2017-2019 Request for Applications (RFA) for Local Community-based and Minority-based Capacity Building Partnerships in Tobacco Prevention and Cessation

The Indiana State Department of Health’s Tobacco Prevention and Cessation Commission (TPC) seeks to fund grantees as local community-based and minority-based partnerships of Indiana’s tobacco prevention and cessation program. TPC wants to ensure that as many counties as possible conduct tobacco control programs in Indiana. No one single agency type has been selected as the Lead Agency for the community-based and minority-based programs. TPC recognizes that different organizations may assume this responsibility in different counties; therefore, coalitions must select one organization to serve as the lead agency. Capacity building grants will not be guaranteed for each and every county.

This RFA is an invitation for communities to join together to make the Indiana Tobacco Prevention and Cessation Commission’s vision... To significantly improve the health of Hoosiers and to reduce the disease and economic burden tobacco use places on Hoosiers of all ages...a reality for the State of Indiana.

This RFA is based on the objectives and strategies outlined in the Indiana Tobacco Control Strategic Plan. Coalitions should refer to TPC’s 2017-2019 Request for Application Workshop folder for additional resources. TPC reserves the right to correct any errors in and/or omissions in the RFA.

TPC is interested in the following Priority Areas:

- Decrease youth tobacco use rates
- Increase proportion of Hoosiers not exposed to secondhand smoke
- Decrease adult smoking rates
- Maintain a state and local infrastructure necessary to lower tobacco use rates

APPLICANT ELIGIBILITY

A public or private entity, state or local government entity as well as a public or private minority entity may apply as an agency for the capacity building grant with the TPC program. A minority entity is defined as an entity that is controlled by one (1) or more persons who are: (A) United States citizens; and (B) members of a minority group. "Minority group" means the following: (A) Blacks, (B) American Indians, (C) Hispanics, (D) Asian Americans, (E) Other similar minority groups as defined by 13 CFR 124.103. "Controlled" means having direct control over the management and active in the day-to-day operations of the entity.

TPC will accept more than one capacity building grant application per county.

A 2015-2017 lead agency cannot apply for a 2017-2019 capacity building grant within the county in which there was a grant during 2015-2017. The purpose of the Capacity Building Grant application is to bring in local partnerships for tobacco prevention and cessation that are not currently funded. The
two-year capacity grant will allow for new partnerships to fully develop a local coalition and learn evidence based tobacco control practices.

**What is a Lead Agency?**

- **The Lead Agency is the Fiscal Agent.** A separate Fiscal Agent and Lead Agency is not allowed.

- **The Lead Agency must have a Federal Identification Number.** In order to receive grant funds, the Federal Identification Number used must be registered to the Lead Agency. TPC will not accept a Lead Agency using another organization’s Federal Identification Number.

**Lead Agency Responsibilities**

**Financial Responsibilities**

- Serve as the fiscal officer for the grant
- Submit Monthly or Quarterly Invoices and Quarterly Fiscal Reports by due dates
- Respond timely to periodic information requests
- Be registered with the Indiana Secretary of State
- Fulfill the terms of the contract
- Establish a separate account or ledger for grant funds to ensure that TPC funds are not commingled with other funds
- Participate in monitoring engagement to review fiscal compliance
- Conduct an audit to be paid by grant recipient (if required by law)
- Provide additional financial information if requested

**Programmatic Responsibilities**

- Participate actively in the preparation of the work plan
- Ensure that the Lead Agency is educated on tobacco control best practices
- Demonstrate collaboration with other key partners in the preparation of the work plan
- Agree to serve as the key contact point for required reporting to TPC
- Submit Monthly Program Reports by due dates
- In the temporary absence of a coalition coordinator, ensure that the Lead Agency is represented at coalition meetings, training events, conference calls and cluster meetings
- Assure that all grant related staff (coalition coordinator) participate in all TPC training events
- Participate in all evaluation and accountability activities including monitoring of subcontracts
- Respond timely to periodic information requests
- Promote and conduct the Youth Tobacco Survey data collection. Disseminate results to school administrators
- Designate an in-house Lead Agency staff person to serve as the Supervisor for the Coordinator. Coordinator will report directly to the Lead Agency staff person.

**Lead Agency and Coalition Responsibilities**

Although the Lead Agency plays a critical coordination and leadership role in the implementation of this grant, the coalition and related partners are the local Community Program. It is through the collaborative effort of this diverse group of committed organizations, and its resources, that work is accomplished and goals met. Coalition members are responsible for selecting the Lead Agency. The Lead Agency is responsible for supporting the coalition throughout the grant. The Lead Agency should be an active member of the coalition.
The coalition and its member organizations will carry out many of the activities outlined in the RFA; therefore, the Lead Agency plays an essential role in providing staff time and support to the coalition. The Lead Agency must:

- Assure that a qualified coalition coordinator is employed full or part time to this program. Additional staff may be hired in future RFA cycles based on the needs of the coalition and the work plan.
- Assure that resources are available for the coalition that may include meeting accommodations and notices, logistical assistance and other necessary support.
- Assure that hours billed to this grant for staff time are devoted solely to working on the approved work plan.
- Assure that a communication mechanism is developed and maintained to keep coalition members informed of activities and events.
- Assure that the coalition’s member organizations are provided opportunities to develop specific experience in tobacco prevention and cessation interventions.

**Coalition Training Requirements**

Program staff must attend required TPC conferences, meetings, and training sessions. Attending required training sessions and conferences is critical for building and maintaining the skills of the staff with responsibility for carrying out the program requirements and is a term and condition of this application. Program staff will accept technical assistance from TPC throughout the course of the grant period to implement their respective work plan. Program staff are required to participate in, at minimum:

- **Conference Calls:** All grantees are required to participate in all scheduled partnership conference calls (monthly).

