 page)**

Provide the letter of support from and signed by the chair of the department to which the candidate is being recruited. The following information should be included in the letter:

**Recruitment Activities:** The letter should provide a description of the recruitment activities, strategies, and priorities that have led to the nomination of this candidate.

**Caliber of Candidate:** The letter should include a description of the caliber of the candidate and justification of the nomination of the candidate by the institution.

**Description of Candidate Duties and Certification of 70% Time Commitment to Research.**

While scholars may engage in direct patient care activities and/or have some administrative or teaching duties, at least 70% of the candidate's time must be available for research. Breach of this requirement will constitute grounds for discontinuation of funding. The certification that 70% time will be spent on research must be included.

The letter of support from the department chair must also do the following:

1. Describe how the candidate will be independent and autonomous in developing his or her research program at the institution;
2. Present a plan for mentoring that includes the design and execution of a faculty career development plan for the candidate.

### **7.2.4. Curriculum Vitae (CV)**

Provide a complete CV and list of publications for the candidate.

### **7.2.5. Summary of Goals and Objectives (2,000 characters)**

List very broad goals and objectives to be achieved during this award. **This section must be completed by the candidate.**

### **7.2.6. Research (4 pages)**

Summarize the key elements of the candidate's research accomplishments and provide an overview of the proposed research by outlining the background and rationale, hypotheses and aims, strategies, goals, and projected impact of the focus of the research program. Highlight the innovative aspects of this effort and place it into context with regard to what pressing problem in

cancer will be addressed. **This section of the application must be prepared by the candidate. References cited in this section must be included within the stated page limit. Any appropriate citation format is acceptable; official journal abbreviations should be used.**

Candidates for CPRIT Scholar Awards must include the following signed statement at the end of this section. **Applications that do not contain this signed statement will be returned without review.**

“I understand that I do not need to have made a commitment to <*nominating institution*> before this application has been submitted. However, I also understand that only 1 Texas institution may nominate me for a CPRIT Recruitment Award, and this is the nomination that I have endorsed. Requests to change the recruiting institution during the recruitment process are inappropriate.”

#### **7.2.7. Publications**

Provide the 3 most significant publications that have resulted from the candidate’s research efforts. Publications should be uploaded as PDFs of full-text articles. Only articles that have been published or that have been accepted for publication (“in press”) should be submitted.

#### **7.2.8. Timeline (1 page)**

Provide a general outline of anticipated major award outcomes to be tracked. Timelines will be reviewed during the evaluation of annual progress reports. If the application is approved for funding, this section will be included in the award contract. Applicants are advised not to include information that they consider confidential or proprietary when preparing this section.

#### **7.2.9. Current and Pending Support**

State the funding source, duration, and title of all current and pending research support held by the candidate. If the candidate has no current or pending funding, a document stating this must be submitted.

#### **7.2.10. Letters of Recommendation**

Provide 3 letters of recommendation from individuals who are in a position to detail the candidate’s academic and scientific research accomplishments, potential for high-impact research, and ability to make a significant contribution to the field of cancer research.

### **7.2.11. Research Environment (1 page)**

Briefly describe the research environment available to support the candidate's research program, including core facilities, training programs, and collaborative opportunities.

### **7.2.12. Descriptive Biography (Up to 2 pages)**

Provide a brief descriptive biography of the candidate, including his or her accomplishments, education and training, professional experience, awards and honors, publications relevant to cancer research, and a brief overview of the candidate's goals if selected to receive the award.

**This section of the application must be prepared by the candidate.** If the application is approved for funding, this section will be made publicly available on CPRIT's website.

Candidates are advised not to include information that they consider confidential or proprietary when preparing this section.

**Applications that are missing 1 or more of these components, exceed the specified page, word, or budget limits, or do not meet the eligibility requirements listed above will be administratively withdrawn without review.**

## **8. APPLICATION REVIEW**

### **8.1. Review Process**

All eligible applications will be evaluated and scored by the CPRIT Scientific Review Council using the criteria listed in this RFA. Applications may be submitted continuously in response to this RFA, but will generally be reviewed on a monthly basis by the CPRIT Scientific Review Council. Council members may seek additional ad hoc evaluations of candidates. Scientific Review Council members will review applications and provide an individual Overall Evaluation Score that conveys the members' recommendation related to the proposed recruitment.

Applications recommended by the Council will be forwarded to the CPRIT Program Integration Committee (PIC) for review, prioritization, and recommendation to the CPRIT Oversight Committee for approval and funding. Approval is based on an application receiving a positive vote from at least two-thirds of the members of the Oversight Committee. The review process is described more fully in CPRIT's Administrative Rules, [chapter 703, sections 703.6 to 703.8](#).

The decision of the Scientific Review Council not to recommend an application is final, and such applications may not be resubmitted for a recruitment award. Notification of review decisions is sent to the nominator.

### **8.1.1. Confidentiality of Review**

Each stage of application review is conducted confidentially, and all CPRIT Scientific 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 Scientific 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, or a Scientific 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 the Department 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. Intentional, serious, or frequent violations of this rule may result in the disqualification of the grant applicant from further consideration for a grant award.

## **8.2. Review Criteria**

Applications will be assessed based on evaluation of the quality of the candidate and his or her potential for continued superb performance as a cancer researcher. Also of critical importance is the strength of the institutional commitment to the candidate. Recruitment efforts are not likely to be successful unless there is a strong commitment from both CPRIT and the host institution.

It is not necessary that a candidate agree to accept the recruitment offer at the time an application is submitted. However, applicant institutions should have some reasonable expectation that recruitment will be successful if an award is granted by CPRIT.

Review criteria will focus on the overall impression of the candidate, his or her proposed research program, and his or her long-term contribution to and impact on the field of cancer research. Questions to be considered by the reviewers are as follows:

**Quality of the Candidate:** Has the candidate demonstrated academic excellence? Has the candidate received excellent predoctoral and postdoctoral training? Does the candidate show exceptional potential for achieving future impact on basic, translational, clinical, or population-based cancer research in the future? Has the candidate demonstrated a commitment to cancer research? Has the candidate demonstrated independence or the potential for independence?

**Scientific Merit of Proposed Research:** Is the research plan comprehensive and well thought out? Does the proposed research program demonstrate innovation, creativity, and feasibility? Will it have a significant impact on the field of cancer research? Will the proposed research generate preliminary data that can be used for the preparation of applications for future independent research project grants?

**Relevance of Candidate's Research:** Is the proposed research likely to have a significant impact on reducing the burden of cancer in the near term? Does the research contribute to basic, translational, clinical, or population-based cancer research?

**Letters of Recommendation:** Do the letters of recommendation detail the candidate's academic and clinical research accomplishments, potential for high-impact research, and ability to make a significant contribution to the field of cancer research?

**Research Environment:** Does the institution have the necessary facilities, expertise, and resources to support the candidate's research? Is there evidence of strong institutional support?

Will the candidate be free of major administrative/clinical responsibilities so that he or she can focus on growing his or her research? Has the institution identified a mentor who will design and execute a faculty career development plan for the candidate?

## 9. KEY DATES

### RFA

RFA Release June 21, 2016

### Application Receipt and Review Timeline

Application Receipt System opens 7 AM CT	Application Receipt	Anticipated Application Review	Application Closing Date
June 21, 2016	Continuous	Monthly by the 15 <sup>th</sup> day of the month	June 20, 2017

## 10. 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. Awards made under this RFA are not transferable to another institution. 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, which are available at [www.cprit.texas.gov](http://www.cprit.texas.gov).

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 award recipients to submit an annual progress report. These reports summarize the progress made toward the research goals and address plans for the upcoming year. In addition, fiscal reporting, human studies reporting, and vertebrate animal use reporting will be required as appropriate. 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. Forms and instructions will be made available at [www.cprit.texas.gov](http://www.cprit.texas.gov).

## **11. REQUIREMENT TO DEMONSTRATE AVAILABLE FUNDS**

Texas law requires that prior to disbursement of CPRIT grant funds, the award recipient must demonstrate that it has an amount of funds equal to one-half of the CPRIT funding dedicated to the research that is the subject of the award. The demonstration of available matching funds must be made at the time the award contract is executed and annually thereafter, not when the application is submitted. Grant applicants are advised to consult CPRIT's Administrative Rules, [chapter 703, section 703.11](#), for specific requirements regarding the demonstration of available funding.

## **12. CONTACT INFORMATION**

### **12.1. 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 members are not in a position to answer questions regarding scientific aspects of applications.

**Hours of operation:**                   Monday, Tuesday, Thursday, Friday, 7 AM to 4 PM central time  
   Wednesday, 8 AM to 4 PM central time

**Tel:**                                     866-941-7146

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

### **12.2. Scientific and Programmatic Questions**

Questions regarding the CPRIT Program, including questions regarding this or other funding opportunities, should be directed to the CPRIT Senior Program Manager for Research.

**Tel:**                                     512-305-8491

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

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

## **Third Party Observer Reports**

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# CPRIT Recruitment Scientific Review Council Meeting Observation Report

Report #2016-11-10-RES

Program Name: Academic Research

Panel Name: FY17.3 & 17.4 Recruitment Review Panel

Panel Date: November 10, 2016

Report Date: November 14, 2016

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## **Background**

As part of CPRIT's on-going emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, the Chief Compliance Officer will act as an independent observer of all Peer Review Panel and Review Council meetings where Grant Applications are discussed.

## **Introduction**

The subject of this report is the Cancer Prevention Research peer review of applications for FY17 funding. The meeting was chaired by Richard Kolodner and held via teleconference on November 10, 2016.

## **Panel Observation Objectives and Scope**

The Chief Compliance Officer's observation was limited to observing whether the following objectives were met:

- CPRIT's established procedures for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers leave room or do not participate in the telephone conference if they have a conflict);

- CPRIT program staff participation is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications;
- The peer review panel discussion is focused on the established scoring criteria.

### **Observation Results Summary**

The Chief Compliance Officer observed the Recruitment Scientific Review Council meeting held via teleconference. The meeting was facilitated by SRA International, CPRIT's contracted third-party grant application administrator, and chaired by Richard Kolodner on November 10, 2016.

The Chief Compliance Officer noted the following during the observation:

- Five applications were discussed within the Recruitment Scientific Review Council meeting to determine which applications would be recommended for funding.
- Six peer review panelists, three CPRIT staff members and three SRA employees were present for the meeting.
- One conflict of interest was identified prior to or during the meeting. One application for the one conflict was discussed during the peer review panel. The reviewer with the conflict of interest did not participate telephonically and did not participate in the review of the conflicted application.
- CPRIT program staff participation was limited to answering procedural questions and clarifying policies.
- SRA program staff did not participate in the discussions around the merits of the applications.
- The panelists' discussions were limited to the application evaluation criteria.

This observation did not include the following:

- An evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical or programmatic aspects of the applications.



## Cancer Prevention and Research Institute of Texas (CPRIT) Research Peer Review Observation Report

*Report No.* 2017-01-12-REC\_17.5-6  
*Program Name:* Academic Research  
*Panel Name:* Recruitment Review Panel 17.5 and 17.6 (REC\_17.5-6)  
*Panel Date:* January 12, 2017  
*Report Date:* January 17, 2017

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions, LLC (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Recruitment Review Panel 17.5 and 17.6. The meeting was chaired by Richard Kolodner and conducted telephonically on January 12, 2017.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when an application with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by Academic Research Recruitment panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The Academic Research Recruitment panel discussion is focused on the established scoring criteria and/or making recommendations.

### *Summary of Observation Results*

The BFS independent observer participated in the Academic Research Recruitment teleconference. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observer noted the following during the recruitment meeting:

- Four applications were discussed to score applicants for recruitment funding;
- Participants: six peer review panelists including the Panel Chairperson;
- Two CPRIT staff members and four CSRA employees participated in the meeting;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the evaluation criteria.

None of the four discussed applications presented a conflict of interest (COI). A list of all attendees, sign in log, and informational materials were provided by CSRA staff to aid in the observation of these objectives.

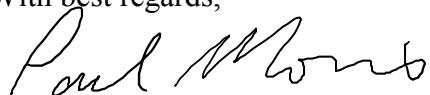
### *Conclusion*

In conclusion; we observed that the activities of the Academic Research - Recruitment Peer Review panel were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA

Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

January 12, 2017

cc: Vince Burgess, Chief Compliance Officer

## **Conflicts of Interest Disclosure**

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**Conflicts of Interest Disclosure**  
**Academic Research Recruitment Cycle 17.3-17.6 Applications**  
**(Academic Research Recruitment Cycle 17.3-17.6 Awards Announced at February 15,  
2017, Oversight Committee Meeting)**

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Academic Research Recruitment Cycle 17.3-17.6 include *Recruitment of First-Time, Tenure-Track Faculty Members*, *Recruitment of Rising Stars*, and *Recruitment of Established Investigators*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by SRA International, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
<b>Applications considered by the PIC and Oversight Committee</b>			
RR170008	Dmitrovsky, Ethan	The University of Texas M. D. Anderson Cancer Center	O'Reilly, Richard
<b>Applications not considered by the PIC or Oversight Committee</b>			
No conflicts reported.			

## **De-Identified Overall Evaluation Scores**

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## Recruitment of First-Time, Tenure-Track Faculty Members

Academic Research Recruitment Cycles 17.3-17.6

Application ID	Final Overall Evaluation Score
RR170010*	2.0
RR170014*	2.0

\* = Recommended for funding

## **Final Overall Evaluation Scores and Rank Order Scores**

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**Ludwig Institute for  
Cancer Research Ltd**

**Richard D. Kolodner  
Ph.D.**

Director, San Diego Branch

Head, Laboratory of  
Cancer Genetics  
San Diego Branch

Distinguished Professor of  
Cellular & Molecular  
Medicine, University of  
California San Diego School  
of Medicine

[rkolodner@ucsd.edu](mailto:rkolodner@ucsd.edu)

**San Diego Branch**  
UC San Diego School of  
Medicine  
CMM-East / Rm 3058  
9500 Gilman Dr - MC 0669  
La Jolla, CA 92093-0669

T 858 534 7804  
F 858 534 7750

January 17, 2017

Mr. Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Mr. Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

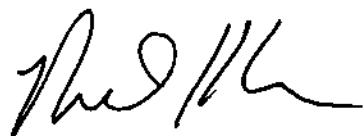
Dear Mr. Geren and Mr. Roberts,

The Scientific Review Council (SRC) is pleased to submit this list of recruitment grant recommendations. The SRC met on Thursday, November 10, 2016 and Thursday January 12, 2017 to consider the applications submitted to CPRIT under the Recruitment for First-Time Tenure Track Faculty Members, Recruitment of Rising Stars and Recruitment of Established Investigators requests for applications for Recruitment Cycle REC 17.3, 17.4, 17.5 and 17.6 respectively. Please note one application (RR170007) recommended by the SRC, was subsequently withdrawn by the nominating institution.

The projects on the attached list are numerically ranked in the order the SRC recommends the applications be funded. Recommended funding amounts and the overall evaluation scores are stated for each grant applications. There were no recommended changes to funding amounts, goals, timelines, or project objectives requested. The total amount for the applications recommended for all cycles is \$22,000,000.

These recommendations meet the SRC's standards for grant award funding. These standards include selecting candidates at all career levels that have demonstrated academic excellence, innovation, excellent training, a commitment to cancer research and exceptional potential for achieving future impact in basic, translational, population based or clinical research.

Sincerely yours,



Richard D. Kolodner, Ph.D.  
Chair, CPRIT Scientific Review Council

Attachment

Rank	App ID	Candidate	Mechanism	Organization	Budget	Overall Score
<b>1</b>	RR170013	Giuseppe Pelicci	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.2
<b>2</b>	RR170011	Gerard Evan	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.6
<b>3</b>	RR170008	Yair Reisner	REI	The Univeristy of Texas M.D. Anderson Cancer Center	\$6,000,000	1.8
<b>4</b>	RR170010	Ram Madabhushi	RFTFM	The University of Texas Southwestern Medical Center	\$2,000,000	2.0
<b>5</b>	RR 170014	Han Xiao	RFTFM	Rice University	\$2,000,000	2.0

REI: Recruitment of Established Investigators

RRS: Recruitment of Rising Stars

RFTFM: Recruitment of First-Time Tenure Track Faculty Members



CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

# CEO Affidavit Supporting Information

FY 2017—Cycle 1  
*Competitive Continuation/Expansion - Evidence-Based  
Cancer Prevention Services*

# **Request for Applications**

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## CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

# REQUEST FOR APPLICATIONS

## RFA P-17.1-CCE

### Competitive Continuation/Expansion

Please also refer to the Instructions for Applicants document,  
which will be posted June 9, 2016

**Application Receipt Opening Date:** June 9, 2016

**Application Receipt Closing Date:** August 30, 2016

**FY 2017**

Fiscal Year Award Period

September 1, 2016-August 31, 2017

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## **RFA VERSION HISTORY**

Rev 05/26/16 RFA release

Rev 06/09/16 Changed the phone number for the CPRIT Prevention Program Office in the Program Questions section (section 7.2, page 32)

## **1. ABOUT CPRIT**

The state of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$3 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 in enhancing 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.

#### **Established Principles**

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

#### **Prevention Program Priorities**

- Prioritize populations and geographic areas of greatest need, greatest potential for impact
- Focus on underserved populations
- Increase targeting of preventive efforts to areas where significant disparities in cancer incidence or mortality in the state exist

## **2. FUNDING OPPORTUNITY DESCRIPTION**

### **2.1. Summary**

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 technologies and strategies. CPRIT will foster 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.

This **Competitive Continuation/Expansion (CCE)** RFA solicits applications seeking to continue or expand projects previously or currently funded under the Evidence-Based Cancer Prevention Services, Cancer Prevention Promotion and Navigation to Clinical Services, Health Behavior Change through Public Education, and Health Behavior Change through Public and Professional Education mechanisms. **This award mechanism is open only to previously or currently funded CPRIT Prevention projects.**

The proposed projects must continue to provide evidence-based interventions in primary, secondary, and/or tertiary cancer prevention and control. The proposed program should be designed to reach and serve as many people as possible. Partnerships with other organizations that can support and leverage resources are strongly encouraged. A coordinated submission of a collaborative partnership program in which all partners have a substantial role in the proposed project is preferred.

### **2.2. Project Objectives**

CPRIT seeks to fund evidence-based education, outreach, clinical and survivorship services that will do the following:

- Address multiple components of the cancer prevention and control continuum (eg, provision of screening and navigation services in conjunction with outreach and education of the priority population as well as health care provider education);
- Offer effective and efficient systems of delivery of prevention services based on the existing body of knowledge about, and evidence for, cancer prevention in ways that far exceed current performance in a given service area;
- Offer systems and/or policy changes that are sustainable over time;

- Provide tailored, culturally appropriate outreach and accurate information on early detection, prevention, and survivorship to the public and/or health care professionals that result in a health impact that can be measured; and/or
- Deliver evidence-based survivorship services aimed at reducing the morbidity associated with cancer diagnosis and treatment.

### **2.3. Award Description**

CPRIT's **Competitive Continuation/Expansion** grants are intended to fund continuation or expansion of currently or previously funded projects that have demonstrated exemplary success, as evidenced by progress reports and project evaluations, and desire to further enhance their impact on priority populations. Detailed descriptions of **results, barriers, outcomes, and impact of the currently or previously funded project are required** (see outline of Project Plan, [section 4.4.4](#)).

The projects proposed under this mechanism should NOT be new projects but should closely follow the intent and core elements of the currently or previously funded project. Established infrastructure/processes and fully described prior project results are required. Improvements and expansion (eg, new geographic area, additional services, new populations) are strongly encouraged but will require justification. Expansion of current projects into geographic areas not well served by the CPRIT portfolio (see maps at <http://www.cprit.state.tx.us/prevention/cprit-portfolio-maps/>), especially rural areas or subpopulations of urban areas that are not currently being served, will receive priority consideration. CPRIT expects measurable outcomes of supported activities, such as a significant increase over baseline (for the proposed service area). It is expected that baselines will have already been established and that continued improvement over baseline is demonstrated in the current application. However, in the case of a proposed expansion where no baseline data exist for the priority population, the applicant must present clear plans and describe method(s) of measurement used to collect the data necessary to establish a baseline. Applicants must demonstrate how these outcomes will ultimately impact cancer incidence, mortality, morbidity, or quality of life.

CPRIT also expects that applications for continuation **will not** require startup time, that applicants can demonstrate that they have overcome barriers encountered, and that applicants have identified **lasting systems changes** that improve results, efficiency, and sustainability.

Leveraging of resources and plans for dissemination are expected and should be well described.

CPRIT requires applicants to deliver evidence-based interventions in at least 1 of the following cancer prevention and control areas (see [section 2.3.2](#) for areas of emphasis):

### **Clinical Services**

- Delivery of vaccines that reduce the risk of cancer,
- Evidence-based assessment and counseling services for behaviors established as increasing cancer risk,
- Screening and early detection services, or
- Survivorship services.

CPRIT considers counseling services (eg, tobacco cessation, survivorship, exercise, and nutrition) as clinical services when provided on an individual basis or in small groups.

Applicants are **required** to conceptualize comprehensive projects **or provide a continuum of services** that would increase desired outcomes. This mechanism **will fund** case management/patient navigation if it is paired with the actual delivery of a clinical service.

Applicants offering screening services must ensure that there is access to treatment services for patients with cancers that are detected as a result of the program and describe plans to provide access to treatment services. CPRIT strongly encourages projects to include broad-based education on cancer risk reduction and health lifestyle as one component of the education curriculum. Applicants offering survivorship services should include an individual needs assessment in addition to the clinical service.

### **Public and Professional Education**

- Development and delivery of culturally competent, evidence-based methods of community education, outreach and support on primary prevention, early detection, and survivorship
- Delivery of education and training for health care professionals that are designed to improve practice behaviors and system support related to primary and secondary prevention of cancer as well as cancer survivorship issues that will result in facilitation and sustained behavior change in the patient population

Projects must include active, rather than passive, education and outreach strategies that are designed to reach, engage, and motivate people and must include plans for realistic action and sustainable behavior change. Applicants **must assist participants in obtaining the prevention**

**interventions being promoted and have a process for tracking participants to document actions taken.**

Under this RFA, CPRIT **will not** consider the following:

- **Continuation or expansion of projects originally funded under the Health Behavior Change through Professional Education mechanism**
- **Projects focusing on case management/patient navigation services through the treatment phase of cancer**
- **Projects requesting CPRIT funding for State Quitline services** (Applicants proposing the utilization of Quitline services should communicate with the Tobacco Prevention and Control program prior to submitting a CPRIT grant application to discuss the services currently offered by the Texas Department of State Health Services [DSHS].)
- **Resources for the treatment of cancer or viral treatment for hepatitis**
- **Prevention/intervention research** (Applicants interested in prevention research should review CPRIT's Academic Research RFAs [available at <http://www.cprit.state.tx.us>].)

### **2.3.1. Priorities**

**Types of Cancer:** Applications addressing any cancer type(s) for which there is strong evidence of effectiveness and that are responsive to this RFA will be considered for funding.

**Priority Populations:** The age of the priority population and frequency of screening plans for provision of clinical services described in the application must comply with established and current national guidelines (eg, US Preventive Services Task Force [USPSTF], American Cancer Society, American College of Physicians).

