# Tobacco-Use Prevention Education Program Tier 2 Grant

Request for Applications

Fiscal Years 2023–26

For Programs Serving Grades Six through Twelve

Governed by California Health and Safety Code Section 104420

November 2022



Application Due Date: February 28, 2023

Tobacco-Use Prevention Education Office

Whole Child Division

California Department of Education

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## Questions and Contact Information

The information contained in this Tier 2 Grant Request for Applications (RFA) and the Tier 2 RFA Technical Assistance (TA) Webinars should be your primary resource documents for developing an application. Answers to substantive questions from the webinars will be compiled in a Frequently Asked Questions list and posted on the Resources page of the Tobacco-Use Prevention Education (TUPE) Grant Electronic Management System (TUPE GEMS).

Completed applications should be submitted through TUPE GEMS at [https://tupegems.‌ucsd.edu](https://tupegems.ucsd.edu/" \o "TUPE Grant Electronic Management System website). Mailed or emailed submissions will not be accepted.

Note: This RFA process is competitive and will be reviewed and scored by readers using a [scoring rubric](#_Appendix_1:_Scoring). The California Department of Education (CDE) strongly encourages interested parties to read the entire Tier 2 Grant RFA, view the TA webinars, and consider all elements for eligibility, program and narrative requirements, and potential disqualifications prior to submitting a completed application.

## Application Highlights for Tier 2 Grants, 2023–26

* Tier 2 grants will be funded using tax revenues allocated to the CDE from Propositions 56 and 99, as enacted in the state budget.
* The number of grants awarded will depend on the number and quality of applications received, the number of students enrolled in districts and schools applying for funding, and the total amount of funding available.
* The size of awards will be based largely on student enrollment in the grades to be served by the program, as reported for the 2022–23 school year. However, no award will be less than $50,000 per year.
* Prospective applicants must submit an Intent to Submit (ITS) form in TUPE GEMS by the specified deadline. No later than two business days after this deadline, the TUPE Office will post a spreadsheet in TUPE GEMS with each applicant’s estimated funding amount. The estimated funding amounts will be listed by the application identification number which is generated in TUPE GEMS when the ITS is submitted. The applicant must develop a budget not exceeding the funding amount listed in this spreadsheet. However, the final budget amount, if awarded, is subject to change.
* The grant award period is from July 1, 2023, to June 30, 2026. Grant Award Notifications (AO-400s) will be allocated annually, contingent on continued availability of funds.
* Grantees will be required to submit annual budgets.
* School districts, direct-funded charter schools, and county offices of education (COEs) serving grades six through twelve in California are eligible to apply if they meet the eligibility requirements.
* Applications must be submitted online via TUPE GEMS.
* Applicants may submit no more than one application per lead agency.
* Applicants in Northern, Central, and Southern California and in urban and rural locations compete for funding against others in their respective geographic categories.
* This RFA requires applicants to propose services for their general population of students as well as additional, targeted services for health disparity populations.
* At least 60 percent of the funding awarded to each grantee must be allocated to student services.
* At least 15 percent of the funding awarded to each grantee must be allocated to health disparity populations.
* The TUPE Office will host and record two live TA webinars after the release of the RFA. The webinars will provide guidance on program requirements for the Tier 2 Grant Application and on developing a project monitoring and evaluation plan. The webinar recordings, as well as a list of questions and answers compiled during the webinars, will be posted on the Resources page of TUPE GEMS approximately five days after the webinars.
* All required application materials and the webinars will be available on the CDE TUPE Tier 2 Grant RFA web page at <http://www.cde.ca.gov/fg/fo/r8/tupetier2rfa2326.asp> and on TUPE GEMS at [https://tupegems.ucsd.edu](https://tupegems.ucsd.edu/).

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### I. Critical Dates

The following chart identifies 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 Tier 2 Grant RFA web page at <http://www.cde.ca.gov/fg/fo/r8/tupetier2rfa2326.asp>.

| **Critical Dates** | **Events** |
| --- | --- |
| **January 17, 2023** | RFA and supporting documents are posted on the CDE TUPE Funding web page at [https://www.cde.ca.gov/ls/‌he/at/tupefunding.asp](https://www.cde.ca.gov/ls/he/at/tupefunding.asp) and on TUPE GEMS. |
| **January 27, 2023** | **Submission deadline for Intent to Submit an Application** 5 p.m. Pacific Time. Failure to submit this form on time via TUPE GEMS will result in disqualification. |
| **January 30, 2023** | List of estimated funding amounts is posted to TUPE GEMS. |
| **TBD** | The TUPE Office hosts two live TA webinars for applicants. Recordings of the webinars and questions and answers are posted 5 days later on the Resources page of TUPE GEMS. |
| **February 28, 2023** | **Submission deadline for complete applications** via TUPE GEMS at 5 p.m. Pacific Time. |
| **March 3, 2023** | Applicants are notified if they have been disqualified based on CDE screening. Review and scoring of eligible applications begins. |
| **March 17, 2023** | Intent to Award (ITA) funding list is posted on the CDE TUPE Funding web page at [https://www.cde.ca.gov/ls/‌he/at/tupefunding.asp](https://www.cde.ca.gov/ls/he/at/tupefunding.asp). Note: The ITA is not the final funding list. Appeals are due to the CDE no later than 10 business days after ITA posting. |
| **March 31, 2023** | Final Funding List is posted on the CDE TUPE Funding web page at [https://www.cde.ca.gov/ls/‌he/at/tupefunding.asp](https://www.cde.ca.gov/ls/he/at/tupefunding.asp). |
| **July 1, 2023** | Grant period begins. Grant Award Notifications (GAN, form AO-400) sent to grantees upon approval by the State Superintendent of Public Instruction. |

### II. Introduction

#### A. Goal

The goal of the TUPE Program is to prevent youth tobacco use in California schools by funding local educational agencies (LEAs) to help students build their knowledge and skills to make healthy decisions. Funded LEAs empower students through tobacco-specific, evidence-informed education, positive youth development, and reinforcement activities.

#### B. Background

In 1988, California voters approved Proposition 99, the Tobacco Tax and Health Protection Act, which placed a 25-cent tax on packs of cigarettes, a portion of which goes to various state and local agencies to operate a comprehensive tobacco control program. Proposition 99 funded the CDE to establish the TUPE Program to provide students in grades six through twelve with the knowledge and skills needed to avoid tobacco use and tobacco-related diseases.

Proposition 99 also established the Tobacco Education and Research Oversight Committee (TEROC) to advise other agencies, including the CDE, with respect to program development, implementation, and evaluation. The TEROC develops and regularly updates an overarching plan for tobacco control in California. Objective 4 of the TEROC Plan addresses the need for programs to prevent tobacco use among young people [and to empower them as advocates for tobacco control](https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/Pages/YouthObjective.aspx). The TEROC Plan may be found at [https://www.cdph.ca.gov/Programs/CCDPHP/‌DCDIC/CTCB/Pages/TEROCMasterPlan.aspx](https://www.cdph.ca.gov/Programs/CCDPHP/DCDIC/CTCB/Pages/TEROCMasterPlan.aspx).

In 2016, California voters also approved Proposition 56, the California Healthcare Research and Prevention Tobacco Tax Act. Proposition 56 increased the cigarette tax by $2.00 per pack and placed new taxes on other tobacco products. A portion of the tax goes to support anti-tobacco programming. The law was designed to help prevent youth tobacco use, reduce tobacco-related health care costs, and accelerate the rate of decline in tobacco-related disparities.

Pursuant to Propositions 99 and 56, the CDE has developed important funding opportunities. The Tier 1, Tier 2, and Youth Engagement to Address Tobacco-Related Health Disparities (HD) grant programs support tobacco prevention programming by school districts, direct-funded charter schools, COEs, and various consortia.

#### C. Purpose

The purpose of this RFA is to help LEAs develop and implement effective tobacco prevention and education programs for students in grades six through twelve. The most effective Tier 2 grantees tend to focus on certain core aims: (1) reducing the prevalence of youth tobacco use and vaping, (2) increasing collaboration with other agencies and individuals who have a stake in youth tobacco-use prevention, (3) promoting school connectedness as an integral part of their programming, and (4) adopting a holistic approach to youth tobacco-use prevention.