- **New Coordinator Training Program:** All new coordinators are required to participate in the TPC Coordinator Training Program, including but not limited to Tobacco 101, Media & Policy Advocacy training, and the Coordinator-to-Coordinator (C2C) mentoring program.

- **Regional Meetings and/or Cluster Meetings:** Regional meetings scheduled for 2017-2019 (quarterly).

- **Partner Information Exchange:** 1 to 2 day statewide conference for program staff and coalition members (one per grant cycle).

- **A minimum of four (4) optional TPC trainings sessions** (scheduled as needed).

**Training Performance Measure**

Evidence of attendance at required TPC conferences, meetings, conference calls, and training sessions will be required. The proportion of TPC partners receiving training is a TPC commission metric submitted quarterly to the Indiana State Department of Health’s Office of Public Health Performance Management (OPHPM).
TPC RESPONSIBILITIES

- **Fiscal Responsibilities**
  - Indiana State Department of Health Tobacco Prevention and Cessation Commission (TPC) will monitor the fiscal process for each contract
  - Review and approve contracts
  - Receive and monitor required fiscal reports
  - Provide training and technical assistance to contract agencies to assure compliance with fiscal rules and procedures to contract staff and to help manage budgets

- **Programmatic Responsibilities**
  - Guide the program process by providing priorities for action
  - Review goals, work plan activities and outcomes of coalition action using monthly program reports, throughout the contract
  - Provide technical assistance and training throughout the contract using site visits, telephone, written communication, online trainings, and electronic materials and information tools
  - Provide management through assigned TPC program staff
  - Communicate current tobacco control events at the international, national, state and local levels

GRANT DESCRIPTION

The grant consists of four sections with several forms and attachments. See Page 10 for Application Checklist.

1. The **Administration** section outlines and requires completion of the Cover Sheet and Lead Agency Profile.

2. The **Coalition Assessment** section addresses how the coalition plans to build and maintain a partnership across diverse sectors of the community in order to develop a broad-based coalition of support for social norm changes related to tobacco control policy change. A portion of this section is devoted to identifying and assessing the disparately-affected population groups in the community.

3. The **2017-2019 Work Plan** section includes the work plan forms. Required community indicators are: Point-of-Sale, Tobacco-free Schools, Multi-Unit Housing, Quitline and Coalition (see page 8).

4. The **Budget** section describes the operation costs to conduct tobacco control programming and development of strategic work plan through June 30, 2019. A budget narrative with detailed descriptions must be included.

A job description for ALL persons paid through the TPC Grant must be included in this section.
FUNDING AND BUDGETING

This contract period covers State Fiscal Years 2018 and 2019. The contract period starts on October 1, 2017 and ends on June 30, 2019.

Local Capacity Building grants will not be guaranteed for each county. There will not be a guaranteed allotment or a funding range for each county. However, as a guide for planning purposes capacity building grantees might budget for $50,000 to $100,000 for the two-year grant. Budget requests should reflect the needs of the community, the amount of work proposed in the work plan, and resources needed to be successful. The size of the county’s population will be a strong consideration. Applications will be reviewed through a competitive process. All grants are contingent upon the availability of funding.

The Lead Agency serves as the Fiscal Agent; the Fiscal Agent is the Lead Agency. TPC will execute the contract with the lead agency and this organization bears the fiduciary responsibility over both the program activities and funding received. Funds will be paid to the Lead Agency monthly upon receipt of invoice.

Lead Agencies will be required to sign the contract, submit the IRS W9 form and Direct Deposit Authorization, and complete an on-line Bidder Registration, prior to receiving any funding. All non-governmental entities are required to submit audited financial statements. All funds paid by TPC will be directly deposited into the Lead Agency’s bank account.

All grants are contingent upon the availability of funding. “When the Director of the State Budget Agency makes a written determination that funds are not appropriated or otherwise available to support continuation of performance of this contract, the contract shall be canceled. A determination by the Director of the State Budget Agency that funds are not appropriated or otherwise available to support continuation of performance shall be final and conclusive.” Financial Management Circular #2007-1.
SUBMITTING AN APPLICATION

The completed application forms and all attachments must be submitted electronically via email at TPCApplications@isdh.in.gov and must be received by midnight EST on Monday, July 31, 2017.

APPLICATIONS WILL ONLY BE ACCEPTED AT THE EMAIL ADDRESS ABOVE.

REVIEW PROCESS

A Team consisting of members of the ISDH, TPC staff, and state and national tobacco control experts will review the proposals. The Review Team will evaluate proposals to ensure that each proposal meets the minimum requirements of this grant application, and will then submit funding recommendations to the ISDH for final approval.

Applications will be reviewed using the following criteria:

- Potential for community-wide impact
- Maximize limited funds
- Approach to coalition building and maintenance
- Partnership approach to achieving objectives
- Input from community partners in writing work plan
- Leadership and capacity of the Lead Agency
- Focus on policy and systems change
- Appropriateness of the budget
- Meets all contract requirements
- Thorough, focused work plans
- Appropriateness of the subcontract proposals, if used