Priority populations are subgroups that are disproportionately affected by cancer. CPRIT-funded efforts must address 1 or more of these priority populations:

- Underinsured and uninsured individuals;
- Geographically or culturally isolated populations;
- Medically unserved or underserved populations;
- Populations with low health literacy skills;
- Geographic regions of the state with higher prevalence of cancer risk factors (eg, obesity, tobacco use, alcohol misuse, unhealthy eating, sedentary lifestyle);
- Racial, ethnic, and cultural minority populations; or

- Other populations with low screening rates, high incidence rates, and high mortality rates, focusing on individuals never before screened or who are significantly out of compliance with nationally recommended screening guidelines.

**Geographic and Population Balance Priority:** For applications submitted in response to this announcement, at the programmatic level of review conducted by the Prevention Review Council (see [section 5.1](#)), priority will be given to projects that target geographic regions of the state and population subgroups that are not adequately covered by the current CPRIT Prevention project portfolio (see <http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control> and <http://www.cprit.state.tx.us/funded-grants>).

### **2.3.2. Specific Areas of Emphasis**

Applications that propose comprehensive programs delivering **ANY** type of evidence-based preventive service that is responsive to this RFA will be considered. However, CPRIT has identified the following areas of emphasis for this cycle of awards.

#### **A. Primary Prevention**

Priority will be given to projects that, through evidence-based efforts, address and can positively influence **local policy or systems change** that can lead to **sustainable change in desired health behaviors**.

##### Tobacco Prevention and Control

- Decreasing tobacco use in vulnerable and high-risk populations, including people with mental illness, history of substance abuse, youth, and pregnant women, that have higher tobacco usage rates than the general population and decreasing tobacco use in areas of the state that have higher smoking rates per capita than other areas of the state
  - Health Service Regions (HSRs) 2, 4, and 5 have significantly higher tobacco use among adults than in other regions of the state. For more information about maps of HSRs, please visit <http://www.dshs.state.tx.us/regions/state.shtm>.

##### HPV Vaccination

- Increasing access to, delivery of, and completion of the HPV vaccine regimen to males and females through evidence-based intervention efforts
- HPV vaccine completion rates are low (15% for males and 39% for females) across the state compared to the CDC goals of 75% completion rates.<sup>1</sup>

## Liver Cancer

- Decreasing disparities in incidence and mortality rates for hepatocellular cancer (HCC) by increasing the provision of vaccination and screening for hepatitis B virus and screening for hepatitis C virus (following USPSTF guidelines), diagnostic testing, navigation that ensures access to viral treatment, and education on risk factors and on reducing transmission of hepatitis
  - HCC incidence is significantly higher in Texas Hispanics, blacks, and Asian/Pacific Islanders than in non-Hispanic whites.<sup>2</sup>
  - Significantly higher HCC rates in Texas Hispanics versus the United States are driven by very high rates among Hispanics in South Texas.<sup>2</sup>
  - Males have significantly higher incidence and mortality rates than females.<sup>2</sup>
  - Age at diagnosis is shifting toward younger patients, both in Texas and the United States.<sup>2</sup>

## **B. Secondary Prevention - Screening and Early Detection Services**

Applicants should select preventive services using current evidence-based national clinical guidelines (eg, USPSTF, American Cancer Society, American College of Physicians).

## Colorectal Cancer

- Increasing screening/detection rates in HSRs 1 through 6 and HSR 9. For more information about maps of HSRs, please visit  
<http://www.dshs.state.tx.us/regions/state.shtml>.
- The highest rates of cancer incidence and mortality are found in these regions of Texas.<sup>2</sup>
- Decreasing disparities in incidence and mortality rates of colorectal cancer for racial/ethnic populations and rural communities
  - African Americans have the highest incidence and mortality rates, followed by non-Hispanic whites and Hispanics.<sup>2</sup>
- Decreasing incidence and mortality rates in rural counties
  - Incidence and mortality rates are higher in rural counties compared to urban counties.<sup>2</sup>

### Cervical Cancer

- Increasing screening/detection rates for women in Texas-Mexico border counties
  - Women in these counties have a 30% higher cervical cancer mortality rate than women in nonborder counties.<sup>2</sup>
- Decreasing disparities in racial/ethnic populations
  - Hispanics have the highest incidence rates, while African Americans have the highest mortality rates.<sup>2</sup>
- Reaching women never before screened

### Breast Cancer

- Increasing screening/detection rates in rural and medically underserved areas of the state
- Reaching women never before screened

Data on cancer incidence and mortality are provided by the Texas Cancer Registry.<sup>2</sup> For more information about cancer in Texas, visit CPRIT's website at

<http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control>, visit the Texas Cancer Registry site at <http://www.dshs.state.tx.us/tcr/> or contact the Texas Cancer Registry at the Department of State Health Services.

### **C. Tertiary Prevention - Survivorship Services**

Priority for funding will be given to survivorship projects that demonstrate a likelihood of success based on available evidence and that can demonstrate and measure an improvement in quality of life in 1 of more of the following areas:

- Preventing secondary cancers and recurrence of cancer;
- Managing the aftereffects of cancer and treatment to maximize quality of life and number of years of healthy life; or
- Minimizing preventable pain, disability, and psychosocial distress.

Applicants proposing survivorship projects may address people with any type of cancer.

#### **2.3.3. Outcome Metrics**

The applicant is required to describe the results (quantitative and qualitative) of the currently or previously funded project and the proposed outcome measures/metrics for the current application. Interim or output measures that are associated with the final outcome measures

should be identified and will serve as a measure of program effectiveness and public health impact. Applicants are required to clearly describe their assessment and evaluation methodology and to provide results and baseline data from currently or previously funded projects. Applicants should describe how funds from the proposed CPRIT grant will improve and expand outcomes from the initial project and how the current application builds on the previous work or addresses new areas of cancer prevention and control services. If the applicant is not providing baseline data for a measure, the applicant must provide a well-justified explanation and describe clear plans and method(s) of measurement to collect the data necessary to establish a baseline.

## **Reporting Requirements**

Funded projects are required to report quantitative output and outcome metrics (as appropriate for each project) 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:
  - Summary page, including narrative on project progress (required);
  - Services, other than clinical services, provided to the public/professionals;
  - Actions taken by people/professionals as a result of education or training;
  - Clinical services provided; and
  - Precursors and cancers detected.
- Annual and Final progress report sections include, but are not limited to, the following:
  - Key accomplishments, including qualitative analysis of policy change and/or lasting systems change;
  - Progress against goals and objectives, including percentage increase over baseline in provision of age- and risk-appropriate comprehensive preventive services to eligible individuals in a defined service area; for example:
    - Percentage increase over baseline in number of people served
    - Percentage increase over baseline in number of services provided
    - Completion of all required doses of vaccine
    - Number of people quitting tobacco use and sustaining healthy behavior
    - Percentage increase over baseline in cancers detected
    - Percentage increase in early-stage cancer diagnoses in a defined service area
  - Materials produced and publications; and

- Economic impact of the project.

Outcome measures/metrics (as appropriate for each project) should be reported in the annual and final reports and should include, **but are not limited to**, the following:

#### **For Primary Preventive Services**

- Percentage increase over baseline in provision of age- and risk-appropriate comprehensive preventive services to eligible individuals in a defined service area
- Percentage of people reporting sustained behavior change
- Estimates of cancers prevented as a result of primary preventive services

#### **For Screening Services**

- Percentage increase over baseline in provision of age- and risk-appropriate comprehensive preventive services to eligible individuals in priority populations
- Percentage increase over baseline in early-stage cancer diagnoses in a defined service area

#### **For Survivorship Services**

- Percentage increase over baseline in provision of survivorship services in a defined service area
- Percentage increase over baseline in improvement in quality-of-life measures using a validated quality-of-life instrument, if such an instrument is applicable to the project
- Percentage of people reporting sustained behavior change
- Percentage of people showing clinical improvement of cancer treatment sequelae

#### **For Public/Patient Behavior Change**

- Increase over baseline in the number of people in priority populations who take preventive actions (eg, change behavior, access screening services, receive counseling) as a result of participating in the educational program
- Interim measures may include increase over baseline in the number of people who accessed services and were appropriately counseled about health behaviors and evidence-based screening guidelines

## **For Provider Outcomes**

- Knowledge increase:
  - Increase over baseline in health care providers' **knowledge and ability to counsel, engage, and motivate** patients on preventive measures
  - Increase over baseline in health care providers' knowledge of cancer survivorship issues and services
- Provider performance/practice improvement or behavior change
  - Increase over baseline in the number of health care providers who screen and counsel their at-risk patients about tobacco use and cessation, health lifestyles, alcohol misuse, cancer screenings, etc
  - Increase over baseline in the number of health care providers who address patients' postdiagnosis issues, including counseling and referral to survivorship programs and services

## **Systems Change (for all projects)**

- Qualitative analysis of policy or systems change
- Description of lasting, sustainable system changes

## **2.4. Eligibility**

- The applicant must be a Texas-based entity that previously received CPRIT funding through Prevention Program RFAs.
- The designated Program Director (PD) will be responsible for the overall performance of the funded project. The PD must have relevant education and management experience and must reside in Texas during the project performance time.
- The evaluation of the project must be headed by a professional who has demonstrated expertise in the field and who resides in Texas during the time that the project is conducted.
- The applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application is submitted.
- 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.

- The applicant may submit more than 1 continuation application, if eligible, but each application must be for distinctly different services without overlap in the services provided. Applicants who do not meet this criterion will have all applications administratively withdrawn without peer review.
- Applicants may submit a continuation application before the end of the currently funded project but should time their submission for continuation during the last year of the current project to ensure minimal overlap of funding. Unexpended funds from the original project will not carry forward to the continuation/expansion project. To apply for an expansion of a current project, projects must have at least 1 full year of results and data.
- If the applicant or a partner is an existing DSHS contractor, CPRIT funds may not be used as a match, and the application must explain how this grant complements or leverages existing state and federal funds. DSHS contractors who also receive CPRIT funds must be in compliance with and fulfill all contractual obligations within CPRIT. CPRIT and DSHS reserve the right to discuss the contractual standing of any contractor receiving funds from both entities.
- 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 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 at <http://www.cprit.state.tx.us>.

#### **2.4.1. Resubmission Policy**

Two **resubmissions** are permitted. An application is considered a resubmission if the proposed project is the same project as presented in the original submission. A change in the identity of the PD for a project or a change of title for a project that was previously submitted to CPRIT does not constitute a new application; the application would be considered a resubmission.

#### **2.5. Funding Information**

Applicants may request any amount of funding up to the maximum listed below for each type of project (Table 1).

**Table 1. Summary of Funding Amounts for CCE**

Competitive Continuations	Health Behavior Change Through Public Education (PubEd/PE)	Health Behavior Change Through Public and Professional Education (PPE)	Cancer Prevention Promotion and Navigation to Clinical Services (PN)	Evidence-Based Cancer Prevention Services (EBP)
<b>Duration of the project</b>	24 months	24 months	24 months	36 months
<b>Total funding</b>	\$150,000	\$150,000 each component (Public and Professional)	\$200,000	\$1.5 M

Within the Evidence-Based Cancer Prevention Services (EBP) mechanism, the following estimates may be used as a general guide:

- Primary prevention services only: \$300,000 to \$500,000
  - Screening and early detection services, including clinical services: Up to \$1.5 million (projects requesting the maximum should provide comprehensive services, demonstrate broad-based community collaboration, and serve as many people as possible)
  - Survivorship services only: \$300,000 to \$500,000

Grant funds may be used to pay for clinical services, navigation services, salary and benefits, project supplies, equipment, costs for outreach and education of populations, and travel of project personnel to project site(s). 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 to attend CPRIT's biennial 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.

The budget should be proportional to the number of individuals receiving programs and services, and a significant proportion of funds is expected to be used for program delivery as opposed to program development. In addition, CPRIT seeks to fill gaps in funding rather than replace existing funding, supplant funds that would normally be expended by the applicant's organization, or make up for funding reductions from other sources.

### **3. KEY DATES**

RFA

RFA release May 26, 2016

## Application

Online application opens	June 9, 2016, 7 AM central time
Application due	August 30, 2016, 3 PM central time
Application review	December 2016

## **Award**

Award notification	February 2017
Anticipated start date	March 2017

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. 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 Authorized Signing Official (a person authorized to sign and submit the application for the organization) and the Grants Contract/Office of Sponsored Projects Official (the individual who will 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 9, 2016, and must be submitted by 3 PM central time on August 30, 2016. 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. 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. Please refer to the *Instructions for Applicants* document for details that will be available when the application receipt system opens. Submissions that are missing 1 or more components or do not meet the eligibility requirements will be administratively withdrawn without review.

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

Clearly explain the problem(s) to be addressed and 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 upon review of this statement.

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

- **Need:** Include a description of need in the specific service area. Include rates of incidence, mortality, and screening in the service area compared to overall Texas rates. Describe barriers, plans to overcome these barriers, and the priority population to be served.
- **Overall Project Strategy:** Describe the project and how it will address the identified need. Clearly explain what the project is and what it will specifically do, including the services to be provided and the process/system for delivery of services and outreach to the priority population.
- **Specific Goals:** State specifically the overall goals of the proposed project; include the estimated overall numbers of people (public and/or professionals) to be reached and people (public and/or professionals) to be served.
- **Significance and Impact:** Explain how the proposed project, if successful, will have a unique and major impact on cancer prevention and control for the population proposed to be served and for the state of Texas.

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

Goals and objectives must be completed for the initial and/or the most recently funded project and for the proposed continuation/expansion project. The initial project is defined as the first

funded project upon which this application is based. The initial project may or may not be the most recently funded project.

If this is the first application for a continuation/expansion award, enter the goals and objectives for the initial funded project and progress made against each goal and objective in the **Goals and Objectives template** form. Provide an explanation if goals and objectives were not fully met. Include the number and type of each clinical, education, and navigation service delivered as well as the percent change from the initial baseline. If the baseline was 0, report against the baseline that was established during the initial project.

If this is an application for a subsequent continuation/expansion project, complete the CPRIT **Grants Summary template** for the initial project, regardless of the PD or Co-PD of the original project. In addition, enter the goals and objectives for the most recently funded CCE project and progress made against each goal and objective in the **Goals and Objectives template** form.

Enter the goals and objectives for the proposed continuation/expansion project in the **CARS text fields**. List specific outcome goals and **measurable** objectives for each year of the project. Process objectives should be included in the project plan only. The suggested maximum number is 4 goals with 2 to 3 objectives each. See [Appendix B](#) for instructions on writing goals and objectives.

Baseline and method(s) of measurement for the proposed continuation/expansion project are required. Provide both raw numbers and percent changes for the baseline and target. Applicants must explain plans to establish baseline and describe method(s) of measurement in cases where it has not been defined.

#### **4.4.3. Project Timeline (2 pages)**

Provide a project timeline for project activities that includes deliverables and dates. Use Years 1, 2, 3, and Months 1, 2, 3, etc, as applicable instead of specific months or years (eg, Year 1, Months 3-5, not 2017, March-May).

#### **4.4.4. Project Plan (15 pages; fewer pages permissible)**

The project plan must include information for the initial funded project, the most recently funded project (if different from the initial project), and the proposed continuation/expansion project. Please note that a different set of reviewers from those assigned to the previously funded application may evaluate this application. Therefore, applicants should be detailed and clear

about the proposed work, even if it is similar to the original or subsequent project. Also, applicants should make it easy for reviewers to compare the original project and the most recently funded project (if different from the initial project) with the proposed continuation/expansion project.

#### **4.4.4.1 Initial and Most Recently Funded Project**

Describe how the project has evolved from the initial project to the most recently funded project (if different from the initial project). In the description include a discussion of the following:

- **The evidence-based intervention:** its purpose and how it was implemented in the priority population. Describe any adaptations made for the population served.
- **Project Results and Outcomes:** Address how the need for the evidence-based service was met by describing **qualitative** results and outcomes of the project(s). (Quantitative results are reported in the appropriate template form described in [section 4.4.4.2](#)) Explain any barriers or obstacles encountered and strategies used to overcome these.
- **Integration and Capacity Building:** Describe steps taken toward integration and capacity building for components of the projects.
- **Dissemination/Adaptation:** Describe how project results were disseminated or plans for future dissemination of results.

#### **4.4.4.2 Proposed Continuation/Expansion Project**

The required project plan format follows. Applicants must use the headings outlined below. Applications not following the required format will be administratively withdrawn.

**Introduction:** Briefly present the rationale behind the proposed service, emphasizing the critical barriers to current service delivery that will be addressed. Identify the evidence-based service to be implemented for the priority population. Baseline data for the priority population and target service area are required where applicable. Reviewers will be aware of national and state statistics, and these should be used only to compare rates for the proposed service area. Describe the geographic region of the state that the project will serve; maps are appreciated.

**Goals and Objectives (optional):** Outcome goals and objectives will be entered in separate fields in CARS. Process objectives should be included in the project plan. However, if desired, outcome goals and objectives may be fully repeated or briefly summarized here. See [Appendix B](#) for instructions on writing goals and objectives.

**Components of the Project:** Clearly describe the need, delivery method, and evidence base (provide references) for the services as well as anticipated results. Be explicit about the base of evidence and any necessary adaptations for the proposed project. Provide details for any proposed expansion of the project to new geographic areas and/or priority populations. Clearly demonstrate the ability to provide the proposed service and describe how results will be improved over baseline and the ability to reach the priority population. Applicants must also clearly describe plans to ensure access to treatment services should cancer be detected.

**Evaluation Strategy:** A strong commitment to evaluation of the project is required. Describe the impact on outcome measures and interim output measures as outlined in [section 2.3.3](#). Describe the plan for outcome and output measurements, including data collection and management methods, data analyses, and anticipated results. 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, prevention research centers, or the like. Applicants should budget accordingly for the evaluation activity and should involve that professional during grant application preparation to ensure, among other things, that the evaluation plan is linked to the proposed goals and objectives.

**Organizational Qualifications and Capabilities:** Describe the organization and its track record and success in providing programs and services. Describe the role and qualifications of the key collaborators/partners in the project. Include information on the organization's financial stability and viability. To ensure access to preventive services and reporting of services outcomes, applicants should demonstrate that they have provider partnerships and agreements (via memoranda of understanding) or commitments (via letters of commitment) in place.

**Integration and Capacity Building:** CPRIT funds projects that target the unmet needs not sufficiently covered by other funding sources, and full maintenance of the project may not be feasible. This is especially the case when the project involves the delivery of clinical services. Educational and other less costly interventions may be more readily sustained. Full maintenance of a project, the ability of the grantee's setting or community to continue to deliver the health benefits of the intervention as funded, is not required; however, efforts toward maintenance should be described.

It is expected that steps toward integration and capacity building for components of the project will be taken and plans for such be fully described in the application. *Integration* is defined as the extent the evidence-based intervention is integrated within the culture of the grantee's setting or community through policies and practice. *Capacity building* is any activity (eg, training, identification of alternative resources, building internal assets) that builds durable resources and enables the grantee's setting or community to continue the delivery of some or all components of the evidence-based intervention.

Elements of integration and capacity building may include, but are not limited to, the following:

- Developing ownership, administrative networks, and formal engagements with stakeholders;
- Developing processes for each practice/location to incorporate services into its structure beyond project funding;
- Identifying and training of diverse resources (human, financial, material, and technological);
- Implementing policies to improve effectiveness and efficiency (including cost-effectiveness) of systems.

**Dissemination and Scalability (Expansion):** Dissemination of project results and outcomes, including barriers encountered and successes achieved, is critical to building the evidence base for cancer prevention and control efforts in the state. Dissemination methods may include, but are not limited to, presentations, publications, abstract submissions, and professional journal articles, etc.

Describe how the project lends itself to dissemination to or application by other communities and/or organizations in the state or expansion in the same communities.

While scalability of programs is desirable, some programs may have unique resources and may not lend themselves to replication by others. However, some components of the project may lend themselves to modification and replication. Discuss whether the program lends itself to scalability and expansion by others.

#### **4.4.5. People Reached**

Provide the estimated overall number of people (members of the public and professionals) to be reached by the funded project. The applicant is required to itemize separately the noninteractive

education and outreach activities, with estimates, that led to the calculation of the overall estimates provided. Refer to [Appendix A](#) for definitions.

#### **4.4.6. People Served**

Provide the estimated overall number of services delivered to members of the public and to professionals by the funded project. The applicant is required to itemize separately the education, navigation, and clinical activities/services, with estimates, that led to the calculation of the overall estimates provided. Refer to [Appendix A](#) for definitions.

#### **4.4.7. 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 services.

#### **4.4.8. Resubmission Summary**

Please use the template provided on the CARS (<https://CPRITgrants.org/>). Describe the approach to the resubmission and how reviewers' comments were addressed. The summary statement of the original application review, if previously prepared, will be automatically appended to the resubmission; the applicant is not responsible for providing this document.

#### **4.4.9. CPRIT Grants Summary**

Please use the template provided on the CARS (<https://CPRITGrants.org>). Provide a description of the progress or final results of any CPRIT-funded projects of the PD or Co-PD, except for the initial funded project that is the basis for this CCE application, regardless of their connection to this application. Progress for the initial project will be detailed in the Goals and Objectives template form (see [section 4.4.2](#)) and need not be repeated here. Applications that are missing this document and have a PD and/or Co-PD with previous or current CPRIT funds will be administratively withdrawn prior to peer review.

In addition, if this application is requesting funding for a second continuation/expansion, complete the CPRIT Grants Summary template for the initial funded project that was the basis for the first continuation/expansion, regardless of the PD or Co-PD of the original project.

#### **4.4.10. 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, equipment, supplies, contractual expenses,

education and outreach expenses, services delivery, and other expenses. CPRIT funds will be distributed on a reimbursement basis.

Applications requesting more than the maximum allowed cost (total costs) as specified in [section 2.5](#) will be administratively withdrawn.

- **Average Cost of Services:** The average cost of services will be automatically calculated from the total cost of the project divided by the total number of services (refer to [Appendix A](#)).
- **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.
- **Equipment:** Equipment having a useful life of more than 1 year and an acquisition cost of \$5,000 or more per unit must be specifically approved by CPRIT. An applicant does not need to seek this approval prior to submitting the application. Justification must be provided for why funding for this equipment cannot be found elsewhere; CPRIT funding should not supplant existing funds. Cost sharing of equipment purchases is strongly encouraged.
- **Services Costs:** CPRIT reimburses for services using Medicare reimbursement rates. Describe the source of funding for all services where CPRIT funds are not requested.
- **Other Expenses:**
  - **Incentives:** Use of incentives or positive rewards to change or elicit behavior is allowed; however, incentives may only be used based on strong evidence of their effectiveness for the purpose and in the priority population identified by the applicant. CPRIT will not fund cash incentives. The maximum dollar value allowed for an incentive per person, per activity or session, is \$25.
  - **Costs Not Related to Cancer Prevention and Control:** CPRIT does not allow recovery of any costs for services not related to cancer (eg, health physicals, HIV testing).
  - **Indirect Expenses:** 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](#).

#### **4.4.11. Current and Pending Support and Sources of Funding**

Please 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. Information for the initial funded project need not be included.

#### **4.4.12. 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.

The evaluation professional must provide a biographical sketch.

Up to 3 additional biographical sketches for key personnel may be provided. Each biographical sketch must not exceed 2 pages and must use the “Prevention Programs: Biographical Sketch” template provided on the CARS (<https://CPRITGrants.org>).

Only biographical sketches will be accepted; do not submit resumes and/or CVs.

#### **4.4.13. Collaborating Organizations**

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 (eg, evaluation, clinical services, recruitment to screening).

