Prostate Cancer Disparities Project
American Cancer Society and Pfizer Global Medical Grants

Chronic Disease Prevention and Control Division
Community Initiatives Bureau

July 7th, 2020
I. Overview

The Boston Public Health Commission (BPHC) is the local public health department for the City of Boston. BPHC’s mission is to protect, preserve, and promote the health and well-being of all Boston residents, particularly the most vulnerable.

The BPHC Chronic Disease Prevention and Control Division is applying for a grant to address vulnerable populations and prostate health from the American Cancer Society/Pfizer. The goal of our initiative is to work with quality improvement and clinical staff at a community health center that predominately serves a Black patient population to implement a model of tailored prostate cancer screening for individual patients according to their risk. This scalable model is based on guidelines, patient population and workflow/capacity dynamics, and can be customized for any community based health center (CHC.)

Prostate cancer is the most commonly diagnosed cancer, and the second leading cause of cancer-related death, among male residents in Boston. Black men in Boston bear a significantly disproportionate burden from prostate cancer based on incidence and mortality compared to White men, with rates in each category higher than those for the State and the nation. Data show that Black men are also more likely to be diagnosed at younger ages and with more aggressive disease than men of other races.

Prostate cancer screening with PSA is currently the only test available to aid in early detection, but it continues to be controversial. Evidence shows, however, that for all men, baseline PSA testing before age 50 is stronger than race or family history in predicting aggressive disease. As such, baseline testing results can determine screening intervals for individual patients as part of a risk-based approach to prostate cancer early detection. Risk-based prostate cancer early detection can potentially improve outcomes for high-risk men and mitigate overtreatment of low-risk men. For men that are eligible based on USPSTP guidelines, prostate cancer screening rates are low, and fell further for Black men than for men of other races after the USPSTF D recommendation was issued in 2012. In 2018, the USPSTF changed their recommendation to C, stressing the importance of men talking with their doctor to help make the decision about whether to be screened.

Our model will address care-level issues including unbundling SDM (shared decision-making) from physicians, baseline testing for all men 40 years of age and older, tailoring subsequent screening intervals based on results at baseline, and individualizing referral to urology thresholds based on PSA trends and other factors. Further, the model will require changes to the health center’s EHR system so that SDM, family history, screening results, follow-up and other associated conditions and activity are aggregated and included in the patient’s medical record.

Scalability and replication of this model will lead to standardization of both public messaging and clinical practice. This is an important step in mitigating confusion around how men should be managing their health as relates to one of the most common and most deadly cancers for men. This will be especially beneficial for Black men, who suffer disproportionately. The mortality disparity from prostate cancer for Black men compared to White men is the largest disparity for major cancers.

BPHC’s Equitable Procurement Policy encourages Certified Underrepresented Business Enterprises (CUBEs) to participate in the request for proposals.
II. Scope of Work

The Community Health Center must commit to the following:

1. Work with BPHC Grants Office and program staff to complete the proposal.
2. Design and implement a prostate cancer early detection workflow that includes staff training, patient education, baseline PSA testing, additional PSA testing at specified intervals, and referrals to urology.
   a. Staff training: Work with BPHC Program Manager to identify the preferred approach to delivering shared decision making in the CHC setting
   b. Patient education: CHC provides patient education on prostate health, PSA screening, prostate cancer risk, how to interpret results, when to be referred to urologist
   c. Baseline PSA testing: Complete PSA test for patient. After screening follow-up on what the results are, how to interpret the results, and next steps
3. Imbed new data fields into EHR with patient results and recommendations for follow-up.
4. Reporting:
   (1) Selected CHC will provide patient level demographic and clinical data for process, outcomes and disparity measurements and comparisons:
      a. CHC sites currently connected to Azara DRVS can authorize the Massachusetts League of Community Health Centers (MLCHC) to access and provide data.
      b. CHC sites not connected to Azara DRVS, or for EHR data needs outside of the DRVS connection, CHCs can receive free assistance from the MLCHC to configure EHR exports or work with your vendors for customization needs.
   (2) Comply with grant activities reporting requirements- TBD upon successful funding of application
### III. RFP Timeline

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<tr>
<th>Date</th>
<th>Event Description</th>
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<tbody>
<tr>
<td>Sunday, July 12, 2020</td>
<td>RFP Legal Notice publication in The Boston Globe</td>
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<tr>
<td>Monday, July 13, 2020</td>
<td>RFP available online at <a href="http://www.bphc.org/RFP">www.bphc.org/RFP</a> by 10:00 AM EST. RFP will also be disseminated via e-mail to relevant networks</td>
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<tr>
<td>Friday, July 17, 2020</td>
<td>Questions due in writing by 5:00 PM EST to: Mark Kennedy at email <a href="mailto:MKennedy@bphc.org">MKennedy@bphc.org</a> Subject – Prostate Health RFP</td>
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<td>Wednesday, July 22, 2020</td>
<td>Responses to questions available for viewing on <a href="http://www.bphc.org/RFP">www.bphc.org/RFP</a> by 4:00 PM EST</td>
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<tr>
<td>Monday, July 27, 2020</td>
<td>RFP due by 5:00 PM EST Submit as one PDF document via email to <a href="mailto:Procurement@bphc.org">Procurement@bphc.org</a> Subject line – “Company Name” RFP For Prostate Health</td>
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<tr>
<td>Monday, August 3, 2020</td>
<td>Notification of Decision: Selected candidate will be notified by or before 5:00 PM EST of the award.</td>
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<tr>
<td>Thursday, August 13, 2020</td>
<td>Application due to the American Society/Pfizer.</td>
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IV. Minimum Qualifications

- Must be a community health center located in Boston
- Must serve a predominantly Black population
- Must commit to deliverables listed above in Scope of Work.

IV. Proposal Requirements

Please prepare a proposal with the following Information. Proposal should be no longer than 5 typed pages, single spaced, 12-point font, standard 1-inch margins and as only one PDF file.

1. History of your organization, including mission, programs offered, and population served. (30 points)

2. Experience in addressing prostate cancer or other similar diseases. (30 points)

3. Describe current electronic health record capabilities. (20 points)

4. Budget - Please submit a detailed line item budget and narrative for no more than $100,000. Costs can include personnel, technology and administrative costs up to 25% (20 points.)

V. Period of Performance and Location

This award is contingent on the BPHC receiving funding from the American Cancer Society/Pfizer.

The initial period of performance shall be the date of contract execution (from approximately Monday August 3rd through Thursday August 13th). If funded the period of performance is anticipated to be April 2021 to March 2023 (project may be shorter but not longer than two years.)
VI. Submission Instructions

Please submit your Proposal before Monday, July 27, 2020 due by **5:00 PM EST** - Submit via email to [Procurement@bphc.org](mailto:Procurement@bphc.org)

Subject line – “Company Name” RFP For Prostate Health

Questions shall be submitted via email to [MKennedy@bphc.org](mailto:MKennedy@bphc.org) by 5:00 PM on Friday, July 17, 2020 with Subject Line named: Prostate Health RFP.

Additional Instructions:

1. No information responding to questions or requirements within the RFP should be included in the body of the email.

2. No other recipient should be cc or bcc in the email submission.

**NO EXCEPTIONS TO THIS DEADLINE, Monday, July 27, 2020 by 5:00 PM EST**