TPC reserves the right to require additional materials to substantiate any claim made in the application and during the grant cycle.
<table>
<thead>
<tr>
<th>Date</th>
<th>Event</th>
</tr>
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<tbody>
<tr>
<td>June 12, 2017</td>
<td>RFA re-released on <a href="https://www.tpc.gov">TPC website</a></td>
</tr>
</tbody>
</table>
| Wednesday, June 21, 2017 | Government Center South Conference Center  
|                        | 302 W. Washington St. Indianapolis, IN 46204  
|                        | Room D  
|                        | 1-4pm  
|                       | Parking Instructions: The Washington Street Parking Garage entrance is on the east side of the building, accessible via Missouri Street. Public parking is available as space permits. Parking is also available in the Circle Center Mall parking garages.  
|                       | Please register [here](https://www.tpc.gov)                         |
|                       | Feel free to refer to the Frequently asked Questions document currently posted on TPC’s website. |
| June 28, 2017         | Deadline to submit questions in writing to [sgriewank@isdh.in.gov](mailto:sgriewank@isdh.in.gov) |
| July 6, 2017          | Responses to questions posted on the TPC website                     |
| July 31, 2017 before Midnight | Completed Applications due to TPC at [TPCAplications@isdh.in.gov](mailto:TPCAplications@isdh.in.gov) |
| Week of August 7, 2017 | Evaluation by TPC Review Team                                       |
| August 2017           | Target date for award announcements and contract negotiations        |
Contract Requirements

The following are requirements for funding for all TPC local capacity building grants. The Coalition Coordinator and Lead Agency must:

Work on the following Indicators and their corresponding Contract Deliverables

- **Point-of-Sale**: Extent of broad-based community support for tobacco point-of-sale strategies at the local level.
- **Tobacco-free Schools**: Proportion of school districts with comprehensive tobacco-free campuses.
- **Multi-Unit Housing**: Proportion of comprehensive smoke-free policies in multi-unit housing, including public housing and privately-owned multi-resident buildings.
- **Quitline**: Extent of utilization of the Indiana Tobacco Quitline throughout the community.
- **Coalition**: Extent of participation by partners within the broad-based coalition.

Submit complete and accurate invoices, quarterly fiscal reports, and monthly program reports by the due date.

Administer the 2018 Indiana Youth Health Survey and/or Youth Tobacco Survey in local or surrounding schools, if selected. This may include schools in neighboring counties.

Participate in all required TPC conferences, meetings, training sessions, webinars/webcasts, and conference calls. Program staff will accept technical assistance from TPC throughout the course of the grant period to implement their respective work plan. All new coordinators are required to participate in the TPC Coordinator Training Program. See the Training and Technical Assistance document for detailed information.

Collaborate with TPC statewide and national partners on initiatives when appropriate and as directed. Projects to be awarded July 1, 2017. For a list of current statewide partners and description of projects, visit [http://www.in.gov/itpc/2349.htm](http://www.in.gov/itpc/2349.htm).

When working with organizations such as school districts, hospital systems, behavioral health centers, college and university campuses, and other workplaces on tobacco-related policy change in addition to city and county ordinances, *model policies* provided by TPC must be used.

Provide TPC with a copy of all newly-passed tobacco-free policies, including but not limited to the following settings: school district, university/college, behavioral health center, public housing and other multi-family housing, hospital campus, and community health centers.

When a local smoke-free air ordinance passes or is amended, provide TPC with a copy of the signed and filed (“official”) community smoke-free air ordinance.

Adhere to TPC communication requirements, which includes completing and maintaining a communications plan (see Recommended Communication Outreach reference page as a guide) and using all media materials, such as swiss cheese press releases or media advisories, that TPC instructs partners to customize and distribute to local media outlets.

Identify and educate local policymakers about how tobacco companies target disparately affected populations.
Demonstrate collaboration throughout the work plan with TPC funded minority-based or community-based partnership(s) in your community, if applicable.

Respond in a timely manner to ALL information and data requests from TPC throughout the duration of the grant cycle.

Submit all required forms upon award notification for timely contract execution. Forms include: Fundamentals of Smoke-free Air Policy, Brand Use Agreement, W9, and direct deposit form. In addition, lead agencies must register with the State of Indiana’s online Bidder Registration (this will be provided by the ISDH Finance Department upon award notification).
# APPLICATION CHECKLIST

<table>
<thead>
<tr>
<th>APPLICATION SECTION</th>
<th>COMPONENTS</th>
<th>INCLUDED</th>
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<tbody>
<tr>
<td>Administration</td>
<td>Cover Sheet and Lead Agency Profile</td>
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<tr>
<td>Coalition Assessment</td>
<td>Coalition Assessment Form</td>
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<tr>
<td>2017-2019 Work plan</td>
<td>Work plan forms</td>
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<tr>
<td><strong>Budget</strong></td>
<td>Budget Worksheet Form</td>
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<td>Budget Narrative Form</td>
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<td>Scope of Work Form</td>
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<td>Audited financial statements, if applicable</td>
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<td>Subcontract Forms, if applicable</td>
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<td>TPC Declarations Form-signed</td>
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<tr>
<td></td>
<td>Job Description of Program Coordinator (and any other employee paid by the TPC grant)</td>
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Application Forms

Section 1: Administration

This section outlines the Lead Agency’s capacity to administer the SFY 2017-2019 grant. Be succinct but demonstrate the Lead Agency’s ability to oversee the grant.

Forms to complete in this section:

- Application Cover Sheet and Lead Agency Profile
  - Note: at least three different signatures from an organization are required on the Application Cover Sheet.
Tobacco Prevention and Cessation Program
October 2017–June 2019

Application for Local Capacity Building Partnerships

Lead Agency Information

Lead Agency Name:
County:
Lead Agency Contact, Director or CEO:
Address:
City: Zip Code:
Telephone:
Fax:
Email:
Federal Identification Number:
****please only include your FID# on the original application***

Signature of Lead Agency Contact: ____________________________________________

Primary Contact Information

Primary Contact to TPC:
Primary Contact Address if different from above:
City: Zip Code:
Telephone:
Fax:
Email:

Signature of Primary Contact: ____________________________________________
Primary Contact Supervisor Information – Lead Agency Employee

Primary Contact’s Direct Supervisor:  
Supervisor Address if different from above:  
City:  
Zip Code:  
Telephone:  
Fax:  
Email:  