#### **4.4.14. Letters of Commitment (10 pages)**

Applicants should provide letters of commitment and/or memoranda of understanding from community organizations, key faculty, or any other component essential to the success of the program.

### **5. APPLICATION REVIEW**

#### **5.1. Review Process Overview**

All eligible applications will be reviewed using a 2-stage peer review process: (1) evaluation of applications by peer review panels and (2) prioritization of grant applications by the Prevention

Review Council. In the first stage, applications will be evaluated by an independent review panel using the criteria listed below. In the second stage, applications judged to be meritorious by review panels will be evaluated by the Prevention Review Council and recommended for funding based on comparisons with applications from all of the review panels and programmatic priorities. Programmatic considerations may include, but are not limited to, geographic distribution, cancer type, population served, and type of program or service. The scores are only 1 factor considered during programmatic review. At the programmatic level of review, priority will be given to proposed projects that target geographic regions of the state or population subgroups that are not well represented in the current CPRIT Prevention project portfolio.

Applications approved by the Prevention 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.

An applicant will be notified regarding the peer review panel assigned to review the grant application. Peer Review Panel members are listed by panel on CPRIT's website. **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 Committee 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 consisting of experts in the field and advocates 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**

- Do the proposed services address an important problem or need in cancer prevention and control? Will the proposed outcomes have a significant impact on cancer incidence, morbidity, and/or mortality?
- Will the project reach and serve an appropriate number of people based on the budget allocated to providing services and the cost of providing services?
- Does the proposed continuation/expansion project build on its initial results (baseline) and continue to demonstrate creativity, ingenuity, resourcefulness, or imagination? Does it go beyond the initial project to address what the applicant has learned or explore new partnerships, new audiences, or improvements to systems?

- Does the program address known gaps in prevention services and avoid duplication of effort?

### **Previous Project Performance**

- Does the proposed continuation project demonstrate a high likelihood of success based on the initial project's results and outcomes?
- Does the applicant provide evidence of compelling project progress of the already-funded project? If not, has the applicant addressed obstacles and strategies to overcome those obstacles?

### **Project Strategy and Feasibility**

- Does the proposed project provide prevention interventions or services specified in the RFA?
- Are the overall program approach, strategy, and design clearly described and supported by established theory and practice? Are the base of evidence and any necessary adaptations clearly defined and referenced?
- Are the proposed objectives and activities feasible within the duration of the award? Has the applicant convincingly demonstrated the short- and long-term impacts of the project?
- Are possible barriers addressed and approaches for overcoming them proposed?
- Are the priority population and culturally appropriate methods to reach the priority population clearly described? If applicable, does the application demonstrate the availability of resources and expertise to provide case management, including followup for abnormal results and access to treatment?
- Does the program leverage partners and resources to maximize the reach of the services proposed? Does the program leverage and complement other state, federal, and nonprofit grants?

### **Outcomes Evaluation**

- Are specific goals and measurable objectives for each year of the project listed for both the initial project and the proposed continuation project? Does the applicant provide the baseline and results or method(s) of measurement?
- Are the proposed outcome measures appropriate for the services provided, and are the expected changes clinically significant?

- Does the application provide a clear and appropriate plan for data collection and management and data analyses?
- If an evidence-based intervention is being adapted in a population where it has not been tried/tested, are plans for evaluation of barriers, effectiveness, and fidelity to the model described?
- Is the qualitative analysis of planned policy or system changes described?

### **Organizational Qualifications and Capabilities**

- Do the organization and its collaborators/partners demonstrate the ability to provide the proposed preventive 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 implement, evaluate, and complete the project?
- Is the organization structurally and financially stable and viable?

### **Integration and Capacity Building**

- Does the applicant describe steps that will be taken and components of the project that will be integrated into the organization through policies and practices?
- Does the applicant describe steps that will be taken or components of the project that will remain (eg, trained personnel, identification of alternative resources, building internal assets) to continue the delivery of some or all components of the evidence-based intervention once CPRIT funding ends?

## **5.2.2. Secondary Evaluation Criteria**

### **Budget**

- Is the budget appropriate and reasonable for the scope and services of the proposed work?
- Is the cost per person served appropriate and reasonable?
- Is the proportion of the funds allocated for direct services reasonable?
- Is the project a good investment of Texas public funds?

## **Dissemination and Scalability (Expansion)**

- Are plans for dissemination of the project's results and outcomes, including barriers encountered and successes achieved, clearly described?
- Some programs may have unique resources and may not lend themselves to replication by others. If applicable, does the applicant describe a plan for scalability/expansion of all or some components of the project by others in the state?

## **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, which are available at <http://www.cprit.state.tx.us>. Applicants are advised to review CPRIT's Administrative Rules regarding 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. 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, which provides a step-by-step guide to using CARS.

**Hours of operation:** Monday, Tuesday, Thursday, Friday, 7 AM to 4 PM central time  
Wednesday, 8 AM to 4 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.state.tx.us](http://www.cprit.state.tx.us)

## **8. RESOURCES**

- The Texas Cancer Registry. <http://www.dshs.state.tx.us/tcr> or contact the Texas Cancer Registry at the Department of State Health Services
- The Community Guide. <http://www.thecommunityguide.org/index.html>
- Cancer Control P.L.A.N.E.T. <http://cancercontrolplanet.cancer.gov>

- Guide to Clinical Preventive Services: *Recommendations of the U.S. Preventive Services Task Force*. <http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/>
- Centers for Disease Control and Prevention: The Program Sustainability Assessment Tool: A New Instrument for Public Health Programs.  
[http://www.cdc.gov/pcd/issues/2014/13\\_0184.htm](http://www.cdc.gov/pcd/issues/2014/13_0184.htm)
- Centers for Disease Control and Prevention: Using the Program Sustainability Tool to Assess and Plan for Sustainability. [http://www.cdc.gov/pcd/issues/2014/13\\_0185.htm](http://www.cdc.gov/pcd/issues/2014/13_0185.htm)
- Cancer Prevention and Control Research Network: Putting Public Health Evidence in Action Training Workshop. <http://cpcrn.org/pub/evidence-in-action/>
- Moore, D.E. A Framework for Outcomes Evaluation in the Continuing Professional Development of Physicians. In: Davis, D., Barnes, B.E., Fox, R., eds. *The Continuing Professional Development of Physicians: From Research to Practice*. Chicago, Ill: American Medical Association; 2003
- Centers for Disease Control and Prevention. Distinguishing Public Health Research and Public Health Nonresearch. <http://www.cdc.gov/od/science/integrity/docs/cdc-policy-distinguishing-public-health-research-nonresearch.pdf>
- Brownson, R.C., Colditz, G.A., and Proctor, E.K. (Editors), *Dissemination and Implementation Research in Health: Translating Science to Practice*. Oxford University Press, March 2012

## **9. REFERENCES**

1. <http://www.cdc.gov/hpv/parents/questions-answers.html>
2. Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services. <http://www.dshs.state.tx.us/tcr/default.shtm>

## APPENDIX A: KEY TERMS

- **Activities:** A listing of the “who, what, when, where, and how” for each objective that will be accomplished
- **Capacity Building:** Any activity (eg, training, identification of alternative resources, building internal assets) that builds durable resources and enables the grantee’s setting or community to continue the delivery of some or all components of the evidence-based intervention
- **Clinical Services:** Number of clinical services such as screenings, diagnostic tests, vaccinations, counseling sessions, or other evidence-based preventive services delivered by a health care practitioner in an office, clinic, or health care system (Other examples include genetic testing or assessments, physical rehabilitation, tobacco cessation counseling or nicotine replacement therapy, case management, primary prevention clinical assessments, and family history screening.)
- **Education Service:** Number of evidence-based, culturally appropriate cancer prevention and control education and outreach services delivered to the public and to health care professionals (Examples include education or training sessions [group or individual], focus groups, and knowledge assessments.)
- **Evidence-Based Program:** A program that is validated by some form of documented research or applied evidence (CPRIT’s website provides links to resources for evidence-based strategies, programs, and clinical recommendations for cancer prevention and control. To access this information, visit <http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control>.)
- **Goals:** Broad statements of general purpose to guide planning (Goals should be few in number and focus on aspects of highest importance to the project.)
- **Integration:** The extent the evidence-based intervention is integrated within the culture of the grantee’s setting or community through policies and practice
- **Navigation Services:** Number of unique activities/services that offer assistance to help overcome health care system barriers in a timely and informative manner and facilitate cancer screening and diagnosis to improve health care access and outcomes (Examples include patient reminders, transportation assistance, and appointment scheduling assistance.)

- **Objectives:** Specific, **measurable**, actionable, realistic, and timely projections for outputs and outcomes; example: “Increase screening service provision in X population from Y% to Z% by 20xx” (Baseline data for the priority population must be included as part of each objective.)
- **People Reached:** Number of members of the public and/or professionals reached via noninteractive public or professional education and outreach activities, such as mass media efforts, brochure distribution, public service announcements, newsletters, and journals (This category includes individuals who would be reached through activities that are directly funded by CPRIT as well as individuals who would be reached through activities that occur as a direct consequence of the CPRIT-funded project’s leveraging of other resources/funding to implement the CPRIT-funded project.)
- **People Served:** Number of services delivered to members of the public and/or professionals—direct, interactive public or professional education, outreach, training, navigation service, or clinical service, such as live educational and/or training sessions, vaccine administration, screening, diagnostics, case management/navigation services, and physician consults. One individual may receive multiple services (This category includes individuals who would be served through activities that are directly funded by CPRIT as well as individuals who would be served through activities that occur as a direct consequence of the CPRIT-funded project’s leveraging of other resources/funding to implement the CPRIT-funded project.)

## **APPENDIX B: WRITING GOALS AND OBJECTIVES**

**Adapted with permission from Appalachia Community Cancer Network, NIH Grant U54 CA 153604**

### **Develop well-defined goals and objectives.**

**Goals** provide a roadmap or plan for where a group wants to go. Goals can be long term (over several years) or short term (over several months). Goals should be based on needs of the community and evidence-based data.

Goals should be:

- Believable – situations or conditions that the group believes can be achieved
- Attainable – possible within a designated time

- Tangible – capable of being understood or realized
- On a timetable – with a completion date
- Win-Win – beneficial to individual members and the coalition

**Objectives** are measurable steps toward achieving the goal. They are clear statements of specific activities required to achieve the goal. The best objectives have several characteristics in common – S.M.A.R.T. + C.:

- Specific – they tell how much (number or percent), who (participants), what (action or activity), and by when (date)
  - Example: 115 uninsured individuals age 50 and older will complete colorectal cancer screening by March 31, 2018.
- Measurable – specific measures that can be collected, detected, or obtained to determine successful attainment of the objective
  - Example: How many screened at an event? How many completed pre/post assessment?
- Achievable – not only are the objectives themselves possible, it is likely that your organization will be able to accomplish them
- Relevant to the mission – your organization has a clear understanding of how these objectives fit in with the overall vision and mission of the group
- Timed – developing a timeline is important for when your task will be achieved
- Challenging – objectives should stretch the group to aim on significant improvements that are important to members of the community

### Evaluate and refine your objectives

Review your developed objectives and determine the type and level of each using the following information:

#### There are 2 types of objectives:

- Outcome objectives – measure the “what” of a program
- Process objectives – measure the “how” of a program

#### There are 3 levels of objectives:

- Community-level – objectives measure the planned community change

- Program impact – objectives measure the impact the program will have on a specific group of people
- Individual – objectives measures participant changes resulting from a specific program, using these factors:
  - Knowledge – understanding (know screening guidelines; recall the number to call for screening)
  - Attitudes – feeling about something (will consider secondhand smoke dangerous; believe eating 5 or more fruits and vegetable is important)
  - Skills – the ability to do something (complete fecal occult blood test)
  - Intentions – regarding plan for future behavior (will agree to talk to the doctor, will plan to schedule a Pap test)
  - Behaviors (past or current) – to act in a particular way (will exercise 30+ minutes a day, will have a mammogram)

**Well-defined goals and objectives can be used to track, measure, and report progress toward achievement.**

## Summary Table

	<b>Outcome</b>	<b>Process</b>
<b>Community-level</b>	WHAT will change in a community  <i>Example: As a result of CPRIT funding, FIT (fecal immunochemical tests) will be available to 1,500 uninsured individuals age 50 and over through 10 participating local clinics and doctors.</i>	HOW the community change will come about  <i>Example: Contracts will be signed with participating local providers to enable uninsured individuals over age 50 have access to free colorectal cancer screening in their communities.</i>
<b>Program impact</b>	WHAT will change in the target group as a result of a particular program  <i>Example: As a result of this project, 200 uninsured women between 40 and 49 will receive free breast and cervical cancer screening.</i>	HOW the program will be implemented to affect change in a group/population  <i>Example: 2,000 female clients, between 40 and 49, will receive a letter inviting them to participate in breast and cervical cancer screening.</i>
<b>Individual</b>	WHAT an individual will learn as a result of a particular program, or WHAT change an individual will make as a result of a particular program  <i>Example: As a result of one to one education of 500 individuals, at least 20% of participants will participate in a smoking cessation program to quit smoking.</i>	HOW the program will be implemented to affect change in an individual's knowledge or actions  <i>Example: As a result of one-to-one counseling, all participants will identify at least 1 smoking cessation service and 1 smoking cessation aid.</i>

## **Third Party Observer Reports**

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## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-05- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 1 (CPRIT Peer Review Meeting - Panel 1)  
*Panel Date:* December 5-6, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 1 peer review of applications for FY17 funding. The meeting was chaired by Ross Brownson, Ph.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 5-6, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Twelve applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Four CPRIT staff members and three CSRA employees were present for the meeting; one additional CSRA employee participated telephonically;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- Four applications with five COIs were identified prior to the meeting; one application had two COIs. No additional COIs were identified during the peer review panel;
- One application with a COI was not discussed during the meeting;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-07- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 2 (CPRIT Peer Review Meeting - Panel 2)  
*Panel Date:* December 7-8, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 2 peer review of applications for FY17 funding. The meeting was chaired by Nancy Lee, M.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 7-8, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Ten applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Two CPRIT staff members and three CSRA employees were present for the meeting;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- One application with two COIs was identified prior to the meeting; no additional COIs were identified during the peer review panel;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict of interest signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

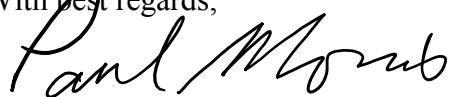
### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

BSF's third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform and did not perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2017-01-2\_PRC\_17.1

*Program Name:* Prevention

*Panel Name:* FY17.1 Prevention Review Council Programmatic Review

*Panel Date:* January 20, 2017

*Report Date:* January 23, 2017

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the applications and focused on established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions, LLC (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT FY17.1 Prevention Review Council Programmatic Review. The meeting was chaired by Stephen Wyatt and conducted telephonically on January 20, 2017.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest is followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when an application with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by Prevention Review Council members or CSRA staff;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The Prevention Review Council discussion is focused on the established scoring criteria and/or making recommendations.

### *Summary of Observation Results*

Two BFS independent observers participated in the Prevention Review Council teleconference. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observer noted the following during the recruitment meeting:

- Thirteen applications were discussed;
- Participants: Three council panelists including the Chairperson;
- Two CPRIT staff members and four CSRA employees participated in the meeting;
- CPRIT staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the evaluation criteria.

There were no conflicts of interest (COIs) identified. A list of all attendees and informational materials were provided by CSRA staff to aid in the observation of these objectives.

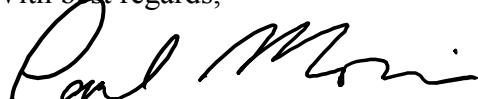
### *Conclusion*

In conclusion; we observed that the activities of the Prevention Review Council were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA

Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

January 20, 2017

cc: Vince Burgess, Chief Compliance Officer

## **Conflicts of Interest Disclosure**

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**Conflicts of Interest Disclosure**  
**Prevention Cycle 17.1 Applications**  
**(Prevention Cycle 17.1 Awards Announced at February 15, 2017, Oversight Committee Meeting)**

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Prevention Cycle 17.1 include *Competitive Continuation/Expansion - Evidence-Based Cancer Prevention Services; Dissemination of CPRIT-Funded Cancer Control Interventions; Evidence-Based Cancer Prevention Services; and Cancer Prevention Promotion and Navigation to Clinical Services*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by SRA International, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
<b>Applications considered by the PIC and Oversight Committee</b>			
PP170023	Karen Basen-Engquist	The University of Texas M. D. Anderson Cancer Center	Eriksen, Michael
PP170046	Paula Cuccaro	The University of Texas Health Science Center at Houston	Brandt, Healther; Vanderpool, Robin
<b>Applications not considered by the PIC or Oversight Committee</b>			
PP170054*	Kentya Ford	The University of Texas at Austin	Eriksen, Michael
PP170003	Navkiran Shokar	Texas Tech University Health Sciences Center at El Paso	Eriksen, Michael
PP170049	Marcia Ory	Texas A&M University System Health Science Center	Brady, Kevin; Plescia, Marcus

\* = Not discussed

## **De-Identified Overall Evaluation Scores**

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## Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services

### Prevention Cycle 17.1

*Two de-identified applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

*Additionally, this list contains one de-identified application with an equal or more favorable score than those recommended that was deferred by the Program Integration Committee.*

Application ID	Final Overall Evaluation Score
PP170036*	1.3
PP170004*	2.1
PP170023*	2.1
PP170012*	2.3
a	2.3
PP170039*	3.4
b	3.4
c	3.4
d	3.6
e	4.3

\* = Recommended for funding

## **Final Overall Evaluation Scores and Rank Order Scores**

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Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

Dear Mr. Roberts and Mr. Geren,

On behalf of the Prevention Review Council (PRC), I am pleased to provide the PRC's recommendations for CPRIT Prevention grant awards. The applicants on the attached list of submitted proposals responded to CPRIT requests for applications (RFA) released for the first review cycle of FY2017.

The projects are numerically ranked in the order the PRC recommends the applications be funded. Recommended funding amounts and the overall evaluation score are provided for each grant application. The PRC did not make changes to the goals, timelines, or project objectives requested by the applicants. When the PRC did not follow the rank ordered scores in developing its recommended funding order a justification, based upon established programmatic priorities outlined in the RFAs, is provided.

The projected funding available for this fiscal year is \$26,171,122. With the second funding cycle for the fiscal year underway, the PRC opted for a conservative approach to its recommendations for this cycle. Recommendations are provided at two levels: (1) initially fund 9 projects totaling \$12,024,696 and (2) depending upon the availability of funds later in the fiscal year, fund an additional project, PP170037 for \$1,500,000.

Our recommendations meet the PRC's standards for grant award funding of projects that are evidence-based, deliver programs or services to underserved populations, and focus on primary, secondary or tertiary prevention. In making these recommendations the PRC also considered the available funding, the composition of the current portfolio, and the programmatic priorities in the RFA which include potential for impact and return on investment, geographic distribution, cancer type and type of program. All of the recommended grants address one or more of the Prevention Program priorities.

Sincerely,

Stephen W. Wyatt, DMD, MPH  
Chair, CPRIT Prevention Review Council





CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

# CEO Affidavit Supporting Information

FY 2017—Cycle 1  
*Dissemination of CPRIT-Funded Cancer Control  
Interventions*

# **Request for Applications**

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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**REQUEST FOR APPLICATIONS**  
**RFA P-17.1-DI**

**Dissemination of CPRIT-Funded Cancer  
Control Interventions**

Please also refer to the Instructions for Applicants document,  
which will be posted on June 9, 2016

**Application Receipt Opening Date:** June 9, 2016  
**Application Receipt Closing Date:** August 30, 2016

**FY 2017**  
Fiscal Year Award Period  
September 1, 2016-August 31, 2017

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## **RFA VERSION HISTORY**

Rev 05/26/16 RFA release

## **1. ABOUT CPRIT**

The state of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$3 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 in enhancing 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.

#### **Established Principles**

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

#### **Prevention Program Priorities**

- Prioritize populations and geographic areas of greatest need and greatest potential for impact
- Focus on underserved populations
- Increase targeting of preventive efforts to areas where significant disparities in cancer incidence or mortality in the state exist

## **2. FUNDING OPPORTUNITY DESCRIPTION**

### **2.1. Summary**

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 technologies and strategies. CPRIT will foster 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.

The **Dissemination of CPRIT-Funded Cancer Control Interventions (DI)** award mechanism seeks to fund programs that facilitate the dissemination and implementation of successful CPRIT-funded, evidence-based cancer prevention and control interventions across Texas. **This award mechanism is open only to previously or currently funded CPRIT projects.**

The proposed program should describe and package strategies or approaches to introduce, modify, and implement previously funded CPRIT evidence-based cancer prevention and control interventions for dissemination to other settings and populations in the state. To be eligible, the applicant should be in a position to develop 1 or more “products” based on the results of the CPRIT-funded intervention. The proposed projects should also identify and assist others in preparing to implement the intervention and/or preparing to apply for grant funding.

### **2.2. Project Objectives**

CPRIT seeks to fund projects that will provide 1 or more of the following:

- Dissemination of tools or models to public health professionals, health care practitioners, health planners, policymakers, and advocacy groups;
- Dissemination of materials or information about an intervention to broader settings/systems; and
- Dissemination or scaling up of best practices (infrastructure and tools) and evidence-based interventions for implementation (ie, implementation guides).

### **2.3. Award Description**

The **Dissemination of CPRIT-Funded Cancer Control Interventions** RFA solicits applications from currently or previously funded CPRIT projects that have demonstrated

exemplary success and have materials, policies, and other resources that have been successfully implemented and evaluated and could be scaled up and/or applied to other systems and settings.

**The Center for Research in Implementation Science and Prevention** website (<http://www.dissemination-implementation.org/measures.aspx>) defines active and passive dissemination strategies as follows: “Dissemination strategies describe mechanisms and approaches that are used to communicate and spread information about interventions to targeted users. Dissemination strategies are concerned with the packaging of the information about the intervention and the communication channels that are used to reach potential adopters and target audience. Passive dissemination strategies include mass mailings, publication of information including practice guidelines, and untargeted presentations to heterogeneous groups. Active dissemination strategies include hands on technical assistance, replication guides, point-of-decision prompts for use, and mass media campaigns. It is consistently stated in the literature that dissemination strategies are necessary but not sufficient to ensure wide-spread use of an intervention.”

Adopters will need to employ implementation strategies to replicate or adapt projects to their settings or populations. Implementation strategies are described as the systematic processes, activities, and resources that are used to integrate interventions into usual settings. Core implementation components or implementation drivers can be staff selection, preservice and in-service training, ongoing consultation and coaching, staff and program evaluation, facilitative administrative support, and systems interventions. (See <http://www.dissemination-implementation.org/measures.aspx>)

This award will support both passive and active dissemination strategies but must include 2 or more active dissemination strategies. This award will also support implementation strategies in the form of technical assistance, coaching, and consultation within the time period of the grant. CPRIT recognizes that there are limits to the amount of technical assistance or coaching that can be accomplished within the grant period; however, priority will be given to those projects that identify and assist potential adopters in preparing to implement the intervention and/or preparing to apply for grant funding. Examples of active dissemination strategies and implementation strategies follow.