##### 1. Reducing the Prevalence of Youth Tobacco Use and Vaping

Early tobacco prevention and education is important because tobacco use generally starts in youth. Nicotine is highly addictive and can harm adolescent brain development. Prevalence rates for cigarette smoking among youth are at historic lows, but rates of youth vaping—the use of e-cigarettes or other battery-operated devices that generate aerosols rather than smoke, collectively known as “vapes”—are much higher. For example, in the 2019–20 California Student Tobacco Survey (CSTS), only 6.5 percent of high school students in California reported ever having smoked a cigarette, but 24.3 percent had vaped. Combining all forms of tobacco, 24.1 percent of tenth graders and 33.6 percent of twelfth graders reported having used tobacco. Current tobacco-use rates (i.e., rates of use within the past 30 days) were 7.8 percent among tenth graders and 11.7 percent among twelfth graders. These findings are alarming, but not surprising given that the tobacco industry often markets vapes with names and flavors that are clearly designed to appeal to children. TUPE programs must counter these influences and strive to reduce tobacco-use rates in their student populations.

Rates of marijuana use among California high school students are even higher than those for tobacco. In the 2019–20 CSTS, 25.5 percent of tenth graders and 37.4 percent of twelfth graders had ever used marijuana, while 12.1 percent of tenth graders and 18.0 percent of twelfth graders were current marijuana users. These high rates are due in part to the wide availability of vaping devices, which make it easier for young people to use other substances besides tobacco, including marijuana. In fact, according to the 2019–20 CSTS, 7.1 percent of high school students in California were currently co-using tobacco and marijuana, including 6 percent who used vapes. It is important to note that under California state law, vaping devices are considered tobacco products even when used to consume substances other than tobacco (*Business and Professions Code* 22950.5, *Revenue and Taxation Code* 30121, and *Health and Safety Code* [*HSC*] 104495). This means that TUPE programs and others funded for youth tobacco-use prevention can and should also address the rising epidemic of marijuana vaping.

Local prevalence rates may vary greatly from statewide prevalence rates. For example, rates in rural areas tend to be significantly higher than those in urban areas. Rates may also vary among different populations of students in the same district. For example, tobacco-use rates tend to be significantly higher among lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ) students than they are among straight/cisgender students. This highlights the need for grantees to participate in regular surveys such as the California Healthy Kids Survey (CHKS) to track local prevalence rates over time and to ensure that special needs among priority populations are identified and addressed in programming. For more information about how CHKS data can be used in TUPE program development, please see [https://‌calschls.org/videos/766279513/](https://calschls.org/videos/766279513/).

##### 2. Increasing Collaboration

Collaboration is critical in efforts to address the youth tobacco and vaping epidemics. TUPE applicants should work closely with other groups that have a stake in prevention. Potential collaborators include, but are not limited to: (a) Local Lead Agencies (LLAs), or county health departments that are funded by the California Department of Public Health (CDPH), along with their local coalitions of volunteer tobacco control advocates; (b) agencies funded by the Attorney General for enforcement activities; and (c) researchers funded by the Tobacco-Related Disease Research Program to study youth tobacco use, predatory marketing to youth, etc. By sharing resources and working together, LLAs, LEAs, and other youth-serving organizations can accomplish more than they can on their own. Such collaborations may also provide opportunities for youth engagement in policy work, public service, and research.

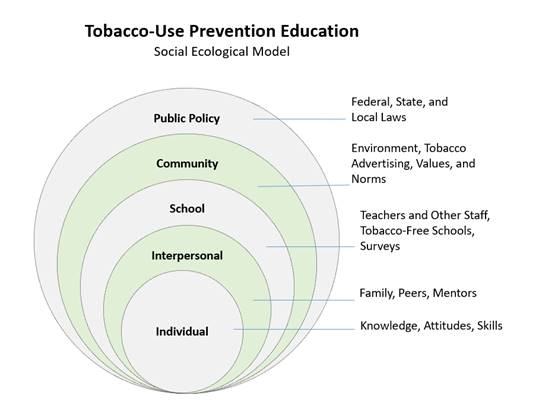
Applicants can also foster collaboration by involving school staff and parents, family, and other community members in their efforts. Parents and families often play a critical role in tobacco prevention by providing social and environmental support and intervening on youth tobacco use. TUPE grantees can capitalize on this influence by including parent/family input in their tobacco and vaping needs assessments, asking parents to reinforce tobacco-free educational messages at home, and soliciting community support for the program. Homework assignments involving parents and families increase the likelihood that smoking and vaping will be discussed at home, and may even motivate adults in the family to quit or reduce their own tobacco use. Efforts to engage family and community members are especially important in populations experiencing disparities, including African American, Hispanic/Latino, and other communities that experience disproportionate, targeted marketing by the tobacco industry. To learn more about family engagement go to CDE’s Family Engagement Toolkit at <https://www.cde.ca.gov/fg/aa/lc/documents/family-engagement.pdf>.

##### 3. Promoting School Connectedness

When school staff, parents, and others in the community work together for students’ benefit, students experience greater school connectedness—the perception that adults and peers in their school care about their learning and about them as individuals. Research has shown that students who feel connected to school have better school attendance, earn higher grades, perform better on standardized tests, and are more likely to graduate. They are also more likely to engage in positive health behaviors such as physical activity and healthy eating, and are less likely to engage in risky behaviors such as drinking alcohol or using tobacco and other drugs.

The reasons youth tobacco use is associated with lower school connectedness and academic performance are not fully understood. But research has shown that tobacco use during adolescence, when the human brain is still developing, disrupts the development of brain circuits that control a person’s ability to pay attention and to learn. Exposure to nicotine affects key brain receptors and makes young people more susceptible to addiction. It can increase stress and symptoms of attention-deficit/hyperactivity disorder, anxiety, and depression. For these reasons, evidence-informed tobacco prevention programs, coupled with strategies to promote school connectedness, are needed to support positive educational and health outcomes.

Engaging students—especially at-risk students and those experiencing tobacco-related disparities—in youth development activities for tobacco prevention not only helps them develop the knowledge and skills needed to avoid tobacco use but can support them in other ways. These activities support the formation of positive peer support and adult ally relationships and foster a sense of belonging. When students become involved in service learning, peer-to-peer education, or other creative projects, they gain valuable opportunities to share ideas and build interpersonal and decision-making skills. Such activities can enhance students’ experience of school connectedness and help set them up for success in school and beyond. Providing opportunities like these is consistent with the “whole child” approach to education, in which schools create environments where all students are safe, engaged, supported, challenged, and healthy.



##### 4. Adopting a Holistic Approach

TUPE uses a five-level social ecological model, as illustrated above, to assess how environmental and interpersonal factors can encourage or deter tobacco use and vaping among youth.

Each level of the model identifies a point of influence and a potential opportunity for intervention:

###### A. The *individual* level examines how personal factors such as a student’s own knowledge and attitudes may increase or decrease the likelihood of tobacco use and vaping. At its most basic, tobacco-use prevention education aims to equip students with the knowledge and skills they need to avoid using tobacco.

###### B. The interpersonal level examines the influence of others in students’ lives, such as family, peers, and mentors. TUPE programs seek to enlist family members’ support in preventing youth tobacco use. They also strive to cultivate a norm of tobacco-free living in their student populations, including health disparity populations.

###### C. The *school* level explores how teachers, other school staff, and educational institutions themselves influence students. TUPE grantees ensure that their districts and schools implement and communicate tobacco-free policies, provide tobacco-use prevention education to all or most of their students, and participate in regular surveys such as CHKS to support movement toward the tobacco-free norm. Grantees support after-school and other activities such as Friday Night Live to further support this norm while enhancing students’ experience of school connectedness.

###### D. The *community* level explores influences in students’ broader environment, such as the prevalence of adult tobacco use in their community, the presence or absence of tobacco-free recreational opportunities, and exposure to pro- and anti-tobacco messaging in the media, online, and in physical locations such as retail stores. Discriminatory influences, such as the greater concentration of tobacco retailers in communities of color, tend to operate on this level. TUPE programs collaborate with local partners such as LLAs and their volunteer coalitions to ensure that influences on students from the larger community are as positive as possible.

###### E. The *public policy* level considers the influence of laws, regulations, and enforcement measures. Research has shown that lax tobacco laws are associated with higher rates of youth tobacco use. TUPE programs may seek to turn this situation around by engaging students in policy-related activities, such as educating local officials about the impact of flavored tobacco products on youth, which can create meaningful youth development opportunities.

This model provides a useful framework to help TUPE programs focus their strategies and resources most effectively.

#### D. Applicable Laws and Regulations

The California Health and Safety Code requires that funds allocated under this RFA be used to develop school-based anti-tobacco education programs and tobacco use intervention and cessation activities in order to reduce the numbers of students in California who begin or continue to use tobacco (*HSC* 104420[k][1]).

