# Youth Engagement to Address Tobacco-Related Health Disparities Grant

**Fiscal Year 2019–22**

**Request for Applications**

**For Programs Serving Grades Six through Twelve**

Governed by

California *Health and Safety Code* Section 104420 and

California *Revenue and Taxation Code* Section 30130.55(b)(2)

**May 2019**



**Application Due Date: Friday, June 14, 2019**

Educator Excellence and Equity Division

Tobacco-Use Prevention Education Office

California Department of Education

1430 N Street, Suite 6408

Sacramento, CA 95814-5901

916-323-1540

## Questions, Supplements, and Contact Information

All questions and correspondence regarding this Health Disparities Request for Applications (RFA) should be submitted by email through the Tobacco-Use Prevention Education (TUPE) RFA Helpdesk at [tupe@cde.ca.gov](mailto:tupe@cde.ca.gov) (please indicate “Health Disparities RFA Question” in the email subject line). All questions will be reviewed by the TUPE Office. Material and frequently asked questions (FAQs) will be edited for clarity to remove any personal or confidential information, and will be posted with an official answer on the California Department of Education (CDE) TUPE RFA FAQ web page at <https://www.cde.ca.gov/ls/he/at/disparitiesrfafaqs.asp>. You may contact the TUPE Office by phone at 916-323-1540, however, the information contained in this RFA, RFA Guidance Webinar, and posted FAQs should be your primary resource documents.

All completed RFAs should be submitted to:

Health Disparities Grant Application

Educator Excellence and Equity Division

Tobacco-Use Prevention Education Office

California Department of Education

1430 N Street, Suite 6408

Sacramento, CA 95814-5901

**Note:** The RFA process is competitive and is reviewed and scored by readers using a scoring rubric. Applicants are strongly encouraged to read the entire Health Disparities RFA, view the informational webinar, review posted FAQs (as they are updated throughout the application period), and consider all elements for eligibility, program and narrative requirements, and disqualifications prior to submitting an application.

## Application Highlights for Health Disparities Grant

* A new grant opportunity is being provided as a result of Proposition 56 (California voter approved in 2016) which provides certain grant funds to be allocated by the CDE in order to accelerate and monitor the rate of decline in tobacco-related disparities in California for subgroup(s) (an estimated $7 million is available for a three year grant period).
* School districts and direct-funded charter schools serving grades six through twelve (6–12) are eligible to apply if they meet the eligibility requirements. County offices of education (COEs) may apply only if the COE provides direct supervision over a specific school.
* Applicants must select one or more of the priority subgroup(s) (defined below) in which to develop specific strategies to accelerate and monitor the rate of decline in tobacco-related disparities, for the purpose of eliminating tobacco-related disparities.
* The TUPE Office will post a pre-recorded webinar on **Wednesday,** **May 22, 2019.** The purpose of the webinar is to provide guidance to assist prospective applicants with completing the Health Disparities application. The webinar may be viewed at any time after posting.
* The TUPE Office will provide an RFA Helpdesk and FAQ web page to assist applicants with RFA-related questions. The RFA Helpdesk will be available from **May 15, 2019, to June 14, 2019.** All questions submitted for FAQ posting must be received by **June 7, 2019.** All answers will be posted between **May 28, 2019,** and **June 14, 2019.**
* All required application forms and Program Resources (Appendix 4) are available on the CDE TUPE RFA web page at <https://www.cde.ca.gov/fg/fo/r8/disparitiesrfa.asp>.
* The grant award cycle is for three years; however, if funded, Grant Award Notifications (AO-400s) will be allocated in annual increments with annual reporting requirements.

Table of Contents

[I. Critical Dates for the Application Process 1](#_Toc6831525)

[II. Description and Purpose of the Program 2](#_Toc6831526)

[A. Background 2](#_Toc6831527)

[B. Purpose 3](#_Toc6831528)

[C. Funding 5](#_Toc6831529)

[III. Eligibility Requirements 5](#_Toc6831530)

[A. Who May Apply? 6](#_Toc6831531)

[B. Absence of Tobacco Industry Funding or Support 6](#_Toc6831532)

[C. Other Eligibility Requirements 6](#_Toc6831533)

[IV. Health Disparities Program Requirements 7](#_Toc6831534)

[A. Priority Subgroups 7](#_Toc6831535)

[B. Tobacco-Free Policy and Certification 8](#_Toc6831536)

[C. Evidence-Based Curriculum Program 9](#_Toc6831537)

[D. Implementation of a Youth Development Strategy 9](#_Toc6831538)

[E. Intervention Strategies 9](#_Toc6831539)

[F. Cessation Activities or Referral Plan 10](#_Toc6831540)

[G. California Healthy Kids Survey Requirements 10](#_Toc6831541)

[H. Program Assurances 11](#_Toc6831542)

[I. Required Signatures 12](#_Toc6831543)

[V. Application Narrative Requirements 12](#_Toc6831544)

[A. Collaborative Process 13](#_Toc6831545)

[B. Needs Assessment 13](#_Toc6831546)

[C. Description of the Program Plan 15](#_Toc6831547)

[D. Pre- and Post- Subgroup Assessment 21](#_Toc6831548)

[E. Project Budget 22](#_Toc6831549)

[VI. Reading and Scoring the Application Narratives 23](#_Toc6831550)

[A. Scoring Rubric 23](#_Toc6831551)

[B. Reading and Scoring Process 24](#_Toc6831552)

[VII. Appeals Process 25](#_Toc6831553)

[VIII. Application Submission Elements 25](#_Toc6831554)

[A. Intent to Submit an Application 25](#_Toc6831555)

[B. Application Technical Requirements and Disqualifications 26](#_Toc6831556)

[IX. Application Checklist 27](#_Toc6831557)

[Appendix 1: Scoring Form and Rubric 29](#_Toc6831558)

[Appendix 2: Sample Budget Summary and Justification 36](#_Toc6831559)

[Appendix 3: Fiscal Terms and Conditions 48](#_Toc6831560)

[Appendix 4: Program Resources 54](#_Toc6831561)

**Note:** Forms A–F are available on the CDE TUPE RFA web page at <https://www.cde.ca.gov/fg/fo/r8/disparitiesrfa.asp>

### I. Critical Dates for the Application Process

The following chart identifies the anticipated critical dates for the application process. These dates may be extended by the CDE at its discretion. Any changes will be posted on the CDE TUPE RFA FAQ web page at <https://www.cde.ca.gov/ls/he/at/disparitiesrfafaqs.asp>.

| **Dates** | **Critical Events** |
| --- | --- |
| **May 15, 2019** | RFA and supporting documents are posted on the CDE TUPE Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp>. |
| **May 15–June 14, 2019** | Health Disparities RFA Helpdesk available at [tupe@cde.ca.gov](mailto:tupe@cde.ca.gov). |
| **May 22, 2019** | Health Disparities RFA Guidance Webinar (pre-recorded) posted on the CDE TUPE Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp>. |
| **May 24, 2019** | **Intent to Submit an Application is due to the CDE.** Failure to submit this completed form will result in disqualification of the application from the reading and scoring process.  Postmarks will not be accepted. |
| **June 14, 2019** | **Submission deadline for applications** in hard copy to the CDE by 4 p.m.  Postmarks will not be accepted. |
| **June 2019** | Applicants are notified if they have been disqualified based on CDE screening.  Appeals are due to the CDE 10 days after notification of disqualification.  Review and scoring of eligible applications. |
| **June–July 2019** | Intent to Award (ITA) is posted on the CDE TUPE Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp> (the ITA is NOT the final funding list).  Appeals are due to the CDE 10 days after ITA posting. |
| **July 2019** | Final Funding List is posted on the CDE TUPE Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp>. |
| **July 2019** | Grant Award Notifications (AO-400) sent to grantees. |
| **July 1, 2019** | Grant period begins. |

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### Description and Purpose of the Program

#### Background

In 1988, California voters approved Proposition 99, the Tobacco Tax and Health Protection Act, which required the CDE to establish a TUPE Program that provided students in grades six through twelve (6–12) inclusive with the knowledge and skills directed at the prevention of tobacco use and tobacco-related diseases.

The Tobacco Education and Research Oversight Committee (TEROC) was also created to advise state agencies, including the CDE, with respect to policy development, integration, and evaluation of funded tobacco education programs, including TUPE. In addition, the TEROC is instrumental with the development of a Master Plan for future implementation of tobacco education programs. The TEROC guides and informs CDE’s TUPE Office and is composed of 13 appointed members representing multiple professional and health education programs throughout the state.

In 2016, California voters approved Proposition 56, which aims to further prevent and reduce the use of tobacco and nicotine products by young people in accordance with California *Health and Safety Code* *(HSC)* Section 104420, and accelerate and monitor the rate of decline in tobacco-related disparities for the purpose of eliminating tobacco-related disparities (California *Revenue and Taxation Code* Section 30130.55[b][2] *Healthcare, Research and Prevention Tobacco Tax Act of 2016*, *Distribution of Revenue*). The authorizing legislation can be found on the California Law website at <https://leginfo.legislature.ca.gov/>. Proposition 56 also provided that certain grant funds be allocated through the CDE in order to accelerate and monitor the rate of decline in tobacco-related disparities in California (an estimated $7 million is available for a three year grant period). The intent is to reduce tobacco-related disparities through the expenditure of these funds for priority subgroups.

Several grant programs were developed as a result of the passage of Proposition 99 and Proposition 56. The resultant Tier 1 and Tier 2 funding opportunities for school districts, direct-funded charter schools, county offices of education (COEs), and consortia funded the utilization of comprehensive, evidence-based tobacco-use prevention, youth development, intervention, and reinforcement activities for tobacco-free school environments, and cessation programs as strategies against smoking and secondhand smoke exposure, which are the leading causes of preventable death in this country.

#### Purpose

The goal of the TUPE Program is to prevent and/or reduce student tobacco use and nicotine addiction by funding local educational agency (LEA) programs to provide education for young people to make healthful tobacco-related decisions through tobacco-specific, evidence-based educational instruction and activities that build knowledge, social skills, and youth development assets. Collaboration between the CDE and community-based tobacco control programs such as the California Department of Public Health (CDPH), California Tobacco Control Program, and California Office of the Attorney General, is an integral part of this process. As such, the school, parents/guardians, and larger community should be involved in the collaborative efforts of the program so that students are aware of a cohesive effort and concern for their health, and consequently, their ability to succeed in school and live a healthy life that is tobacco and nicotine free.