Signature of Primary Contact’s Direct Supervisor: ________________________________

Lead Agency Financial Contact Person Information – Lead Agency Employee

Lead Agency Financial Contact Person:  
Address if different from above:  
City:  
Zip Code:  
Telephone:  
Fax:  
Email:  

Signature of Lead Agency Financial Contact Person: ________________________________

Proposal Information

Total Funding requested $  

Priority consideration will be given to applications demonstrating sufficient operating capacity to appropriately segregate duties and responsibilities.
Lead Agency Profile Form

1. Provide a brief history of the agency, including the agency’s role in the community.

2. Why are you interested in tobacco control? Why are you the best lead agency?

3. What is the “added value” of this grant to your community?

4. Describe the Lead Agency experience with tobacco control (if applicable).

5. Please identify potential limitations (challenges/barriers), both internal and external.

6. Is there a coordinator for this program? _____ Yes _____ No

   If no, please describe the process by which the agency will hire a coordinator for this grant project.

7. Describe how the program is to be organized, staffed and managed. Include the following:
   a. An organizational chart indicating where the staff for this project will be placed
   b. To whom does the coordinator report within the Lead Agency
   c. List the normal working hours for the coordinator and any other staff paid through this grant.

8. Does the Lead Agency accept funds or other resources from any tobacco company, any of its subsidiaries or parent company? _____ No _____ Yes: Please describe:

9. Does the Lead Agency provide insurance coverage or other support for tobacco dependence treatment (smoking cessation) for employees? _____ No _____ Yes: Please describe:

10. Attach a copy of the Lead Agency’s tobacco-free grounds policy.
11. Please acknowledge each of the Lead Agency responsibilities listed below by placing a check mark or “x” on the line. As fiscal agent, the Lead Agency must:

**Financial Capabilities**

- ___ Serve as fiscal officer for the grant
- ___ Have a Federal Identification Number. In order to receive grant funds, the Federal Identification Number must be registered to the Lead Agency
- ___ Submit Monthly Invoices, Quarterly Fiscal Reports, and Monthly Program Reports by due dates
- ___ Respond timely to periodic information requests
- ___ Register with the Indiana Secretary of State
- ___ Fulfill the terms of the contract
- ___ Establish a separate account or ledger for grant funds
- ___ Participate in monitoring engagement
- ___ Conduct an audit to be paid by grant recipient (if required by law)
- ___ Additional financial information may be requested from all applicants

**Programmatic Capabilities**

- ___ Participate actively in the preparation of the work plan
- ___ Ensure that the Lead Agency is educated on tobacco control Best Practices
- ___ Actively participate in the coalition, with representation from the Lead Agency other than the coalition coordinator
- ___ Demonstrate collaborations with other key partners in the preparation of the work plan
- ___ Agree to serve as the point of contact for required reporting to TPC
- ___ In the absence of a coalition coordinator, ensure that the Lead Agency is represented at TPC partner meetings, trainings, conference calls, cluster meetings, and community assessments
- ___ Assure that all grant-related staff (coalition coordinator) participate in all training events
- ___ Participate in all evaluation and accountability activities
- ___ Participate in Youth Tobacco Survey data collection and dissemination of results
- ___ Provide in-house employee to serve as immediate supervisor to the tobacco coalition coordinator
- ___ Respond timely to periodic information requests

**Coalition Capabilities**

- ___ Assure that a qualified coalition coordinator is employed full or part time to this grant program. Additional staff may be hired based on the needs of the coalition
- ___ Assure that resources are available for the coalition. That may include meeting accommodations and notices, logistical assistance, etc.
- ___ Assure that a communication mechanism is developed and maintained to keep coalition members informed of activities and events
- ___ Assume that the coalition’s member organizations are provided opportunities to develop specific experience in tobacco prevention and cessation interventions

**Director of the Lead Agency**

Signature_____________________________________________Date__________________

Printed or Typed Name and Title
Section 2: Coalition Assessment

This section of the application addresses how the coalition plans to build and maintain a partnership across diverse sectors of the community in order to sustain a broad-based coalition of support for social norm changes related to tobacco control.

Forms to be completed in this section:

- Coalition Assessment

Assessment: *(Please respond to the following 5 questions in paragraph form)*

1. How would you describe your community?

2. Explain the burden of tobacco in your community.

3. Describe a community level collaboration facilitated by the lead agency within the last 2 years.

4. How do you plan to identify new partnerships and build on existing partnerships to form a tobacco control coalition? Be specific.

5. List specific organizations you would target to build the coalition. Be sure to consider organizations that serve priority populations.
Section 3: Work Plan

TPC is interested in the following Priority Areas:

- Decrease youth tobacco use rates
- Increase proportion of Hoosiers not exposed to secondhand smoke
- Decrease adult smoking rates
- Maintain a state and local infrastructure necessary to lower tobacco use rates

Community Indicators

- Community Indicators provide strategies that work to achieve the program’s priority areas. Based on the community indicators in the submitted work plan, specific outcomes must be demonstrated throughout and at the end of the contract period. For each community indicator there is an expected outcome and a list of contract deliverables specific for the capacity building grant period. These are the minimum expectations and can be further refined upon award and technical assistance provided by TPC.
- SMART Objective – A SMART Objective is Specific, Measureable, Achievable, Results-oriented, and Time-limited. It states where you started, where you are going, when you plan to arrive, and how you will know you have arrived. Reference SMART Objective resource.

The work plan should include a SMART Objective for the indicator and describe the coalition’s vision for building capacity during the 2017-2019 grant cycle.