### Tools/models

- Toolkits with materials, sample policies, and procedures for implementation of CPRIT-funded programs
- Interactive websites that provide future adopters with key information on how to implement CPRIT-related interventions
- Approaches for dissemination of findings via nontraditional channels (eg, social media)
- User-friendly summaries—short issue or policy briefs that tell a story for decision makers based on CPRIT findings
- Brief, user-friendly case studies from program developers and recipients to illustrate key issues

### Implementation guides

- Targeted communication materials emphasizing how to apply them to different populations, systems, and settings
- Step-by-step implementation guides on how to translate an evidence-based intervention/program to broader settings, including guidelines for retaining core elements of the interventions or programs while offering suggested adaptations for the elements that would enhance the adoption and sustainability of the programs in different populations, settings, or circumstances (See Partnership for Prevention examples: <https://www.prevent.org/Action-Guides/The-Community-Health-Promotion-Handbook.aspx>)

### Training/Technical assistance

- Provision of training and technical assistance to guide adopters in developing their plans to adapt, refine, and implement their projects

In addition, proposed materials should include a discussion of barriers to dissemination; a description of personnel and necessary resources to overcome barriers to implementation; a description of expected outcomes, evaluation strategies with a sample evaluation plan, and tools (if applicable); and suggestions or plan for project sustainability, capacity building, or integration.

Under this RFA, CPRIT **will not** consider the following:

- **Proposals to disseminate projects not previously or currently funded by CPRIT or**
- **Projects involving prevention/intervention research.**

Applicants interested in prevention research should review CPRIT's Academic Research RFAs (available at <http://www.cprit.state.tx.us>).

### **2.3.1. Priorities**

Priority will be given to proposals to disseminate and replicate projects that when implemented can address the following program priorities set by the CPRIT Oversight Committee:

- Prioritize populations and geographic areas of greatest need, greatest potential for impact;
- Focus on underserved populations (see Priority Populations);
- Increase targeting of preventive efforts to areas where significant disparities in cancer incidence and mortality in the state exist (see [section 2.3.2](#)).

#### **Priority Populations**

Priority populations are subgroups that are disproportionately affected by cancer.

- Underinsured and uninsured individuals
- Geographically or culturally isolated populations
- Medically unserved or underserved populations
- Populations with low health literacy skills
- Geographic regions or populations of the state with higher prevalence of cancer risk factors (eg, obesity, tobacco use, alcohol misuse, unhealthy eating, sedentary lifestyle)
- Racial, ethnic, and cultural minority populations
- Other populations with low screening rates, high incidence rates, and high mortality rates, focusing on individuals never before screened or who are significantly out of compliance with nationally recommended screening guidelines

### **2.3.2. Specific Areas of Emphasis**

Applications that propose delivering ANY type of evidence-based preventive service or education and outreach program that includes navigation to services that is responsive to this RFA will be considered. However, CPRIT has identified the following areas of emphasis for this cycle of awards.

## A. Primary Prevention

Priority will be given to projects that, through evidence-based efforts, address and can positively influence **local policy or systems change** that can lead to **sustainable change in desired health behaviors.**

### Tobacco Prevention and Control

- Decreasing tobacco use in areas of the state that have higher smoking rates per capita than other areas of the state
  - Health Service Regions (HSRs) 2, 4, and 5 have significantly higher tobacco use among adults than in other regions of the state. For more information about maps of HSRs, please visit <http://www.dshs.state.tx.us/regions/state.shtm>.
- Decreasing tobacco use in vulnerable and high-risk populations, including people with mental illness, history of substance abuse, youth, and pregnant women, that have higher tobacco usage rates than the general population

### HPV Vaccination

- Increasing access to, delivery of, and completion of the HPV vaccine regimen to males and females through evidence-based intervention efforts
  - HPV vaccine completion rates are low (15% for males and 39% for females) across the state compared to the CDC goals of 75% completion rates.<sup>1</sup>

### Liver Cancer

- Decreasing disparities in incidence and mortality rates for hepatocellular cancer (HCC)
  - HCC incidence is significantly higher in Texas Hispanics, blacks, and Asian/Pacific Islanders than in non-Hispanic whites.<sup>2</sup>
  - Significantly higher HCC rates in Texas Hispanics versus the United States are driven by very high rates among Hispanics in South Texas.<sup>2</sup>
  - Males have significantly higher incidence and mortality rates than females.<sup>2</sup>
  - Age at diagnosis is shifting toward younger patients, both in Texas and the United States.<sup>2</sup>

## **B. Secondary Prevention - Screening and Early Detection Services**

### Colorectal Cancer

- Increasing screening/detection rates in HSRs 1 through 6 and HSR 9. For more information about maps of Health Service Regions, please visit <http://www.dshs.state.tx.us/regions/state.shtm>.
  - The highest rates of cancer incidence mortality are found in these regions of Texas.<sup>2</sup>
- Decreasing disparities in incidence and mortality rates of colorectal cancer for racial/ethnic populations and rural communities
  - African Americans have the highest incidence and mortality rates, followed by non-Hispanic whites and Hispanics.<sup>2</sup>
- Decreasing incidence and mortality rates in rural counties
  - Incidence and mortality rates are higher in rural counties compared to urban counties.<sup>2</sup>

### Cervical Cancer

- Increasing screening/detection rates for women in Texas-Mexico border counties
  - Women in these counties have a 30% higher cervical cancer mortality rate than women in nonborder counties.<sup>2</sup>
- Decreasing disparities in racial/ethnic populations
  - Hispanics have the highest incidence rates, while African Americans have the highest mortality rate.<sup>2</sup>
- Reaching women never before screened

### Breast Cancer

- Increasing screening/detection rates in rural and medically underserved areas of the state
- Reaching women never before screened

Data on cancer incidence and mortality are provided by the Texas Cancer Registry.<sup>2</sup> For more information about cancer in Texas, visit CPRIT's website at

<http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control>, visit the Texas Cancer Registry site at <http://www.dshs.state.tx.us/tcr/> or contact the Texas Cancer Registry at the Department of State Health Services.

## **C. Tertiary Prevention - Survivorship Services**

- Preventing secondary cancers and recurrence of cancer
- Managing the aftereffects of cancer and treatment to maximize quality of life and number of years of healthy life
- Minimizing preventable pain, disability, and psychosocial distress

Applicants proposing survivorship projects may address people with any type of cancer.

### **2.3.3. Outcome Metrics**

The applicant is required to describe how the goals and objectives for each year of the project as well as the final outcomes will be measured. The applicant should provide a clear and appropriate plan for data collection and interpretation of results to report against goals and objectives.

### **Reporting Requirements**

Funded projects are required to report quantitative output and outcome metrics (as appropriate for each project) 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 active and passive dissemination and implementation activities undertaken.
- Annual and Final progress report sections include, but are not limited to, the following:
  - Key accomplishments, including discussion of barriers to dissemination,
  - Progress against goals and objectives,
  - Materials produced,
  - Presentations, publications, etc.

### **2.4. 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 designated Program Director (PD) will be responsible for the overall performance of the funded project. The PD must have relevant education and management experience and must reside in Texas during the project performance time.
- The applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application was submitted.
- 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.
- The applicant may submit more than 1 application, but each application must be for distinctly different projects without overlap in the projects. Applicants who do not meet this criterion will have all applications administratively withdrawn without peer review.
- 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 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 at <http://www.cprit.state.tx.us>.

#### 2.4.1. Resubmission Policy

Two **resubmissions** are permitted. An application is considered a resubmission if the proposed project is the same project as presented in the original submission. A change in the identity of the PD for a project or a change of title for a project that was previously submitted to CPRIT does not constitute a new application; the application would be considered a resubmission.

## **2.5. Funding Information**

Applicants may request any amount of funding up to a maximum of \$300,000 in total funding over a maximum of 24 months. Grant funds may be used to pay for salary and benefits, project supplies, equipment, costs for outreach and education, and travel of project personnel to project site(s). 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 to attend CPRIT's biennial 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.

The budget should be well justified. In addition, CPRIT seeks to fill gaps in funding rather than replace existing funding, supplant funds that would normally be expended by the applicant's organization, or make up for funding reductions from other sources.

### 3. KEY DATES

RFA

RFA release May 26, 2016

## Application

Online application opens June 9, 2016, 7 AM central time

Application due August 30, 2016, 3 PM central time

Application review December 2016

## **Award**

Award notification	February 2017
Anticipated start date	March 2017

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 (<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 Authorized Signing Official (a person authorized to sign and submit the application for the organization) and the Grants Contract/Office of Sponsored Projects Official (the individual who will 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 9, 2016, and must be submitted by 3 PM central time on August 30, 2016. 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. 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 will be administratively withdrawn without review.**

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

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

- **Need:** Include a description of need for the proposed project.
- **Overall Project Strategy:** Describe the project and how it will address the identified need.
- **Specific Goals:** State specifically the overall goals of the proposed project.
- **Innovation:** Describe the creative components of the proposed project.
- **Significance and Impact:** Explain how the proposed project, if successful, will have a unique and major impact on cancer prevention and control and for the state of Texas.

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

List specific outcome goals and **measurable** objectives for each year of the project. Process objectives should be included in the project plan only. The suggested maximum number is 4 outcome goals with 2 to 3 objectives each. A baseline and method(s) of measurement are required for each objective. See [Appendix](#) for instructions on writing goals and objectives.

### **4.4.3. Project Timeline (2 pages)**

Provide a project timeline for project activities that includes deliverables and dates. Use Years 1, 2, 3, and Months 1, 2, 3, etc, as applicable instead of specific months or years (eg, Year 1, Months 3-5, not 2017, March-May).

#### **4.4.4. Project Plan (15 pages; fewer pages permissible)**

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

**Background:** Describe the project to be disseminated and how and why it lends itself to replication and scalability. Describe the effectiveness of the intervention that is being proposed for replication/dissemination and the expected short- and long-term impacts of the project. Describe why this project is needed, creative, or unique.

**Goals and Objectives (optional):** Outcome goals and objectives will be entered in separate fields in CARS. Process objectives should be included in the project plan. However, if desired, outcome goals and objectives may be fully repeated or briefly summarized here. See [Appendix](#) for instructions on writing goals and objectives.

**Components of the Project:** Clearly describe the data demonstrating success of the CPRIT-funded project that justifies dissemination. Describe components of the proposed dissemination project and the dissemination approach, strategy (eg, passive and active dissemination and implementation strategies), and the products being designed or packaged. Clearly describe the established theory and practice that support the proposed approach or strategy. Describe parameters of the CPRIT-funded project that may affect its dissemination and replication such as target audience for which it was designed, specialized resources that may be needed, or geographic considerations.

**Evaluation Strategy:** Describe the evaluation plan and methodology to assess dissemination effectiveness (eg, include short and intermediate impact of dissemination activities, knowledge and behavior change among the audience likely to adopt the project). Describe a clear and appropriate plan for data collection and interpretation of results to report against goals and objectives. If needed, applicants may want to consider seeking expertise at Texas-based academic cancer centers, schools/programs of public health, prevention research centers, or the like. Applicants should budget accordingly for the evaluation activity and should ensure, among other things, that the evaluation plan is linked to the proposed goals and objectives.

**Organizational Qualifications and Capabilities:** Describe the organization and its qualifications and capabilities to deliver the proposed project. Describe the role and qualifications of key collaborating organizations/partners (if applicable) and how they add value to the project and demonstrate commitment to working together to implement the project.

Describe the key personnel who are in place or will be recruited to implement, evaluate, and complete the project.

#### **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**

Please use the template provided on the CARS (<https://CPRITGrants.org>). Provide a description of the progress or final results of **all** CPRIT-funded projects of the PD or Co-PD, regardless of their connection to this application. Indicate how the current application builds on the previous work or addresses new areas of cancer prevention and control services. Applications that are missing this document and for which CPRIT records show a PD and/or Co-PD with previous or current CPRIT funds will be administratively withdrawn.

#### **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, equipment, supplies, contractual expenses, and other expenses. CPRIT funds will be distributed on a reimbursement basis. Applications requesting more than the maximum allowed cost (total costs) as specified in [section 2.5](#) 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.
- **Equipment:** Equipment having a useful life of more than 1 year and an acquisition cost of \$5,000 or more per unit must be specifically approved by CPRIT. An applicant does not need to seek this approval prior to submitting the application. Justification must be provided for why funding for this equipment cannot be found elsewhere; CPRIT funding should not supplant existing funds. Cost sharing of equipment purchases is strongly encouraged.
- **Indirect Expenses:** 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**

Please 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. Information for the initial funded project need not be included.

#### **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.

The evaluation professional biographical sketch is optional. Up to 3 additional biographical sketches for key personnel may be provided. Each biographical sketch must not exceed 2 pages and must use the “Prevention Programs: Biographical Sketch” template provided on the CARS (<https://CPRITGrants.org>).

Only biographical sketches will be accepted; do not submit resumes and/or CVs.

#### **4.4.10. Collaborating Organizations**

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 (eg, evaluation).

#### **4.4.11. Letters of Commitment (10 pages)**

Applicants may provide optional letters of commitment and/or memoranda of understanding from community organizations, key faculty, or any other component essential to the success of the program.

## **5. APPLICATION REVIEW**

### **5.1. Review Process Overview**

All eligible applications will be reviewed using a 2-stage peer review process: (1) evaluation of applications by peer review panels and (2) prioritization of grant applications by the Prevention Review Council. In the first stage, applications will be evaluated by an independent review panel using the criteria listed below. In the second stage, applications judged to be meritorious by review panels will be evaluated by the Prevention Review Council and recommended for funding based on comparisons with applications from all of the review panels and programmatic priorities. Programmatic considerations may include, but are not limited to, geographic distribution, cancer type, population served, and type of program or service. The scores are only 1 factor considered during programmatic review. At the programmatic level of review, priority will be given to proposed projects that target geographic regions of the state or population subgroups that are not well represented in the current CPRIT Prevention project portfolio.

Applications approved by 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 through 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.

An applicant will be notified regarding the peer review panel assigned to review the grant application. Peer Review Panel members are listed by panel on CPRIT's website. **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 consisting of experts in the field and advocates 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 and Innovation**

- Does the proposed project demonstrate creativity, ingenuity, resourcefulness, or imagination?
- Does the applicant describe the project to be disseminated and how and why it lends itself to replication and scalability?

- Does the applicant outline the target metrics established for the CPRIT-funded project and describe the effectiveness of the intervention that is being proposed for replication/dissemination?
- Do the data (results) demonstrate success of the CPRIT-funded project and justify dissemination?
- Has the applicant convincingly demonstrated the short- and long-term impacts of the project?

### **Project Strategy and Feasibility**

- Does the proposed project address the requirements of the RFA?
- Is the overall project dissemination approach, strategy, and design clearly described and supported by established theory and practice and likely to result in successful dissemination and adoption? Are 2 or more active dissemination strategies described?
- Does the proposal clearly describe an approach and demonstrate the capacity of the applicant to develop the proposed dissemination project?
- Are the proposed objectives and activities feasible within the duration of the award?
- Are possible barriers addressed and approaches for overcoming them proposed?
- If the CPRIT-funded project is to be adapted for different populations and settings, are specific adaptations and evaluation strategies clearly outlined as a part of the project?
- Does the project identify and assist potential adopters in preparing to implement the intervention and/or preparing to apply for grant funding?

### **Evaluation**

- Are specific goals and measurable objectives for each year of the project provided?
- Are the proposed measures appropriate for the project (eg, include short and intermediate impact of dissemination activities and knowledge or behavior change among audiences likely to adopt the intervention)?
- Does the application provide a clear and appropriate plan for data collection and interpretation of results to report against goals and objectives?

### **Organizational Qualifications and Capabilities**

- Do the organization and its collaborators/partners (if applicable) demonstrate the ability to deliver the proposed project?

- Does the described role of each collaborating organization/partner (if applicable) add value to the project and demonstrate commitment to working together to implement the project?
- Are the appropriate personnel in place or have they been recruited to implement, evaluate, and complete the project?

### **5.2.2. Secondary Evaluation Criteria**

#### **Budget**

- Is the budget appropriate and reasonable for the scope of the proposed work?
- Are all costs well justified?
- Is the project a good investment of Texas public funds?

## **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, which are available at [www.cprit.state.tx.us](http://www.cprit.state.tx.us). 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, which provides a step-by-step guide to using CARS.

**Hours of operation:**     Monday, Tuesday, Thursday, Friday, 7 AM to 4 PM central time  
                                  Wednesday, 8 AM to 4 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.state.tx.us](http://www.cprit.state.tx.us)

## **8. RESOURCES**

- The Texas Cancer Registry. <http://www.dshs.state.tx.us/tcr> or contact the Texas Cancer Registry at the Department of State Health Services
- The Community Guide. <http://www.thecommunityguide.org/index.html>
- Cancer Control P.L.A.N.E.T. <http://cancercontrolplanet.cancer.gov>
- Guide to Clinical Preventive Services: Recommendations of the U.S. Preventive Services Task Force. <http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/>
- Brownson, R.C., Colditz G.A., and Proctor, E.K. (Editors). *Dissemination and Implementation Research in Health: Translating Science to Practice*. Oxford University Press, March 2012
- Centers for Disease Control and Prevention: The Program Sustainability Assessment Tool: A New Instrument for Public Health Programs  
[http://www.cdc.gov/pcd/issues/2014/13\\_0184.htm](http://www.cdc.gov/pcd/issues/2014/13_0184.htm)
- Centers for Disease Control and Prevention: Using the Program Sustainability Tool to Assess and Plan for Sustainability. [http://www.cdc.gov/pcd/issues/2014/13\\_0185.htm](http://www.cdc.gov/pcd/issues/2014/13_0185.htm)

## **9. REFERENCES**

1. <http://www.cdc.gov/hpv/parents/questions-answers.html>
2. Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services. <http://www.dshs.state.tx.us/tcr/default.shtm>
3. Brownson, R.C., Colditz G.A., and Proctor, E.K. (Editors). *Dissemination and Implementation Research in Health: Translating Science to Practice*. Oxford University Press, March 2012
4. Cancer Prevention and Control Research Network: Putting Public Health Evidence in Action Training Workshop. <http://cpcrn.org/pub/evidence-in-action/>

## **APPENDIX: WRITING GOALS AND OBJECTIVES**

**Adapted with permission from Appalachia Community Cancer Network, NIH Grant U54 CA 153604**

**Develop well-defined goals and objectives**

**Goals** provide a roadmap or plan for where a group wants to go. Goals can be long term (over several years) or short term (over several months). Goals should be based on needs of the community and evidence-based data.

Goals should be:

- Believable – situations or conditions that the group believes can be achieved
- Attainable – possible within a designated time
- Tangible – capable of being understood or realized
- On a timetable – with a completion date
- Win-Win – beneficial to individual members and the coalition

**Objectives** are measurable steps toward achieving the goal. They are clear statements of specific activities required to achieve the goal. The best objectives have several characteristics in common—S.M.A.R.T. + C.:

- Specific – they tell how much (number or percent), who (participants), what (action or activity), and by when (date)
  - Example: 115 uninsured individuals age 50 and older will complete colorectal cancer screening by March 31, 2018.
- Measurable – specific measures that can be collected, detected, or obtained to determine successful attainment of the objective
  - Example: How many screened at an event? How many completed pre/post assessment?
- Achievable – not only are the objectives themselves possible, it is likely that your organization will be able to accomplish them
- Relevant to the mission – your organization has a clear understanding of how these objectives fit in with the overall vision and mission of the group
- Timed – developing a timeline is important for when your task will be achieved
- Challenging – objectives should stretch the group to aim on significant improvements that are important to members of the community

### Evaluate and refine your objectives

Review your developed objectives and determine the type and level of each using the following information:

**There are 2 types of objectives:**

- Outcome objectives – measure the “what” of a program
- Process objectives – measure the “how” of a program

**There are 3 levels of objectives:**

- Community-level – objectives measure the planned community change
- Program impact – objectives measure the impact the program will have on a specific group of people
- Individual – objectives measure participant changes resulting from a specific program, using these factors:
  - Knowledge – understanding (know screening guidelines; recall the number to call for screening)
  - Attitudes – feelings about something (will consider secondhand smoke dangerous; believe eating 5 or more fruits and vegetables is important)
  - Skills – the ability to do something (complete fecal occult blood test)
  - Intentions – regarding plan for future behavior (will agree to talk to the doctor, will plan to schedule a Pap test)
  - Behaviors (past or current) – to act in a particular way (will exercise 30+ minutes a day, will have a mammogram)

**Well-defined goals and objectives can be used to track, measure, and report progress toward achievement.**

## Summary Table

	<b>Outcome</b>	<b>Process</b>
<b>Community-level</b>	WHAT will change in a community  <i>Example: As a result of CPRIT funding, FIT (fecal immunochemical tests) will be available to 1,500 uninsured individuals age 50 and over through 10 participating local clinics and doctors.</i>	HOW the community change will come about  <i>Example: Contracts will be signed with participating local providers to enable uninsured individuals over age 50 to have access to free colorectal cancer screening in their communities.</i>
<b>Program impact</b>	WHAT will change in the target group as a result of a particular program  <i>Example: As a result of this project, 200 uninsured women between 40 and 49 will receive free breast and cervical cancer screening.</i>	HOW the program will be implemented to affect change in a group/population  <i>Example: 2,000 female clients, between 40 and 49, will receive a letter inviting them to participate in breast and cervical cancer screening.</i>
<b>Individual</b>	WHAT an individual will learn as a result of a particular program, or WHAT change an individual will make as a result of a particular program  <i>Example: As a result of one-to-one education of 500 individuals, at least 20% of participants will participate in a smoking cessation program to quit smoking.</i>	HOW the program will be implemented to affect change in an individual's knowledge or actions  <i>Example: As a result of one-to-one counseling, all participants will identify at least 1 smoking cessation service and 1 smoking cessation aid.</i>

## **Third Party Observer Reports**

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## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-05- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 1 (CPRIT Peer Review Meeting - Panel 1)  
*Panel Date:* December 5-6, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 1 peer review of applications for FY17 funding. The meeting was chaired by Ross Brownson, Ph.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 5-6, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Twelve applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Four CPRIT staff members and three CSRA employees were present for the meeting; one additional CSRA employee participated telephonically;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- Four applications with five COIs were identified prior to the meeting; one application had two COIs. No additional COIs were identified during the peer review panel;
- One application with a COI was not discussed during the meeting;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-07- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 2 (CPRIT Peer Review Meeting - Panel 2)  
*Panel Date:* December 7-8, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 2 peer review of applications for FY17 funding. The meeting was chaired by Nancy Lee, M.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 7-8, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Ten applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Two CPRIT staff members and three CSRA employees were present for the meeting;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- One application with two COIs was identified prior to the meeting; no additional COIs were identified during the peer review panel;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict of interest signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

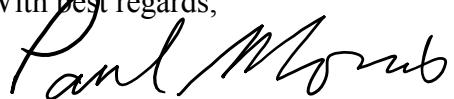
### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

BSF's third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform and did not perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2017-01-2\_PRC\_17.1

*Program Name:* Prevention

*Panel Name:* FY17.1 Prevention Review Council Programmatic Review

*Panel Date:* January 20, 2017

*Report Date:* January 23, 2017

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the applications and focused on established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions, LLC (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT FY17.1 Prevention Review Council Programmatic Review. The meeting was chaired by Stephen Wyatt and conducted telephonically on January 20, 2017.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest is followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when an application with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by Prevention Review Council members or CSRA staff;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The Prevention Review Council discussion is focused on the established scoring criteria and/or making recommendations.

### *Summary of Observation Results*

Two BFS independent observers participated in the Prevention Review Council teleconference. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observer noted the following during the recruitment meeting:

- Thirteen applications were discussed;
- Participants: Three council panelists including the Chairperson;
- Two CPRIT staff members and four CSRA employees participated in the meeting;
- CPRIT staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the evaluation criteria.