School connectedness is the belief held by students that the adults and peers in their school care about their learning and about them as individuals. Students who feel connected to school are more likely to have a number of positive health and academic outcomes, and school connectedness represents an important factor in both health and learning. For example, data has shown that students who feel connected to school are more likely to attend school regularly, stay in school longer, have higher grades and test scores, and are less likely to use tobacco and drink alcohol. Conversely, students with low levels of school connectedness have higher rates of electronic cigarette (e-cigarette) use than their more connected peers. According to the 2013–15 California Healthy Kids Survey (CHKS) data, 18 percent of students with low levels of school connectedness in grades seven, nine, and eleven, and students in non-traditional programs had used e-cigarettes at least seven times. This figure represents almost three times the estimate for students with high levels of school connectedness (6 percent). The data suggests that implementation of evidence-based health promotion programs by schools, coupled with strategies to promote school connectedness, can have the greatest impact on the health and education outcomes of their students.

Four essential factors can help strengthen school connectedness for students: adult support, belonging to a positive peer group, commitment to education, and a positive school environment. For tobacco prevention, that includes evidence-based curriculum and activities that provide opportunities to improve interpersonal and decision-making skills. Several examples of how school connectedness lends itself to youth engagement includes working effectively with others, encouraging students to be involved in service learning, peer-to-peer education, and involvement with creative projects. Youth engagement provides students with the opportunity to build resources, share ideas, and become involved with the decision making alongside adult partners about issues that are important to them.

Advancing students’ health and academic outcomes by improving school connectedness is a collaborative effort that involves the school community as well as parent, family, or community involvement. Parents or families can play an important role in providing social and environmental support to prevent and intervene in the use of tobacco. The applicant should be encouraged to capitalize on this influence by involving parents or families in the Program Plan (defined in section V.C), in soliciting community support for the program, and in reinforcing tobacco-free educational messages at home. Homework assignments involving parents or families increase the likelihood that smoking is discussed at home, and may motivate adult smokers in the family to quit or reduce their own tobacco use. The applicant should also encourage community support and plan training sessions for parents and families.

While one cannot control all components and influences on local school campuses, this Health Disparities RFA seeks applications which offer a youth engagement approach in addressing youth tobacco education to maximize student, staff, peer, and community involvement and accelerate and monitor the rate of decline in tobacco-related disparities for the purpose of eliminating tobacco-related disparities.

Youth tobacco education and prevention is important because initiation of tobacco use, including vaping and e-cigarettes, generally starts in one’s youth. In California, about 63.6 percent of current cigarette smokers started by the age of eighteen (CDPH 2018 California Tobacco Facts and Figures). Electronic smoking devices, often called e-cigarettes or vape pens, heat and aerosolize a liquid that contains a variety of ingredients, including flavorings and varying levels of nicotine. The “e-liquid” in e-cigarettes is largely promoted in candy and fruit flavors such as cotton candy, gummy bear, watermelon, and grape, flavors that are meant to attract youth. Even “Hello Kitty” e-cigarettes are sold. According to the Centers for Disease Control and Prevention (CDC), in 2018 use of electronic smoking devices has increased substantially in recent years, particularly among youth. Based on the 2015–17 CHKS, the survey report indicated that statewide in California an estimated 8.1 percent of seventh graders, 23.2 percent of ninth graders, and 31.7 percent of eleventh graders used e-cigarettes. Under California state law, a tobacco product is any product containing, made, or derived from tobacco or nicotine, and any electronic vaping device or component, part, or accessory of a tobacco product. The CDC warns that nicotine is highly addictive and can harm adolescent brain development which continues into the early to mid-20s. In 2016, an estimated 790,000 California high school-age students co-used cannabis and tobacco products (this includes vaping). These startling developments have resulted in a funding opportunity to address this problem.

#### Funding

An estimated $7 million from Proposition 56 funding has been allocated to the CDE to fund a new Health Disparities Grant Program for three years, beginning July 1, 2019, through June 30, 2022. The level of funding appropriated by the Legislature, the number of qualified applications, and the total amount requested by qualified applicants will determine the number of grants awarded.

The CDE reserves the right to renew or extend selected grants in the best interest of the statewide tobacco prevention effort. Although it is anticipated that funding for the TUPE Health Disparities Grant Program will be available for future cohorts, this may change as a result of the legislative process or oversight committee recommendations by the TEROC.

TUPE funding has previously been offered under other RFAs for programs directed at the general student population. However, the TUPE funding provided under this RFA is intended only for the reduction or elimination of tobacco-use disparities through tobacco-use prevention, youth development, intervention, and cessation programs in schools specifically directed at priority subgroups. Accordingly, this funding should supplement, not supplant, any existing TUPE funding for the general student population and should outline a proposed Program Plan directed specifically for priority subgroups. All TUPE funding received pursuant to this Health Disparities RFA must be accounted for independently and separately from all other TUPE grant funds.

The use of TUPE funds for any purpose other than the reduction or elimination of tobacco-use disparities for priority subgroups is not authorized. When staff positions are multi-funded, there should be personnel activity reports that verify the duties performed and the proportion of time spent for those duties as appropriate to the corresponding grant funding sources used. Products or services that relate to tobacco-use prevention issues may be supported by TUPE funds to the percentage that the product or service effectively prevents tobacco-use behaviors.

### Eligibility Requirements

Applicants must meet all the eligibility requirements set forth below. The programs offered by applicants must meet the requirements set forth in this Health Disparities RFA. Thus, applicants must read and understand this entire Health Disparities RFA as well as the FAQs (as updated) and consider all requirements for eligibility and program requirements prior to submitting an application. Any questions regarding this Health Disparities RFA should be submitted by email through the TUPE RFA Helpdesk at [tupe@cde.ca.gov](mailto:tupe@cde.ca.gov).

#### Who May Apply?

Applicant LEAs are limited to public school districts, direct-funded charter schools, and COEs with direct supervision over a specific school, within the State of California that serve students in grades 6–12. The governing district must apply on behalf of a school or school sites within its jurisdiction. Individual schools, with the exception of direct-funded charter schools, LEA consortiums, community agencies, private schools, and locally-funded charter schools are not eligible to apply for these funds. Projects targeting out-of-school students cannot be funded under this application.

Any district or direct-funded charter school that is a member of a consortium that is funded through other TUPE grants is eligible to apply on its own, but must apply separately under this Health Disparities RFA. Current TUPE grantees are eligible to apply; however, any funds received hereunder may only be used to meet the requirements of this Health Disparities RFA.

#### Absence of Tobacco Industry Funding or Support

Applicants are ineligible for any TUPE grant funding if they have received directly or indirectly, any funding, educational materials, or services from the tobacco industry even if for the purpose of implementing tobacco-use prevention, youth development, intervention, or cessation programs. In addition, TUPE grantees are prohibited from accepting such materials and services for the duration of the grant. Acceptance of such items will result in termination of the grant and the return of all advanced grant funds and may disqualify LEAs from future TUPE funding opportunities.

An original, wet signature by the Superintendent or Designee on the Application Cover Page (Attachment B) constitutes an assurance that the districts or direct-funded charter schools identified in the application will not accept materials, services, or funding from the tobacco industry.

#### Other Eligibility Requirements

The application submitted must (1) show that the applicant’s program meets the Health Disparities Program Requirements, (2) comply with Application Narrative Requirements, (3) meet all other conditions, requirements and deadlines, and (4) provide signatures as set forth in this RFA.

### IV. Health Disparities Program Requirements

#### Priority Subgroups

The Legislature requires that the funds allocated under this Health Disparities RFA must be used to accelerate and monitor the rate of decline in tobacco-related disparities in California. The CDE has determined through valid and reliable research from the health industry and CHKS data that disparities in tobacco use exist in California for the priority subgroups listed below.

Applicants must select one or more of the following priority subgroups in which to develop a specific program with strategies to accelerate and monitor the rate of decline in tobacco-related disparities for the purpose of eliminating tobacco-related disparities.

1. African Americans
2. American Indians/Alaska Natives
3. Asians
4. Hispanics/Latinos
5. Native Hawaiian/Pacific Islanders
6. Foster Youth
7. Students experiencing homelessness
8. Pregnant minors or minor parents
9. Not Straight—Gay, Lesbian, or Bisexual
10. Transgender
11. Low Socio-Economic Status (Free and Reduced Price Meals [FRPM] Eligibility)
12. Students in non-traditional schools (including, but not limited to, continuation schools and community day schools)
13. Other subgroups identified by the LEA as being at greater risk and supported by existing data

Applicants may select more than one subgroup, however, the program should reduce the tobacco-related disparities for each and every subgroup selected, rather than the general student population, and each subgroup selected must have evidence of need to justify the application. The only students who are members of the subgroup(s) selected should receive the services funded by this RFA since the LEA is identifying them as needing targeted services to reduce disparity.

#### Tobacco-Free Policy and Certification

In accordance with *HSC* Section 104420(n)(2), all school districts, charter schools, and COEs that receive TUPE funding must adopt and enforce a tobacco-free campus policy no later than July 1 of each fiscal year (FY). The policy shall prohibit the use of products containing tobacco and nicotine, including, but not limited to, smokeless tobacco, snuff, chew, clove cigarettes, and e-cigarettes that can deliver nicotine and non-nicotine vaporized solutions, at any time, in charter school or school district-owned or leased buildings, on school or district property, and in school or district vehicles. However, this section does not prohibit the use or possession of prescription products, nicotine patches, or nicotine gum. Information about the policy and enforcement procedures shall be communicated clearly to school personnel, parents, pupils, and the larger community. Signs stating “Tobacco use is prohibited” shall be prominently displayed at all entrances to school property as provided in *HSC* Section 104559. Information about smoking cessation support programs shall be made available and encouraged for pupils and staff. Any school district, charter school, or COE that does not have a tobacco-free district policy implemented by July 1, shall not be eligible to apply for funds from the Cigarette and Tobacco Products Surtax Fund for that FY.

The applicant must have been certified by the CDE as having met the tobacco-free school district criteria. This certification must be valid at least through

July 1, 2018. The applicant agency identified in the application must continue to meet the tobacco-free certification criteria, including enforcement of the Tobacco-Free School Policy, during the term of the grant. This requirement extends to all schools in the LEA, including those not listed in the grant application.

An original, wet signature by the Superintendent or Designee on the Application Cover Page (Attachment B) constitutes an assurance that the entities identified in the application will meet the tobacco-free school district and CDE requirements pursuant to *HSC* Section 104420(n)(2).

For information regarding the Tobacco-Free School Policy Certification, contact the TUPE Coordinator at your COE. A list of these coordinators is available on the CDE COE TUPE Coordinators web page at <https://www.cde.ca.gov/ls/he/at/countycoordinators.asp>.

#### Evidence-Based Curriculum Program

Each school identified in the application that the LEA will serve is required to implement an approved, evidence-based curriculum program. An evidence-based curriculum consists of practices and strategies that have been vetted through rigorous research and has evidence of effectiveness to prevent tobacco use for the specific student subgroup(s) selected in grades 6–12.

Implementation is based on the grade levels for which the evidence-based curriculum is designed. If the selected program is designed to be implemented in two grade levels in grades six through eight, the expectation is that the implementation of the program will occur in grades six and seven or grades seven and eight as needed to meet implementation guidelines.