<table>
<thead>
<tr>
<th>Point-of-Sale (Indicator #3) – Extent of broad-based community support for tobacco Point-of-Sale (POS) strategies at the local level</th>
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</thead>
<tbody>
<tr>
<td><strong>Expected Outcome:</strong> Educate the community on tobacco Point-of-Sale advertising</td>
</tr>
<tr>
<td><strong>SMART Objective for indicator:</strong></td>
</tr>
<tr>
<td>Describe vision to meet deliverables (below) for 2017-2019:</td>
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</tbody>
</table>

**Deliverables:**

1. Participate in Standardized Tobacco Assessment of Retail Settings (STARS) annual survey to collect county-level data on tobacco products and point-of-sale advertising in retail establishments.

2. Conduct youth and adult-focused presentations on how tobacco products are priced and marketed to target teens. Appropriate audiences may include youth ages 12-18 years, youth-serving organizations, internal and external partners including coalition members and lead agencies, and key decision makers in the community.

3. Provide education to the coalition regarding tobacco related Point-of-Sale strategies.
Tobacco-free Schools (Indicator #7): Proportion of school districts with comprehensive tobacco-free campuses

**Expected Outcome:** Ensure all school districts in your county have a comprehensive tobacco-free grounds policy including Electronic cigarettes/smoking devices.

**SMART Objective for indicator:**

Describe vision to meet deliverables (below) for 2017-2019:

**Deliverables:**

1. Conduct at least four adult-focused presentations on other tobacco products (OTP) including Electronic cigarettes/smoking devices and the importance of a comprehensive tobacco-free school district policy. Presentations could be to school teachers, staff, administration and parents.

2. If the school district does not have a comprehensive tobacco free policy including Electronic cigarettes/smoking devices, assist the school corporation in developing and passing a comprehensive policy.

*(Please review the policy lists for schools listed on the TPC website ([http://www.in.gov/isdh/tpc/2333.htm](http://www.in.gov/isdh/tpc/2333.htm)) for accuracy. Provide any revisions or updates.)*
Multi-Unit Housing (Indicator #8) – Proportion of comprehensive smoke-free policies in Multi-Unit Housing, including public housing and market rate multi-resident buildings.

**Expected Outcome:** Increase the number of housing properties that protect residents from secondhand smoke exposure

**SMART Objective for indicator:**

Describe vision to meet deliverables (below) for 2017-2019:

**Deliverables:**

1. Assist with the implementation of the smoke free policy required by the U.S. Housing and Urban Development (HUD) office by providing resources including Indiana Tobacco Quitline materials.

2. Conduct at least four presentations to the public housing authority board, other multi-unit management, or trade associations on the dangers of exposure to secondhand smoke and the importance of smoke-free policies; use the toolkits and other resources received from the smoke-free public housing trainings.

3. Implement smoke-free policies in multi-unit housing complexes (public and market rate)

*(Please refer to insmokefreehousing.com for additional information.)*

Quitline (Indicator #11) – Extent of utilization of the Indiana Tobacco Quitline (ITQL) throughout the community

**Expected Outcome:** Build a network of healthcare providers that routinely refer tobacco users to the Indiana Tobacco Quitline

**SMART Objective for indicator:**

Describe vision to meet deliverables (below) for 2017-2019:

**Deliverables:**

1. Manage the Quit Now Indiana Preferred Provider Network list by conducting **ALL** of the following on-going activities:
   o Outreach with all new contacts on the Quit Now Indiana Preferred Provider Network list to determine interest level and intensity of follow up needed (new contacts provided monthly)
   o Intense outreach to Quit Now Indiana Preferred Provider Network members with a high interest level through on-going follow-up (by phone or in person)
   o Track outreach to Quit Now Indiana Preferred Provider Network and quitline referrals from providers contacted
<table>
<thead>
<tr>
<th><strong>Coalition (Indicator #14) – Extent of participation by partners within the broad-based coalition.</strong></th>
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</thead>
<tbody>
<tr>
<td><strong>Expected Outcome:</strong> Build a robust coalition representing all sectors of the community</td>
</tr>
<tr>
<td><strong>SMART Objective for indicator:</strong></td>
</tr>
<tr>
<td>Describe vision to meet deliverables (below) for 2017-2019:</td>
</tr>
<tr>
<td><strong>Deliverables:</strong></td>
</tr>
<tr>
<td>1. Conduct the first steps of building a tobacco control coalition.</td>
</tr>
<tr>
<td>2. Conduct face-to-face meetings or key informant interviews with a prospective coalition member or partner in order to recruit from sectors of the community not well represented on the coalition.</td>
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<tr>
<td>3. Hold regularly scheduled meetings (monthly is recommended)</td>
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<tr>
<td>4. Send thank you letter to policy makers and provide regular education on tobacco control issues</td>
</tr>
</tbody>
</table>

*(Please refer to “Steps to Successful Coalition Building” for additional information on identifying sectors in the community.)*
Section 4: Budget

The section describes the operation costs to continue tobacco control programming through June 30, 2019.

Forms to be completed in this section:

• Budget Worksheet Form
• Budget Narrative Form
• Scope of Work Form

Attachments included in this section:

1. Audited financial statements (required for all non-governmental entities).
2. Subcontract forms for all subcontracts to be executed, if applicable.
3. TPC Declarations Form
4. Job Description

Reminder: Provide a written Job Description for all positions funded through this grant. Submission of a resume does not replace the job description requirement.

NOTE: The submitted budget is not the final budget. The final budget must be approved by the Regional Director and Contracts Administrator subsequent to the submission and approval of this application.
BUDGET EXPLANATION

Description of Budget Line Items

The following line items should be included. Use the budget form provided or a similar format. Explanation of budget items must be submitted using the Budget Narrative form.