The California Healthcare, Research and Prevention Tax Act of 2016 further requires that Proposition 56 funds allocated to the CDE “be used for school programs to prevent and reduce the use of tobacco and nicotine products by young people as described in Section 104420 of the *HSC* with no less than 15 percent of these funds being awarded to accelerate and monitor the rate of decline in tobacco-related disparities for the purpose of eliminating tobacco-related disparities.”

### III. Grant Information

#### A. Anticipated Size and Number of Awards

The size of awards will be based largely on student enrollment in the grades to be served by the program, as reported for the 2022–23 school year. However, to ensure that smaller applicants have sufficient funds to operate a full-service TUPE program, the minimum award size will be $50,000 per year.

The number of grants awarded will depend on the number and quality of applications received and approved, the number of students enrolled in the districts and schools applying for funding, and the total amount of funding available.

#### B. Grant Funding Period

The Tier 2 Grant Program provides funding for three years, from July 1, 2023, to June 30, 2026.

#### C. Opportunity for Future Funding or Renewal

The CDE expects to issue a new Tier 2 RFA for the period after June 30, 2026, subject to state budget allocations and TEROC recommendations. However, the CDE also reserves the right to renew or extend grants under this RFA if in the best interest of the statewide tobacco prevention effort.

#### D. Eligibility Requirements

Applicants must meet the eligibility requirements set forth below, and the proposed programs must meet the requirements of this RFA to be funded. Therefore, applicants should review the entire RFA and the TA webinars and consider all eligibility and program requirements prior to submission.

##### 1. Who May Apply

Public school districts, direct-funded charter schools, COEs, and consortia that serve students in grades six through twelve within the State of California are eligible to apply. The governing district must apply on behalf of schools and school sites within its jurisdiction. Individual schools, community agencies, private schools, and locally-funded charter schools are not eligible to apply. Projects targeting out-of-school students are not eligible.

Both new applicants and currently-funded TUPE grantees may apply. Districts or direct-funded charter schools that are members of a Tier 1 consortium are eligible to apply separately or as a new consortium. However, the CDE will terminate Tier 1 awards for those who are awarded a Tier 2 grant. Tier 1 grantees who apply unsuccessfully for Tier 2 funding may retain their Tier 1 funding.

##### 2. Absence of Tobacco Industry Funding or Support

Applicants are ineligible for TUPE funding if at the time of application they are in receipt of funding, educational materials, or services from the tobacco, vaping, or marijuana industries, even if for the purpose of implementing tobacco use prevention, intervention, cessation, or youth development programs. In addition, TUPE grantees are prohibited from accepting such funding, 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.

A signature by the Superintendent or Designee on the Grant Application Cover Sheet constitutes an assurance that the COEs, districts, and direct-funded charter schools participating in the Tier 2 Grant application will not accept funding, materials, or services from the tobacco, vaping, and marijuana industries.

##### 3. Other Eligibility Requirements

The application submitted must: (a) show that the proposed program meets the Tier 2 Grant TUPE Program Requirements; (b) comply with the TUPE GEMS online Application Submission and Narrative Requirements; (c) meet all other conditions, requirements, and deadlines; and (d) provide signatures as set forth in this RFA.

#### E. Overview of the Application Process

An applicant may not submit more than one complete application. If both urban and rural sites will participate in the program, the applicant must select a classification (urban or rural) that matches the dominant school type. Applicants must also identify the geographic category in which they are competing on the Grant Application Cover Sheet.

##### 1. Intent to Submit an Application

Prospective applicants must submit an ITS form in TUPE GEMS no later than January 27, 2023, at 5 p.m. Pacific Time. The ITS serves as a placeholder indicating an agency’s intent to submit a complete application and allows the CDE to identify a sufficient number of readers to review and score applications. Submission of an ITS does not obligate the agency to submit a complete application.

Failure to submit an ITS by the due date and time will result in disqualification of the application. An email confirmation of receipt of the ITS will be sent to the contact person identified on the form.

No later than two business days after the ITS submission deadline, the TUPE Office will post a spreadsheet in TUPE GEMS with each applicant’s estimated funding amount. The estimated funding amounts will be listed by the application identification number which is generated in TUPE GEMS when the ITS is submitted. The applicant must develop a budget not exceeding the funding amount listed in this spreadsheet. However, the final budget amount, if awarded, is subject to change.

##### 2. Application Types

There are two basic types of allowable applications under this RFA:

###### a. Single Agency Applications

A Single Agency Application is one in which an individual LEA applies for TUPE funding on behalf of all schools in its jurisdiction. TUPE services that the applicant proposes to implement in certain grade levels must be implemented in all schools in the district that have those grade levels.

###### b. Consortium Applications

Alternatively, public school districts, direct-funded charter schools, and COEs may collaborate to form a consortium to apply jointly for TUPE funding. A single district, direct-funded charter school, or COE must be designated on the Tier 2 Grant Application Cover Sheet as the lead agency. The lead agency assumes fiscal and reporting responsibility for the consortium. The roles and responsibilities of the lead agency and consortium members must be clearly described in the Application Narrative and delineated in a Memorandum of Understanding (MOU) between the lead agency and other consortium member agencies.

Each member of a consortium must meet the same grant requirements as Single Agency applicants. The application may not propose to provide services in one district and not in the other district(s). However, the specific strategies used in each district may vary, as not every district has the same needs.

##### 3. Geographic Categories

Under California law, the CDE must consider the need to balance urban and rural applicants when allocating grant awards (*HSC* 104420(k)(2)(D)(4)). Applicants must therefore identify the geographic category in which their applications will compete (identified on the Grant Application Cover Sheet in TUPE GEMS):

* Northern-Urban
* Northern-Rural
* Central-Urban
* Central-Rural
* Southern-Urban
* Southern-Rural

Northern California consists of California County Superintendents Educational Services Association (CCSESA) regions 1 through 4. Central California consists of CCSESA regions 5 through 8. Southern California consists of CCSESA regions 9 through 11. Applicants may determine their service region on the CCSESA map on the California County Superintendents web page at <https://ccsesa.org/regions/>.

Applicants may determine their Urban and Rural Classifications by visiting the National Center for Education Statistics (NCES) Search for Public Schools online tool at <https://nces.ed.gov/ccd/schoolsearch/> and entering the search criteria as directed. Sites in the NCES database are identified in one of the following classifications:

| **Urban Classification** | **Rural Classification** |
| --- | --- |
| 11—City, Large | 31—Town, Fringe |
| 12—City, Midsize | 32—Town, Distant |
| 13—City, Small | 33—Town, Remote |
| 21—Suburb, Large | 41—Rural, Fringe |
| 22—Suburb, Midsize | 42—Rural, Distant |
| 23—Suburb, Small | 43—Rural, Remote |

Consortium grantees should use the classification that best represents the majority of their districts.

##### 4. Complete Application

A full and complete Tier 2 Grant application and required forms must be submitted in TUPE GEMS no later than February 28, 2023, at 5 p.m. Pacific Time. Applications that are late, mailed, or emailed will not be accepted.

The Grant Application Cover Sheet must include the authorized signature of the Superintendent or Designee. An electronic signature is acceptable. A Designee may sign as long as a copy of a recent governing board resolution or minutes, specifically authorizing the Designee to accept and sign as a proxy on financial statements and legally binding documents, is uploaded with the application materials. In the absence of an authorized signature by the Superintendent, or by the Designee with governing board resolution or minutes, the application will be disqualified.

Note: Submitting an application 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 become the property of the CDE.

#### F. Use of Funds

Funding provided through this RFA must supplement, not supplant, any current TUPE funding. Funding received pursuant to this RFA must be accounted for independently and separately from all other TUPE grant funds.

The use of TUPE funds for any purpose other than student tobacco-use prevention is not authorized. However, the CDE encourages grantees to address marijuana use as it relates to co-use with tobacco and as it relates to the use of vaping devices, which are defined as tobacco products under California law.

#### G. Reporting Requirements

Ongoing communication with the CDE is an important part of reporting requirements. Opportunities for technical assistance and capacity building will be made available by the CDE and/or the Capacity Building Project (CBP) throughout the grant period, and grantees are strongly encouraged (but not required) to take advantage of them.

Additionally, grantees must complete and submit the following regular reports according to a schedule to be provided by the CDE:

* Two expenditure reports per year, and
* One annual progress report including data on implementation of the Program Plan.

If communication is insufficient, or if required reports are not provided in a timely manner, the CDE may suspend funding to the grantee and, unless the situation is remedied, may terminate funding altogether.