There were no conflicts of interest (COIs) identified. A list of all attendees and informational materials were provided by CSRA staff to aid in the observation of these objectives.

### *Conclusion*

In conclusion; we observed that the activities of the Prevention Review Council were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA

Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

January 20, 2017

cc: Vince Burgess, Chief Compliance Officer

## **Conflicts of Interest Disclosure**

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**Conflicts of Interest Disclosure**  
**Prevention Cycle 17.1 Applications**  
**(Prevention Cycle 17.1 Awards Announced at February 15, 2017, Oversight Committee Meeting)**

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Prevention Cycle 17.1 include *Competitive Continuation/Expansion - Evidence-Based Cancer Prevention Services; Dissemination of CPRIT-Funded Cancer Control Interventions; Evidence-Based Cancer Prevention Services; and Cancer Prevention Promotion and Navigation to Clinical Services*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by SRA International, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
<b>Applications considered by the PIC and Oversight Committee</b>			
PP170023	Karen Basen-Engquist	The University of Texas M. D. Anderson Cancer Center	Eriksen, Michael
PP170046	Paula Cuccaro	The University of Texas Health Science Center at Houston	Brandt, Healther; Vanderpool, Robin
<b>Applications not considered by the PIC or Oversight Committee</b>			
PP170054*	Kentya Ford	The University of Texas at Austin	Eriksen, Michael
PP170003	Navkiran Shokar	Texas Tech University Health Sciences Center at El Paso	Eriksen, Michael
PP170049	Marcia Ory	Texas A&M University System Health Science Center	Brady, Kevin; Plescia, Marcus

\* = Not discussed

## **De-Identified Overall Evaluation Scores**

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## Dissemination of CPRIT-Funded Cancer Control Interventions

Prevention Cycle 17.1

Application ID	Final Overall Evaluation Score
PP170015*	2.4

\* = Recommended for funding

## **Final Overall Evaluation Scores and Rank Order Scores**

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Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

Dear Mr. Roberts and Mr. Geren,

On behalf of the Prevention Review Council (PRC), I am pleased to provide the PRC's recommendations for CPRIT Prevention grant awards. The applicants on the attached list of submitted proposals responded to CPRIT requests for applications (RFA) released for the first review cycle of FY2017.

The projects are numerically ranked in the order the PRC recommends the applications be funded. Recommended funding amounts and the overall evaluation score are provided for each grant application. The PRC did not make changes to the goals, timelines, or project objectives requested by the applicants. When the PRC did not follow the rank ordered scores in developing its recommended funding order a justification, based upon established programmatic priorities outlined in the RFAs, is provided.

The projected funding available for this fiscal year is \$26,171,122. With the second funding cycle for the fiscal year underway, the PRC opted for a conservative approach to its recommendations for this cycle. Recommendations are provided at two levels: (1) initially fund 9 projects totaling \$12,024,696 and (2) depending upon the availability of funds later in the fiscal year, fund an additional project, PP170037 for \$1,500,000.

Our recommendations meet the PRC's standards for grant award funding of projects that are evidence-based, deliver programs or services to underserved populations, and focus on primary, secondary or tertiary prevention. In making these recommendations the PRC also considered the available funding, the composition of the current portfolio, and the programmatic priorities in the RFA which include potential for impact and return on investment, geographic distribution, cancer type and type of program. All of the recommended grants address one or more of the Prevention Program priorities.

Sincerely,

Stephen W. Wyatt, DMD, MPH  
Chair, CPRIT Prevention Review Council





CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

# **CEO Affidavit Supporting Information**

**FY 2017—Cycle 1**  
*Evidence-Based Cancer Prevention Services*

# **Request for Applications**

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## CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

# REQUEST FOR APPLICATIONS

## RFA P-17.1-EBP

### Evidence-Based Cancer Prevention Services

Please also refer to the Instructions for Applicants document,  
which will be posted on June 9, 2016

**Application Receipt Opening Date:** June 9, 2016

**Application Receipt Closing Date:** August 30, 2016

**FY 2017**

Fiscal Year Award Period

September 1, 2016-August 31, 2017

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## **RFA VERSION HISTORY**

Rev 05/26/16 RFA release

## **1. ABOUT CPRIT**

The state of Texas has established the Cancer Prevention and Research Institute of Texas (CPRIT), which may issue up to \$3 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 in enhancing 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.

#### **Established Principles:**

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

#### **Prevention Program Priorities**

- Prioritize populations and areas of greatest need and greatest potential for impact
- Focus on underserved populations
- Increase targeting of preventive efforts to areas where significant disparities in cancer incidence or mortality in the state exist

## **2. FUNDING OPPORTUNITY DESCRIPTION**

### **2.1. Summary**

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 technologies and strategies. CPRIT will foster 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.

The **Evidence-Based Cancer Prevention Services (EBP)** award mechanism seeks to fund programs that greatly challenge the status quo in cancer prevention and control services. The proposed program should be designed to reach and serve as many people as possible.

Partnerships with other organizations that can support and leverage resources are strongly encouraged. A coordinated submission of a collaborative partnership program in which all partners have a substantial role in the proposed project is preferred.

### **2.2. Project Objectives**

CPRIT seeks to fund projects that will do the following:

- Address multiple components of the cancer prevention and control continuum (eg, provision of screening and navigation services in conjunction with outreach and education of the priority population as well as health care provider education);
- Offer effective and efficient systems of delivery of prevention services based on the existing body of knowledge about and evidence for cancer prevention in ways that far exceed current performance in a given service area;
- Offer systems and/or policy changes that are sustainable over time;
- Provide tailored, culturally appropriate outreach and accurate information on early detection and prevention to the public and health care professionals that results in a health impact that can be measured; and
- Deliver evidence-based survivorship services aimed at reducing the morbidity associated with cancer diagnosis and treatment.

## **2.3. Award Description**

The Evidence-Based Cancer Prevention Services RFA solicits applications for projects up to 36 months in duration that will deliver evidence-based services in cancer prevention and control. In addition to other primary prevention and screening/early detection services, CPRIT considers counseling services (eg, tobacco cessation, survivorship, exercise, and nutrition) when done on a one-on-one basis or in small groups as clinical services.

This mechanism will fund case management/patient navigation if it is paired with the delivery of a clinical service (eg, human papillomavirus [HPV] vaccination/screening). Applicants offering screening services must ensure that there is access to treatment services for patients with cancers that are detected as a result of the program and must describe access to treatment services in their application. In the case of screening for hepatitis C, applicants must provide navigation to ensure access to viral treatments and must describe the process for ensuring access to treatment services.

CPRIT's services grants are intended to fund prevention interventions that have a demonstrated evidence base and are culturally appropriate for the priority population.

CPRIT recognizes that evidence-based services have been developed but not implemented or tested in all populations or service settings. In such cases, other forms of evidence (eg, preliminary evaluation or pilot project data) that the proposed service is appropriate for the population and has a high likelihood of success must be provided. The applicant must fully describe the base of evidence and any plans to adapt and evaluate the implementation of the program for the specific audience or situation.

**Comprehensive projects are required.** Comprehensive projects include a continuum of services and systems and/or policy changes and comprise all or some of the following: Public and/or professional education and training, patient support of behavior modification, outreach, delivery of clinical services, and follow-up navigation.

This RFA encourages traditional and nontraditional partnerships as well as leveraging of existing resources and dollars from other sources. The applicant should coordinate and describe a collaborative partnership program in which all partners have a substantial role in the proposed project. Letters of commitment describing their role in the partnership are required from all partners.

CPRIT expects measurable outcomes of supported activities, such as a significant increase over baseline (for the proposed service area) in the provision of evidence-based services, changes in provider practice, systems changes, and cost-effectiveness. Applicants must demonstrate how these outcomes will ultimately impact incidence, mortality, morbidity, or quality of life.

Under this RFA, CPRIT **will not** consider the following:

- **Projects focusing solely on systems and/or policy change or solely on education and/or outreach** that do not include the delivery of services.
- **Projects focusing solely on case management/patient navigation services.** Case management/patient navigation services must be paired with the delivery of a clinical service. Furthermore, while navigation to the point of treatment of cancer is required when cancer is discovered through a CPRIT-funded project, applications seeking funds to provide coordination of care while an individual is in treatment are not allowed under this RFA.
- **Projects for continuation/expansion of a currently or previously funded project.** Applications for continuation/expansion should be submitted in response to the Competitive Continuation/Expansion RFA.
- **Projects requesting CPRIT funding for Quitline services** Applicants proposing the utilization of Quitline services should communicate with the Tobacco Prevention and Control program prior to submitting a CPRIT grant application to discuss the services currently offered by the Texas Department of State Health Services (DSHS).
- **Projects focusing on computerized tomography screening for lung cancer**
- **Projects involving prevention/intervention research.** Applicants interested in prevention research should review CPRIT's Research RFAs (available at <http://www.cprit.state.tx.us>).
- **Resources for the treatment of cancer or viral treatment for hepatitis.**

### **2.3.1. Priorities**

**Types of Cancer:** Applications addressing any cancer type(s) that are responsive to this RFA will be considered for funding.

**Priority Populations:** The age of the priority population and frequency of screening plans for provision of clinical services described in the application must comply with established and

current national guidelines (eg, US Preventive Services Task Force [USPSTF], American Cancer Society, American College of Physicians).

Priority populations are subgroups that are disproportionately affected by cancer. CPRIT-funded efforts must address 1 or more of these priority populations:

- Underinsured and uninsured individuals;
- Geographically or culturally isolated populations;
- Medically unserved or underserved populations;
- Populations with low health literacy skills;
- Geographic regions or populations of the state with higher prevalence of cancer risk factors (eg, obesity, tobacco use, alcohol misuse, unhealthy eating, sedentary lifestyle);
- Racial, ethnic, and cultural minority populations; or
- Other populations with low screening rates, high incidence rates, and high mortality rates, focusing on individuals never before screened or who are significantly out of compliance with nationally recommended screening guidelines.

**Geographic and Population Priority:** For applications submitted in response to this announcement, at the programmatic level of review conducted by Prevention Review Council (see [section 5.1](#)), priority will be given to projects that target geographic regions of the state and population subgroups that are not adequately covered by the current CPRIT Prevention project portfolio (see <http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control/> and <http://www.cprit.state.tx.us/funded-grants/>).

### **2.3.2. Specific Areas of Emphasis**

Applications that propose comprehensive programs delivering **ANY** type of evidence-based preventive service that is responsive to this RFA will be considered. However, CPRIT has identified the following areas of emphasis for this cycle of awards.

#### **A. Primary Prevention**

Priority will be given to projects that, through evidence-based efforts, address and can positively influence **local policy or systems change** that can lead to **sustainable change in desired health behaviors.**

## Tobacco Prevention and Control

- Decreasing tobacco use in areas of the state that have higher smoking rates per capita than other areas of the state
  - Health Service Regions (HSRs) 2, 4, and 5 have significantly higher tobacco use among adults than in other regions of the state. For more information about maps of HSRs, please visit <http://www.dshs.state.tx.us/regions/state.shtm>.
- Decreasing tobacco use in vulnerable and high-risk populations, including people with mental illness, history of substance abuse, youth, and pregnant women, that have higher tobacco usage rates than the general population

## HPV Vaccination

- Increasing access to, delivery of, and completion of the HPV vaccine regimen to males and females through evidence-based intervention efforts
  - HPV vaccine completion rates are low (15% for males and 39% for females) across the state compared to the CDC goals of 75% completion rates.<sup>1</sup>

## Liver Cancer

- Decreasing disparities in incidence and mortality rates for hepatocellular cancer (HCC) by increasing the provision of vaccination and screening for hepatitis B virus and screening for hepatitis C virus (following USPSTF guidelines), diagnostic testing, navigation that ensures access to viral treatment, and education on risk factors and on reducing transmission of hepatitis
  - HCC incidence is significantly higher in Texas Hispanics, blacks, and Asian/Pacific Islanders than in non-Hispanic whites.<sup>2</sup>
  - Significantly higher HCC rates in Texas Hispanics versus the United States are driven by very high rates among Hispanics in South Texas.<sup>2</sup>
  - Males have significantly higher incidence and mortality rates than females.<sup>2</sup>
  - Age at diagnosis is shifting toward younger patients, both in Texas and the United States.<sup>2</sup>

## **B. Secondary Prevention - Screening and Early Detection Services**

Applicants should select preventive services using current evidence-based national clinical guidelines (eg, USPSTF, American Cancer Society, American College of Physicians).

## Colorectal Cancer

- Increasing screening/detection rates in HSR 1 through 6 and HSR 9. For more information about maps of HSRs, please visit  
<http://www.dshs.state.tx.us/regions/state.shtm>
  - The highest rates of cancer incidence and mortality are found in these regions of Texas.<sup>2</sup>
- Decreasing disparities in incidence and mortality rates of colorectal cancer for racial/ethnic populations and rural communities
  - African Americans have the highest incidence and mortality rates, followed by non-Hispanic whites and Hispanics.<sup>2</sup>
- Decreasing incidence and mortality rates in rural counties
  - Incidence and mortality rates are higher in rural counties compared to urban counties.<sup>2</sup>

## Cervical Cancer

- Increasing screening/detection rates for women in Texas-Mexico border counties
  - Women in these counties have a 30% higher cervical cancer mortality rate than women in nonborder counties.<sup>2</sup>
- Decreasing disparities in racial/ethnic populations
  - Hispanics have the highest incidence rates, while African Americans have the highest mortality rates.<sup>2</sup>
- Reaching women never before screened

## Breast Cancer

- Increasing screening/detection rates in rural and medically underserved areas of the state
- Reaching women never before screened

Data on cancer incidence and mortality is provided by the Texas Cancer Registry.<sup>2</sup> For more information about cancer in Texas, visit CPRIT's website at <http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control>, visit the Texas Cancer Registry site at <http://www.dshs.state.tx.us/tcr/> or contact the Texas Cancer Registry at the Department of State Health Services.

## C. Tertiary Prevention - Survivorship Services

Priority for funding will be given to survivorship projects that demonstrate a likelihood of success based on available evidence and that can demonstrate and measure an improvement in quality of life in 1 or more of the following areas:

- Preventing secondary cancers and recurrence of cancer,
- Managing the aftereffects of cancer and treatment to maximize quality of life and number of years of healthy life,
- Minimizing preventable pain, disability, and psychosocial distress.

Applicants proposing survivorship projects may address people with any type of cancer.

### 2.3.3. Outcome Metrics

The applicant is required to describe final outcome measures for the project. Interim or output measures that are associated with the final outcome measures should be identified and will serve as a measure of program effectiveness and public health impact. Applicants are required to clearly describe their assessment and evaluation methodology. **Baseline data for each measure proposed are required.** In addition, applicants should describe how funds from the CPRIT grant will improve outcomes over baseline. If the applicant is not providing baseline data for a measure, the applicant must provide a well-justified explanation and describe clear plans and method(s) of measurement to collect the data necessary to establish a baseline.

### Reporting Requirements

Funded projects are required to report quantitative output and outcome metrics (as appropriate for each project) 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:
  - Summary page, including narrative on project progress (required);
  - Services, other than clinical services, provided to the public/professionals;
  - Actions taken by people/professionals as a result of education or training;
  - Clinical services provided; and
  - Precursors and cancers detected.

- Annual and Final progress report sections include, but are not limited to, the following:
  - Key accomplishments, including qualitative analysis of policy change and/or lasting systems change;
  - Progress against goals and objectives, including percentage increase over baseline in provision of age- and risk-appropriate comprehensive preventive services to eligible individuals in a defined service area; for example:
    - Percentage increase over baseline in number of people served
    - Percentage increase over baseline in number of services provided
    - Completion of all required doses of vaccine
    - Number of people quitting tobacco use and sustaining healthy behavior
    - Percentage increase over baseline in cancers detected
    - Percentage increase in early-stage cancer diagnoses in a defined service area
  - Materials produced and publications; and
  - Economic impact of the project.

## **2.4. 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 designated Program Director (PD) will be responsible for the overall performance of the funded project. The PD must have relevant education and management experience and must reside in Texas during the project performance time.
- The evaluation of the project must be headed by a professional who has demonstrated expertise in the field and who resides in Texas during the time that the project is conducted.
- The applicant is eligible solely for the grant mechanism specified by the RFA under which the grant application was submitted.
- 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.

- The applicant may submit more than 1 application, but each application must be for distinctly different services without overlap in the services provided. Applicants who do not meet this criterion will have all applications administratively withdrawn without peer review.
- If the applicant or a partner is an existing DSHS contractor, CPRIT funds may not be used as a match, and the application must explain how this grant complements or leverages existing state and federal funds. DSHS contractors who also receive CPRIT funds must be in compliance with and fulfill all contractual obligations within CPRIT. CPRIT and DSHS reserve the right to discuss the contractual standing of any contractor receiving funds from both entities.
- 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 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 at <http://www.cprit.state.tx.us>.

#### **2.4.1. Resubmission Policy**

Two **resubmissions** are permitted. An application is considered a resubmission if the proposed project is the same project as presented in the original submission. A change in the identity of the PD for a project or a change of title for a project that was previously submitted to CPRIT does not constitute a new application; the application would be considered a resubmission.

### **2.5. Funding Information**

Applicants may request any amount of funding up to a maximum of \$1.5 million in total funding over a maximum of 36 months. Grant funds may be used to pay for clinical services, navigation services, salary and benefits, project supplies, equipment, costs for outreach and education of populations, and travel of project personnel to project site(s). 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 to attend CPRIT's biennial 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.

The budget should be proportional to the number of individuals receiving programs and services, and a significant proportion of funds is expected to be used for program delivery as opposed to program development. In addition, CPRIT seeks to fill gaps in funding rather than replace existing funding, supplant funds that would normally be expended by the applicant's organization, or make up for funding reductions from other sources.

### **3. KEY DATES**

#### **RFA**

RFA release May 26, 2016

#### **Application**

Online application opens	June 9, 2016, 7 AM central time
Application due	August 30, 2016, 3 PM central time
Application review	December 2016

#### **Award**

Award notification	February 2017
Anticipated start date	March 2017

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 (<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 Authorized Signing Official (a person authorized to sign and submit the application for the organization) and the Grants Contract/Office of Sponsored Projects Official (the individual who will 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 9, 2016, and must be submitted by 3 PM central time on August 30, 2016. 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.**

#### **4.2.1. 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. Submission deadline extensions, including the reason for the extension, will be documented as part of the grant review process records.

### **4.3. 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 will be administratively withdrawn without review.**

#### **4.3.1. Abstract and Significance (5,000 characters)**

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

- **Need:** Include a description of need in the specific service area. Include rates of incidence, mortality, and screening in the service area compared to overall Texas rates. Describe barriers, plans to overcome these barriers, and the priority population to be served.
- **Overall Project Strategy:** Describe the project and how it will address the identified need. Clearly explain what the project is and what it will specifically do, including the services to be provided and the process/system for delivery of services and outreach to the priority population.
- **Specific Goals:** State specifically the overall goals of the proposed project; include the estimated overall numbers of people (public and/or professionals) reached and people (public and/or professionals) served.
- **Innovation:** Describe the creative components of the proposed project and how it differs from current programs or services being provided.

- **Significance and Impact:** Explain how the proposed project, if successful, will have a unique and major impact on cancer prevention and control for the population proposed to be served and for the state of Texas.

#### **4.3.2. Goals and Objectives (700 characters each)**

List specific outcome goals and **measurable** objectives for each year of the project. Process objectives should be included in the project plan only. The suggested maximum number is 4 goals with 2 to 3 objectives each. See [Appendix B](#) for instructions on writing goals and objectives.

A baseline and method(s) of measurement are required for each objective. Provide both raw numbers and percent changes for the baseline and target. Applicants must explain plans to establish baseline and describe method(s) of measurement in cases where a baseline has not been defined.

#### **4.3.3. Project Timeline (2 pages)**

Provide a project timeline for project activities that includes deliverables and dates. Use Years 1, 2, 3, and Months 1, 2, 3, etc, as applicable instead of specific months or years (eg, Year 1, Months 3-5, not 2017, March-May).

#### **4.3.4. Project Plan (15 pages; fewer pages permissible)**

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

**Background:** Briefly present the rationale behind the proposed service, emphasizing the critical barriers to current service delivery that will be addressed. Identify the evidence-based service to be implemented for the priority population. If evidence-based strategies have not been implemented or tested for the specific population or service setting proposed, provide evidence that the proposed service is appropriate for the population and has a high likelihood of success. Baseline data for the priority population and target service area are required where applicable. Reviewers will be aware of national and state statistics, and these should be used only to compare rates for the proposed service area. Describe the geographic region of the state that the project will serve; maps are appreciated.

**Goals and Objectives (optional):** Outcome goals and objectives will be entered in separate fields in CARS. Process objectives should be included in the project plan. However, if desired,

outcome goals and objectives may be fully repeated or briefly summarized here. See [Appendix B](#) for instructions on writing goals and objectives.

**Components of the Project:** Clearly describe the need, delivery method, and evidence base (provide references) for the services as well as anticipated results. Be explicit about the base of evidence and any necessary adaptations for the proposed project. Describe why this project is nonduplicative, creative, or unique. Clearly demonstrate the ability to provide the proposed service and describe how results will be improved over baseline and the ability to reach the priority population. Applicants must also clearly describe plans to ensure access to treatment services should cancer be detected.

**Evaluation Strategy:** A strong commitment to evaluation of the project is required. Describe the impact on outcome measures and interim output measures as outlined in [section 2.3.3](#). Describe the plan for outcome and output measurements, including data collection and management methods, data analyses, and anticipated results. 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, prevention research centers, or the like. Applicants should budget accordingly for the evaluation activity and should involve that professional during grant application preparation to ensure, among other things, that the evaluation plan is linked to the proposed goals and objectives.

**Organizational Qualifications and Capabilities:** Describe the organization and its track record and success in providing programs and services. Describe the role and qualifications of the key collaborators/partners in the project. Include information on the organization's financial stability and viability. To ensure access to preventive services and reporting of services outcomes, applicants should demonstrate that they have provider partnerships and agreements (via memoranda of understanding) or commitments (via letters of commitment) in place.

**Integration and Capacity Building:** CPRIT funds projects that target the unmet needs not sufficiently covered by other funding sources, and full maintenance of the project may not be feasible. This is especially the case when the project involves the delivery of clinical services. Educational and other less costly interventions may be more readily sustained. Full maintenance of a project, the ability of the grantee's setting or community to continue to deliver the health

benefits of the intervention as funded, is not required; however, efforts toward maintenance should be described.

It is expected that steps toward integration and capacity building for components of the project will be taken and plans for such be fully described in the application. *Integration* is defined as the extent the evidence-based intervention is integrated within the culture of the grantee's setting or community through policies and practice. *Capacity building* is any activity (eg, training, identification of alternative resources, building internal assets) that builds durable resources and enables the grantee's setting or community to continue the delivery of some or all components of the evidence-based intervention.

Elements of integration and capacity building may include, but are not limited to, the following:

- Developing ownership, administrative networks, and formal engagements with stakeholders;
- Developing processes for each practice/location to incorporate services into its structure beyond project funding;
- Identifying and training of diverse resources (human, financial, material, and technological);
- Implementing policies to improve effectiveness and efficiency (including cost-effectiveness) of systems.

**Dissemination and Scalability (Expansion):** Dissemination of project results and outcomes, including barriers encountered and successes achieved, is critical to building the evidence base for cancer prevention and control efforts in the state. Dissemination methods may include, but are not limited to, presentations, publications, abstract submissions, and professional journal articles, etc.