1. Personnel
   a. Salaries and Wages
      For each staff position proposed, include the title of the position, percentage of time (FTE), annual salary, number of years salary requested, and a summary of the job description or responsibilities. Staff position(s) paid by community- or minority-based partnership funds must be dedicated only to approved tobacco use prevention activities in the work plan. Full-time employees may not have another full-time position outside of the TPC grant. TPC does not recommend that a lead agency employ a part-time person to do tobacco control work funded by this grant that currently has another full-time position. The position requires personnel to attend mandatory activities during the day and periodically during evening hours. TPC does not take exception to an incumbent employed by the grant that works two part-time positions; part-time position is defined as 20 hours or less per week or as defined by the lead agency. Variations from strict full-time (37.5 to 40 hours/week or as defined by lead agency) or part-time assignments (20 hours or less per week, or as defined by lead agency) must be reviewed and approved on a case-by-case basis.

      Tobacco programming activities must occur during the calendar quarter for which the staff is being paid salaries and wages. Paid staff must document hours worked and summarize activities performed on a daily log. Salaries and wages paid to staff must be for hours worked in the same calendar quarter and evidenced by the daily log.

      Salary and wage increases for staff are effective only after an individual has worked toward approved plan goals for more than 12 months. A cap on annual salary increases is limited to the consumer price index – all urban consumers, as published by the U.S. Department of Labor, Bureau of Labor Statistics Data (www.bls.gov) or 3% of the current approved salary and wages, whichever percentage is less. Please apply the percentage, not to exceed the 3% limit, as applicable, by checking the year and month that corresponds with the one-year anniversary of the staff person in question. Please remember that the earliest date staff could have been actively employed is the initial term date on the grant contract. The final signature date is the date the contract is considered fully executed, the date the contract is signed by the Indiana State Attorney General’s office.

   b. Fringe Benefits
      For each position, indicate the rate and compute the amount charged for fringe benefits usually and customarily provided by the Lead Agency for employees. TPC grant funding cannot be used to provide benefits in excess of those normally and customarily offered to all employees. If the Lead Agency does not provide fringe benefits to all employees, TPC grant dollars cannot be used to provide benefits not normally and customarily offered. Please refer to the human resources department of your Lead Agency for written guidance on this budget line item.
2. Travel
Expenditures for travel will be limited to the rate customarily paid by the agency or the current rate being paid by the State of Indiana, whichever is less. A chart summarizing the maximum reimbursement amounts from the State of Indiana's is included for reference.

   a. In-state or Out-of-state Travel
   Expenses incurred to attend tobacco use prevention and cessation trainings, conferences and meetings in state are appropriate. Out-of-State travel must be pre-approved in writing by TPC. Please submit a written request to your primary contact at TPC prior to travel. Present the following for each event: Description of the event or conference; rationale for attending (this should connect directly to the partnership’s vision and tobacco program activities); anticipated follow-up from the event after you return to the community; budget estimate (travel, lodging, meals, registration fees, other expenses.)

3. Supplies
Supplies may include: office supplies or meeting supplies, including those supplies not specifically excluded. The purchase of tobacco use prevention educational supplies should be consistent with the goals and objectives of TPC. Include a narrative justification outlining the intended use and incorporation of the supplies into the local program. Promotional items and other similar items must be pre-approved. Submit a written request to your primary contact at TPC for consideration prior to approval.

4. Contractual
Descriptions of contracts for program activities must be included along with budget information. Legal professional services to be secured from outside of the unit need to be secured by contract. Legal services must be pre-approved by TPC. On the budget form or on another page, describe for each contract the following information:
   A) scope of work including tasks and deliverables,
   B) time period of the contract,
   C) person in the agency who will supervise or manage the subcontract,
   D) name of the contractor or, if not yet known, what method will be used to select the contractor, e.g. bids, request for proposals, sole source, etc.
   E) amount or budget for the contract,
   F) process for contractor to secure payment,
   G) how the contract will be supervised, managed, or otherwise monitored by the Lead Agency.
The subcontract agreement formats provided by the Tobacco Prevention and Cessation Commission should serve as a boilerplate to collect at minimum information on subcontractors. If additional space is needed to explain the details of a contract, please attach and reference these documents within the body of the subcontract. The boilerplate contract documents provided are not intended to be the sole source of information for executing a contract for goods or services, but the information requested in the boilerplate must be contained in any subcontract agreement executed.

5. Other
This category can include costs for items such as telephone, rent, copying, printing, postage, mailing, publications, and professional education costs.

Rent to be paid for space exclusively reserved for tobacco prevention and cessation programming activities cannot exceed the fair market value for the space. Document how the rental expense was determined and retain this documentation in the records.

Cell phone expense paid from tobacco grant funds must be for calls to conduct tobacco prevention and cessation business. To be reimbursed for cell phone calls, the grantee must have an approved line item in the budget for cell phone expense and provide itemized billing receipts with tobacco prevention and cessation phone calls highlighted. The reimbursement can only be for the calls to conduct tobacco prevention and cessation business. No reimbursement will be issued for cell phone expenses without itemized billing for calls that can be documented for tobacco prevention and cessation activities. To pay a vendor for cell phone expenses you must have itemized billings, highlight the calls for tobacco grant programming activities and only pay for the calls that are for tobacco grant programming activities. If you contract for a flat fee for cell phone expenditures, you must still get itemized billing, highlight the calls that are for tobacco programming activities and calculate the percentage of the total expense that was incurred to conduct tobacco grant programming activities. Only charge the tobacco grant for the percentage of tobacco grant program calls applicable.

6. Furniture and Equipment
Office furniture, equipment and computer/software upgrades, are allowable, provided they are reasonable expenditures relative to the work proposed and were not purchased in a previous year. All equipment purchased with grant funds, which cost $500 or more, shall remain the property of TPC and shall not be sold or disposed of without written consent from TPC. All office furniture, equipment and computer/software upgrades purchased which cost $500 or more must be listed on a fixed assets ledger, see sample document in Tab 9.