#### H. Application Review Process

The review and scoring process for applications will be conducted via TUPE GEMS. It consists of three stages: (1) an initial CDE screening, (2) reader review and online scoring, and (3) funding determination.

##### 1. CDE Screening

Applications will be screened by the CDE to ensure that all technical requirements (forms, signatures, etc.), are met. Applications meeting the technical requirements of the RFA will move on to the reader review and online scoring process.

##### 2. Reader Review and Online Scoring

Applications passing the initial screening will be read and scored by two independent readers who will determine the extent to which the applications meet the requirements identified in the Scoring Form and Rubric (Appendix 1). Each element in the rubric will be scored as Outstanding (3 points), Good (2 points), Developing (1 point), or Weak (0 points).

The readers’ scores will be averaged to obtain the application’s final score. If the scores are widely divergent, the readers will have the opportunity to discuss the application and re-score. If the readers are still unable to reach consensus, the application will be assigned to a third reader. The score from the third reader will be paired with the closest score from the original readers and then averaged to obtain the application’s final score.

Comments from individual readers will not be provided to applicants, and the professional judgment of readers will not be considered on appeal.

Applications will then be ranked by overall score in each of six geographic categories as identified by applicants in the [Applicant Summary](#Applicant_Summary). If necessary, the scores for Student Services, Family and Community Engagement, and other sections of the application, in sequence, will be used as tiebreakers.

Upon completion of the review and scoring process, the CDE will post an ITA funding list arranged by geographic category on the Tobacco-Use Prevention Education Funding web page at <https://www.cde.ca.gov/ls/he/at/tupefunding.asp>.

#### I. Evaluation Criteria

Applications will be scored using a Scoring Form and Rubric (see [Appendix 1](#_Appendix_1:_Scoring)), which is based on a percentage scale and covers the main sections of the application as discussed in this RFA. Applications will generally score well if they provide: (1) accurate and pertinent information in each of the sections, (2) thorough and concise details in the narrative sections, and (3) a precise and well-considered budget. The CDE encourages applicants to review the Scoring Form and Rubric as they develop their applications.

#### J. Payment Procedures

The grant award cycle is for three years; however, GANs, form AO-400, will be issued in annual increments following the submission and approval of a budget for each new fiscal year in the grant cycle. The AO-400 must be signed and resubmitted each year of the grant. Carryover from one fiscal year to the next will be allowed with sufficient justification. Applicants must retain documentation of their fiscal and program records documenting expenditures and program implementation for audit and state monitoring purposes for five years beyond the date of the final grant payment.

Payments will be issued following the schedule provided in the Project Budget Guidelines.

#### K. RFA Technical Assistance Webinars

Two live TA webinars will be hosted after release of the RFA. Recordings of the webinars and a list of questions and answers compiled during the webinars will be posted on the Resources page of TUPE GEMS approximately five days later. The webinars will provide guidance on program requirements for the Tier 2 Grant Application and on developing a project monitoring and evaluation plan. The information contained in this RFA and the associated webinars should be your primary resource documents for developing an application.

### IV. Application Instructions

All grant applications must be submitted via TUPE GEMS. The Tier 2 Application Module provides a structured and uniform format for applications and includes nine sections: Applicant Summary, Participating School Districts, Capacity, General Population (Plan Summary and Services), Health Disparities (Plan Summary and Services), Tobacco-Free Policy Development and Implementation, Project Monitoring and Evaluation, Assurances, and Project Budget. Requirements for individual sections are described below under [Application Narrative](#Application_Narrative) and [Project Budget](#Project_Budget).

#### A. Format and Content Requirements

For most sections of the application, applicants will enter information in the user interface in the Tier 2 Application Module. Applicants should read and follow the specific instructions in TUPE GEMS and enter only the information requested. The module allows multiple users to work collaboratively to develop an application. Each section includes a summary screen that displays what has been entered so far. Users may start and stop at any point in the process but should save their work in any one section by clicking the “Save” button at the bottom of the screen before moving on to another section or leaving the module. Generally speaking, the sections do not need to be completed in order.

While sections do not generally need to be completed in order, it is important to complete Participating School Districts ([Section 2](#Participating_School)) before General Population Services (Sections [4A](#General_Population_4A), [4B](#General_Population_4B), and [4C](#General_Population_4C)) and Health Disparity Populations (Sections [5A](#HD_5A), [5B](#HD_5B), and [5C](#HD_5C)), because the latter draw information from the former. Note that Tobacco-Free Policy Development and Implementation ([Section 6](#Tobacco_Free_Policy)) and the Project Monitoring and Evaluation Plan ([Section 7](#Project_Monitoring)) also draw information from earlier sections.

​TUPE GEMS supports multiple users and allows them to simultaneously view screens in the same application. However, it is strongly recommended that (1) only one user edits a given screen at the same time, and (2) users save their work on a screen before exiting or handing it off to another user. The system cannot prevent potential conflicts or overwrites should multiple users attempt to edit data simultaneously on the same screen.

Note that for sections requiring service entry, the applicant may need to enter multiple services and answer the same set of questions for each service. Instructions on the number and type of services required are provided below and in the relevant sections of TUPE GEMS.

All text boxes in TUPE GEMS have character limits, which are inclusive of spaces. For questions requiring a narrative response, the CDE recommends that applicants compose and edit their text in word processing software before copying and pasting it into the user interface. The “Word Count” function in Microsoft Word, which allows users to see the number of characters in selected text, may be particularly helpful in this regard.

Applicants may not submit attachments other than those required in this RFA. Additional documents uploaded with the application will not be considered.

Applications that are incomplete or that do not follow the format and content instructions below and in the TUPE GEMS Tier 2 Application Module will be disqualified.

#### B. How to Submit Applications

Applications must be submitted via TUPE GEMS at [https://tupegems.ucsd.edu](https://tupegems.ucsd.edu/).

Mailed or emailed applications will not be accepted.

#### C. Submission Deadline

A full and complete Tier 2 Grant application, including required signatures, must be submitted no later than **February 28, 2023, at 5 p.m. Pacific Time**.

Late applications will not be accepted.

#### D. General TUPE Guidance

The Tier 2 Grant Application should be designed as a three-year program that prioritize planning in Year 1, implementation and evaluation in Years 1–3, and improvement in Years 2–3. It is expected that all grantees, including new applicants, start providing services in Year 1, but that new applicants may need more time in Year 1 for planning. Project monitoring and evaluation should also begin in Year 1 and continue for the duration of the grant. All grantees should follow a continuous quality improvement process, in which project monitoring and evaluation produce timely findings that are then used to improve the provision of services. Demonstration of solid planning, implementation, evaluation, and improvement processes is required in all applications.

Following is general program guidance for this funding opportunity.

##### 1. Collaborative Process

As mentioned in the Introduction, collaboration is critical in efforts to address youth tobacco use and vaping. Applicants should develop a collaborative process for their TUPE program, including establishing a collaborative group comprised of the TUPE County Coordinator, district-level coordinators, youth or community engagement coordinators from local public health agencies, tobacco control programs and their coalitions of volunteers, parents and other community members, school resource officers, counselors and other school staff, and students. Additional members may come from other supporting agencies. The group should meet regularly to ensure progress. Ideally, the group would be involved in development of the application itself, helping to assess needs, identify services and activities to address those needs, and develop the project monitoring and evaluation processes.

##### 2. Needs Assessment

Throughout this RFA, applicants are required to identify “data-driven needs.” This refers to needs that can be demonstrated through appropriate data collection and analysis. For example, participation in standardized surveys such as CHKS can provide detailed data on the prevalence of tobacco use and vaping in the local student population, broken down demographically and by grade level. This can reveal not only how the local student population overall is doing relative to the statewide student population, but also which local subgroups are most at risk of tobacco use.

Applicants should also use data to assess whether or not the resources and services required for program implementation are available. For example, if an inventory of tobacco-related services reveals that a community has several cessation providers, but only a few youth development programs, more effort should go into creating additional youth development opportunities.

Qualitative data, such as findings from key informant interviews or focus groups comprised of students or staff who were involved in past tobacco prevention programming, can provide valuable insight about future needs. Interviews with members of target populations can likewise be helpful. For example, a focus group with members of a Gay-Straight Alliance may help to identify needs for lesbian, gay, bisexual, transgender, and queer or questioning (LGBTQ)-targeted programming.

##### 3. Program Plan

The application module in TUPE GEMS will help you develop a Program Plan, the purpose of which is to guide the overall development, implementation, and evaluation of your TUPE program. This plan addresses five program areas:

* Student Services,
* Family and Community Engagement,
* Staff Professional Development,
* Tobacco-Free Policy Development and Implementation, and
* Project Monitoring and Evaluation.