Describe how the project lends itself to dissemination to or application by other communities and/or organizations in the state or expansion in the same communities.

#### **4.3.5. People Reached**

Provide the estimated overall number of people (members of the public and professionals) to be reached by the funded project. The applicant is required to itemize separately the types of noninteractive education and outreach activities, with estimates, that led to the calculation of the overall estimates provided. Refer to [Appendix A](#) for definitions.

#### **4.3.6. People Served**

Provide the estimated overall number of services delivered to members of the public and to professionals by the funded project. The applicant is required to itemize separately the education, navigation, and clinical activities/services, with estimates, that led to the calculation of the overall estimate provided. Refer to [Appendix A](#) for definitions.

#### **4.3.7. 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 services.

#### **4.3.8. Resubmission Summary**

Please use the template provided on the CARS (<https://CPRITGrants.org>). Describe the approach to the resubmission and how reviewers' comments were addressed. The summary statement of the original application review, if previously prepared, will be automatically appended to the resubmission; the applicant is not responsible for providing this document.

#### **4.3.9. CPRIT Grants Summary**

Please use the template provided on the CARS (<https://CPRITGrants.org>). Provide a description of the progress or final results of **all** CPRIT-funded projects of the PD or Co-PD, regardless of their connection to this application. Indicate how the current application builds on the previous work or addresses new areas of cancer prevention and control services. Applications that are missing this document and for which CPRIT records show a PD and/or Co-PD with previous or current CPRIT funds will be administratively withdrawn.

#### **4.3.10. 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, equipment, supplies, contractual expenses, services delivery, and other expenses. CPRIT funds will be distributed on a reimbursement basis. Applications requesting more than the maximum allowed cost (total costs) as specified in [section 2.5](#) will be administratively withdrawn.

- **Average Cost of Services:** The average cost of services will be automatically calculated from the total cost of the project divided by the total number of services (refer to

Appendix A). A significant proportion of funds is expected to be used for program delivery as opposed to program development and organizational infrastructure.

- **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.
- **Equipment:** Equipment having a useful life of more than 1 year and an acquisition cost of \$5,000 or more per unit must be specifically approved by CPRIT. An applicant does not need to seek this approval prior to submitting the application. Justification must be provided for why funding for this equipment cannot be found elsewhere; CPRIT funding should not supplant existing funds. Cost sharing of equipment purchases is strongly encouraged.
- **Services Costs:** CPRIT reimburses for services using Medicare reimbursement rates. Describe the source of funding for all services where CPRIT funds are not requested.
- **Other Expenses:**
  - **Incentives:** Use of incentives or positive rewards to change or elicit behavior is allowed; however, incentives may only be used based on strong evidence of their effectiveness for the purpose and in the priority population identified by the applicant. CPRIT will not fund cash incentives. The maximum dollar value allowed for an incentive per person, per activity or session, is \$25.
  - **Costs Not Related to Cancer Prevention and Control:** CPRIT does not allow recovery of any costs for services not related to cancer (eg, health physicals, HIV testing).
  - **Indirect Expenses:** 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](#).

#### 4.3.11. Current and Pending Support and Sources of Funding

Please 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. Information for the initial funded project need not be included.

#### **4.3.12. 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.

The evaluation professional must provide a biographical sketch.

Up to 3 additional biographical sketches for key personnel may be provided. Each biographical sketch must not exceed 2 pages and must use the “Prevention Programs: Biographical Sketch” template provided on the CARS (<https://CPRITGrants.org>).

Only biographical sketches will be accepted; do not submit resumes and/or CVs.

#### **4.3.13. Collaborating Organizations**

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 (eg, evaluation, clinical services, recruitment to screening).

#### **4.3.14. Letters of Commitment (10 pages)**

Applicants should provide letters of commitment and/or memoranda of understanding from community organizations, key faculty, or any other component essential to the success of the program.

**Applications that are missing 1 or more of these components, exceed the specified page, word, or budget limits, or that do not meet the eligibility requirements listed above will be administratively withdrawn without review.**

### **5. APPLICATION REVIEW**

#### **5.1. Review Process Overview**

All eligible applications will be reviewed using a 2-stage peer review process: (1) evaluation of applications by peer review panels and (2) prioritization of grant applications by the Prevention

Review Council. In the first stage, applications will be evaluated by an independent review panel using the criteria listed below. In the second stage, applications judged to be meritorious by review panels will be evaluated by the Prevention Review Council and recommended for funding based on comparisons with applications from all of the review panels and programmatic priorities. Programmatic considerations may include, but are not limited to, geographic distribution, cancer type, population served, and type of program or service. The scores are only 1 factor considered during programmatic review. At the programmatic level of review, priority will be given to proposed projects that target geographic regions of the state or population subgroups that are not well represented in the current CPRIT Prevention project portfolio.

Applications approved by 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.

An applicant will be notified regarding the peer review panel assigned to review the grant application. Peer Review Panel members are listed by panel on CPRIT's website. **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 consisting of experts in the field and advocates 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 and Innovation**

- Do the proposed services address an important problem or need in cancer prevention and control? Do the proposed project strategies support desired outcomes in cancer incidence, morbidity, and/or mortality? Does the proposed project demonstrate creativity, ingenuity, resourcefulness, or imagination? Does it take evidence-based interventions and apply them in innovative ways to explore new partnerships, new audiences, or improvements to systems?
- Does the program address adaptation, if applicable, of the evidence-based intervention to the priority population? Is the base of evidence clearly explained and referenced?
- Does the program address known gaps in prevention services and avoid duplication of effort?

- If applicable, have collaborative partners demonstrated that the collaborative effort will provide a greater impact on cancer prevention and control than the applicant organization's effort separately?
- Will the project reach and serve an appropriate number of people based on the budget allocated to providing services and the cost of providing services?

### **Project Strategy and Feasibility**

- Does the proposed project provide services specified in the RFA?
- Are the overall program approach, strategy, and design clearly described and supported by established theory and practice? Are the proposed objectives and activities feasible within the duration of the award? Has the applicant convincingly demonstrated the short- and long-term impacts of the project?
- Are possible barriers addressed and approaches for overcoming them proposed?
- Are the priority population and culturally appropriate methods to reach the priority population clearly described?
- If applicable, does the application demonstrate the availability of resources and expertise to provide case management, including followup for abnormal results and access to treatment?
- Does the program leverage partners and resources to maximize the reach of the services proposed? Does the program leverage and complement other state, federal, and nonprofit grants?

### **Outcomes Evaluation**

- Are specific goals and measurable objectives for each year of the project provided?
- Are the proposed outcome measures appropriate for the services provided, and are the expected changes clinically significant?
- Does the application provide a clear and appropriate plan for data collection and management and data analyses?
- Are clear baseline data provided for the priority population, or are clear plans included to collect baseline data?

- If an evidence-based intervention is being adapted in a population where it has not been implemented or tested, are plans for evaluation of barriers, effectiveness, and fidelity to the model described?
- Is the qualitative analysis of planned policy or system changes described?

### **Organizational Qualifications and Capabilities**

- Do the organization and its collaborators/partners demonstrate the ability to provide the proposed preventive 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 implement, evaluate, and complete the project?
- Is the organization structurally and financially stable and viable?

### **Integration and Capacity Building**

- Does the applicant describe steps that will be taken and components of the project that will be integrated into the organization through policies and practices?
- Does the applicant describe steps that will be taken or components of the project that will remain (eg, trained personnel, identification of alternative resources, building internal assets) to continue the delivery of some or all components of the evidence-based intervention once CPRIT funding ends?

### **5.2.2. Secondary Evaluation Criteria**

#### **Budget**

- Is the budget appropriate and reasonable for the scope and services of the proposed work?
- Is the cost per person served appropriate and reasonable?
- Is the proportion of the funds allocated for direct services reasonable?
- Is the project a good investment of Texas public funds?

#### **Dissemination and Scalability**

- Are plans for dissemination of the project's results and outcomes, including barriers encountered and successes achieved, clearly described?

- Some programs may have unique resources and may not lend themselves to replication by others. If applicable, does the applicant describe a plan for scalability/expansion of all or some components of the project by others in the state?

## **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, which are available at [www.cprit.state.tx.us](http://www.cprit.state.tx.us). 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, which provides a step-by-step guide to using CARS.

**Hours of operation:** Monday, Tuesday, Thursday, Friday, 7 AM to 4 PM central time  
Wednesday, 8 AM to 4 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.state.tx.us](http://www.cprit.state.tx.us)

## **8. RESOURCES**

- The Texas Cancer Registry. <http://www.dshs.state.tx.us/tcr> or contact the Texas Cancer Registry at the Department of State Health Services
- The Community Guide. <http://www.thecommunityguide.org/index.html>
- Cancer Control P.L.A.N.E.T. <http://cancercontrolplanet.cancer.gov>
- Guide to Clinical Preventive Services: Recommendations of the U.S. Preventive Services Task Force. <http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/guide/>
- Brownson, R.C., Colditz G.A., and Proctor, E.K. (Editors). *Dissemination and Implementation Research in Health: Translating Science to Practice*. Oxford University Press, March 2012

- Centers for Disease Control and Prevention: The Program Sustainability Assessment Tool: A New Instrument for Public Health Programs.  
[http://www.cdc.gov/pcd/issues/2014/13\\_0184.htm](http://www.cdc.gov/pcd/issues/2014/13_0184.htm)
- Centers for Disease Control and Prevention: Using the Program Sustainability Tool to Assess and Plan for Sustainability. [http://www.cdc.gov/pcd/issues/2014/13\\_0185.htm](http://www.cdc.gov/pcd/issues/2014/13_0185.htm)
- Cancer Prevention and Control Research Network: Putting Public Health Evidence in Action Training Workshop. <http://cpcrn.org/pub/evidence-in-action/>

## **9. REFERENCES**

1. <http://www.cdc.gov/hpv/parents/questions-answers.html>
2. Texas Cancer Registry, Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services. <http://www.dshs.state.tx.us/tcr/default.shtm>

## **10. APPENDIX A: KEY TERMS**

- **Activities:** A listing of the “who, what, when, where, and how” for each objective that will be accomplished
- **Capacity Building:** Any activity (eg, training, identification of alternative resources, building internal assets) that builds durable resources and enables the grantee’s setting or community to continue the delivery of some or all components of the evidence-based intervention
- **Clinical Services:** Number of clinical services such as screenings, diagnostic tests, vaccinations, counseling sessions, or other evidence-based preventive services delivered by a health care practitioner in an office, clinic, or health care system (Other examples include genetic testing or assessments, physical rehabilitation, tobacco cessation counseling or nicotine replacement therapy, case management, primary prevention clinical assessments, and family history screening.)
- **Education Services:** Number of evidence-based, culturally appropriate cancer prevention and control education and outreach services delivered to the public and to health care professionals (Examples include education or training sessions [group or individual], focus groups, and knowledge assessments.)

- **Evidence-Based Program:** A program that is validated by some form of documented research or applied evidence (CPRIT's website provides links to resources for evidence-based strategies, programs, and clinical recommendations for cancer prevention and control. To access this information, visit [http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control.\)](http://www.cprit.state.tx.us/prevention/resources-for-cancer-prevention-and-control.)
- **Goals:** Broad statements of general purpose to guide planning (Goals should be few in number and focus on aspects of highest importance to the project.)
- **Integration:** The extent the evidence-based intervention is integrated within the culture of the grantee's setting or community through policies and practice
- **Navigation Services:** Number of unique activities/services that offer assistance to help overcome health care system barriers in a timely and informative manner and facilitate cancer screening and diagnosis to improve health care access and outcomes (Examples include patient reminders, transportation assistance, and appointment scheduling assistance.)
- **Objectives:** Specific, **measurable**, actionable, realistic, and timely projections for outputs and outcomes; example: "Increase screening service provision in X population from Y% to Z% by 20xx" (Baseline data for the priority population must be included as part of each objective.)
- **People Reached:** Number of members of the public and/or professionals reached via noninteractive public or professional education and outreach activities, such as mass media efforts, brochure distribution, public service announcements, newsletters, and journals (This category includes individuals who would be reached through activities that are directly funded by CPRIT as well as individuals who would be reached through activities that occur as a direct consequence of the CPRIT-funded project's leveraging of other resources/funding to implement the CPRIT-funded project.)
- **People Served:** Number of services delivered to members of the public and/or professionals—direct, interactive public or professional education, outreach, training, navigation service, or clinical service, such as live educational and/or training sessions, vaccine administration, screening, diagnostics, case management/navigation services, and physician consults. One individual may receive multiple services (This category includes individuals who would be served through activities that are directly funded by CPRIT as well as individuals who would be served through activities that occur as a direct

consequence of the CPRIT-funded project's leveraging of other resources/funding to implement the CPRIT-funded project.)

## 11. APPENDIX B: WRITING GOALS AND OBJECTIVES

Adapted with permission from Appalachia Community Cancer Network, NIH Grant U54 CA 153604

### Develop well-defined goals and objectives.

**Goals** provide a roadmap or plan for where a group wants to go. Goals can be long term (over several years) or short term (over several months). Goals should be based on needs of the community and evidence-based data.

Goals should be:

- Believable – situations or conditions that the group believes can be achieved
- Attainable – possible within a designated time
- Tangible – capable of being understood or realized
- On a timetable – with a completion date
- Win-Win – beneficial to individual members and the coalition

**Objectives** are measurable steps toward achieving the goal. They are clear statements of specific activities required to achieve the goal. The best objectives have several characteristics in common – S.M.A.R.T. + C.:

- Specific – they tell how much (number or percent), who (participants), what (action or activity), and by when (date)
  - Example: 115 uninsured individuals age 50 and older will complete colorectal cancer screening by March 31, 2018.
- Measurable – specific measures that can be collected, detected, or obtained to determine successful attainment of the objective
  - Example: How many screened at an event? How many completed pre/post assessment?
- Achievable – not only are the objectives themselves possible, it is likely that your organization will be able to accomplish them

- Relevant to the mission – your organization has a clear understanding of how these objectives fit in with the overall vision and mission of the group
- Timed – developing a timeline is important for when your task will be achieved
- Challenging – objectives should stretch the group to aim on significant improvements that are important to members of the community

### **Evaluate and refine your objectives**

Review your developed objectives and determine the type and level of each using the following information:

#### **There are 2 types of objectives:**

- Outcome objectives – measure the “what” of a program
- Process objectives – measure the “how” of a program

#### **There are 3 levels of objectives:**

- Community-level – objectives measure the planned community change
- Program impact – objectives measure the impact the program will have on a specific group of people
- Individual – objectives measures participant changes resulting from a specific program, using these factors:
  - Knowledge – understanding (know screening guidelines; recall the number to call for screening)
  - Attitudes – feeling about something (will consider secondhand smoke dangerous; believe eating 5 or more fruits and vegetable is important)
  - Skills – the ability to do something (complete fecal occult blood test)
  - Intentions – regarding plan for future behavior (will agree to talk to the doctor, will plan to schedule a Pap test)
  - Behaviors (past or current) – to act in a particular way (will exercise 30+ minutes a day, will have a mammogram)

**Well-defined goals and objectives can be used to track, measure, and report progress toward achievement.**

## Summary Table

	<b>Outcome</b>	<b>Process</b>
<b>Community-level</b>	WHAT will change in a community  <i>Example: As a result of CPRIT funding, FIT (fecal immunochemical tests) will be available to 1,500 uninsured individuals age 50 and over through 10 participating local clinics and doctors.</i>	HOW the community change will come about  <i>Example: Contracts will be signed with participating local providers to enable uninsured individuals over age 50 have access to free colorectal cancer screening in their communities.</i>
<b>Program impact</b>	WHAT will change in the target group as a result of a particular program  <i>Example: As a result of this project, 200 uninsured women between 40 and 49 will receive free breast and cervical cancer screening.</i>	HOW the program will be implemented to affect change in a group/population  <i>Example: 2,000 female clients, between 40 and 49, will receive a letter inviting them to participate in breast and cervical cancer screening.</i>
<b>Individual</b>	WHAT an individual will learn as a result of a particular program, or WHAT change an individual will make as a result of a particular program  <i>Example: As a result of one to one education of 500 individuals, at least 20% of participants will participate in a smoking cessation program to quit smoking.</i>	HOW the program will be implemented to affect change in an individual's knowledge or actions  <i>Example: As a result of one-to-one counseling, all participants will identify at least 1 smoking cessation service and 1 smoking cessation aid.</i>

## **Third Party Observer Reports**

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## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-05- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 1 (CPRIT Peer Review Meeting - Panel 1)  
*Panel Date:* December 5-6, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 1 peer review of applications for FY17 funding. The meeting was chaired by Ross Brownson, Ph.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 5-6, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Twelve applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Four CPRIT staff members and three CSRA employees were present for the meeting; one additional CSRA employee participated telephonically;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- Four applications with five COIs were identified prior to the meeting; one application had two COIs. No additional COIs were identified during the peer review panel;
- One application with a COI was not discussed during the meeting;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2016-12-07- PREV  
*Program Name:* Prevention  
*Panel Name:* FY17.1 Prevention Panel 2 (CPRIT Peer Review Meeting - Panel 2)  
*Panel Date:* December 7-8, 2016  
*Report Date:* December 13, 2016

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the application and focused on the established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT Peer Review Meeting - Panel 2 peer review of applications for FY17 funding. The meeting was chaired by Nancy Lee, M.D., and held at the Marriott Suites Medical/Market Center in Dallas, Texas on December 7-8, 2016.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest are followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when a proposal with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by peer review panel members;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The peer review panel discussion is focused on the established scoring criteria and/or making grant award recommendations.

### *Summary of Observation Results*

The BFS independent observers participated in the Prevention peer review meeting held in-person. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observers noted the following during the peer review meeting:

- Ten applications were discussed within the Prevention peer review meeting to score applications for funding;
- Participants: nine peer review panelists including the Panel Chairperson; two advocate reviewers; one additional peer review participant (Dr. Stephen Wyatt, Prevention Review Council Chairman participated telephonically);
- Two CPRIT staff members and three CSRA employees were present for the meeting;
- CPRIT program staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the application evaluation criteria.

Regarding applications with a conflict of interest (COIs):

- One application with two COIs was identified prior to the meeting; no additional COIs were identified during the peer review panel;
- The reviewers with conflicts left the room and did not participate in the review of the conflicted application;
- All reviewers with a conflict of interest signed out on the COI log when leaving the room.

A list of all attendees; sign in log; and informational materials were provided by CSRA staff to aid in the observation of these objectives.

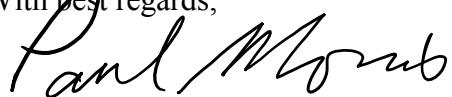
### *Conclusion*

In conclusion; we observed that the activities of the Prevention peer review meeting were limited to the identified objectives noted earlier in this report.

BSF's third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform and did not perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA  
Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

December 13, 2016

cc: Vince Burgess, Chief Compliance Officer



## Cancer Prevention and Research Institute of Texas (CPRIT) Prevention Peer Review Observation Report

*Report No.* 2017-01-2\_PRC\_17.1

*Program Name:* Prevention

*Panel Name:* FY17.1 Prevention Review Council Programmatic Review

*Panel Date:* January 20, 2017

*Report Date:* January 23, 2017

### *Background*

As part of CPRIT's ongoing emphasis on continuous improvement in its grants review/management processes and to ensure that panel discussions are limited to the merits of the applications and focused on established evaluation criteria, CPRIT continues to engage a third-party independent observer at all in-person and telephone conference peer review meetings. CPRIT has authorized an independent party to function as a neutral third-party observer. CPRIT engaged Business and Financial Management Solutions, LLC (BFS) as third-party observer as of December, 2016.

### *Introduction*

The subject of this report is the CPRIT FY17.1 Prevention Review Council Programmatic Review. The meeting was chaired by Stephen Wyatt and conducted telephonically on January 20, 2017.

### *Panel Observation Objectives and Scope*

The third-party observation engagement was limited to observation of the following objectives:

- CPRIT's established procedure for panelists who have declared a conflict of interest is followed during the meeting (e.g., reviewers hang up from the teleconference or leave the room when an application with which there is a conflict is discussed);
- CPRIT program staff participation at meetings is limited to offering general points of information when asked by Prevention Review Council members or CSRA staff;
- CPRIT program staff do not engage in the panel's discussion on the merits of applications; and
- The Prevention Review Council discussion is focused on the established scoring criteria and/or making recommendations.

### *Summary of Observation Results*

Two BFS independent observers participated in the Prevention Review Council teleconference. CSRA, CPRIT's contracted third-party grant application administrator, facilitated the meeting.

The independent observer noted the following during the recruitment meeting:

- Thirteen applications were discussed;
- Participants: Three council panelists including the Chairperson;
- Two CPRIT staff members and four CSRA employees participated in the meeting;
- CPRIT staff participation was limited to reviewing and clarifying policies, and answering procedural questions;
- CSRA staff did not participate in the discussions around the merits of the applications;
- The panelists' discussions were limited to the evaluation criteria.

There were no conflicts of interest (COIs) identified. A list of all attendees and informational materials were provided by CSRA staff to aid in the observation of these objectives.

### *Conclusion*

In conclusion; we observed that the activities of the Prevention Review Council were limited to the identified objectives noted earlier in this report.

Third-party observation services did not include an evaluation of the appropriateness or rigor of the review panel's discussion of scientific, technical, or programmatic aspects of the applications. We were not engaged to perform an audit, the objective of which would be the expression of an opinion on the accuracy of voting and scoring. Accordingly, we will not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

This report is intended solely for the information and use of CPRIT, its management and its Oversight Committee members. This report is not intended to be, and should not be used by anyone other than these specified parties.

With best regards,



Paul Morris, CPA, CIA

Vice President Compliance and Advisory Services  
Business and Financial Management Solutions, LLC

January 20, 2017

cc: Vince Burgess, Chief Compliance Officer

## **Conflicts of Interest Disclosure**

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**Conflicts of Interest Disclosure**  
**Prevention Cycle 17.1 Applications**  
**(Prevention Cycle 17.1 Awards Announced at February 15, 2017, Oversight Committee Meeting)**

The table below lists the conflicts of interest (COIs) identified by peer reviewers, Program Integration Committee (PIC) members, and Oversight Committee members on an application-by-application basis. Applications reviewed in Prevention Cycle 17.1 include *Competitive Continuation/Expansion - Evidence-Based Cancer Prevention Services; Dissemination of CPRIT-Funded Cancer Control Interventions; Evidence-Based Cancer Prevention Services; and Cancer Prevention Promotion and Navigation to Clinical Services*. All applications with at least one identified COI are listed below; applications with no COIs are not included. It should be noted that an individual is asked to identify COIs for only those applications that are to be considered by the individual at that particular stage in the review process. For example, Oversight Committee members identify COIs, if any, with only those applications that have been recommended for the grant awards by the PIC. COI information used for this table was collected by SRA International, CPRIT's third party grant administrator, and by CPRIT.

