Common Mistake	Why It's an Issue	Fix
"The CCC program will provide patient navigation services."	NCCCP funds systems change and coordination, not direct clinical services. This wording can make it sound unallowable.	*"The CCC program will collaborate with partners to strengthen patient navigation systems that improve access to cancer care."*
Describing navigation only as helping individual patients	CCC programs operate at the population and systems level, not individual service delivery.	Describe navigation as strengthening **systems and infrastructure** that support many patients.
Only mentioning screening	CDC expects programs to address the full cancer continuum.	Show navigation impact across **screening, diagnosis, treatment, and survivorship**.
Vague activities like *"support navigation"*	Reviewers cannot tell what the program is actually doing.	Specify actions like *convene partners, improve referral processes, support training*.
No measurable outputs	Makes it difficult to evaluate progress or demonstrate impact.	Add outputs like *partners engaged, navigators trained, referral systems improved*.
No connection to outcomes	Activity alone does not show value without impact.	Connect to outcomes like *improved follow-up rates or reduced time to diagnosis*.
No mention of CCC role	It becomes unclear why CCC funding is needed.	Show CCC as the **convener, coordinator, or backbone organization**.
No health equity connection	NCCCP prioritizes reducing disparities; missing this weakens alignment.	Include priority populations and barriers being addressed.
No connection to the State Cancer Plan	CCC programs are expected to implement their cancer plan.	Reference which cancer plan goal or strategy this supports.

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Describing navigation as a standalone program	Makes navigation sound isolated instead of strategic.	Position navigation as an **evidence-based implementation strategy**.
No systems language	Weakens alignment with NCCCP expectations.	Add terms like *care coordination, infrastructure, partnerships, access*.
No partner description	CCC programs are partnership driven.	Identify partners such as *health systems, FQHCs, and community organizations*.
Activity focused only	Leaves out the logic model connection.	Add **activity** → **output** → **outcome** connection.
Using general language like *"improve navigation"*	Too vague to measure or evaluate.	Use specific language like *improve referral coordination and reduce time to diagnosis*.
No sustainability framing	Need to show long-term impact beyond the funding period.	Add language about *capacity building and sustainable systems*