#### Implementation of a Youth Development Strategy

Applicants are required to implement a tobacco-free focused youth development strategy. Tobacco-free focused youth development strategies are defined as intentional, prosocial approaches that engage youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people’s strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths. Youth development activities must have a direct relationship that supports tobacco-use prevention. Youth development strategies can be used to address the needs of the specific subgroup(s) identified for tobacco use at any of grades 6–12.

#### Intervention Strategies

Applicants are required to identify the priority subgroup(s) that are most likely to begin tobacco use and provide intervention strategies to meet the needs of those students. Intervention strategies are defined as a combination of program elements or strategies designed to produce behavior changes or improve health status among individuals or an entire group. Interventions may include educational programs, new or stronger policies, improvements in the environment, or a health promotion campaign. The applicant is also strongly encouraged to intentionally solicit priority subgroup youth to participate in intervention strategies. Identification of these subgroups should be a component of the district’s Needs Assessment and should address subgroups with disproportionately high rates of tobacco use.

#### Cessation Activities or Referral Plan

Applicants are required to identify the specific subgroup(s) currently using tobacco and either provide current tobacco users with voluntary cessation services or describe a plan to refer them to cessation classes provided by the community. Applicants may refer to the CDE TUPE Resource page in Appendix 4. Applicants may propose other activities to address the required prevention program activities and strategies. These activities must have a direct relationship to tobacco-use prevention and must be justified in the application narrative.

#### California Healthy Kids Survey Requirements

All successful grantees (districts and schools) are required to conduct the district-level CHKS Core Module to the subgroup population of students in grades seven, nine, and eleven. Survey results, to the extent possible, must be reported by school site and student ethnicity. The survey is to be administered within the first year of funding and at least every other year thereafter as long as funding is received. If an LEA has conducted the CHKS in the 2018–19 school year and is planning to conduct the CHKS in the 2019–20 school year, the LEA may continue conducting the survey every other year and does not need to conduct it within the first year of the grant. Applicants are encouraged to refer to an individual LEA’s adopted policies and administrative regulations regarding conducting student surveys and receiving parental permission. For additional information regarding the administration of the CHKS, visit the WestEd California School Climate, Health, and Learning Surveys website at [https://calschls.org/reports-data/query-calschls/](https://calschls.org/).

Additionally, each successful grantee and schools must participate, if selected, in the California Student Tobacco Survey (CSTS) administered by the CDPH and the Evaluation of Tobacco-Use Prevention Education Programs in California conducted under the auspices of the University of California, Office of the President’s Tobacco-Related Disease and Research Program. The results of this statewide biennial evaluation will be made available to the CDE for the purposes of improving its ability to implement and oversee school-based tobacco-use prevention programs and to determine to what extent schools have reduced the smoking prevalence rate for high school youth. Students in grades six, eight, ten, and twelve, as well as school and district TUPE Program Administrators, will be among the participants of this evaluation. All schools in the LEA must participate, including those not listed in the grant application. As with the CHKS, the CSTS is conducted in accordance with board policy on parental consent and requires beginning-of-the-year notice to parents. The next anticipated administrations of the CSTS will occur during the 2019–20 and 2020–21 school years.

#### Program Assurances

1. Program Assurances, General Assurances, and Certifications

Each successful grantee must provide General Assurances and Certifications as a condition of receiving CDE funds. Applicants do not need to sign and return the General Assurances and Certification with the application; instead, immediately following notice of award, each successful grantee must download the updated General Assurances and Certifications and retain copies of signed documents for their records and for audit purposes. Please visit the CDE General Assurances and Certifications web page at <https://www.cde.ca.gov/fg/fo/fm/ff.asp>.

1. Tobacco-Use Prevention Education Program Assurances

The applicant agency, on behalf of the school districts and any schools identified in the application, agree to the following:

1. Enforce the Tobacco-Free School Policy as described in *HSC* Section 104420(n)(2).
2. Neither receive, nor apply for funds, educational materials, or services from the tobacco industry or any agency which has received funding from the tobacco industry to implement tobacco-use prevention or intervention programs.
3. Administer the district-level CHKS Core Module as described in this RFA under CHKS Requirements.
4. Participate in external evaluations by researchers as described in this RFA under CHKS Requirements.
5. Participate, if selected, as a reader for subsequent cohorts of TUPE competitive grants.
6. Implement a systemic and ongoing process to (1) collect data; (2) ensure that the program resulting from this Health Disparities grant process is being implemented as planned; and (3) measure the effectiveness of the Health Disparities Program Plan in achieving the expected result.
7. Implement the program as described in the approved application or receive written permission from the CDE prior to implementing any changes to the approved application.
8. Expend funds as detailed in the approved application unless specifically approved by the CDE.
9. Submit all the required deliverables by the designated due dates to ensure the program remains in good standing with the TUPE Office.

#### Required Signatures

All original authorized signatures from the applicant’s Superintendent or Designee are due at the time the application forms are submitted to the CDE, or the application **will be disqualified.** An original “wet” signature, using blue ink, from all applicants is required. **Applications that are submitted with signature stamps, electronic stamps, or any form of reproduced stamp will be disqualified.** Original signatures on the Application Cover Page represent a certification that all of the forms and materials submitted through this RFA have been reviewed and approved, and that all grant requirements will be completed as stated in legislation and this RFA.

A Designee may provide the authorized signature as long as a copy of a recent governing board resolution or minutes, specifically authorizing the designee to accept and sign as a proxy for financial statements and legally binding documents, is included with the application materials (Attachment C). In the absence of an authorized signature, the applicant **will be disqualified.**

All grantees are required to retain copies of signed documents for their records and for audit purposes. Please visit the CDE General Assurances and Certifications web page at <https://www.cde.ca.gov/fg/fo/fm/ff.asp> for more information.

### V. Application Narrative Requirements

An application should not contain any attachments other than those required in this RFA. Additional documents will be redlined or removed from the application prior to the review and scoring process so as not to provide an unfair advantage over other applicants that submit only the required materials. All applications must include the items listed on the Application Checklist section of this RFA.

There are five parts to the application narrative: the Collaborative Process, Needs Assessment, Description of the Program Plan, Pre- and Post-Subgroup Assessment, and the Project Budget Justification. The application narrative must be formatted and presented in the same order as described below or the application will be disqualified. An applicant may want to review the Scoring Form and Rubric (Appendix 1) to ensure that the narrative and supporting documentation reflects the criteria in the rubric.

The application narrative should adequately describe the subgroup(s), and include the following elements, not to exceed 15 pages:

#### Collaborative Process

The collaborative process should include establishment of a collaborative oversight group. This group should include, but is not limited to, the TUPE County Coordinator, a district-level coordinator, youth engagement or community engagement coordinators from local public health and tobacco control agencies, local lead agencies, the community at large, parents, school resource officers, counselors, or other school staff and students. Additional members may also come from agencies referenced on the CDE TUPE Resource page in Appendix 4. The collaborative oversight group should conduct ongoing and regular meetings to ensure sharing of initiatives, goals, and objectives. Applicants may demonstrate that a broad collaborative oversight group is involved in developing and implementing the application by providing information such as:

1. A description of how the district-level staff member will share resources and work with the TUPE Coordinator and/or the local lead agency in their region. A letter from the TUPE Coordinator is required as part of the submitted application and is discussed later in the Application Technical Requirements and Disqualifications Section of this RFA.
2. A description of how the oversight group was identified and/or recruited.
3. An attached list that references names of collaborative oversight members and the organizations they represent.
4. A description of how the collaborative oversight group will be involved in ongoing project management.
5. A description of how students have been involved in the application’s development and how the collaborative oversight group will ensure the active participation of students and others throughout the grant term.

#### Needs Assessment

The goal of this section is twofold: (1) to describe the applicant’s priority subgroup(s) needs that are currently unmet, and (2) to document these unmet needs with various types of qualitative or quantitative data. Examples include survey data, local student information systems data, focus group interviews, key informant interviews, and intercept surveys. This section should provide adequate information to support why the applicant is selecting to focus on this subgroup(s) above and beyond the general student population or those already served by other TUPE funding sources.

This section shall contain a description of the needs analysis conducted by the collaborative oversight group, including CHKS data about student tobacco use, descriptions of other funding or resources being used to meet the identified needs for the specific subgroup(s), and other data identified by the applicant.

This section of the application must include:

1. **School/Community Description.** Applicants must provide a clear description of the school/community in which subgroup(s) are identified. This description should include a discussion of any differences in school and community norms around tobacco use and the disparities among populations regarding tobacco-use behaviors or attitudes.
2. **Focus Group(s) Data.** Focus groups are an effective way to obtain information about community and student priorities. Information from focus groups may be gathered through multiple avenues, including, but not limited to, face-to-face meetings, electronic meetings, surveys, and questionnaires. Student focus groups must be held separately from adult focus groups. Applicants must provide a description of:
3. The focus group process by which students, parents, staff, and the community identified concerns and created one or more prioritized list(s) of unmet subgroup(s) needs.
4. One or more prioritized list(s) of unmet subgroup(s) needs identified by students, parents, staff, and the community.
5. Strong and convincing statistical and other data that provide compelling evidence of high levels of tobacco use, demographic data, and socioeconomic factors associated with the priority subgroup(s).
6. Strong and convincing statistical and other data that provide compelling evidence linking tobacco use with risk factors or lack of protective factors associated with the subgroup(s) most likely to use tobacco.
7. **Data Sources.** Data results must be presented in this section. The types of information which may be presented include CHKS data, CDPH 2018 California Tobacco Facts and Figures, community statistics, discipline data, information about services unavailable in the community, health department data, service gaps, and historical background data.

District-based CHKS data reports for most priority subgroups (for the 2015–17 cycle) are available on the dashboard of the CalSCHLS website at <https://calschls.org/reports-data/dashboard>.

The Dashboard can generate a comparison between the state and the specific district. For Step 1, choose the State or a specific district. For Step 2, choose School Safety and Substance Use. For Step 3, choose either Current Cigarette Smoking or Current Electronic Cigarette Use, or both, one at a time, based on the local situation. For Step 4, you have the option of selecting Gender Identity which provides a report on the Transgender population. Other options include Living Situation, which provides reports on Homeless and Foster Youth, and Sexual Orientation, which provides a report on Not Straight—Gay/Lesbian/Bisexual.

For disparity groups that are not included in the CHKS Dashboard reports, applicants will need to rely on local data with the data source identified.

1. **Needs Analysis.** The final section should describe how the collaborative discussed the implications of the focus group findings, the CHKS data, and any additional data considered by the collaborative. Applicants may accomplish this description by providing information such as:
2. A description of the highest priority needs chosen by the collaborative as the primary focus of the proposed project.
3. A description of the process by which the committee reviewed and discussed the data to identify the highest priority unmet tobacco-use prevention needs, and an explanation of why those particular needs were considered to be highest priority.
4. A description of how the focus group’s recommendations relate to other data presented, and how the proposed project will address the prioritized subgroup(s) tobacco-use prevention needs.