Application ID	Applicant/PI	Institution	Conflict Noted
<b>Applications considered by the PIC and Oversight Committee</b>			
PP170023	Karen Basen-Engquist	The University of Texas M. D. Anderson Cancer Center	Eriksen, Michael
PP170046	Paula Cuccaro	The University of Texas Health Science Center at Houston	Brandt, Healther; Vanderpool, Robin
<b>Applications not considered by the PIC or Oversight Committee</b>			
PP170054*	Kentya Ford	The University of Texas at Austin	Eriksen, Michael
PP170003	Navkiran Shokar	Texas Tech University Health Sciences Center at El Paso	Eriksen, Michael
PP170049	Marcia Ory	Texas A&M University System Health Science Center	Brady, Kevin; Plescia, Marcus

\* = Not discussed

## **De-Identified Overall Evaluation Scores**

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## Evidence Based Cancer Prevention Services

Prevention Cycle 17.1

Application ID	Final Overall Evaluation Score
PP170046*	1.8
PP170010*	2.1
PP170042*	2.5
aa	4.0
ab	4.1
ac	4.4
ad	4.7
ae	5.1
af	5.2
ag	5.3
ah	5.3
ai	5.7
aj	5.8
ak	6.0
al	6.3
am	6.5

\* = Recommended for funding

## **Final Overall Evaluation Scores and Rank Order Scores**

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Pete Geren  
Oversight Committee Presiding Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [pgcprit@sidrichardson.org](mailto:pgcprit@sidrichardson.org)

Wayne R. Roberts  
Chief Executive Officer  
Cancer Prevention and Research Institute of Texas  
Via email to [wroberts@cprit.state.tx.us](mailto:wroberts@cprit.state.tx.us)

Dear Mr. Roberts and Mr. Geren,

On behalf of the Prevention Review Council (PRC), I am pleased to provide the PRC's recommendations for CPRIT Prevention grant awards. The applicants on the attached list of submitted proposals responded to CPRIT requests for applications (RFA) released for the first review cycle of FY2017.

The projects are numerically ranked in the order the PRC recommends the applications be funded. Recommended funding amounts and the overall evaluation score are provided for each grant application. The PRC did not make changes to the goals, timelines, or project objectives requested by the applicants. When the PRC did not follow the rank ordered scores in developing its recommended funding order a justification, based upon established programmatic priorities outlined in the RFAs, is provided.

The projected funding available for this fiscal year is \$26,171,122. With the second funding cycle for the fiscal year underway, the PRC opted for a conservative approach to its recommendations for this cycle. Recommendations are provided at two levels: (1) initially fund 9 projects totaling \$12,024,696 and (2) depending upon the availability of funds later in the fiscal year, fund an additional project, PP170037 for \$1,500,000.

Our recommendations meet the PRC's standards for grant award funding of projects that are evidence-based, deliver programs or services to underserved populations, and focus on primary, secondary or tertiary prevention. In making these recommendations the PRC also considered the available funding, the composition of the current portfolio, and the programmatic priorities in the RFA which include potential for impact and return on investment, geographic distribution, cancer type and type of program. All of the recommended grants address one or more of the Prevention Program priorities.

Sincerely,

Stephen W. Wyatt, DMD, MPH  
Chair, CPRIT Prevention Review Council





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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170004**  
**Competitive Continuation/Expansion-**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services Request for Applications* (RFA). CPRIT received 11 applications for this RFA, including one application that was withdrawn. This application was assigned to the Prevention review panel 2 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

---

*Two applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

The Program Integration Committee (PIC) unanimously voted to defer one award recommendation made by the Prevention Review Council for this mechanism to a future meeting date of the PIC. The decision resulted from the recommendation by the Chief Prevention Officer.

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.

This statement is true."



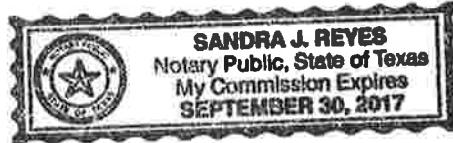
\_\_\_\_\_  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Competitive Continuation/Expansion (CCE)  
 APPLICATION ID PP170004  
 APPLICATION TITLE DE Casa 2: Cervical Cancer Prevention in El Paso and West Texas  
 APPLICANT NAME Shokar, Navkiran  
 ORGANIZATION Texas Tech University Health Sciences Center at El Paso  
 PANEL NAME 17.1 Prevention Panel-2 (17.1 PP-2)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/04/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/04/17
	Date application submitted	08/29/16	01/04/17
	Method of submission	CARS	01/04/17
	Within receipt period	YES	01/04/17
	Request for extension to submit application after CARS closed	N/A	01/04/17
	Request for extension for late application submission accepted	N/A	01/04/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/04/17
	Donation(s) made to CPRIT/foundation	NO	01/04/17
	Assigned to primary reviewers	09/14/16	01/04/17
	Applicant notified of review panel assignment	10/12/16	01/04/17
	Primary Reviewer 1 COI signed	09/14/16	01/04/17
	Primary (Advocate) Reviewer 2 COI signed	09/14/16	01/04/17
	Primary Reviewer 3 COI signed	09/19/16	01/04/17
3. Peer Review Meeting	Primary Reviewer 4 COI signed	09/19/16	01/04/17
	Primary Reviewer 1 critique submitted	11/12/16	01/04/17
	Primary (Advocate) Reviewer 2 critique submitted	11/13/16	01/04/17
	Primary Reviewer 3 critique submitted	11/13/16	01/04/17
	Primary Reviewer 4 critique submitted	11/14/16	01/04/17
	COI indicated by non-primary reviewer	NONE	01/04/17
	COI recused from participation	N/A	01/04/17
	Discussed at Peer Review Meeting	YES	01/04/17
	Peer Review Meeting	12/07/16-12/08/16	01/04/17
	Post review statements signed	12/08/16	01/04/17
	Third Party Observer Report	12/13/16	01/05/17
4. Final PRC Recommendation	Score report delivered to CPO	12/19/16	01/04/17
	Recommended for PRC Review	YES	01/04/17
	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
5. PIC Review	Third Party Observer Report	01/23/17	01/27/17
	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
6. Oversight Committee Approval	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170010**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Evidence-Based Cancer Prevention Services* Request for Applications (RFA). CPRIT received 18 applications for this RFA, including two applications that were withdrawn. This application was assigned to the Prevention review panel 2 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

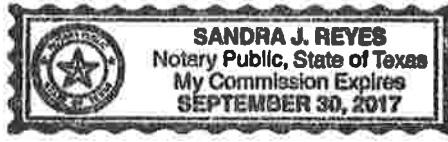
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

  
\_\_\_\_\_  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
\_\_\_\_\_  
Sandra Reyes  
Notary Public, State of Texas



CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS  
APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Evidence-Based Cancer Prevention Services (EBP)  
 APPLICATION ID PP170010  
 APPLICATION TITLE Cervical Cancer Screening and Patient Navigation (X-SPAN)  
 APPLICANT NAME Argenbright, Keith  
 ORGANIZATION The University of Texas Southwestern Medical Center  
 PANEL NAME 17.1 Prevention Panel-2 (17.1 PP-2)

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COI recused from participation			
Donation(s) made to CPRIT/foundation			
Presented to CPRIT Oversight Committee			
Award approved by Oversight Committee			
Authority to advance funds requested			
Advance authority approved by Oversight Committee			

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170012**  
**Competitive Continuation/Expansion-**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

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CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

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*Two applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

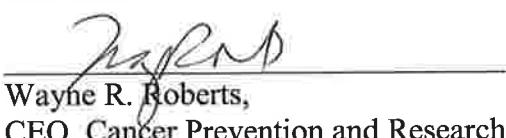
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

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In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

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This statement is true."



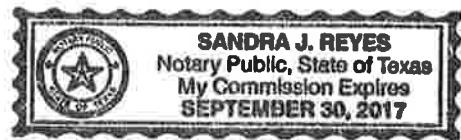
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
\_\_\_\_\_  
Sandra Reyes

Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Competitive Continuation/Expansion (CCE)  
 APPLICATION ID PP170012  
 APPLICATION TITLE Building Bridges: Cancer Prevention Education and Screening for Refugees  
 APPLICANT NAME Raines-Milenkov, Amy  
 ORGANIZATION University of North Texas Health Science Center at Fort Worth  
 PANEL NAME 17.1 Prevention Panel-1 (17.1 PP-1)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
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	Primary Reviewer 4 critique submitted	11/16/16	01/03/17
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	COI recused from participation	N/A	01/03/17
	Discussed at Peer Review Meeting	YES	01/03/17
	Peer Review Meeting	12/05/16-12/06/16	01/03/17
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	PRC Meeting	01/20/17	01/24/17
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	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
6. Oversight Committee Approval	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
COI indicated by Oversight Committee member		NAME or NONE	
COI recused from participation		YES/NO or N/A	
Donation(s) made to CPRIT/foundation		YES/NO	
Presented to CPRIT Oversight Committee		DATE	
Award approved by Oversight Committee		YES/NO	
Authority to advance funds requested		YES/NO	
Advance authority approved by Oversight Committee		YES/NO	

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



---

CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170015**  
**Dissemination of CPRIT-Funded Cancer Control Interventions**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

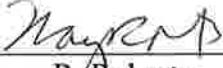
My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Dissemination of CPRIT-Funded Cancer Control Interventions* Request for Applications (RFA). CPRIT received one application for this RFA. This application was assigned to the Prevention review panel 1 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

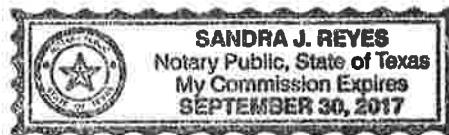
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
Sandra J. Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Dissemination of CPRIT-Funded Cancer Control Interventions (DI)  
 APPLICATION ID PP170015  
 APPLICATION TITLE Disseminating Evidence-Based Cancer Genomics Training to Community Health Workers  
 APPLICANT NAME Chen, Lei-Shih  
 ORGANIZATION Texas A&M University  
 PANEL NAME 17.1 Prevention Panel-1 (17.1 PP-1)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	6/8/2016*	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/03/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/03/17
	Date application submitted	08/30/16	01/03/17
	Method of submission	CARS	01/03/17
	Within receipt period	YES	01/03/17
	Request for extension to submit application after CARS closed	N/A	01/03/17
	Request for extension for late application submission accepted	N/A	01/03/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/03/17
	Donation(s) made to CPRIT/foundation	NO	01/03/17
	Assigned to primary reviewers	09/14/16	01/03/17
	Applicant notified of review panel assignment	10/12/16	01/03/17
	Primary Reviewer 1 COI signed	09/16/16	01/03/17
	Primary (Advocate) Reviewer 2 COI signed	09/19/16	01/03/17
	Primary Reviewer 3 COI signed	09/15/16	01/03/17
3. Peer Review Meeting	Primary Reviewer 4 COI signed	09/14/16	01/03/17
	Primary Reviewer 1 critique submitted	10/25/16	01/03/17
	Primary (Advocate) Reviewer 2 critique submitted	11/15/16	01/03/17
	Primary Reviewer 3 critique submitted	11/14/16	01/03/17
	Primary Reviewer 4 critique submitted	11/15/16	01/03/17
	COI indicated by non-primary reviewer	NONE	01/03/17
	COI recused from participation	N/A	01/03/17
	Discussed at Peer Review Meeting	YES	01/03/17
	Peer Review Meeting	12/05/16-12/06/16	01/03/17
	Post review statements signed	12/06/16	01/03/17
	Third Party Observer Report	12/13/16	01/05/17
4. Final PRC Recommendation	Score report delivered to CPO	12/19/16	01/03/17
	Recommended for PRC Review	YES	01/03/17
	COI Indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
5. PIC Review	Third Party Observer Report	01/23/17	01/27/17
	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017**	01/27/17
	COI indicated by PIC member	NONE	01/31/17
6. Oversight Committee Approval	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

\*Reflects approval of RFA Instructions.

\*\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170023**  
**Competitive Continuation/Expansion-**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services Request for Applications* (RFA). CPRIT received 11 applications for this RFA, including one application that was withdrawn. This application was assigned to the Prevention review panel 1 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

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*Two applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

The Program Integration Committee (PIC) unanimously voted to defer one award recommendation made by the Prevention Review Council for this mechanism to a future meeting date of the PIC. The decision resulted from the recommendation by the Chief Prevention Officer.

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."



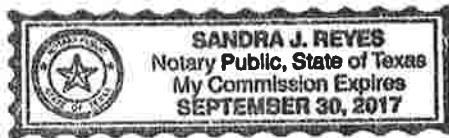
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Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Competitive Continuation/Expansion (CCE)  
 APPLICATION ID PP170023  
 APPLICATION TITLE Active Living After Cancer: Combining a Physical Activity Program with Survivor Navigation  
 APPLICANT NAME Basen-Engquist, Karen  
 ORGANIZATION The University of Texas M. D. Anderson Cancer Center  
 PANEL NAME 17.1 Prevention Panel-1 (17.1 PP-1)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/03/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/03/17
	Date application submitted	08/30/16	01/03/17
	Method of submission	CARS	01/03/17
	Within receipt period	YES	01/03/17
	Request for extension to submit application after CARS closed	N/A	01/03/17
	Request for extension for late application submission accepted	N/A	01/03/17
2. Receipt, Referral, and Assignment	Administrative review notification	09/27/16	01/03/17
	Donation(s) made to CPRIT/foundation	NO	01/03/17
	Assigned to primary reviewers	09/14/16	01/03/17
	Applicant notified of review panel assignment	10/12/16	01/03/17
	Primary Reviewer 1 COI signed	09/14/16	01/03/17
	Primary (Advocate) Reviewer 2 COI signed	09/19/16	01/03/17
	Primary Reviewer 3 COI signed	10/25/16	01/03/17
3. Peer Review Meeting	Primary Reviewer 4 COI signed	09/16/16	01/03/17
	Primary Reviewer 1 critique submitted	11/15/16	01/03/17
	Primary (Advocate) Reviewer 2 critique submitted	10/20/16	01/03/17
	Primary Reviewer 3 critique submitted	11/16/16	01/03/17
	Primary Reviewer 4 critique submitted	11/07/16	01/03/17
	COI indicated by non-primary reviewer	Michael Eriksen	01/03/17
	COI recused from participation	YES	01/03/17
	Discussed at Peer Review Meeting	YES	01/03/17
	Peer Review Meeting	12/05/16-12/06/16	01/03/17
	Post review statements signed	12/06/16	01/03/17
4. Final PRC Recommendation	Third Party Observer Report	12/13/16	01/05/17
	Score report delivered to CPO	12/19/16	01/03/17
	Recommended for PRC Review	YES	01/03/17
	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
5. PIC Review	Third Party Observer Report	01/23/17	01/27/17
	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
6. Oversight Committee Approval	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170036**  
**Competitive Continuation/Expansion-**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Competitive Continuation/Expansion-Evidence-Based Cancer Prevention Services Request for Applications* (RFA). CPRIT received 11 applications for this RFA, including one application that was withdrawn. This application was assigned to the Prevention review panel 2 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
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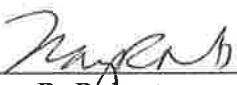
*Two applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

The Program Integration Committee (PIC) unanimously voted to defer one award recommendation made by the Prevention Review Council for this mechanism to a future meeting date of the PIC. The decision resulted from the recommendation by the Chief Prevention Officer.

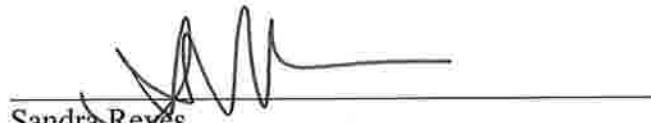
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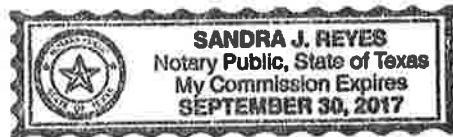
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

  
\_\_\_\_\_  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Competitive Continuation/Expansion (CCE)  
 APPLICATION ID PP170036  
 APPLICATION TITLE Expansion and Continuation of Web-based Clinical Decision Support to Disseminate Tailored Screening Recommendations for Survivors of Pediatric Cancers  
 APPLICANT NAME Poplack, David  
 ORGANIZATION Baylor College of Medicine  
 PANEL NAME 17.1 Prevention Panel-2 (17.1 PP-2)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas Register	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/04/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/04/17
	Date application submitted	08/30/16	01/04/17
	Method of submission	CARS	01/04/17
	Within receipt period	YES	01/04/17
	Request for extension to submit application after CARS closed	N/A	01/04/17
2. Receipt, Referral, and Assignment	Request for extension for late application submission accepted	N/A	01/04/17
	Administrative review notification	N/A	01/04/17
	Donation(s) made to CPRIT/foundation	NO	01/04/17
	Assigned to primary reviewers	09/14/16	01/04/17
	Applicant notified of review panel assignment	10/12/16	01/04/17
	Primary Reviewer 1 COI signed	09/22/16	01/04/17
	Primary (Advocate) Reviewer 2 COI signed	09/14/16	01/04/17
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	Primary Reviewer 1 critique submitted	11/16/16	01/04/17
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	Primary Reviewer 3 critique submitted	11/15/16	01/04/17
	Primary Reviewer 4 critique submitted	10/16/16	01/04/17
	COI indicated by non-primary reviewer	NONE	01/04/17
	COI recused from participation	N/A	01/04/17
	Discussed at Peer Review Meeting	YES	01/04/17
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	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
	Third Party Observer Report	01/23/17	01/27/17
5. PIC Review	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
6. Oversight Committee Approval	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
6. Oversight Committee Approval	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting party is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170039**  
**Competitive Continuation/Expansion-**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

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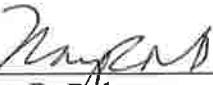
*Two applications in response to this RFA with an equal or more favorable score than those recommended were not recommended by the Prevention Review Council (PRC). As allowed in 25 T.A.C § 703.6(d)(1), the PRC's numerical rank order is substantially based on the final overall evaluation score, but also takes into consideration how well the grant application achieves program priorities and the overall program portfolio. The letter and rank order list from the PRC Chair explains why some recommended grant applications were ranked ahead of an application with a more favorable score as required by 25 T.A.C. § 703.6(d)(2)(B).*

- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

The Program Integration Committee (PIC) unanimously voted to defer one award recommendation made by the Prevention Review Council for this mechanism to a future meeting date of the PIC. The decision resulted from the recommendation by the Chief Prevention Officer.

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

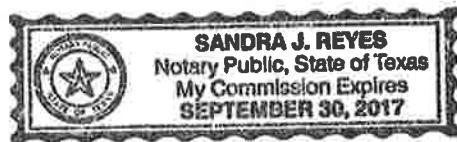
  
\_\_\_\_\_  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Competitive Continuation/Expansion (CCE)  
 APPLICATION ID PP170039  
 APPLICATION TITLE Nicotine Recovery Program (NRP)  
 APPLICANT NAME Hollis, Gina  
 ORGANIZATION Mental Health Mental Retardation of Tarrant County  
 PANEL NAME 17.1 Prevention Panel-1 (17.1 PP-1)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/03/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/03/17
	Date application submitted	08/30/16	01/03/17
	Method of submission	CARS	01/03/17
	Within receipt period	YES	01/03/17
	Request for extension to submit application after CARS closed	N/A	01/03/17
	Request for extension for late application submission accepted	N/A	01/03/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/03/17
	Donation(s) made to CPRIT/foundation	NO	01/03/17
	Assigned to primary reviewers	09/14/16	01/03/17
	Applicant notified of review panel assignment	10/12/16	01/03/17
	Primary Reviewer 1 COI signed	09/20/16	01/03/17
	Primary (Advocate) Reviewer 2 COI signed	09/21/16	01/03/17
	Primary Reviewer 3 COI signed	10/25/16	01/03/17
3. Peer Review Meeting	Primary Reviewer 4 COI signed	09/27/16	01/03/17
	Primary Reviewer 1 critique submitted	11/13/16	01/03/17
	Primary (Advocate) Reviewer 2 critique submitted	11/14/16	01/03/17
	Primary Reviewer 3 critique submitted	11/16/16	01/03/17
	Primary Reviewer 4 critique submitted	11/13/16	01/03/17
	COI indicated by non-primary reviewer	NONE	01/03/17
	COI recused from participation	N/A	01/03/17
	Discussed at Peer Review Meeting	YES	01/03/17
	Peer Review Meeting	12/05/16-12/06/16	01/03/17
	Post review statements signed	12/06/16	01/03/17
	Third Party Observer Report	12/13/16	01/05/17
	Score report delivered to CPO	12/19/16	01/03/17
4. Final PRC Recommendation	Recommended for PRC Review	YES	01/03/17
	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
	Third Party Observer Report	01/23/17	01/27/17
	Recommended for grant award	YES	01/24/17
5. PIC Review	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
6. Oversight Committee Approval	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.			

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170042**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Evidence-Based Cancer Prevention Services* Request for Applications (RFA). CPRIT received 18 applications for this RFA, including two applications that were withdrawn. This application was assigned to the Prevention review panel 2 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

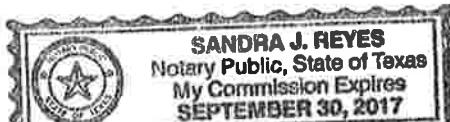
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 1  
 PROGRAM Prevention  
 AWARD MECHANISM Evidence-Based Cancer Prevention Services (EBP)  
 APPLICATION ID PP170042  
 APPLICATION TITLE University Health System Hepatitis Viral Infection and Systematic Treatment Program (HepVISTA)  
 APPLICANT NAME Villarreal, Roberto  
 ORGANIZATION University Health System  
 PANEL NAME 17.1 Prevention Panel-2 (17.1 PP-2)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/04/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/04/17
	Date application submitted	08/30/16	01/04/17
	Method of submission	CARS	01/04/17
	Within receipt period	YES	01/04/17
	Request for extension to submit application after CARS closed	N/A	01/04/17
	Request for extension for late application submission accepted	N/A	01/04/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/04/17
	Donation(s) made to CPRIT/foundation	NO	01/04/17
	Assigned to primary reviewers	09/14/16	01/04/17
	Applicant notified of review panel assignment	10/12/16	01/04/17
	Primary Reviewer 1 COI signed	09/19/16	01/04/17
	Primary (Advocate) Reviewer 2 COI signed	09/14/16	01/04/17
	Primary Reviewer 3 COI signed	09/22/16	01/04/17
3. Peer Review Meeting	Primary Reviewer 4 COI signed	09/15/16	01/04/17
	Primary Reviewer 1 critique submitted	11/14/16	01/04/17
	Primary (Advocate) Reviewer 2 critique submitted	11/13/16	01/04/17
	Primary Reviewer 3 critique submitted	11/16/16	01/04/17
	Primary Reviewer 4 critique submitted	10/27/16	01/04/17
	COI indicated by non-primary reviewer	NONE	01/04/17
	COI recused from participation	N/A	01/04/17
	Discussed at Peer Review Meeting	YES	01/04/17
	Peer Review Meeting	12/07/16-12/08/16	01/04/17
	Post review statements signed	12/08/16	01/04/17
4. Final PRC Recommendation	Third Party Observer Report	12/13/16	01/05/17
	Score report delivered to CPO	12/19/16	01/04/17
	Recommended for PRC Review	YES	01/04/17
	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
5. PIC Review	Third Party Observer Report	01/23/17	01/27/17
	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
6. Oversight Committee Approval	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
COI indicated by Oversight Committee member			
COI recused from participation			
Donation(s) made to CPRIT/foundation			
Presented to CPRIT Oversight Committee			
Award approved by Oversight Committee			
Authority to advance funds requested			
Advance authority approved by Oversight Committee			

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application PP170046**  
**Evidence-Based Cancer Prevention Services**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

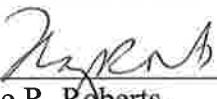
My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Evidence-Based Cancer Prevention Services* Request for Applications (RFA). CPRIT received 18 applications for this RFA, including two applications that were withdrawn. This application was assigned to the Prevention review panel 1 for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

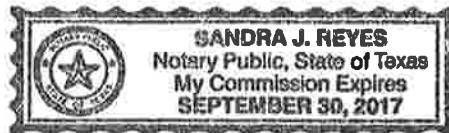
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules. This statement is true."