Providing high-quality, evidence-informed Student Services is the most important and resource-intensive part of the Program Plan—reflected in the requirement that at least 60 percent of your budget be allocated to Student Services. Family and Community Engagement is also important because parents, guardians, and other community members have strong influence on students and can help prevent youth tobacco use. Staff Professional Development helps ensure that school staff have the training needed to support students in making healthy choices with regard to tobacco use and vaping. With this RFA, you must propose services and activities in these program areas both for the general population (in [Section 4](#General_Population)) and for health disparity populations (in [Section 5](#Health_Disparity)).

Tobacco-Free Policy Development and Implementation ([Section 6](#Tobacco_Free_Policy)) is a key part of the plan because effective policy provides a strong foundation for communicating the importance of a tobacco-free lifestyle to students, family, the community, and staff.

Project Monitoring and Evaluation ([Section 7](#Project_Monitoring)) helps ensure that services and activities are implemented as planned, achieve their intended outcomes, and provide the data needed to make timely improvements. For more on the Project Monitoring Plan, see the section below.

For examples of suggested TUPE services and activities, go to the Program Guidance document on the TUPE GEMS Resources web page.

##### 4. Project Monitoring and Evaluation Plan

Your Project Monitoring and Evaluation Plan should be designed to complement your services, so that the data you collect while monitoring services will produce findings that can be used to improve those services in a future iteration.

Basic statistics are at the foundation of all services. You may be most concerned about assessing the reach of your most important services, i.e., whether all schools with the grades that are supposed to receive the prevention curriculum actually teach it to all students in those grades. If so, you could choose reach as the measurable outcome for this service, and ask all TUPE staff who implement the curriculum to report each time they teach it, with the school site, grade level, and number of students participating. Using school enrollment data by grade as the denominator(s), you would be able to track the percentage of students reached over time by school, by grade, and overall. This would allow you to identify sites or grades where uptake is slower, so that you could make improvements to increase the reach of the service in the future.

Second to establishing reach is assessing effectiveness. For example, you may want to know if the prevention curriculum is leading to significant changes in students’ knowledge and attitudes about tobacco and vaping. If so, you could choose effectiveness as the measurable outcome for this service, and ask all TUPE staff to implement the pre- and post-test that comes with the curriculum. You would then be able to track shifts in knowledge and attitudes as a result of the curriculum. With a sufficient sample size and appropriate analysis, you may even be able to detect whether there are significant differences in effectiveness between schools, grades, or instructors. This could allow you to develop a staff training to improve their use of the curriculum.

Over the short term of a three-year grant cycle, the goal of your Project Monitoring and Evaluation Plan should be to provide data to inform the most meaningful improvements in the delivery of your services. Over the long term of multiple grant cycles, the goal should be to advance from process evaluation alone to process plus some form of outcomes evaluation, from assessing basic measures such as reach and fidelity of implementation to also assessing more complex measures such as impact and effectiveness.

Your Project Monitoring and Evaluation Plan will include multiple measurable outcomes. The CDE encourages you to put together the most robust—but useful—monitoring plan that you have the capacity to implement. Note that, if funded, you must follow the plan you developed and report on your findings in annual progress reports, or provide justification of any changes. You are only required to propose measurable outcomes for your Student Services, and only one per service. This is intended to help you focus your monitoring efforts on the most important program area. However, if you have the capacity to monitor additional services, doing so may help you make improvements in other program areas as well, strengthening your overall application.

The TUPE Office strongly encourages applicants to view the TA webinar on program evaluation to help them develop their Project Monitoring and Evaluation Plan.

Grantees must also participate in CHKS, as well as the California Youth Tobacco Survey (CYTS) if selected. These surveys yield standardized local estimates of youth tobacco-use prevalence rates. Over time and for the TUPE program overall, the results provide important measures of program impact.

#### E. Application Narrative

Following is an overview of the narrative sections of the application. For specific instructions about how to enter your information, see the Tier 2 TUPE GEMS User Guide at <https://ucsdcloud-my.sharepoint.com/:w:/g/personal/jys037_ucsd_edu/EXU_sYYqMRhBv8lAer2K4bgBakero315CmRFyuscBQLe1g?e=EwWfZL>.

##### 1. Applicant Summary (Section 1)

The purpose of this section is to collect basic information about the applicant.

The Applicant Agency is the lead agency applying for TUPE funding on behalf of all participating members, and the agency that will receive funding directly from the CDE, if the application is funded.

The Application Lead is the person driving the development of the application. This person has “ownership” of the application and thus has the authority to invite other local members to be on the application team. The Application Lead is the only person authorized to verify the application content and submit it to the CDE.

The Superintendent/Designee is either the Superintendent or someone for whom an Authorized Designee Form has been completed and uploaded to Section 8 (Assurances). The Designee must differ from the Application Lead. The only exception to this is an Assistant Superintendent who is a Superintendent/Designee; s/he may also be Application Lead.

##### 2. Participating School Districts (Section 2)

This section is to identify the school district(s) participating in the application. Enrollment numbers can be found on the DataQuest website at <https://dq.cde.ca.gov/dataquest/>. Counts of non-traditional school students and pregnant minors/minor parents must be found locally; they need not be subtracted from the student counts by grade. Student enrollment numbers for participating districts determine the amount of funding grantees will receive.

In general, the CDE expects that all of a participating district’s schools with grades six through twelve will participate in the TUPE program. If this is not the case, a special exception must be requested, and the student enrollment numbers must be adjusted to ensure that they do not include students from the excluded school(s).

##### 3. Capacity (Section 3)

This section is for you to describe your team’s capacity for TUPE programming.

First, describe your overall capacity for TUPE programming. What relevant skills, knowledge, and abilities do your key personnel have? What support do you have from senior leadership (e.g., district administration)?

Second, what tobacco-use prevention work has been done to date in your district(s)? What experience do you have in carrying out school-, district-, or county-wide health education programs in which you demonstrated initiative in working with middle and high school students, staff, and families/communities?

Next, describe how the TUPE program will be set up and organized to reach its intended audiences. What are the relevant roles and responsibilities (i.e., who will do what)? What channels will be used to educate and pass information among members of your TUPE team and from team members to the program’s intended audiences of students, families and community, and staff?

Finally, illustrate the set-up of your program by developing and uploading a chart showing the flow of information among members of your team and from team members to the program’s intended audiences. For more information, please see the TA webinar on Tier 2 Grant Application program requirements.

##### 4. General Population Plan Summary (Section 4)

This section is for you to describe your plan for your general student population.

First, describe your general student population, their parents/families and the wider community, and your school staff. Describe specific collaborative efforts with community partners and other agencies. Please see the [Collaborative Process](#Collaborative_Process) section above for more information on this.

Then describe the needs for TUPE programming that you have identified for the new grant period, and the data-driven processes that were used to determine those needs.

Finally, describe how you will meet the identified needs. Provide an overview of the services and activities that you will use to meet the identified needs across three program areas—Student Services, Family and Community Engagement, and Staff Professional Development.

###### a. General Population—Student Services (Section 4A)

This section is for you to describe in detail your services for the general population of students. You must propose at least five such services. At a minimum, these must include:

* Two prevention services, at least one of which uses an approved curriculum,
* One intervention service,
* One cessation service, and
* One youth development service.

You *may* propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably provide with the funding available.

Following are definitions of the terms above:

*Prevention* refers to providing students with the skills and knowledge they need to avoid initiating tobacco use. Applicants must use an approved curriculum for at least one of their prevention services for the general population of students. Approved curriculum refers to an evidence-informed tobacco-use prevention curriculum which has been vetted by a CDE-designated team of tobacco-use prevention experts and approved by the CDE. For a list of approved curricula, please see the TUPE Prevention Curriculum web page at [https://tupeca.org/Pages/‌‌Prevention-Curriculum.aspx](https://tupeca.org/Pages/Prevention-Curriculum.aspx).

*Intervention* refers to engaging in a helpful way with students who have been caught with tobacco or marijuana or who have disclosed that they are experimenting with vaping. Situations like these present teachable moments when a teacher or other influential person can do or say something that makes the students less likely to advance to regular use. The CDE encourages the use of Alternatives to Suspension and Expulsion (ATSE), which are approaches to addressing violations of tobacco-free policies that are more effective and equitable than suspending or expelling students. ATSE are evidence-informed restorative disciplinary practices which foster accountability and help youth understand the harms of tobacco-use and vaping. ATSE improves educational outcomes, especially for African American, Hispanic/Latino, and LGBTQ students, English language learners, foster youth, and youth with disabilities, who are more likely to be suspended and expelled than other youth cited for tobacco use. For more information, see the Fix School Discipline Toolkit at<http://www.fixschooldiscipline.org/community-toolkit/>.