#### Description of the Program Plan

The purpose of the Program Plan required by this section is to identify the Program Plan activities and strategies chosen to address the unmet health disparity needs of the priority subgroups identified by the applicant that is above and beyond the current baseline program for the general student or previously identified disparity population. The LEA should briefly describe its current plan for general student and disparity populations. This section must also contain a description of the tobacco-use prevention efforts to be implemented at the participating school site(s), including a description of how other community-based prevention resources will be used to meet the general practices at school sites. The paragraphs below contain bullet points that provide examples of program activities and strategies that could be incorporated into the Program Plan.

1. **Curriculum**

See Appendix 4

1. **Materials Development**

* Develop logos, designs, and other materials that discourage underage student tobacco usage
* Work with health and education professionals to develop accurate health educational materials

1. **Youth Engagement Strategies**
   1. **Policy Development**

* Implement an ongoing Tobacco-Free School Policy at school sites within the district
* Operationalize the tobacco-free policy with other students at school sites
* Work with other staff, administrators, and students to foster a school culture that demands and expects a tobacco-free environment
* Specifically include students in anti-tobacco efforts as leaders with active roles and experiential participation in tobacco-use prevention
* Specifically target students from the priority subgroup(s) for participation in youth development strategies
* Develop a description of the policies regarding the use or possession of tobacco products by students, staff, and visitors. The description should identify, at a minimum, the party affected by the policy, what activities are prohibited or allowed, where tobacco use is prohibited, and the period during which this policy is effective (also refer to Student/Parent Handbook)
* Develop a description of the consequences for violation of the policy by students, staff, and visitors. The description should include actions that will be taken in the event of a violation of the policy and identification of personnel responsible for enforcement, along with an alternative to suspension option for students
* Develop a description of how students, parents, staff, and the community at large are made aware of the policies and enforcement procedures
* Develop strategies to prevent minors from obtaining vaping and nicotine products via the internet or proxy buyers
* Help school districts/sites implement policies to reduce student access to these products and stop usage on school campuses
  1. **Social Media**
* Develop logos, designs, and other materials that discourage underage student tobacco usage
* Create social media/marketing campaigns against vaping,

e-cigarettes, and nicotine products

* Write columns and/or blogs and post
* Develop and submit letters to the editor
  1. **Student Advocacy**
* Build relationships with public health and education professionals to develop materials to educate students about risks of nicotine exposure to the brain and other health related effects
* Build relationships with health and education advocacy groups to combat underage student usage
* Build relationships with law enforcement to combat illegal sales to underage students and develop cadet programs
* Promote youth development activities that result in prevention services or products that target priority subgroup(s) and that are culturally responsive to the needs of priority subgroup(s)
  1. **Peer-to-Peer and Community Outreach**
* Present to peers, parents, and school staff about underage tobacco usage and health risks associated with vaping, e-cigarettes, second-hand smoke, and nicotine
* Train students to become peer-to-peer educators to promote the message about the dangers of tobacco, e-cigarette, and vaping use
* Research and present current trends and data regarding underage usage and false tobacco industry representation
* Incorporate the findings and information from published research and evaluation identifying best practices for youth development

**3. Intervention and Cessation Strategies**

1. **Alternatives to Suspension Model**

* Review and update the Student/Parent Handbook to include an alternative to suspension policy for students who have been referred as having used tobacco, nicotine, or vaping products on campus
* Work with students and their parents to develop a counseling and/or education plan as an alternative to suspension
* Develop a peer-to-peer program
* Provide intervention training as an alternative to suspension
* Require community service activities related to TUPE
* Refer to smoking cessation programs

1. **Create Local Resources**

* Explore how to boost the number and frequency of quit attempts by priority subgroup(s)
* Boost the quit attempt rate across priority subgroup(s)
* Increase the desirability of quitting and the motivation of smokers to try quitting
* Normalize quitting, just as smoking has been denormalized
* Increase the sense of urgency about quitting earlier in life
* Be alert for differences among the quit attempt rates of subgroups
* Encourage students to access health care providers that spur pediatric patients to try quitting
* Increase quit attempts, since it is the frequency—not efficacy—of quit attempts which is the primary determinant of tobacco use cessation
* Promote tobacco use cessation through multiple channels, including the California Smokers Helpline, quit applications (apps) available for electronic devices, and by encouraging students to seek out health care providers that help pediatric patients to quit
* Work with the TEROC Master Plan, available on the CDPH web page at <https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/CDPH%20Document%20Library/TEROC/MasterPlan/TEROCMasterPlan2018-2020.pdf>

1. **Pregnant Minor and Minor Parent Services**

* Develop site referral process for perinatal and related support services for subgroup(s)
* Provide outreach services to pregnant minors
* Refer students to individualized counseling and advocacy services
* Develop motivational messages
* Work with cessation services to provide needed resources to subgroup(s)
* Develop healthy lifestyle materials
* Provide follow-up services for students
* Establish a maintenance and relapse prevention service at site(s)

**4. Parent and Community Involvement**

1. **Parent Engagement Activities**

* Craft and implement outreach programs aimed at parents, teachers, and school administrators to educate them about vaping and nicotine products, and how to spot underage student use
* Participate in Open House, Back to School Night, and Parent Teacher Associations
* Establish family, school, peer, and community connectedness to support subgroup(s)

1. **Community Engagement Activities**
   * + Join the Youth Tobacco Coalition
     + Work with Youth Engagement Coordinators in health and education industries, across districts, and county-wide
     + Participate in health fairs

**5. Training Strategies**

* Offer peer-to-peer training
* Attend Joining Forces Conference in 2020
* Develop an ongoing student club at school site(s)
* Host guest speakers
* Facilitate peer discussions (focus groups)

**6. Other Strategies**

Applicants may propose other activities to supplement the strategies identified above, as long as they are responsive to the Needs Assessment and focus on the specific subgroup(s) identified in this application. All supplemental activities must be directly related to tobacco-use prevention for the selected subgroup(s). The ability of the supplemental activities to prevent tobacco use must be well justified.

#### Pre- and Post-Subgroup Assessment

The applicant must include process measures to determine if the activities and strategies described in the application are actually implemented and outcome measures to determine if the implemented activities and strategies are having the desired effect of reducing and preventing tobacco-related disparities for the selected priority subgroup(s).

Applicants, if funded, will be required to incorporate a pre- and post-assessment tool into each of the activities or strategies provided to the targeted priority subgroups, staff, and parents (activities such as parent outreach events do not need to include this self-assessment tool). The self-assessment tool serves two major purposes: first, to assess effectiveness of an activity or strategy accurately and precisely, and second, to modify or enhance current activities or strategies as the data collected from the two assessments will help identify potential gaps between planned outcomes and the actual results.

For example, if the activity or strategy sets a measurable objective that 85 percent of the participating subgroup students with a positive or neutral view on e-cigarettes and vaping will change their opinion after they engage in an activity or strategy, the results from the students taking a survey, once at the beginning and once at the end, will be able to show whether the objective of 85 percent has been met. If not, the gap shows the direction for further enhancement.

The following information about the pre- and post-assessment tool must be included in the application:

1. Who will complete records of what activities and how often
2. Who will be responsible for gathering records and compiling them into progress reports
3. A measureable objective of the designed service (e.g., the means that will be used to document student participation in evidence-based lessons, the means that will be used to track the number of subgroup students who attempt to quit using tobacco, and the number of quit attempts, etc.)
4. An assessment tool, such as a survey and observation rubric
5. A brief description of the data collection process and analysis method
6. How the collaborative will review and use the process and outcome measures to determine if the program is effectively preventing tobacco use for the selected subgroup(s) (i.e., lower tobacco-use prevalence), and that the outcome is actually the result of the grantee having implemented the project’s activities and strategies

#### Project Budget

The budget section should provide a summary of costs as well as a justification for each item listed in the Health Disparity application. The proposed budget should not exceed $250,000 per year ($750,000 maximum for the three-year grant period). The CDE will review the proposed budget items for clarity, reasonableness, and purpose. Each item must delineate the intended purchase or service, and directly correlate with the proposed project. Each budget item must provide a justification, along with the unit cost of the item or service. Prior to funding, the CDE will screen for non-allowable costs and may reduce the requested amount in the application.

There are two required sections of the project budget: the Budget Summary and the Budget Justification. Neither the Budget Summary nor the Budget Justification pages count toward the page limitations for the project narrative. Applicants should refer to the Scoring Form and Rubric (Appendix 1) for more information when preparing the Budget Summary and Budget Justifications.

1. **Budget Summary.** The Budget Summary should show the subtotal of each listed object code. These subtotals should match those listed on the Budget Justification. The total budget must match the funding levels requested for each district and/or school site on the Participant Identification Form (Attachment D).
2. **Budget Justification.** The purpose of the Budget Justification narrative is to provide specific detail justifying the cost of each of the items listed in the Budget Summary, and to provide support for the amount itemized for those budgeted items. The Budget Justification must be clearly aligned with the program as described in the application. Numbers within formulas should correspond to the numbers provided in the application, (e.g., staffing hours, number of students, number of school sites, etc.).

To complete the Budget Justification the narrative table must:

1. Specify each position funded by the project on a separate line item. The time base and annual cost must be included, as shown in the Sample Budget Summary and Justification (Appendix 2).
2. Provide clear unit cost computations for each budget item.
3. Provide in detail all personnel and non-personnel costs that are included in the proposed project.
4. Provide a subtotal for each object code.

**Every dollar amount proposed must be fully explained.** Every dollar amount should be accompanied by a computation that includes a unit cost for the item being purchased (e.g., 1 set of curriculum materials for Project Alert for each of 30 classrooms at $240 each, 1 x 30 x 240 = $7,200). An exception to this rule is the cost of LEA staff and contract staff. In this case, only the time base and annual cost need be stated, as shown in Appendix 2. Please refer to the Budget Justification for additional information.

### VI. Reading and Scoring the Application Narratives

#### Scoring Rubric

The Scoring Form and Rubric (Appendix 1) is based on a 100 point scale. Application narratives will generally score higher if they describe programs that:

1. Demonstrate high levels of involvement by school staff, students, parents, and community organizations while developing and implementing the proposed priority subgroup(s) Program Plan.
2. Provide a comprehensive and clear Needs Assessment completed by the applicant that includes supporting data that makes a compelling case for the need for tobacco education and prevention services for the specific subgroup(s).
3. Include a comprehensive Program Plan that is likely to be effective in addressing the identified tobacco-use prevention needs of the priority subgroup, is coordinated with current community-based tobacco-use prevention efforts, and contains a plan for implementing evidence-based programs, youth development strategies, and intervention and cessation services for the selected priority subgroup(s).
4. Present a pre- and post-assessment plan that provides a means for collecting process and outcome measures, ensuring the Program Plan is effective through measurable objectives, and ensuring that activities are fully implemented and effective.
5. Establish a detailed budget that reasonably reflects and justifies the expenditures in the proposed Program Plan.