7. Additional Conditions

The Grantee agrees to abide by the following additional conditions:

a. That grant funds and program income shall not be expended for:
   1. Construction of buildings, building renovations;
   2. Depreciation of existing buildings or equipment;
   3. Contributions, gifts or donations
   4. Entertainment;
   5. Automobile purchases, rental and/or leases;
   6. Interest and other financial costs;
   7. Fines and penalties;
8. Bad debts; 
9. Contingency funds; 
10. Food; and 
11. Political contributions.

b. All disbursements are required by law to be fully itemized. IC 4-10-11-1 states that “vouchers shall not be approved by any officer or officers authorized to approve the same, unless so itemized, giving minutiae of detail, and when vouchers are presented to the auditor of state for warrants, they shall be accompanied by said itemized accounts and statements.” Other state statutes requiring fully itemized state payments include the following:

IC 5-11-10-1 Disbursements for claims 
IC 4-10-12-1 Itemized vouchers; expenditure for purpose appropriated.

Information necessary to sufficiently itemize payments range from listing specific contract program detail to providing unit costs, quantity, and descriptions for each item or service received. Adequate information must be provided to substantiate hourly billing, such as activities performed and cost per hour. If reference is made to a vendor invoice, statement, or bill, it should be attached. Blank or incomplete invoices should never be certified or paid by Grantees.

Public funds may not be used to pay for personal items or for expenses that do not relate to the functions and purposes of the tobacco grant program.

Personal long distance calls are not allowed to be charged to the grant. Cellular phone service, which is paid for with grant funds, is for the sole benefit of the program for which grant funds have been received. Grantees have a responsibility to monitor cellular phone expenses to ensure they are not paying for airtime that is not needed. Cellular phone service is paid only via reimbursement with detailed billing.

Dues and subscriptions paid from public funds should be for institutional memberships; i.e. in the name of the organization, or grantee’s organization name, not an individual’s name.

No checks can be issued for cash to pay expenditures. Checks must be made out to the subcontractor and/or supplier. No petty cash funds can be established.

No debit cards can be authorized or utilized on the tobacco grant bank account holding State of Indiana – Indiana State Department of Health Tobacco Prevention & Cessation funds.

Grantees must reimburse staff for travel expenditures; no advance payments without specific written permission from TPC.

Grantees are responsible for collecting any overpayment or duplicate payments made. Repayment should be sought immediately once an overpayment has been identified.

Grantees are obligated to collect, document and retain all such information necessary to certify invoices submitted for payment for goods or services received. Grantees have the duty to pay properly documented invoices in a timely fashion. With the exception of payroll expenditures for the Lead Agency employees, all contracts and other payments from the grant should be paid upon receipt of a properly documented invoice for contracts, billings or requests for reimbursement.
c. The Grantee will maintain a fixed assets ledger as prescribed in the budget explanation. See sample of Fixed Assets Ledger in Tab 9. If an internal tracking system exists within your Lead Agency, follow those prescribed procedures to document any equipment purchases.

d. Grantees will account for tobacco grant funds separately from other organization funds and will reconcile the tobacco grant fund account monthly. Tobacco grant funds cannot be co-mingled with other agency funds. If tobacco grant funds are deposited in an account with other funds, a separate accounting ledger must be maintained, including the proper division and crediting of interest to the various components of the account. At the end of the quarter the fund and account statement, including interest must reconcile to the quarterly fiscal reports submitted to TPC.

e. That acceptance of any services offered under this Grant Agreement shall be voluntary on the part of the individual to whom such services are offered and that acceptance of any services shall not be a prerequisite to eligibility for the receipt of any other services under the Grant Agreement.

f. That any proposed changes in the target population served under this Grant Agreement or any proposed changes in geographic location of service sites must be submitted in writing to TPC.

g. That funding is contingent upon providing individualized data files in a file structure specified by TPC. Grantee will submit said data files to TPC according to a specific schedule determined by TPC. The data provided by the Grantee will be used to perform statistical and evaluative functions, and other reporting requirements.

h. That changes in line items in the budget will be requested in writing and approved by a duly authorized representative of TPC prior to implementation.

i. That payment is contingent upon timely receipt of required client data in accordance with procedures and schedules established by TPC, a copy of which is available upon request.

j. That all income generated by grant funds shall be added to the grant fund balance in the period in which it is earned and is subject to the same requirements as the basic grant monies. All grant monies must be invested in types of investments as directed by current statute, IC 5-13-9-1 thru 5. Please refer to the current statute for guidance.

k. To adopt and enforce a no tobacco policy in project facilities at all times.
Budget Worksheet Form

Lead Agency _________________________              County _____________________

<table>
<thead>
<tr>
<th>1. Personnel (Salaries/Wages)</th>
<th>FY2018 Budget</th>
<th>FY2019 Budget</th>
<th>TOTAL 2018-2019 Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. %FTE/ Wage Annual Salary/Hours per Month # Years/#Months</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. (Position Title)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. (Position Title)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL SALARIES/WAGES &gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. (Position Title)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. (Position Title)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL FRINGE BENEFITS &gt;</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| 2. Travel                  |              |              |                        |
| a. In-State                |              |              |                        |
| b. Out-of-State            |              |              |                        |
| TOTAL TRAVEL >             |              |              |                        |

| 3. Supplies                |              |              |                        |
| a.                         |              |              |                        |
| b.                         |              |              |                        |
| TOTAL SUPPLIES >           |              |              |                        |

| 4. Contracts               |              |              |                        |
| a.                         |              |              |                        |
| b.                         |              |              |                        |
| TOTAL SUBCONTRACTS >       |              |              |                        |

| 5. Other                   |              |              |                        |
| a.                         |              |              |                        |
| b.                         |              |              |                        |
| TOTAL OTHER>               |              |              |                        |

| 6. Furniture & Equipment   |              |              |                        |
| a.                         |              |              |                        |
| b.                         |              |              |                        |
| TOTAL FURNITURE & EQUIPMENT > |            |              |                        |