*Cessation* refers to helping students who regularly use tobacco products to quit. Cessation services can include providing school-based counseling or referring students to Kick It California, Youth Vaping Alternative Prevention Education, or local resources. Referral is considered a cessation service only when regular tobacco users are individually identified and directly referred to a treatment provider. In developing their cessation strategies, applicants should consider both combustible tobacco and vaped tobacco. They should address all vaping devices, whether used to consume tobacco or marijuana, as well as products such blunts and spliffs, which contain both tobacco and marijuana.

*Youth development* refers to intentional, pro-social approaches that engage young people in their communities, schools, organizations, peer groups, or families in ways that recognize, utilize, and enhance their strengths. Applicants should propose youth development activities that relate directly to tobacco prevention.

For examples of suggested TUPE services, see the Program Guidance document on the TUPE GEMS Resources page at <https://sites.google.com/view/tupegemsresources/>.

For each service, provide supporting information about how it will be implemented and estimate the percentage of enrolled students in each grade who will receive it. Applicants should plan prevention services not only for middle school students, but for students in the higher grades (i.e., grades ten through twelve) as well.

You must also identify a measurable outcome for each service. These are tracking measures that indicate the extent to which the service was implemented as intended, or that quantify the effect that the service had on the knowledge, attitudes, or behavior of the population being targeted. They should be specific, measurable, attainable, relevant, and timely. Indicate the data source that will be used, who will collect the data, and the frequency of data collection.

Considering your Student Services together, indicate the minimum percentage of students in each grade who will receive at least one service.

###### b. General Population—Family and Community Engagement (Section 4B)

This section is for you to describe services and activities that will directly engage parents, families, and other community members in youth tobacco prevention activities. You must propose at least two such services. You *may* propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably accomplish.

For each service or activity, provide supporting information about how it will be implemented and estimate the reach. You *may* enter one measurable outcome for the service, but are not required to do so.

Finally, estimate the total number of parents, guardians, and other family members who will receive at least one of the services described in this section.

###### c. General Population—Staff Professional Development (Section 4C)

This section is for you to describe Staff Professional Development services pertaining to the general population of students. You must propose at least four such services, including:

* Three trainings or other interactive professional development activities for TUPE staff, and
* One interactive training for non-TUPE staff.

Trainings may be developed locally or provided by your COE or the CBP. Trainings may cover a variety of tobacco-related topics and include attendance at TUPE-related conferences. You *may* propose ancillary development services, such as information distribution, in addition to or in conjunction with the required training services. You *may* also propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably accomplish.

For each training or other activity, provided supporting information about how it will be implemented and the reach. You *may* enter one measurable outcome for the service, but are not required to do so.

Finally, estimate the percentages of TUPE staff and non-TUPE staff who will receive at least one TUPE-related staff professional development service pertaining to the general population of students.

##### 5. Health Disparity Plan Summary (Section 5)

This section is for you to summarize your overall plan for serving HD populations. HD populations are subgroups of people disproportionately impacted by tobacco. These may include students and their family or other community members who use tobacco or vape at higher rates, who experience greater secondhand exposure, who are disproportionately targeted by the tobacco industry, or who suffer higher rates of tobacco-related disease. In school settings, HD populations may include youth of color (African American, Hispanic/Latino, Asian American, Pacific Islander, American Indian, and Alaska Native), LGBTQ youth, youth of low socioeconomic status, rural youth, and pregnant minors and minor parents. As noted in the 2021–22 TEROC Plan, HD populations may also include students experiencing homelessness or foster placement, students in nontraditional school settings, youth involved in the criminal justice system, and youth with co-occurring disorders such as mental health conditions and substance use disorders.

First, describe the HD student populations you propose to serve, their families and communities, and steps that were taken to identify these populations. Describe staff readiness to provide culturally responsive services to these populations and collaborative efforts with community partners and other agencies. Please see the [Collaborative Process](#Collaborative_Process) section above for more information on this.

Then describe the needs for TUPE programming that you have identified with respect to HD populations, and the data-driven processes used to determine those needs.

Finally, provide an overview of the services and activities that you will use to meet the needs you have identified across three program areas—Student Services, Family and Community Engagement, and Staff Professional Development. Describe the concrete steps and culturally responsive strategies that will be used to recruit and engage members of HD populations in your proposed services and activities. Culturally responsive strategies are those that foster equity and belonging. They empower youth, parents, and other community members to affirm their own values, customs, genders, and ethnic/racial heritages while also affirming the lived experiences of others.

###### 5a. HD—Student Services (Section 5A)

This section is for you to describe services and activities specifically designed to reach HD populations, that are distinct from the services proposed in Section [4A](#General_Population_4A). You must propose at least two such services, including:

* One prevention and/or youth development service, and
* One intervention and/or cessation service.

The proposed services should be designed for HD populations. However, general population students who want to use them should be allowed to do so.

You *may* propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably accomplish.

For examples of suggested TUPE services, see the Program Guidance document on the TUPE GEMS Resources page at <https://sites.google.com/view/tupegemsresources/>.

For each service, identify the HD population(s) to be targeted; provide supporting information about how it will be implemented; describe culturally responsive strategies to be used to recruit and engage HD populations in the service; and estimate the percentage of enrolled students in each grade who will receive it. Identify one measurable outcome.

Estimate the total number of individuals in each HD population who will receive at least one of the Student Services in this section.

###### 5b. HD—Family and Community Engagement (Section 5B)

This section is for you to describe services specifically designed to engage HD family and community members and that are distinct from the services proposed in [Section 4B](#General_Population_4B). You must propose at least one such service. You *may* propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably accomplish.

For each proposed service or activity, provide supporting information about how the service will be implemented; its reach; and culturally responsive strategies to be used to recruit and engage HD populations in the service. You *may* enter one measurable outcome for the service, but are not required to do so.

Finally, estimate the total number of parents, guardians, and other family members who will receive at least one of the services described in this section.

###### 5c. HD—Staff Professional Development (Section 5C)

This section is for you to describe Staff Professional Development services pertaining to HD populations. You must propose at least one such service.

The CDE expects that school staff will receive specialized training to increase their capacity to support tobacco prevention in HD populations. These trainings may be developed locally or provided by your COE or the CBP. Trainings may include attendance at conferences related to addressing health disparities. You *may* propose ancillary development services, such as information distribution, in addition to or in conjunction with the required training services. You *may* also propose additional services in this section, but the CDE encourages you to propose no more services than you can reasonably accomplish.

For each training or other activity, provide supporting information about how it will be implemented and the reach. You *may* enter one measurable outcome for the service, but are not required to do so.

Finally, estimate the percentages of TUPE staff and non-TUPE staff who will receive at least one TUPE-related staff professional development service pertaining to HD student populations.

##### 6. Tobacco-Free Policy Development and Implementation (Section 6)

This section is for you to describe progress toward the development and implementation of comprehensive tobacco-free policy in the district(s) that are participating in your application.

Tobacco-free certification is a process whereby the CDE certifies that districts have implemented a district-wide policy prohibiting tobacco use at all school sites and in all school property. School districts must be certified before they can receive TUPE funding. For additional information about these requirements, refer to [Specific Terms and Conditions](bookmark://Specific_Terms), [Tobacco-Free Policy Development](#Tobacco_Free_Policy_2).

###### a. Policy Development and Certification

Indicate the latest certification date for each district participating in the application. If the certification has expired or the district was never certified, describe the steps that will be taken to ensure certification by the start of the grant period.

Indicate the elements of a comprehensive tobacco-free policy that are included in each district’s policy as of the latest certification date. If a policy does not include all of the elements listed in this section of TUPE GEMS, describe steps to be taken in the new grant period to develop a more comprehensive policy.

Information regarding Tobacco-Free School Policy Certification is available on the CDE Tobacco-Free School District Certification web page at <https://www.cde.ca.gov/ls/he/at/tobaccofreecert.asp>.

###### b. Policy Communication

Describe actions to be taken to ensure effective communication of the tobacco-free policy to each of three constituent groups—students, family and community, and staff.

###### c. Equitable Policy Enforcement

Describe protocols in place to address violations of the tobacco-free policy on campus or at school-sponsored events. Describe efforts to ensure that equitable practices, such as ATSE, are adopted locally.