#### Reading and Scoring Process

The review and scoring process for the Health Disparities application narratives will take place in June 2019. The review process will consist of several stages: (1) initial CDE screening, (2) reader review and scoring of the narratives, and (3) determination of FRPM percentage. Due to the limited amount of funding available, this will be considered a highly competitive grant with a limited number of funded applications.

* + - 1. **CDE Screening.** Each application will first be screened by the CDE to ensure that it meets all technical requirements (forms, signatures, etc.) as required in the RFA (see Section IX: Application Checklist). Each application successfully passing the initial CDE screening process will next move on to the reader review and scoring of the application narratives process.
      2. **Review and Scoring.** Each application narrative will be independently read and scored by two application reviewers selected by the TUPE Office. Reviewers will be asked to evaluate the application narratives to determine the extent to which the narratives meet the program elements identified in the Scoring Form and Rubric (Appendix 1), and whether the narrative adequately describes a quality program. Each section with be scored as either Outstanding (4 points), Complete (3 points), Sufficient (2 points), Developing (1 point), or Weak (0 points).

The scores of both readers will be added together and averaged to obtain the application’s final score, then ranked from highest to lowest score across all applications. **Comments from reviewers will not be provided. In addition, the professional judgment of the application reviewers will not be considered on appeal.**

* + - 1. FRPM Percentage**.** Each school district and/or individual school site identified in the application will be reviewed for their FRPM percentage. The FRPM data will only serve as a tiebreaker if applications receive the same score on their narratives.

The FRPM data used in the Funding Priority process will be the data reported to the CDE in the California Longitudinal Pupil Achievement Data System (CALPADS) during the 2017–18 school year. The CDE will obtain data on the percentage of students eligible for FRPM from the FY 2017–18 FRPM downloadable file. Please visit the CDE Student Poverty FRPM Data web page at <https://www.cde.ca.gov/ds/sd/sd/filessp.asp>. The data used represents the count of the FRPM eligible students ages five through seventeen who were enrolled on Census Day, October 2017, and certified through the FY 2017–18 CALPADS Fall 1 submission. Alternative data sources will not be considered for this RFA, only FRPM data as reported through CALPADS.

### VII. Appeals Process

Applicants who wish to appeal the CDE Intent to Award list must submit a letter of appeal to the CDE within 10 days of the CDE’s posting of the list. Late appeals and postmarks will not be accepted. Emailed letters of appeal will not be accepted. **Appeals are limited to the grounds that the CDE’s action(s) violated a state statute or regulation.** The professional judgment of the application readers will not be considered on appeal.

The letter of appeal must have an original “wet” signature in blue ink from the Superintendent or the Designee and should be mailed or hand delivered to:

Health Disparities TUPE Grant Application

Educator Excellence and Equity Division—TUPE Office

California Department of Education

1430 N Street, Suite 6408

Sacramento, CA 95814-5901

The letter of appeal shall include:

1. A clear, concise statement of the action being appealed,
2. The state statute and/or regulation which the CDE is alleged to have violated,
3. The specific evidence being submitted to support the appeal, and
4. The specific remedy sought.

A final decision will be made by the CDE within 20 working days of the filing deadline for appeals. The decision shall be the final administrative action afforded to the appellant.

### VIII. Application Submission Elements

#### Intent to Submit an Application

Prospective applicants are required to submit the Intent to Submit an Application (ITS) Form. **Failure to submit this completed form will result in disqualification of the application from the reading and scoring process.** Submission of the Intent to Submit form does not obligate the agency to submit an application. An email confirmation of receipt of the ITS form will be sent to the contact person identified on the form.

The prospective applicant is responsible for ensuring that the ITS form is received by the CDE no later than **Friday,** **May 24, 2019, by 4:00 p.m.** Postmarks will not be accepted.

#### Application Technical Requirements and Disqualifications

1. An original Health Disparities grant application and two copies must be received by the CDE no later than 4:00 p.m. on Friday, June 14, 2019. Postmarks will not be accepted. Late submissions, faxed, or emailed applications, and those without the requested number of copies will be disqualified.

Mail or hand deliver applications to:

Health Disparities Grant Application

Educator Excellence and Equity Division—TUPE Office

California Department of Education

1430 N Street, Suite 6408

Sacramento, CA 95814-5901

1. The original Application Cover Page Form (Attachment B) shall include all original wet signatures in blue ink. Applications that do not have original signatures from the Superintendent or Designee using blue ink will be disqualified.

A Designee may provide the authorized signature as long as a copy of a recent governing board resolution or minutes, specifically authorizing the Designee to accept and sign as a proxy for financial statements and legally binding documents, is included with the application materials (Attachment C). In the absence of an authorized signature, the applicant will be disqualified.

1. Application Narratives:
   1. Must be in 12-point Arial font, single-spaced, normal character spacing, with one-inch minimum margins. Tables or boxes used to present narrative information in text form must be in 12-point Arial font. Applicants may only use a smaller Arial font when inserting pie charts or graphs to present technical information not of a narrative nature. The CDE will screen applications to ensure compliance with these requirements. If smaller font sizes or margins are used in the application, the CDE staff shall compute the number of excess characters added to the application as a result, and will draw a red line through the extra characters. Application readers will not be allowed to review the red-line characters in the application.
   2. Must be submitted on single-sided standard white, 8½- by 11-inch paper. The narrative section shall not exceed a total of 15 pages for a single LEA application. If the narrative section exceeds the maximum allowed pages, the CDE will draw a red line through the extra pages and will not allow application readers to review those pages.
2. Application packets must be stapled or clipped together for submission and in the order identified on the Application Checklist (Section IX). Do not use binders, covers, flat folders, or sleeves. Do not include section separators or blank pages.
3. TUPE Coordinator Letter of Support—A letter of support from the regional TUPE Coordinator should be submitted by the applicant demonstrating the collaborative effort of implementing the Program Plan for the identified subgroup(s). Applicants must include this letter or the application will be disqualified.
4. The Budget Summary and Budget Justification requested must not exceed $250,000 per year ($750,000 maximum for the 3-year grant period).

Note: Submission of an application packet constitutes consent to a release of information and waiver of the applicant’s right to privacy with regard to information provided in response to this RFA. Ideas and format contained in the application will become the property of the CDE.

### IX. Application Checklist

Applicants must submit a completed Health Disparities Application package to the CDE no later than **Friday, June 14, 2019, at 4 p.m., or the application will be disqualified.** The various application elements must be assembled in the order listed below. Each of the following items must be submitted for the application to be considered complete. All forms referenced in this RFA may be found on the TUPE Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp>.

* **Intent to Submit an Application (Attachment A)**—The abstract must include the applicant agency name, the project coordinator name, and contact information; identify the priority subgroup(s) to be served, identify the proposed programs and activities (prevention, youth development, intervention, cessation/referral); and briefly describe how the proposed program will address the applicant’s unmet needs for tobacco-use prevention. **Due Friday, May 24, 2019**
* **Application Cover Page (Attachment B)** with original, wet signature from the Superintendent or Designee
* **Authorized Designee Form (Attachment C)** and a copy of a **recent governing board resolution or minutes,** specifically authorizing the Designee to accept and sign as a proxy for financial statements and legally binding documents (applicable only if a Designee is signing in the absence of the Superintendent)
* **Participant Identification** **Form (Attachment D)** (list of participating school sites)
* **Application Narrative (maximum of 15 pages)**
* **TUPE Coordinator Letter of Support**
* **Budget Summary Template (Attachment E1)**
* **Budget Justification Template (Attachment E2)**
* **Project Plan and Activities Matrix (Attachment F)**
* **Grant Certified Assurances (Attachment G)**

Appendix 1

Page 1 of 7

### Appendix 1: Scoring Form and Rubric

| **Rubric Category** | **Score** | **Possible Points** |
| --- | --- | --- |
| Collaborative Process |  | 12 |
| Needs Assessment |  | 20 |
| Description of the Program Plan |  | 40 |
| Pre-and Post-Assessment Plan |  | 16 |
| Project Budget Justification |  | 12 |
| **Total** |  | 100 |

Each of the above categories contains questions or instructions that are assigned a point value. The point scale is divided into five columns labeled **Outstanding, Complete, Sufficient, Developing, and Weak.**

The applicant’s response to each question is evaluated on the following criteria:

* **Outstanding:** The response is very clear, extremely detailed and relevant, and presents a compelling argument supporting the proposal and the intent of the program.
* **Complete:** The response is clear and detailed and presents a persuasive argument supporting the proposal and the intent of the program.
* **Sufficient:** The response addresses the question(s) adequately, provides support for the proposal, and supports the intent of the program.
* **Developing:** The response partially addresses the questions, provides limited support for the proposal, or partially supports the intent of the program.
* **Weak:** The response does not address the question(s) or a response was not provided. Information presented does not provide any understanding of the applicant’s intent, provides limited information requested by the Request for Applications, or does not support the intent of the program.

Appendix 1

Page 2 of 7

| **Collaborative Process—12 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| **Broad Collaborative Group**   1. To what extent does the applicant demonstrate involvement by a broad inclusive group of school staff, students, parents, and community organizations in developing and implementing the proposed subgroup(s) Program Plan? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe the ongoing involvement, regular meetings, and frequent interactions made by the collaborative group? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe how the future participation of students, parents, and community members in the project will be ensured? | **4** | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |  |

Appendix 1

Page 3 of 7

| **Needs Assessment—20 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| **School/Community Description**   1. To what extent does the applicant describe the subgroup(s) to be served and why the subgroup(s) were chosen? | **4** | **3** | **2** | **1** | **0** |
| **Focus Group(s) Data**   1. To what extent does the applicant describe the focus group process used to determine school tobacco-use prevention concerns for the specific subgroup(s)? | **4** | **3** | **2** | **1** | **0** |
| **Focus Group(s) Data**   1. To what extent did the focus group include staff, student, and parent/community groups representative of the subgroup(s)? | **4** | **3** | **2** | **1** | **0** |
| **Data Sources**   1. To what extent does the applicant describe data related to tobacco-use prevalence for the specific subgroup(s) from multiple cited sources and surveys, including, but not limited to, the California Healthy Kids Survey? | **4** | **3** | **2** | **1** | **0** |
| **Needs Analysis**   1. To what extent does the applicant describe the type of needs analysis conducted for the specific subgroup(s), the results of the analysis, and other compelling need information? | **4** | **3** | **2** | **1** | **0** |
| **Tota**l |  |  |  |  |  |