TOTAL BUDGET>

Note: 1. Line items must be explained in detail in the narrative Budget Justification
Budget Narrative Form

**Personnel: Salaries/Wages**  %FTE  Annual Salary  #Months
Salaries – (list each employee separately)
Benefits - (list each employee separately)

*Be specific and show how salaries are determined*
- What percentage of the salary is coming from this grant?
- Percent FTE x Annual Salary Wage x # Months = Salary
- List names and job titles

*Provide a written job description in the Grant Application for all funded positions. Make sure the job titles are the same as in the Budget Narrative*

**Travel:**

In-State

Out of State – Upon written approval on a case-by-case request

- Travel expenses must be reimbursed at the State rate (provided on the “Summary of Travel Allowance”).
- Please document mileage (addresses, total miles traveled to and from on either the provided travel voucher or one that you already use). This must be signed by the traveler and also the supervisor.
  - Mileage: number of miles traveled x reimbursement rate = total
  - Lodging: number of nights x reimbursement rate = total
  - Per diem: number of days x reimbursement rate = total

**Supplies:**

Office Supplies – *Be specific*

Program Supplies – *Be specific*

**Contracts:** Be as specific as possible – contract approval required prior to executing the final contract.

Subcontracts

**Other:** Be specific

*”Other” or “miscellaneous” categories should be specifically explained.*

**Furniture and Equipment:** For tobacco related programming activities only

*INDIRECT COSTS ARE NOT PERMITTED*

USE ADDITIONAL SHEETS AS NECESSARY TO FULLY EXPLAIN BUDGET
SCOPE OF WORK FORM

This form is required by ISDH and submitted with the budget for contractual purposes.

Summary of Program (Limit one (1) Page):
List each community indicator and two bullet points which best describe the expected outcome of the Work Plan. Do not use abbreviations or acronyms without explanation (spell out the term and designate the abbreviation).
Tobacco Prevention and Cessation Commission (TPC)
Declarations

Must be initialed and signed by the signatory authority of the Lead Agency

_____ The TPC may seek additional information from an applicant prior to or during the review of the application.

_____ The TPC reserves the right to negotiate a modification of the proposed work plan and will award funds after agreement has been reached.

_____ The TPC reserves the right to examine the physical location, all books, documents, papers, accounting records, and other evidence (Records) pertaining to the administration of the community program upon request and copies thereof shall be furnished at no cost to the Tobacco Prevention and Cessation Commission.

_____ The signatory for this Organization represents that he/she has been duly authorized to executive agreements on behalf of the organization and has obtained all necessary or applicable approvals from the home office of the organization.

_____ It is policy of the TPC that any organization or individual receiving funding from TPC must agree as a condition of receiving funds that they will not accept any funding from the tobacco industry. By entering into this grant agreement the grantee agrees to abide by this policy during the term of this agreement. Any violation of this clause by the grantee could lead to termination of this agreement by the State.

_____ It is policy of the TPC that any organization or individual receiving funding from TPC must agree as a condition of receiving funds that they will adopt a tobacco-free campus policy. By entering into this agreement the grantee agrees to abide by this policy during the term of this agreement. Any violation of this clause by the grantee could lead to termination of this agreement by the State.

By initialing above and signing below you indicate that you have read and understand these declarations. For questions and assistance please call: Tobacco Prevention and Cessation Commission at (317) 234-1787

_________________________________________ ____________________
Signature     Date

_________________________________________
Printed Name

_________________________________________
Lead Agency Name
TPC Local Program Coordinator:

Will be responsible for working ___ per week in the community, available to travel in-county and to other locations in the state several times per year for training or meetings (see page 29, Lead Agency Profile Form).

Physical lifting may be required for materials or AV equipment.

Coordinator will submit periodic electronic reports as required and respond to local and state needs for information as directed.

Coordinator will be responsible for recruiting public schools selected to conduct the Youth Tobacco Survey Fall 2018.

Media responsibilities include developing partnerships with local news venues and providing accurate local, state, national and international information on tobacco control to the news media as is necessary for education of the public on tobacco issues.

Coordinator will recruit and organize both individuals and organizational representatives from the community to form a coalition representing diverse interests and backgrounds. The coordinator will lead the coalition to strategize action to reduce tobacco use in the county through policy and programs.

Coordinator will fully engage community and coalition members, including specific task force groups, in the business of tobacco control. For this purpose, coordinator is an excellent written and oral communicator. The coordinator will be able to work with healthcare providers, businesses, and other organizations to educate them about evidence-based tobacco control practices, assist them with policy development and implementation, and collaborate with them with to increase referral and acceptance rates to the Indiana Tobacco Quitline.

Coordinator will commit to study CDC’s Best Practices models in tobacco control. Coordinator will use proven, evidence-based actions to reduce tobacco use and exposure to secondhand smoke, and to prevent tobacco use in the community.

Coordinator will monitor completion of activities contracted in the written work plan submitted with this proposal by the coalition of _____________ County.

The ideal candidate should have:
- Leadership skills
- Experience recruiting and organizing volunteers
- An understanding of public health and/or political science
- Marketing and networking skills
- Experience with media, policy advocacy, and/or political campaigns
- The ability to work independently
- Public speaking skills
- Basic computer skills

Other TPC positions:
Detail specific functions that support TPC tobacco control contract for positions paid with TPC funds: i.e. funds management (hours, review, and budget development), supervising (hours, face-to-face, and electronic communication).