##### 7. Project Monitoring and Evaluation (Section 7)

A project monitoring and evaluation plan helps ensure that TUPE programs are implemented as planned and that they achieve their intended outcomes. It also helps ensure that data needed for critical decision-making are collected and analyzed so that timely program improvements can be made. For more on this topic, see the discussion on developing a robust but useful [Project Monitoring and Evaluation Plan](#Project_Monitoring_Plan) above.

###### a. Project Monitoring Plan

Review the measurable outcomes that you selected in Section 4 (General Population) and Section 5 (Health Disparities) to ensure that you have a solid plan for monitoring the proposed services.

Then describe your overall project monitoring plan. What is the rationale for the measurable outcomes you selected? How will you ensure that the data needed to monitor your services are collected and analyzed as planned? How will the results of the data analysis be used to drive continuous quality improvement?

For each district, identify a Data Collection Lead and a Data Analysis Lead.

###### b. CHKS Administration

TUPE Tier 2 grantees are required to participate in the CHKS. For additional information, see Specific Terms and Conditions, [California Healthy Kids Survey Requirement](#California_Healthy).

For each district, indicate the latest CHKS administration date, if any, and identify the County CHKS Administration Lead and the District CHKS Administration Lead. Describe the compliance monitoring process to be used to ensure that all participating districts administer CHKS.

##### 8. Assurances (Section 8)

In this section, applicants must download and complete certain forms, retain some for reference, and upload others. Instructions for the various documents are provided in TUPE GEMS, where the assurances may be downloaded.

###### a. General Assurances and Certifications

The applicant’s Superintendent or Designee must certify that s/he has read and agrees to the terms as stated in this RFA and all terms in accordance with the California *HSC* and California *Education Code*.

The Superintendent or Designee’s signature represents acceptance of all conditions as stated in the Grant Application Cover Sheet, the Project Budget, all general and certified program assurances, and forms contained in TUPE GEMS not requiring a signature; it also represents agreement that the work proposed in the application will be carried out.

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 on financial statements and legally binding documents, is uploaded to TUPE GEMS. In the absence of an authorized signature by the Superintendent, or by the Designee with governing board resolution or minutes, the application will be disqualified.

Grantees must provide General Assurances and Certifications as a condition of receiving CDE funds. See the CDE General Assurances and Certifications web page at [https://www.cde.ca.gov/‌fg/fo/fm/ff.asp](https://www.cde.ca.gov/fg/fo/fm/ff.asp) for more information.

###### b. Program-Specific Assurances and Certifications

The applicant agency, on behalf of districts and schools identified in the application, must certify that it will:

i. Enforce the Tobacco-Free School Policy as described in *HSC* 104420(n)(2).

ii. Neither receive, nor apply for funds, materials, or services from the tobacco, vaping, or marijuana industries or from any agency which has received funding from these industries.

* 1. Administer the district-level CHKS Core Module as described in this RFA under Specific Terms and Conditions, [California Healthy Kids Survey Requirement](#California_Healthy).
  2. Participate in activities related to the statewide evaluation of TUPE, if selected by the CDE or its evaluation partners, such as the evaluation team at the University of California, San Diego.
  3. Participate in CYTS, if selected, as described in this RFA under Specific Terms and Conditions, [California Youth Tobacco Survey Requirement](#Other_Statewide).
  4. Implement a systematic and ongoing process to (a) collect relevant program monitoring data; (b) ensure that the funded program is implemented as planned; and (c) measure the effectiveness of the Program Plan in achieving the intended outcomes.
  5. 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.
  6. Expend funds as detailed in the approved application unless specifically approved by the CDE.
  7. Submit all required deliverables by the designated due dates to ensure that the program remains in good standing with the CDE.
  8. Submit the required TUPE Tobacco-Free School District Certification form for each funded district prior to the start of the award July 1, 2023, and maintain that status throughout the term of the grant.

1. **Memorandum of Understanding**

Consortium applicants must submit a current MOU between the lead agency and all participating districts, dated January 2, 2023, or later. The MOU should clearly describe the roles and responsibilities of the lead agency and consortium members, especially with respect to service provision and data collection. The MOU should affirm that all participating districts agree to the terms of the RFA and agree to implement the services outlined in the application.

The MOU should be signed in one document by all participating members of the consortium and submitted as a PDF through TUPE GEMS. Electronic signatures are acceptable. Alternatively, the lead agency may collect separate signed MOUs from each participating member of the consortium. If separate MOUs are obtained, only one should be uploaded to TUPE GEMS. The remaining MOUs should be filed locally for auditing purposes. Single LEA applicants do not need to submit an MOU.

1. **Letter of Support**

Single LEA applicants must include a letter of support (LOS) written and signed by the COE TUPE Coordinator endorsing the application. The letter should be written on the COE TUPE Coordinator’s letterhead and may contain an e-signature. Only one LOS is required for upload into TUPE GEMS. Consortium applicants do not need to submit a LOS from the COE TUPE Coordinator.

1. **Inventory Report**

The Inventory Report is a requirement across all grant types. All inventory items costing more than $500 and purchased with any TUPE funds, including current and expired TUPE grants, must be noted on the Inventory Report. If you are purchasing or have purchased inventory, including but not limited to, laptops, copiers, desktop computers, etc., complete and upload an Inventory Report using the inventory template provided. Alternatively, you may certify that you do not meet the criteria for completing the Inventory Report.

##### 9. Project Budget (Section 9)

In this section, you will create a Year 1 project budget organized by object code. Every dollar amount in the budget must be clearly and fully justified and be accompanied by a computation that includes a unit cost per budget item. Budgets must align with the Program Plan described in the Application Narrative. The CDE will review all proposed budget items for clarity, reasonableness, and purpose. Prior to funding, the CDE will screen for unallowable costs.

More detailed budget guidance may be found on the TUPE GEMS Resources web page at <https://sites.google.com/view/tupegemsresources/>.

#### F. Signature and Submission

The signature and submission process can be initiated only after all other sections have been completed and the Application Lead has verified them in TUPE GEMS. The signature and submission process is accessible only to the Application Lead.

Authorized signatures are required from the Application Lead and the Superintendent or Designee. Note that both signatures are due before the application is submitted in TUPE GEMS, or the application will be disqualified.

Additional signers are not supported in TUPE GEMS. If your organization’s practices require additional signatures, such as from a fiscal representative or department head, please complete these separately. You may use the download functionality in TUPE GEMS to export a zip/PDF copy of the application for internal circulation and signature.

Once all sections have been successfully verified by the Application Lead in TUPE GEMS, a link to the “Sign and Submit” screen will be enabled for the Application Lead. After the form requiring input of the names and email addresses for each signee is submitted, TUPE GEMS will generate a packet of the application for signature via DocuSign. The Application Lead and the Superintendent/Designee will receive email notifications from DocuSign that their signature is requested. Signatures may be completed in parallel; they do not need to be completed in sequence.

Manual submission of signed applications is no longer necessary. TUPE GEMS will automatically check for submitted applications with completed signatures and will accept them on an hourly basis. Upon acceptance, TUPE GEMS will send an automated email confirmation to the Application Lead and any Co-Applicants. Applications whose signatures are incomplete as of the deadline will be disqualified.

Signature and submission represent certification that all of the information in the application has been reviewed and approved by the Superintendent or Designee, and that all grant requirements will be met as stated pursuant to *HSC* Section 104420(n)(2).

Grantees must 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.

#### G. Specific Terms and Conditions

Applicants funded through this RFA must agree to the following specific terms and conditions.

##### 1. Tobacco-Free Policy Development

In accordance with *HSC* Section 104420(n)(2), all COEs, school districts, and charter schools that receive TUPE funding are required to adopt and enforce a tobacco-free school policy no later than July 1 of each fiscal year. The policy shall prohibit the use of products containing tobacco and nicotine including, but not limited to, smokeless tobacco, snuff, chew, clove cigarettes, and vapes that can deliver nicotine and non-nicotine vaporized solutions, at any time, in COE, charter school, or school district-owned or leased buildings, on school or district property, and in school or district vehicles. Vapes not only expose young people to the harmful effects of nicotine, flavorings, and other chemical additives, but have become another mechanism to consume marijuana. Therefore, tobacco-free school policies have the additional benefit of addressing the vaping of marijuana. This section does not prohibit the use or possession of prescription products, nicotine patches, or nicotine gum.