Appendix 1

Page 4 of 7

| **Description of the Program Plan—40 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| 1. To what extent does the applicant describe why the collaborative group selected the proposed curriculum and the reasons for the selections? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe the youth engagement strategies linked to tobacco-use prevention that targets the specific subgroups? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe intervention strategies that target the specific subgroup(s)? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe cessation strategies or referrals to cessation resources? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe parent involvement strategies that target the specific subgroup(s)? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe community involvement and/or local lead agency strategies that target the specific subgroup(s)? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe training strategies that target the specific subgroup(s)? | **4** | **3** | **2** | **1** | **0** |

Appendix 1

Page 5 of 7

| **Description of the Program Plan—40 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| 1. To what extent does the applicant provide sufficient justification for the use of supplemental programs in support of the evidence-based prevention programs? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the activities matrix lay out program activities, target groups, hours of services, and process and outcome measures? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe the daily operations and management of the project, including who will deliver the project services and direct the project on a daily basis? | **4** | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |  |

Appendix 1

Page 6 of 7

| **Pre- and Post-Assessment Plan—16 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| 1. To what extent does the applicant provide a plan for collecting process and outcome measures, including who will complete records and compile data into reports? | **4** | **3** | **2** | **1** | **0** |
| 1. How will data be summarized, reviewed, and implemented? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe the assessment tool and how the collaborative will use process measures to ensure the project is on track? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent does the applicant describe the measureable objectives to ensure the project is effective? | **4** | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |  |

Appendix 1

7 of 7

| **Project Budget Justification—12 Possible Points** | **Outstanding** | **Complete** | **Sufficient** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- | --- |
| 1. To what extent are all funded personnel (certificated, classified, and contract) separately described, including detailed time base, specific annual costs, duties, and if applicable, justification for clerical support in excess of 0.1 full-time equivalent? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent are budget items related to an activity shown in the activities table? | **4** | **3** | **2** | **1** | **0** |
| 1. To what extent are the proposed budget items realistic, cost-effective, and justified? | **4** | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |  |

Appendix 2

Page 1 of 12

### Appendix 2: Sample Budget Summary and Justification

Applicant Agency: Pueblo Hills Unified School District

For use by applicants in completing the project budget and budget justification pages as discussed in the Tobacco-Use Prevention Education (TUPE) Program Youth Engagement to Address Tobacco Related Health Disparities Grant.

**Budget Summary**

| Object Code | Line Item | Year 1 | Year 2 | Year 3 | Total |
| --- | --- | --- | --- | --- | --- |
| 1000 | Certificated Salaries | $66,079.25 | $61,519.25 | $61,519.25 | $189,117.15 |
| 2000 | Classified Salaries | $5,000.00 | $5,000.00 | $5,000.00 | $15,000.00 |
| 3000 | Benefits | $13,746.22 | $12,925.42 | $12,925.42 | $39,597.06 |
| 4200 | Books and Other Reference Materials | $0 | $550.00 | $0 | $550.00 |
| 4300 | Materials and Supplies | $3,232.00 | $3,130.00 | $3,130.00 | $9,492.00 |
| 4400 | Noncapitalized Equipment | $0 | $0 | $0 | $0 |
| 5200 | Travel and Conferences | $8,249.00 | $8,249.00 | $8,249.00 | $24,747.00 |

Appendix 2

Page 2 of 12

| Object Code | Line Item | Year 1 | Year 2 | Year 3 | Total |
| --- | --- | --- | --- | --- | --- |
| 5600 | Rentals, Leases, Repairs, and Noncapitalized Improvements | $0 | $0 | $0 | $0 |
| 5700 | Interprogram Services | $0 | $1,893.00 | $0 | $1,893.00 |
| 5800–0000 | Noninstructional Consultant Services | $8,333.34 | $8,333.33 | $8,333.33 | $25,000.00 |
| 5800–1000 | Instructional Consultant Services | $5,400.00 | $5,400.00 | $5,400.00 | $16,200.00 |
| 7000\* | Summary of Direct Costs Subject to Indirect Costs | $110,039.81 | $107,000.00 | $104,557.00 | $321,596.81 |
| 7000 Year 1 | Year 1 Indirect Cost Rate Estimated at 5.45% | $5,997.17 | N/A | N/A | $5,997.17 |
| 7000 Year 2 | Year 2 Indirect Cost Rate Estimated at 6.29% | N/A | $6,730.30 | N/A | $6,730.30 |
| 7000 Year 3 | Year 3 Indirect Cost Rate Estimated at 6.85% | N/A | N/A | $7,162.15 | $7,162.15 |
| 5100 | Sub-agreements for Services (Amounts over $25,000 per Subagreement) | $8,327.46 | $8,327.47 | $8,327.47 | $24,982.40 |
|  | TOTAL BUDGET | $124,364.44 | $122,057.77 | $120,046.62 | $366,468.83 |

Appendix 2

Page 3 of 12

**Budget Justification**

**Year 1**

Object Code 1000—Certificated Salaries **$66,079.25**

**TUPE Health Disparities Project Coordinator (Nosmo King)**

.65 full-time equivalent (FTE).

Duties: Coordinating all aspects of the Health Disparity TUPE Program: monitoring of budget, ongoing communications with individual sites to monitor program progress, coordination of staff development trainings conducted by community partners at Pueblo Hills Unified School District (PHUSD) schools, completing annual disparity TUPE reports, disseminating progress reports to stakeholders, and ensuring overall Health Disparity TUPE Program compliance.

$88,645 x .65 FTE = $57,619.25

**Substitutes for Project Alert Staff Development**

(One-day training during fall 2017 for 24 grades seven and eight Project Alert [PA] teachers)

24 subs x $190 (sub rate) = $4,560.00

**Friday Night Live/Club Live Advisor Stipend**

($1,300/teacher) at 4 Middle Schools and 2 High Schools = 6 schools. TUPE will support half of stipend.

Duties: Host weekly special meetings during the entire school year, attend Sacramento County Office of Education (COE) Friday Night Live/Club Live (FNL/CL) advisor trainings, oversee FNL/CL tobacco education schoolwide activities planned by youth club members, partner with youth leaders on Club Rush Day in recruiting youth from disparity populations, promote involvement in Stop Tobacco Access to Kids Enforcement (STAKE) Act Youth Decoy Program and Hackademy Award Night. Craft and implement outreach programs aimed at parents.

6 schools x $650 stipend = $3,900.00

**Object Code 2000—Classified Salaries $5,000.00**

**TUPE Health Disparities Assistant/Administrative Support**

Duties: Provides administrative support to TUPE Project Coordinator, disseminates TUPE information to staff with key TUPE responsibilities, assists TUPE Project Coordinator in coordination/room set-up of TUPE staff trainings, TUPE record keeping, and distribution of TUPE incentive items to school sites.

.1 FTE which = 20 hours/month x $25/hour x 10 months = $5,000.00

Appendix 2

Page 4 of 12

Object Code 3000—Benefits **$13,746.22**

**TUPE Health Disparities Project Coordinator Benefits** (calculated at 18% of salary)

Total Salary $57,619 x .18 = $10,371.42

**PA Substitute Teachers Benefits** (18% of salary)

Total Salary $4,560 x .18 = $820.80

**FNL/CL Club Advisor Benefits**

(Calculated at 18%) Total Salary $7,800 x .18 = $1,404.00

**TUPE Health Disparities Assistant/Administrative Support Benefits** (Classified staff rate 23%)

Total Salary $5,000 x .23 = $1,150.00

**Object Code 4300—Materials and Supplies $3,232.00**

**Student Incentives for FNL/CL**

Student participants—$300 per club

Tobacco free education pencils, stickers, posters, t-shirts, art materials for club activities and tobacco prevention educational youth brochures

$300/year x 6 clubs = $1,800.00

**Office Supplies/Paper and Copying Specific to PA**

Student/parent handouts for 2,850 seventh/eighth graders

$22/month x 10 months x 4 schools = $880.00

**TUPE Office Supplies**

$45/month x 10 months = $450.00

**Lunch for 1 day PA Training**

(Fall 2017 off-site training—24 teachers at $4.25 = $102.00)

Appendix 2

Page 5 of 12

**Object Code 5200—Travel and Conferences $8,249.00**

**Mileage—TUPE Coordinator**

Travel from district office to Tobacco Control Meetings, County Office of Education TUPE Coordinators meetings, school site visits for TUPE Program monitoring/ implementation and support

Estimated at 180 miles/month at $.565/miles x 10 months = $1,017.00

**Mileage—Another Choice Another Chance**

Reimbursement for Another Choice Another Chance (ACAC) staff who provide 1:1 tobacco cessation support at Obama Youth Academy, Fuller High School, and Kennedy High School

Estimated at 320 miles/week x 4 weeks = 1,280 miles/month at $.565/miles x 10 months = $7,232.00

Travel from ACAC home office to each of the 3 designated sites every week)

**Object Code 5800–0000—Noninstructional Consultant Services $8,333.34**

**LMN Consulting** (10% of budget)

Responsibilities: TUPE Program evaluation, data collection, newsletter, and meetings with TUPE Project Coordinator and key TUPE Program staff (program advisors/coordinators)

10% x $499,824 = $49,982.40 for three (3) fiscal years

$49,982.40/3 = $16,660.80 per fiscal year ($8,333.34 for Object Code 5800 and $8,327.46 for Object Code 5100)

($24,982.40 posted in 5100 subagreements, $25,000.00 posted in 5800 noninstructional consultant services)

**Object Code 5800–1000—Instructional Consultant Services $5,400.00**

**Sasquatch COE—FNL/CL Program**

Fees (technical assistance to school site FNL/CL advisors provided by Sasquatch COE staff and youth development site survey reports)

Option 3 fee service = $900 per site x 6 sites = $5,400.00

Appendix 2

Page 6 of 12

Object Code 7000—**Summary of Direct Costs Subject to**

**Indirect Costs $110,039.81**

Object Code 7000—***Y*ear 1 Indirect Cost Rate Estimated at 5.45**% **$5,997.17**

**Object Code 5100—Subagreements for Service**s **$8,327.46**

(Amounts over $25,000 per subagreement)

Balance from LMN contract

**Total Budget—Year 1 $124,364.44**

(Sum of Summary of Direct Costs Subject to Indirect Costs, Year 1 Indirect Cost, andSubagreements for Services)

Appendix 2

Page 7 of 12

**Year 2**

Object Code **1000—Certificated Salaries $61,519.25**

**TUPE Health Disparities Project Coordinator (Nosmo King)**

.65 full-time equivalent (FTE).

Duties: Coordinating all aspects of the Health Disparity TUPE Program: monitoring of budget, ongoing communications with individual sites to monitor program progress, coordination of staff development trainings conducted by community partners at PHUSD schools, completing annual disparity TUPE reports, disseminating progress reports to stakeholders, and ensuring overall Health Disparity TUPE Program compliance.

$88,645 x .65 FTE = $57,619.25

**Friday Night Live/Club Live Advisor Stipend**

($1,300/teacher) at 4 Middle Schools and 2 High Schools = 6 schools. TUPE will support half of stipend.