  
\_\_\_\_\_  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
\_\_\_\_\_  
Sandra J. Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

**FY** 2017  
**CYCLE** 1  
**PROGRAM** Prevention  
**AWARD MECHANISM** Evidence-Based Cancer Prevention Services (EBP)  
**APPLICATION ID** PP170046

**APPLICATION TITLE** Using social marketing and mobile school-based vaccination clinics to increase HPV vaccination uptake in high-risk geographic areas

**APPLICANT NAME** Cuccaro, Paula  
**ORGANIZATION** The University of Texas Health Science Center at Houston  
**PANEL NAME** 17.1 Prevention Panel-1 (17.1 PP-1)

Category	Compliance Requirement	Information	Attestation Date
<b>1. Pre-Receipt</b>	RFA Approved by CPO	05/18/16	01/27/17
	RFA published in Texas.gov eGrants	05/26/16	01/27/17
	CPRIT Application Receipt System (CARS) opened	06/09/16	01/03/17
	CPRIT Application Receipt System (CARS) closed	08/30/16	01/03/17
	Date application submitted	08/30/16	01/03/17
	Method of submission	CARS	01/03/17
	Within receipt period	YES	01/03/17
	Request for extension to submit application after CARS closed	N/A	01/03/17
	Request for extension for late application submission accepted	N/A	01/03/17
<b>2. Receipt, Referral, and Assignment</b>	Administrative review notification	N/A	01/03/17
	Donation(s) made to CPRIT/foundation	NO	01/03/17
	Assigned to primary reviewers	09/30/16	01/03/17
	Applicant notified of review panel assignment	10/12/16	01/03/17
	Primary Reviewer 1 COI signed	09/15/16	01/03/17
	Primary (Advocate) Reviewer 2 COI signed	09/21/16	01/03/17
	Primary Reviewer 3 COI signed	09/16/16	01/03/17
	Primary Reviewer 4 COI signed	09/14/16	01/03/17
<b>3. Peer Review Meeting</b>	Primary Reviewer 1 critique submitted	11/14/16	01/03/17
	Primary (Advocate) Reviewer 2 critique submitted	11/15/16	01/03/17
	Primary Reviewer 3 critique submitted	10/23/16	01/03/17
	Primary Reviewer 4 critique submitted	10/21/16	01/03/17
	COI indicated by non-primary reviewer	Heather Brandt	01/03/17
	COI recused from participation	YES	01/03/17
	COI indicated by non-primary reviewer	Robin Vanderpool	01/03/17
	COI recused from participation	YES	01/03/17
	Discussed at Peer Review Meeting	YES	01/03/17
	Peer Review Meeting	12/05/16-12/06/16	01/03/17
	Post review statements signed	12/06/16	01/03/17
	Third Party Observer Report	12/13/16	01/05/17
<b>4. Final PRC Recommendation</b>	Score report delivered to CPO	12/19/16	01/03/17
	Recommended for PRC Review	YES	01/03/17
	COI indicated by PRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	PRC Meeting	01/20/17	01/24/17
	Third Party Observer Report	01/23/17	01/27/17
<b>5. PIC Review</b>	Recommended for grant award	YES	01/24/17
	PRC Chair Notification to PIC and OC	1/24/2017*	01/27/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
<b>6. Oversight Committee Approval</b>	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

\*The Chair Notification was resent on 1/31/17 to correct a non-substantive issue. The award recommendations were not affected.

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application RR170008**  
**Recruitment of Established Investigators**  
**Nomination of Dr. Yair Reisner**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Recruitment of Established Investigators* for Applications (RFA). CPRIT received five applications for cycles 17.3 through 17.6 in response to this RFA. This application was assigned to the Scientific Review Council for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

- 
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.  
This statement is true."



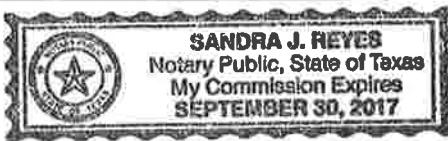
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 3  
 PROGRAM Research  
 AWARD MECHANISM Recruitment of Established Investigators (REI)  
 APPLICATION ID RR170008  
 APPLICATION TITLE Recruitment of Established Investigator- Dr. Yair Reisner  
 NOMINATOR NAME Dmitrovsky, Ethan  
 CANDIDATE NAME Reisner, Yair  
 ORGANIZATION The University of Texas M. D. Anderson Cancer Center  
 PANEL NAME Recruitment FY17 Cycle 3 and 4 (REC 17.3-4)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CSO	06/16/16	01/17/17
	RFA published in Texas.gov eGrants	06/29/16	01/17/17
	CPRIT Application Receipt Cycle opened	08/23/16	01/09/17
	CPRIT Application Receipt Cycle closed	09/20/16	01/09/17
	Date application submitted	09/20/16	01/09/17
	Method of submission	CARS	01/09/17
	Within receipt period	YES	01/09/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/09/17
	Donation(s) made to CPRIT/foundation	NO	01/09/17
	Assigned to primary reviewers	10/31/16	01/09/17
	Applicant notified of review panel assignment	N/A	01/09/17
	Primary Reviewer 1 COI signed	10/26/16	01/09/17
	Primary Reviewer 2 COI signed	10/30/16	01/09/17
3. Peer Review Meeting	Primary Reviewer 1 critique submitted	11/04/16	01/09/17
	Primary Reviewer 2 critique submitted	N/A	01/09/17
	COI indicated by non-primary reviewer	Richard O'Reilly	01/09/17
	COI recused from participation	YES	01/09/17
	Discussed at Peer Review Meeting	YES	01/09/17
	Peer Review Meeting	11/10/16	01/09/17
	Post review statements signed	11/10/16	01/09/17
	Third Party Observer Report	11/14/16	01/11/17
	Score report delivered to CSO	11/18/16	01/09/17
4. Final SRC Recommendation	Recommended for SRC Review	YES	01/09/17
	COI indicated by SRC member	Richard O'Reilly	01/09/17
	COI recused from participation	YES	01/09/17
	SRC Meeting	11/10/16	01/09/17
	Third Party Observer Report	11/14/16	01/11/17
	Recommended for grant award	YES	01/09/17
5. PIC Review	SRC Chair Notification to PIC and OC	01/25/17	01/26/17
	Applicant not accepted employment prior to SRC date	YES	01/31/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
6. Oversight Committee Approval	Recommended for grant award	YES	01/31/17
	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application RR170010**  
**Recruitment of First-Time, Tenure-Track Faculty Members**  
**Nomination of Ram Madabhushi, Ph.D.**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Recruitment of First-Time, Tenure-Track Faculty Members* for Applications (RFA). CPRIT received three applications for cycles 17.3 through 17.6 in response to this RFA, including one application that was withdrawn. This application was assigned to the Scientific Review Council for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

- 
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.

This statement is true."



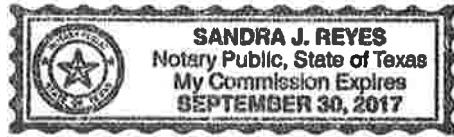
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>ST</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



Notary without Bond

**CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS**
**APPLICATION PEDIGREE**

**FY** 2017  
**CYCLE** 4  
**PROGRAM** Research  
**AWARD MECHANISM** Recruitment of First-Time Faculty Members (RFTFM)  
**APPLICATION ID** RR170010  
**APPLICATION TITLE** Nomination of Ram Madabhushi, Ph.D. for a CPRIT First-Time, Tenure Track Faculty Member Award  
**NOMINATOR NAME** Fitz, John  
**CANDIDATE NAME** Madabhushi, Ram  
**ORGANIZATION** The University of Texas Southwestern Medical Center  
**PANEL NAME** Recruitment FY17 Cycle 3 and 4 (REC 17.3-4)

<b>Category</b>	<b>Compliance Requirement</b>	<b>Information</b>	<b>Attestation Date</b>
<b>1. Pre-Receipt</b>	RFA Approved by CSO	06/16/16	01/17/17
	RFA published in Texas.gov eGrants	06/29/16	01/17/17
	CPRIT Application Receipt Cycle opened	09/21/16	01/06/17
	CPRIT Application Receipt Cycle closed	10/20/16	01/06/17
	Date application submitted	10/18/16	01/06/17
	Method of submission	CARS	01/06/17
	Within receipt period	YES	01/06/17
<b>2. Receipt, Referral, and Assignment</b>	Administrative review notification	N/A	01/06/17
	Donation(s) made to CPRIT/foundation	NO	01/06/17
	Assigned to primary reviewers	10/31/16	01/06/17
	Applicant notified of review panel assignment	N/A	01/06/17
	Primary Reviewer 1 COI signed	10/29/16	01/06/17
	Primary Reviewer 2 COI signed	10/25/16	01/06/17
<b>3. Peer Review Meeting</b>	Primary Reviewer 1 critique submitted	11/09/16	01/06/17
	Primary Reviewer 2 critique submitted	11/09/16	01/06/17
	COI indicated by non-primary reviewer	NONE	01/06/17
	COI recused from participation	N/A	01/06/17
	Discussed at Peer Review Meeting	YES	01/06/17
	Peer Review Meeting	11/10/16	01/06/17
	Post review statements signed	11/10/16	01/06/17
	Third Party Observer Report	11/14/16	01/11/17
	Score report delivered to CSO	11/18/16	01/06/17
	Recommended for SRC Review	YES	01/06/17
<b>4. Final SRC Recommendation</b>	COI indicated by SRC member	NONE	01/06/17
	COI recused from participation	N/A	01/06/17
	SRC Meeting	11/10/16	01/06/17
	Third Party Observer Report	11/14/16	01/11/17
	Recommended for grant award	YES	01/06/17
	SRC Chair Notification to PIC and OC	01/25/17	01/26/17
<b>5. PIC Review</b>	Applicant not accepted employment prior to SRC date	YES	01/31/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
<b>6. Oversight Committee Approval</b>	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

The identity of the attesting party is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application RR170011**  
**Recruitment of Established Investigators**  
**Nomination of Gerard Evan**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Recruitment of Established Investigators* for Applications (RFA). CPRIT received five applications for cycles 17.3 through 17.6 in response to this RFA. This application was assigned to the Scientific Review Council for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

- 
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.

This statement is true."



Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



**CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS**
**APPLICATION PEDIGREE**

**FY** 2017  
**CYCLE** 4  
**PROGRAM** Research  
**AWARD MECHANISM** Recruitment of Established Investigators (REI)  
**APPLICATION ID** RR170011  
**APPLICATION TITLE** Recruitment of Established Investigator- Gerard I. Evan  
**NOMINATOR NAME** Dmitrovsky, Ethan  
**CANDIDATE NAME** Evan, Gerard I.  
**ORGANIZATION** The University of Texas M. D. Anderson Cancer Center  
**PANEL NAME** Recruitment FY17 Cycle 3 and 4 (REC 17.3-4)

<b>Category</b>	<b>Compliance Requirement</b>	<b>Information</b>	<b>Attestation Date</b>
<b>1. Pre-Receipt</b>	RFA Approved by CSO	06/16/16	01/17/17
	RFA published in Texas.gov eGrants	06/29/16	01/17/17
	CPRIT Application Receipt Cycle opened	09/21/16	01/06/17
	CPRIT Application Receipt Cycle closed	10/20/16	01/06/17
	Date application submitted	10/20/16	01/06/17
	Method of submission	CARS	01/06/17
	Within receipt period	YES	01/06/17
<b>2. Receipt, Referral, and Assignment</b>	Administrative review notification	N/A	01/06/17
	Donation(s) made to CPRIT/foundation	NO	01/06/17
	Assigned to primary reviewers	10/31/16	01/06/17
	Applicant notified of review panel assignment	N/A	01/06/17
	Primary Reviewer 1 COI signed	10/26/16	01/06/17
	Primary Reviewer 2 COI signed	10/26/16	01/06/17
<b>3. Peer Review Meeting</b>	Primary Reviewer 1 critique submitted	11/07/16	01/06/17
	Primary Reviewer 2 critique submitted	11/04/16	01/06/17
	COI indicated by non-primary reviewer	NONE	01/06/17
	COI recused from participation	N/A	01/06/17
	Discussed at Peer Review Meeting	YES	01/06/17
	Peer Review Meeting	11/10/16	01/06/17
	Post review statements signed	11/10/16	01/06/17
	Third Party Observer Report	11/14/16	01/11/17
	Score report delivered to CSO	11/18/16	01/06/17
	Recommended for SRC Review	YES	01/06/17
<b>4. Final SRC Recommendation</b>	COI indicated by SRC member	NONE	01/06/17
	COI recused from participation	N/A	01/06/17
	SRC Meeting	11/10/16	01/06/17
	Third Party Observer Report	11/14/16	01/11/17
	Recommended for grant award	YES	01/06/17
	SRC Chair Notification to PIC and OC	01/25/17	01/26/17
<b>5. PIC Review</b>	Applicant not accepted employment prior to SRC date	YES	01/31/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
<b>6. Oversight Committee Approval</b>	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application RR170013**  
**Recruitment of Established Investigators**  
**Nomination of Pier Giuseppe Pelicci**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Recruitment of Established Investigators for Applications* (RFA). CPRIT received five applications for cycles 17.3 through 17.6 in response to this RFA. This application was assigned to the Scientific Review Council for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

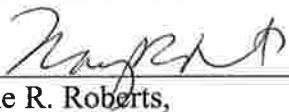
CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

- The applicable Request for Applications (RFA) for this grant cycle
- An overview of the conflict of interest process, including any conflict of interest waivers granted
- The third party observer report(s) documenting that CPRIT’s grant review processes were followed by the review panel evaluating the applications in this grant cycle
- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

- 
- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

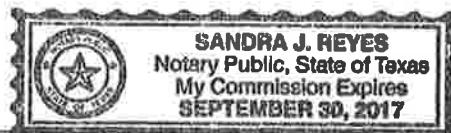
I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.  
This statement is true."

  
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.

  
Sandra J. Reyes  
Notary Public, State of Texas



Notary without Bond

## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 5  
 PROGRAM Research  
 AWARD MECHANISM Recruitment of Established Investigators (REI)  
 APPLICATION ID RR170013  
 APPLICATION TITLE Recruitment of Established Investigator- Pier Giuseppe Pelicci  
 NOMINATOR NAME Dmitrovsky, Ethan  
 CANDIDATE NAME Pelicci, Pier Giuseppe  
 ORGANIZATION The University of Texas M. D. Anderson Cancer Center  
 PANEL NAME Recruitment FY17 Cycle 5 and 6 (REC 17.5-6)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CSO	06/16/16	01/27/17
	RFA published in Texas.gov eGrants	06/29/16	01/27/17
	CPRIT Application Receipt Cycle opened	10/21/16	01/24/17
	CPRIT Application Receipt Cycle closed	11/21/16	01/24/17
	Date application submitted	11/18/16	01/24/17
	Method of submission	CARS	01/24/17
	Within receipt period	YES	01/24/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/24/17
	Donation(s) made to CPRIT/foundation	NO	01/24/17
	Assigned to primary reviewers	12/28/16	01/24/17
	Applicant notified of review panel assignment	N/A	01/24/17
	Primary Reviewer 1 COI signed	12/24/16	01/24/17
	Primary Reviewer 2 COI signed	12/27/16	01/24/17
3. Peer Review Meeting	Primary Reviewer 1 critique submitted	12/31/16	01/24/17
	Primary Reviewer 2 critique submitted	01/10/17	01/24/17
	COI indicated by non-primary reviewer	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	Discussed at Peer Review Meeting	YES	01/24/17
	Peer Review Meeting	01/12/17	01/24/17
	Post review statements signed	01/18/17	01/24/17
	Third Party Observer Report	01/17/17	01/24/17
	Score report delivered to CSO	01/19/17	01/24/17
	Recommended for SRC Review	YES	01/24/17
4. Final SRC Recommendation	COI indicated by SRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	SRC Meeting	01/12/17	01/24/17
	Third Party Observer Report	01/17/17	01/24/17
	Recommended for grant award	YES	01/24/17
	SRC Chair Notification to PIC and OC	01/25/17	01/24/17
5. PIC Review	Applicant not accepted employment prior to SRC date	YES	01/31/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
6. Oversight Committee Approval	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

The identity of the attesting part is retained by CPRIT.



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CANCER PREVENTION & RESEARCH  
INSTITUTE OF TEXAS

**CEO AFFIDAVIT**  
**Application RR170014**  
**Recruitment of First-Time, Tenure-Track Faculty Members**  
**Nomination of Dr. Han Xiao**

THE STATE OF TEXAS

COUNTY OF TRAVIS

BEFORE ME, the undersigned authority, on this day personally appeared Wayne R. Roberts, who swore or affirmed to tell the truth, and stated as follows:

“My name is Wayne R. Roberts, the Chief Executive Officer (CEO) of the Cancer Prevention and Research Institute of Texas (CPRIT). I am of sound mind and capable of making this sworn statement. I submit this affidavit pursuant to the legal requirement imposed by V.T.C.A., Health & Safety Code § 102.251(c).

My affidavit addresses the grant review process for the application stated above that is recommended for a CPRIT grant award by the Program Integration Committee (PIC). This application was submitted pursuant to *Recruitment of First-Time, Tenure-Track Faculty Members* Request for Applications (RFA). CPRIT received three applications for cycles 17.3 through 17.6 in response to this RFA, including one application that was withdrawn. This application was assigned to the Scientific Review Council for review. A preliminary evaluation process as described by 25 T.A.C. § 703.6(e)(1) was not used for applications in this cycle.

CPRIT staff and CPRIT’s third-party grants management vendor have recorded information and prepared documents during the course of their employment that are related to CPRIT’s grant review process described by Health & Safety Code Chapter 102. I have reviewed the information prepared by CPRIT staff and CPRIT’s third-party grants management vendor in my capacity as CPRIT’s CEO to prepare this affidavit. Some information (“CEO Affidavit-Supporting Information”) is applicable to all applications recommended for awards submitted pursuant to this RFA. The information listed below has been compiled as one packet and is incorporated herein by reference:

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- A de-identified list of the overall evaluation scores for applications submitted pursuant to the applicable RFA for this grant cycle

- A final overall evaluation score and rank order score submitted by the SRPP committees for the grant applications recommended by the PIC in this cycle

In addition to the CEO Affidavit-Supporting Information that is applicable to all applications submitted pursuant to the applicable RFA and recommended for grant awards this cycle, I have also reviewed the application's grant pedigree. The grant pedigree for the application listed above has been attached to this affidavit. The application pedigree provides an overview of the conflict of interest process applicable to this application, including any conflicts of interest reported by the review panel or by the PIC. I note that the following PIC members have approved conflict of interest waivers on file for FY2017: Dr. John Hellerstedt, Department of State Health Services Commissioner, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(3); and Dr. Becky Garcia, Chief Prevention Officer, applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(1). At the time of signing this affidavit, the Oversight Committee has not yet reviewed the application; however, I note that members Will Montgomery and Amy Mitchell also have conflict of interest waivers on file for FY2017 applicable to the conflict of interest specified by V.T.C.A., Health & Safety Code § 102.106(c)(4).

I personally reviewed the information for the grant application listed above and referenced herein. Based upon my review of the information and to the best of my knowledge, I swear or affirm that the peer review process for the grant application was consistent, in all material aspects, with the process described in the statute and CPRIT's administrative rules.

This statement is true."



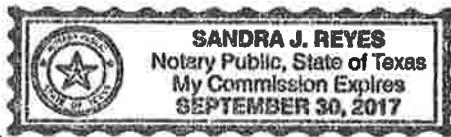
Wayne R. Roberts,  
CEO, Cancer Prevention and Research Institute of Texas

State of Texas  
County of Travis

SWORN to and SUBSCRIBED before me, the undersigned authority, on  
the 31<sup>st</sup> day of January, 2017,  
by WAYNE R. ROBERTS.



Sandra Reyes  
Notary Public, State of Texas



## CANCER PREVENTION AND RESEARCH INSTITUTE OF TEXAS

## APPLICATION PEDIGREE

FY 2017  
 CYCLE 6  
 PROGRAM Research  
 AWARD MECHANISM Recruitment of First-Time Faculty Members (RFTFM)  
 APPLICATION ID RR170014  
 APPLICATION TITLE Recruitment of First-Time, Tenure Track Faculty Member - Dr. Han Xiao  
 NOMINATOR NAME Rossky, Peter  
 CANDIDATE NAME Xiao, Han  
 ORGANIZATION Rice University  
 PANEL NAME Recruitment FY17 Cycle 5 and 6 (REC 17.5-6)

Category	Compliance Requirement	Information	Attestation Date
1. Pre-Receipt	RFA Approved by CSO	06/16/16	01/27/17
	RFA published in Texas.gov eGrants	06/29/16	01/27/17
	CPRIT Application Receipt Cycle opened	11/22/16	01/24/17
	CPRIT Application Receipt Cycle closed	12/20/16	01/24/17
	Date application submitted	12/20/16	01/24/17
	Method of submission	CARS	01/24/17
	Within receipt period	YES	01/24/17
2. Receipt, Referral, and Assignment	Administrative review notification	N/A	01/24/17
	Donation(s) made to CPRIT/foundation	NO	01/24/17
	Assigned to primary reviewers	12/28/16	01/24/17
	Applicant notified of review panel assignment	N/A	01/24/17
	Primary Reviewer 1 COI signed	12/27/16	01/24/17
	Primary Reviewer 2 COI signed	12/27/16	01/24/17
3. Peer Review Meeting	Primary Reviewer 1 critique submitted	01/10/17	01/24/17
	Primary Reviewer 2 critique submitted	01/11/17	01/24/17
	COI indicated by non-primary reviewer	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	Discussed at Peer Review Meeting	YES	01/24/17
	Peer Review Meeting	01/12/17	01/24/17
	Post review statements signed	01/18/17	01/24/17
	Third Party Observer Report	01/17/17	01/24/17
	Score report delivered to CSO	01/19/17	01/24/17
	Recommended for SRC Review	YES	01/24/17
4. Final SRC Recommendation	COI indicated by SRC member	NONE	01/24/17
	COI recused from participation	N/A	01/24/17
	SRC Meeting	01/12/17	01/24/17
	Third Party Observer Report	01/17/17	01/24/17
	Recommended for grant award	YES	01/24/17
	SRC Chair Notification to PIC and OC	01/25/17	01/24/17
5. PIC Review	Applicant not accepted employment prior to SRC date	YES	01/31/17
	COI indicated by PIC member	NONE	01/31/17
	COI recused from participation	N/A	01/31/17
	PIC review meeting	01/31/17	01/31/17
	Recommended for grant award	YES	01/31/17
6. Oversight Committee Approval	CEO Notification to Oversight Committee	DATE	
	COI indicated by Oversight Committee member	NAME or NONE	
	COI recused from participation	YES/NO or N/A	
	Donation(s) made to CPRIT/foundation	YES/NO	
	Presented to CPRIT Oversight Committee	DATE	
	Award approved by Oversight Committee	YES/NO	
	Authority to advance funds requested	YES/NO	
	Advance authority approved by Oversight Committee	YES/NO	

The identity of the attesting part is retained by CPRIT.