Information about the policy and enforcement procedures should be communicated clearly to students, family and community, and staff. Signs stating “Tobacco use is prohibited” should be prominently displayed at all entrances to school property as provided in *HSC* Section 104559. Alternatively, signs may state, “The use of tobacco, e-cigarettes, and marijuana is prohibited.” Information about smoking cessation support programs should be made available and cessation should be encouraged for students and staff. Any school district, charter school, or COE that does not have a tobacco-free district policy implemented by July 1 is ineligible to receive funds from the Cigarette and Tobacco Products Surtax Fund for that fiscal year.

##### 2. California Healthy Kids Survey Requirement

All districts receiving Tier 2 funding are required to participate in CHKS. Grantees must monitor school survey administration periodically to ensure the availability of CHKS data to evaluate their program effectiveness across time in relation to themselves, other districts, other counties, and the state. Grantees are required to maintain a consolidated grantee-level record and provide monitoring results upon CDE request. The CDE provides all grantees access to the TUPE Private Data Dashboard at <https://calschls.org/my-surveys/> as a tool for this purpose.

All grantees are required to conduct the district-level CHKS Core Module with the subgroup population of students in grades five or six and grades seven, nine, and eleven. Survey results, to the extent possible, should be reported by school site and race/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. For any participating school, if there are fewer than 25 students in a grade, the grantee may use either CHKS or a local alternative to fulfill the student tobacco use survey requirement.

If grade five or grade six students participate in CHKS, grantees may use either the core elementary module together with the TUPE elementary module, or the secondary module, to ensure that sufficient data are captured regarding tobacco and vaping use.

If an LEA has conducted CHKS in the school year prior to the first year of the new grant period, it may continue conducting the survey every other year and does not need to conduct it within the first year of the grant. If funding is sufficient and the grantee identifies a need to conduct the survey more frequently or in more grades, or to also administer the California School Staff Survey and California School Parent Survey, that is allowable pending consultation with the TUPE Office.

Applicants should refer to their LEA’s adopted policies and administrative regulations regarding conducting student surveys and receiving parental permission. For additional information regarding the administration of CHKS, visit the WestEd California School Climate, Health, and Learning Surveys web page at <https://calschls.org/reports-data/query-calschls/>.

##### 3. California Youth Tobacco Survey Requirement

Tier 2 grantees are also required to participate, if selected, in the CYTS, formerly known as the CSTS. Funded by CDPH, this statewide, annual survey is used to determine statewide prevalence rates of adolescent use of tobacco and marijuana. All schools in a selected LEA must participate. As with CHKS, CYTS is conducted in accordance with board policy on parental consent and requires a beginning-of-the-year notice to parents.

#### H. Appeal Process

Applicants who wish to appeal the CDE’s Intent to Award list must submit a letter of appeal. The letter must be written on the applicant agency’s letterhead and signed by the Superintendent or Designee. An electronic signature is acceptable. A copy of the signed letter must be uploaded to TUPE GEMS no later than 10 business days after ITA posting.

Letters of appeal that are late, emailed, unsigned, or not submitted via TUPE GEMS will not be considered.

Only appeals based on claims that the CDE’s actions violated a state statute or regulation will be considered. Appeals based on the professional judgment of application readers will not be considered.

The letter of appeal must include:

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

The CDE will make a decision on the appeal within 20 business days of the filing deadline for appeals. The decision will be the final administrative action afforded to the appellant.

### Appendix 1: Scoring Form and Rubric

Applications will be scored in several categories, with each category contributing a proportion of the total score, as summarized in the table below.

| **Rubric Category** | **Weight** |
| --- | --- |
| Capacity | 10% |
| Plan Summaries (General & Health Disparities [HD]) | 20% |
| Student Services (General & HD) | 25% |
| Family and Community Engagement (General & HD) | 10% |
| Staff Professional Development (General & HD) | 10% |
| Tobacco-Free Policy Development and Implementation | 5% |
| Project Monitoring and Evaluation | 10% |
| Budget | 10% |
| **Total** | 100% |

Each item in the rubric will be rated based on the quality of the applicant’s response in the relevant section of the application. The possible ratings are Outstanding (3 points), Good (2 points), Developing (1 point), and Weak (0 points), defined as follows:

* Outstanding: The applicant’s response is exceptionally clear, specific, and relevant, and presents a compelling argument supporting the proposal.
* Good: The response is sufficiently clear, specific, and relevant, and presents a reasonable argument supporting the proposal.
* Developing: The response is in some respects clear, specific, and relevant, but does not fully support the proposal.
* Weak: The response is insufficient. The information provided is not clear, specific, or relevant, and does support the proposal.

| **Capacity**  **(Section 3)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How qualified are key personnel to implement a Tobacco-Use Prevention Education (TUPE) program? How supportive is senior leadership? | **3** | **2** | **1** | **0** |
| How well does the applicant describe tobacco-use prevention efforts to date? How experienced is the applicant in carrying out health education initiatives in middle and high school communities? | **3** | **2** | **1** | **0** |
| How well is the program set up and organized to reach its intended audience(s)? Does the flow chart demonstrate an effective communication structure? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **General Population  Plan Summary (Section 4)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How well does the applicant describe their general population of students, their families and communities, and staff? How well do they describe collaborative efforts with community partners? | **3** | **2** | **1** | **0** |
| How well does the applicant describe their needs for TUPE programming? How suitable are the data-driven processes used to determine those needs? | **3** | **2** | **1** | **0** |
| How well does the program overview make the case that the proposed services and activities will meet the identified needs? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **General Population Student Services (Section 4A)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed services and activities to meet the identified needs in the general student population? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for implementing and evaluating the services and activities? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **General Population  Family and Community Engagement (Section 4B)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed services and activities to meet the identified needs with respect to families and the community? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for implementing the services and activities? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **General Population Staff Professional Development (Section 4C)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed staff professional development activities to meet the identified needs? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for ensuring staff participation in TUPE-related training? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Health Disparities  Plan Summary (Section 5)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How well does the applicant describe their HD student populations, families and communities, and staff readiness to provide culturally responsive services to these populations? How well do they describe collaborative efforts with community partners? | **3** | **2** | **1** | **0** |
| How well does the applicant describe their needs with respect to HD populations, and the data-driven processes used to determine those needs? | **3** | **2** | **1** | **0** |
| How well does the program overview make the case that the proposed services and activities will meet the identified needs? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Health Disparities Student Services (Section 5A)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed services and activities to meet the identified needs with respect to HD populations? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for implementing and evaluating the services and activities? Do they propose culturally responsive recruitment strategies to engage members of their HD populations? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Health Disparities Family and Community Engagement (Section 5B)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed services and activities to meet the identified needs in HD families and communities? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for implementing the services and activities? Do they propose culturally responsive recruitment strategies to engage members of their HD populations? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Health Disparities Staff Professional Development (Section 5C)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How suitable are the proposed staff professional development activities to meet the identified needs with respect to HD populations? | **3** | **2** | **1** | **0** |
| Does the supporting information indicate a solid plan for ensuring staff participation in HD-related trainings? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Tobacco-Free Policy Development and Implementation (Section 6)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How well does the applicant describe a process to ensure tobacco-free certification by the start of the grant period in all participating districts?  Applicants who have already fully met this threshold will receive an outstanding rating. | **3** | **2** | **1** | **0** |
| How well does the applicant describe a process to achieve a comprehensive tobacco-free policy in all participating districts? Applicants who have already fully met this threshold will receive an outstanding rating. | **3** | **2** | **1** | **0** |
| How well does the applicant describe actions that will be taken to ensure effective communication of their tobacco-free policy to students, family and community, and staff? | **3** | **2** | **1** | **0** |
| How well does the applicant describe steps to address policy violations and to ensure that equitable practices, such as the Alternatives to Suspension and Expulsion, are adopted locally? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Project Monitoring and Evaluation (Section 7)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How well does the applicant describe a rationale for the measurable outcomes they selected? Is there an effective plan to ensure that monitoring data are collected and analyzed? Is it clear how results will be used to drive continuous quality improvement? | **3** | **2** | **1** | **0** |
| How well does the California Healthy Kids Survey compliance monitoring process ensure that all participating districts administer the survey? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |

| **Project Budget (Section 9)** | **Outstanding** | **Good** | **Developing** | **Weak** |
| --- | --- | --- | --- | --- |
| How well does the budget align with the Program Plan? Is it reasonable with respect to the allocation of funding across different areas (e.g., personnel, materials and supplies, instructional consultation)? | **3** | **2** | **1** | **0** |
| Is the budget clear, reasonable, and free of unallowable costs? | **3** | **2** | **1** | **0** |
| **Total** |  |  |  |  |