Duties: Host weekly special meetings during the entire school year, attend Sacramento County Office of Education Friday Night Live/Club Live (FNL/CL) advisor trainings, oversee FNL/CL tobacco education schoolwide activities planned by youth club members, partner with youth leaders on Club Rush Day in recruiting youth from disparity populations, promote involvement in STAKE Act Youth Decoy Program and Hackademy Award Night. Craft and implement outreach programs aimed at parents.

6 schools x $650 stipend = $3,900.00

**Object Code** **2000—Classified Salaries $5,000.00**

**TUPE Health Disparities Assistant/Administrative Support**

Duties: Provides administrative support to TUPE Project Coordinator, disseminates TUPE information to staff with key TUPE responsibilities, assists TUPE Project Coordinator in coordination/room set-up of TUPE staff trainings, TUPE record keeping, and distribution of TUPE incentive items to school sites.

.1 FTE which = 20 hours/month x $25/hour x 10 months = $5,000.00

**Object Code** **3000—Benefits $12,925.42**

**TUPE Health Disparities Project Coordinator Benefits** (calculated at 18% of salary)

Total Salary $57,619 x .18 = $10,371.42

**FNL/CL Club Advisor Benefits**

(Calculated at 18%) Total Salary $7,800 x .18 = $1,404.00

Appendix 2

Page 8 of 12

**TUPE Health Disparities Assistant/Administrative Support Benefits**

(Classified staff rate 23%)

Total Salary $5,000 x .23 = $1,150.00

Object Code **4200—Books and Other Reference Material $550.00**

California Healthy Kids Survey (CHKS) Site level reports ($50 each)

$50 x 11 sites x 1 administration = $550

**Object Code** **4300—Materials and Supplies $3,130.00**

**Student Incentives for FNL/CL**

Student participants—$300 per club

Tobacco free education pencils, stickers, posters, t-shirts, art materials for club activities and tobacco prevention educational youth brochures

$300/year x 6 clubs = $1,800.00

**Office Supplies/Paper and Copying Specific to PA**

Student/parent handouts for 2,850 seventh/eighth graders

$22/month x 10 months x 4 schools = $880.00

**TUPE Office Supplies**

$45/month x 10 months = $450.00

**Object Code** **5200—Travel and Conferences $8,249.00**

**Mileage—TUPE Coordinator**

Travel from district office to Tobacco Control Meetings, County Office of Education TUPE Coordinators meetings, school site visits for TUPE Program monitoring/ implementation and support

Estimated at 180 miles/month at $.565/miles x 10 months = $1,017.00

**Mileage—Another Choice Another Chance**

Reimbursement for Another Choice Another Chance (ACAC) staff who provide 1:1 tobacco cessation support at Obama Youth Academy, Fuller High School, and Kennedy High School

Estimated at 320 miles/week x 4 weeks = 1,280 miles/month at $.565/miles x 10 months = $7,232.00

Travel from ACAC home office to each of the 3 designated sites every week)

Appendix 2

Page 9 of 12

**Object Code** **5700—Interprogram Services $1,893.00**

**CHKS Scantron copies**

6,000 student scantrons (grades seven, nine, and eleven) x $.30 x 1 CHKS administration = $1,800 + 1% handling ($18) + shipping (estimate) $75 = $1,893.00

**Object Code** **5800–0000—Noninstructional Consultant Services $8,333.33**

**LMN Consulting** (10% of budget)

Responsibilities: TUPE Program evaluation, data collection, newsletter, and meetings with TUPE Project Coordinator and key TUPE Program staff (program advisors/coordinators)

10% x $499,824 = $49,982.40 for three (3) fiscal years

$49,982.40/3 = $16,660.80 per fiscal year ($8,333.33 for Object Code 5800 and $8,327.47 for Object Code 5100)

($24,982.40 posted in 5100 subagreements, $25,000.00 posted in 5800 noninstructional consultant services)

**Object Code** **5800–1000—Instructional Consultant Services $5,400.00**

**Sasquatch COE—FNL/CL Program**

Fees (technical assistance to school site FNL/CL advisors provided by Sasquatch COE staff and youth development site survey reports)

Option 3 fee service = $900 per site x 6 sites = $5,400.00

**Object Code 7000—Summary of Direct Costs Subject to**

**Indirect Costs $107,000.00**

**Object Code 7000—Year 2 Indirect Cost Rate Estimated at 6.29% $6,730.30**

**Object Code 5100—Subagreements for Services $8,327.47**

(Amounts over $25,000 per subagreement)

Balance from LMN contract

**Total Budget—Year 2 $122,057.77**

(Sum of Summary of Direct Costs Subject to Indirect Costs, Year 2 Indirect Cost, andSubagreements for Services)

Appendix 2

Page 10 of 12

**Year 3**

**Object Code** **1000—Certificated Salaries $61,519.25**

**TUPE Health Disparities Project Coordinator (Nosmo King)**

.65 full-time equivalent (FTE).

Duties: Coordinating all aspects of the Health Disparity Tobacco-Use Prevention Education (TUPE) Program: monitoring of budget, ongoing communications with individual sites to monitor program progress, coordination of staff development trainings conducted by community partners at FCUSD schools, completing annual disparity TUPE reports, disseminating progress reports to stakeholders, and ensuring overall Health Disparity TUPE Program compliance.

$88,645 x .65 FTE = $57,619.25

**Friday Night Live/Club Live Advisor Stipend**

($1,300/teacher) at 4 Middle Schools and 2 High Schools = 6 schools. TUPE will support half of stipend.

Duties: Host weekly special meetings during the entire school year, attend Sacramento County Office of Education Friday Night Live/Club Live (FNL/CL) advisor trainings, oversee FNL/CL tobacco education schoolwide activities planned by youth club members, partner with youth leaders on Club Rush Day in recruiting youth from disparity populations, promote involvement in STAKE Act Youth Decoy Program and Hackademy Award Night. Craft and implement outreach programs aimed at parents.

6 schools x $650 stipend = $3,900.00

**Object Code** **2000—Classified Salaries $5,000.00**

**TUPE Health Disparities Assistant/Administrative Support**

Duties: Provides administrative support to TUPE Project Coordinator, disseminates TUPE information to staff with key TUPE responsibilities, assists TUPE Project Coordinator in coordination/room set-up of TUPE staff trainings, TUPE record keeping, and distribution of TUPE incentive items to school sites.

.1 FTE which = 20 hours/month x $25/hour x 10 months = $5,000.00

**Object Code** **3000—Benefits $12,925.42**

**TUPE Health Disparities Project Coordinator Benefits** (calculated at 18% of salary)

Total Salary $57,619 x .18 = $10,371.42

**FNL/CL Club Advisor Benefits**

(Calculated at 18%) Total Salary $7,800 x .18 = $1,404.00

Appendix 2

Page 11 of 12

**TUPE Health Disparities Assistant/Administrative Support Benefits**

(Classified staff rate 23%)

Total Salary $5,000 x .23 = $1,150.00

**Object Code** **4300—Materials and Supplies $3,130.00**

**Student Incentives for FNL/CL**

Student participants—$300 per club

Tobacco free education pencils, stickers, posters, t-shirts, art materials for club activities and tobacco prevention educational youth brochures

$300/year x 6 clubs = $1,800.00

**Office Supplies/Paper and Copying Specific to PA**

Student/parent handouts for 2,850 seventh/eighth graders

$22/month x 10 months x 4 schools = $880.00

**TUPE Office Supplies**

$45/month x 10 months = $450.00

**Object Code** **5200—Travel and Conferences $8,249.00**

**Mileage—TUPE Coordinator**

Travel from district office to Tobacco Control Meetings, County Office of Education TUPE Coordinators meetings, school site visits for TUPE Program monitoring/ implementation and support

Estimated at 180 miles/month at $.565/miles x 10 months = $1,017.00

**Mileage—Another Choice Another Chance**

Reimbursement for Another Choice Another Chance (ACAC) staff who provide 1:1 tobacco cessation support at Obama Youth Academy, Fuller High School, and Kennedy High School

Estimated at 320 miles/week x 4 weeks = 1,280 miles/month at $.565/miles x 10 months = $7,232.00

Travel from ACAC home office to each of the 3 designated sites every week)

Appendix 2

Page 12 of 12

**Object Code** **5800–0000—Noninstructional Consultant Services $8,333.33**

**LMN Consulting** (10% of budget)

Responsibilities: TUPE Program evaluation, data collection, newsletter, and meetings with TUPE Project Coordinator and key TUPE Program staff (program advisors/coordinators)

10% x $499,824 = $49,982.40 for three (3) fiscal years

$49,982.40/3 = $16,660.80 per fiscal year ($8,333.33 for Object Code 5800 and $8,327.47 for Object Code 5100)

($24,982.40 posted in 5100 subagreements, $25,000.00 posted in 5800 noninstructional consultant services)

**Object Code** **5800–1000—Instructional Consultant Services $5,400.00**

**Sasquatch COE—FNL/CL Program**

Fees (technical assistance to school site FNL/CL advisors provided by Sasquatch COE staff and youth development site survey reports)

Option 3 fee service = $900 per site x 6 sites = $5,400.00

**Object Code** **7000—Summary of Direct Costs Subject to**

**Indirect Costs $104,557.00**

**Object Code 7000—Year 3 Indirect Cost Rate Estimated at 6.85% $7,162.15**

Object Code **5100—Subagreements for Services $8,327.47**

(Amounts over $25,000 per subagreement)

Balance from LMN contract

**Total Budget—Year 3 $120,046.62**

(Sum of Summary of Direct Costs Subject to Indirect Costs, Year 3 Indirect Cost, andSubagreements for Services)

Appendix 3

Page 1 of 6

### Appendix 3: Fiscal Terms and Conditions

Successful applications will be approved for a three-year project period, beginning with fiscal year (FY) 2019–20. The California Department of Education (CDE) will issue a new grant award each fiscal year for each of the three years, contingent upon the CDE’s receipt of state allocations for the Tobacco-Use Prevention Education (TUPE) Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program. The grant award period will run concurrently with the state fiscal year, beginning on July 1 and ending the following June 30. The last year of funding during the three-year project period will be FY 2021–22. Grant funding beyond FY 2021–22 will be determined based upon the results of a new Request for Applications process.

Successful applicants will not automatically receive the amount of funding requested in the application. Prior to funding, unreasonable expenditures may be reduced and disallowed items will be withheld from the grant award.

Budgets will be reviewed for allowable and reasonable expenditure requests following the Grant Readers’ Review. If budget adjustments are made for any application, the rank order (which will be based on the narrative score and the free or reduced price meals in the case of a tiebreak) will remain the same.

At the beginning of each fiscal year, the local educational agency (LEA) will submit to the CDE a Grantee Budget Request Form describing its spending plan for the current year. The distribution of funding among the various categories of cost must clearly support the activities approved in the LEA’s application. If the LEA wishes to change the alignment of funding in its budget, and the changes total more than 10 percent of the grant amount, the LEA must submit a budget revision request to the CDE.

LEAs will also be required to submit to the CDE two expenditure reports each fiscal year indicating grant expenditures to date. The expenditure report due dates will be

February 15 and August 15. This award does not allow grantees to carryover unexpended grant funds of more than 25 percent into the next fiscal year without justification and approval of the CDE.

Appendix 3

Page 2 of 6

**Payment Process**

All payments are subject to Budget Act approval. Payments will be distributed as follows:

1. Grantees will receive a cash advance equal to 50 percent of the grant award after the State Budget has been signed and the LEA has returned the signed Grant Award Notification (AO-400) form with documents satisfactorily addressing all program and budget stipulations and a Grantee Budget Request Form.
2. Grantees will be paid 40 percent after the CDE receives and approves the February 15 expenditure report, providing the LEA has expended at least 65 percent of the first payment.
3. The final payment of 10 percent will be held pending receipt and approval of all required reports, including the final expenditure report due on August 15, 2022.

All funding must be expended no later than June 30, 2022. The carryover of unexpended grant funds after June 30, 2022, is not allowed.

**Personnel Requirements**

Personnel required for the Tobacco-Use Prevention Education (TUPE) Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program must be clearly identified and justified in the narrative and on the budget sections of the application. Project staff may be LEA personnel or contract staff from a partner agency and must provide services related to the Program Plan as described in the RFA. Funding for administrative personnel, other than the Project Coordinator, cannot be funded through the TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program.

1. **Project Coordinator.** The duties of the Project Coordinator may vary, and include, but are not limited to:
   1. Provide overall coordination of project staff and activities, as well as provide direct services to the identified subgroup(s) described in the Program Plan to fully implement the TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program.
   2. Ensure that all project funds expended or obligated are allowable costs and in compliance with the approved budget.
   3. Maintain required documentation of project services, activities, accomplishments, and program records.

Appendix 3

Page 3 of 6

* 1. Develop and provide mandatory grant implementation and annual evaluation reports, maintain and/or monitor any budget and project modifications, project claim invoices, and fiscal reports.
  2. Coordinate ongoing data collection for evaluation purposes. Facilitate ongoing collaborative meetings.

The exact title of the Project Coordinator position is determined by the LEA; however, if a project coordinator is also providing direct services, the application must clearly identify the Project Coordinator duties, separate from the duties of a direct service provider. The total percentage of time for any individual person funded by any TUPE grant cannot exceed 100 percent.

1. **Clerical Staff.** A single LEA applicant may propose up to .1 full-time equivalent (FTE) of a clerical position. Consortium applicants may propose up to .1 FTE of a clerical position per participating LEA. The title and duties of clerical staff may vary. Details of the duties for this position must be clearly identified in the Budget Narrative Section of the application. Clerical staff time greater than .1 FTE per LEA must be clearly justified.
2. **Contracted Direct Service Providers.** There is no time requirement for contracted staff to provide direct services or evaluate the TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program. Each paid staff person must have specific duties related to direct tobacco-use prevention services and activities clearly described in the budget narrative.

**Allowable Costs**

Grant funds must be used as proposed in the approved application or subsequent budget revision(s) approved by the CDE. Costs charged to TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program budgets must be limited to those materials and activities which directly address health disparities, tobacco-use prevention, youth development, intervention, or cessation/referral strategies. Funds may be used for:

1. Project Coordinator position.
2. Staff for the project, if applicable.
3. Contracted direct service providers.
4. Associated costs related to direct services, such as:

Appendix 3

Page 4 of 6

* Training and release time
* Services required by project staff, service providers, parents, and students
* Materials and supplies
* Evaluation contracts

1. Noncapitalized equipment costs less than $5,000 per item. Equipment purchased with TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program funds may only be used by personnel assigned to the TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant Program. The amount budgeted for individual equipment cannot exceed the percentage of time the person using the equipment is assigned to the TUPE Program. Funds from other sources must contribute to equipment costs designated for shared-use with other programs, and costs are to be prorated.
2. Student incentives, awards, and recognitions. These items must be directly related to tobacco-use prevention. Incentives must have a tobacco-free message on the item. Incentives, awards, and recognitions, including gift cards, can be used for the interest of the school and cannot be in the form of cash or for individual or personal use. Total planned expenditures for all incentives, awards, and recognitions must not exceed 5 percent of the total grant award. Applicants are encouraged to review the LEA’s policies regarding use of funds for such items.
3. The percentage used to determine Indirect Cost Rates are not to exceed the CDE-approved rate.
4. Travel costs related to the project. These costs shall be reimbursed at rates not greater than those established in bargaining unit agreements to which the LEA is subject.

**Nonallowable Costs**

TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant funds are intended to supplement existing programs and must not be used to supplant other state or federal funds now being used for existing staff or activities. Grant funds cannot be transferred to any other program accounts that are for specific purposes other than tobacco-use prevention, youth development, intervention, or cessation/referral.

Appendix 3

Page 5 of 6

Funds may **not** be used for:

1. Compensation or expenses of administrative personnel other than the Project Coordinator position
2. Expenditures for land, buildings, and other intangible capital assets, including items acquired through leases with option to purchase and capitalized equipment costs in excess of $5,000
3. Applicants are encouraged to review Procedure 770, Distinguishing between Supplies and Equipment, in the California School Accounting Manual (CSAM) for further discussion regarding capitalized equipment, noncapitalized equipment, and supplies. The CSAM can be downloaded from the CDE CSAM web page at <https://www.cde.ca.gov/fg/ac/sa/documents/csam2019complete.pdf>
4. Telephone systems, fax machines, and telephones, including cell phones and landlines
5. Purchase of vehicles
6. Out-of-state travel
7. Child care
8. Food—exceptions may be allowed if the agency can provide a justification that the provision of food is necessary to implement a student strategy or other TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant training event for students, staff, or parents conducted beyond normal school hours or off-site.
9. Payment of any kind to law enforcement agencies for enforcement, lesson delivery, or other activities and services
10. Campus monitoring and supervision, and
11. Preparation, delivery, and travel costs associated with submitting this or subsequent TUPE applications

**Budget Revisions**

All grantees agree to expend funds as described in the approved application. Failure to do so may result in a reduction of the grant award amount unless a budget revision and justification is submitted to, and approved by the CDE. The budget revision request must provide a fiscal and program explanation with sufficient detail to justify revising the original budget. The request must also describe why the revision is necessary and how

Appendix 3

Page 6 of 6

the revision will affect the LEA’s ability to execute the program strategies approved in the application.

The grantee may not make any changes that increase the rates of reimbursement unless they are part of a negotiated collective bargaining agreement. Rates of reimbursement may not exceed the state-approved rates. The total grant amount may be decreased by the CDE pending available funds.

The grantee must submit all revisions to the budget prior to the end of the grant term.

**Match Requirement**

No matching funds are required. In-kind support for TUPE Program: Youth Engagement to Address Tobacco-Related Health Disparities Grant project costs is allowed and should be clearly identified as such in the budget if proposed.

**Record Retention**

Grant recipients shall maintain accounting records and documentation of costs incurred during the grant award period and thereafter for five full years from the date of the final payment of grant funds. The CDE must be permitted to audit, review, and inspect the activities, documents, papers, and financial records during the term of the grant and for five years following final allocation of funds.

**Final Expenditure Report**

Final expenditure reports must be submitted by August 15, 2022.

Appendix 4

Page 1 of 3

### Appendix 4: Program Resources

**National Resources:**

* Campaign for Tobacco-Free Kids: <https://www.tobaccofreekids.org/>
* Centers for Disease Control and Prevention (CDC): <https://www.cdc.gov/>
* The CDC's Youth Risk Behavior Surveillance Survey: <https://www.cdc.gov/healthyyouth/data/yrbs/index.htm>
* U.S. Food and Drug Administration’s The Real Cost Campaign: <https://www.fda.gov/tobacco-products/public-health-education-campaigns/real-cost-campaign>
* Truth Initiative: <https://truthinitiative.org/>

**Statewide School Resources:**

* California Department of Education (CDE) American Indian Education Centers: <https://www.cde.ca.gov/sp/ai/re/aidirectory.asp>
* WestEd California School Climate, Health, and Learning Survey System: <http://cal-schls.wested.org/>
* California Smokers’ Helpline Telephone Number: 1-800-NO-BUTTS
* California Friday Night Live Partnership: <http://fridaynightlive.org/>
* Stanford Medicine Tobacco Prevention Toolkit: <http://med.stanford.edu/tobaccopreventiontoolkit.html>
* WestEd: <https://www.wested.org/>
* Kids’ Data—Vaping: <http://www.kidsdata.org/blog/?p=8159>
* CDE Tobacco-Use Prevention Education (TUPE) Program: <https://www.cde.ca.gov/ls/he/at/tupe.asp>
* CDE TUPE’s Facebook Page: <https://www.facebook.com/TUPE4kids>

Appendix 4

Page 2 of 3

**Local Resources:**

* California Department of Public Health Tobacco Control Program: <https://www.cdph.ca.gov/tobacco>
* California Youth Advocacy Network: <https://www.cyanonline.org/>
* [ETR’s Best Practices Focus Group Guide](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=2&cad=rja&uact=8&ved=2ahUKEwjzwIfslJngAhX4FTQIHSmuAiEQFjABegQIABAC&url=https%3A%2F%2Fwww.etr.org%2Febi%2Fassets%2FFile%2Fetr_best_practices_focus_groups.pdf&usg=AOvVaw23Z4ZV-DXjTdVcyhKMlFyw): <https://www.etr.org/ebi/assets/File/etr_best_practices_focus_groups.pdf>
* Tobacco Education Clearinghouse of California: <https://www.tecc.org/>
* UNDO End Tobacco Damage Now: <https://www.undo.org/>
* Tobacco Education Research Oversight Committee: <https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/Pages/TobaccoEducationAndResearchOversightCommittee.aspx>
* Tobacco-Related Disease Research Program: <http://www.trdrp.org/>

**Tobacco-Use Prevention Education Curricula:**

**Applicants may use the following curricula:**

* Catch My Breath
* Project Alert
* Project Towards No Drug Use
* Project Towards No Tobacco Use
* Stanford Tobacco Prevention Toolkit

**Tobacco-Use Intervention or Cessation Programs:**

The following programs are suggested for use to provide intervention or cessation services for students. Applicants are not limited to these programs and may choose other programs to meet the needs of their students and schools.

Appendix 4

Page 3 of 3

**Intervention**

* Brief Intervention
* Intervening with Teen Tobacco Users (TEG)
* Teen Intervene

**Cessation**

* California Smokers’ Helpline
* Become an Ex
* Enough Snuff: A Guide for Quitting Smokeless Tobacco
* Project EX: Teen Tobacco Use Cessation Program