



## CALIFORNIA RURAL INDIAN HEALTH BOARD, INC.

4400 Auburn Blvd., Sacramento, CA 95841

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### **Request for Proposal**

#### California Indian Tobacco Education (CITE)

#### Community Program

Addressing commercial tobacco use through policy, systems, and environmental change to promote the good health and wellness in tribal communities throughout California

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#### **Important Dates**

Project Period: November 16, 2016 – August 14, 2017

Funding Announcement Release: October 5, 2016

Application Deadline: October 26, 2016

Notification of Funding: November 9, 2016

Final Report Due: August 31, 2017

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Funded by the Centers for Disease Control and Prevention. Grant #6 NU58DP005432-03



## **Summary**

Thank you for your interest in the California Indian Tobacco Education (CITE) Program. Subcontract funds are intended to foster the process of bringing together a broad-based group of community leaders and members to discuss local tobacco issues, explore data and indicators, set priorities, and implement action strategies. This funding has been made available as part of a California Rural Indian Health Board, Inc. (CRIHB) grant funded by the Centers for Disease Control and Prevention (CDC). The goal of the CITE program is to prevent commercial tobacco abuse among American Indians and Alaska Natives (AIANs) and protect tribal members from secondhand smoke through a holistic approach.

Subcontract funds for the CITE project during FY 2016/2017 have been allocated for tribes to implement and evaluate projects that propose a combination of effective, community chosen and culturally adapted policies, systems, and environmental (PSE) changes to address commercial tobacco use by educating tribal members and leaders about the burden of commercial tobacco abuse on members and the economy, reducing secondhand smoke exposure through commercial tobacco policy implementation, reducing exposure to commercial tobacco advertising, and/or increasing utilization of the California Smokers Helpline. The maximum award amount is \$7,000.

## **CITE Requirements:**

### **I. Eligibility**

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Entities submitting proposals must:

- be a tribe or tribal health agency within California;
- be seeking funding to support the tribe's tobacco education and policy activities;
- have sufficient capacity and resources to complete the planned project activities within the project timeframe; and
- have not received a CITE funding in the past
- priority for funding will go to tribes and tribal health agencies who have not previously received ACORNS Phase II funding.

Note: The California Area was fortunate to receive two CDC GHWIC awards, one to CRIHB and one to United Indian Health Services (UIHS). Please note UIHS member tribes are not eligible for CRIHB CITE subcontracts as they fall within the service area of UIHS.

Entities submitting a completed proposal will receive notice regarding a funding decision by November 9, 2016.

## **II. Project Period**

Proposals are due on or before October 26, 2016. The project period to complete activities outlined in Section V is November 16, 2016 through August 14, 2017. Funded activities must be completed by **August 14, 2017**. Activities should not begin until an agreement has been executed.

## **III. Available Funding**

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The maximum award for this fixed price Subcontract is \$7,000 for any single tribe or tribal health agency. The minimum award is \$2,500.

Initial payment of the Subcontract consisting of fifty percent of total funds will be issued upon receipt of signed Subcontract Agreement. The remaining amount will be issued upon a) review and approval of completed reports and deliverables by the CRIHB CITE Program Administration, and b) receipt of signed final invoice. Final invoice must be received by the date noted in the Subcontract Agreement. We encourage interested entities to apply early. Up to five Subcontracts will be available through this funding.

## **IV. Project Activities**

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The Community Program Subcontract objective is to support tribes throughout California in reducing exposure to commercial tobacco and secondhand smoke through education, awareness, environmental and system changes, and policy implementation. Subcontracts will be awarded to support the activities listed below. These activities are intended to be carried out in regular communication with the CRIHB Health Education Specialists and Program Evaluator.

- **Expand the reach of the CDC TIPS media campaign or other federal tobacco education campaigns, Surgeon General Reports, and other tobacco related science/evidence-based publications among tribal members.**
- **Inform Tribal Leaders, decision makers, and tribal communities about the burden of commercial tobacco use to their tribal members and tribal economy.**
- **Implement evidence-based, culturally relevant interventions that increase the number of AIANs protected from secondhand commercial tobacco smoke as the result of implementing commercial tobacco-free policies.**
- **Implement evidence-based, culturally appropriate tribal interventions that decrease AIAN exposure to commercial tobacco marketing and availability of commercial tobacco products.**

Project examples include but are not limited to developing a tribal TIPS Campaign, signage to increase tribal members' awareness of current commercial tobacco-free policies, assessing the burden of commercial tobacco use and secondhand smoke exposure on the community, banning commercial tobacco sponsorship of activities, developing smoke-free housing, developing smoke-free recreation areas, and ensuring tribal tobacco sales, advertising, and policies are compliant with federal regulations.

## **V. Project Requirements**

Each funded tribe or tribal health agency will be required to do the following:

- Adhere to reporting requirements;
- Identify leadership and staff support;
- Develop appropriate processes to carry out action steps;
- Complete the activities indicated in the Subcontract proposal and as planned in the project Workplan; and
- Commit to the requirements of the Subcontract, including adhering to timelines and providing the appropriate deliverables

## **VI. Required Reporting and Deliverables**

Compensation requirements include a signed invoice and activity documentation. Submission of these documents shall be submitted to CITE staff.

- Documentation developed through use of Subcontract funds (e.g., policies, environmental changes, TIPS videos, publications);
- Final deliverable, which will be based on the proposed project. CITE Staff and the Program Evaluator will collaborate with the Subcontractor to determine the final deliverable within two weeks of the funding notice; and
- Final Report, due August 31, 2017

## **VII. Review Criteria**

All proposals will be reviewed by a selection committee comprised of staff from a variety of CRIHB departments. Individual comments on proposals will not be provided. Proposals will be rated based on the following criteria:

- The degree to which the proposal activities meet all RFP requirements;
- The feasibility of achieving project objectives within the estimated schedule and budget; and

- The demonstrated willingness of the applicant to complete all project activities within the time allotted

## **VIII. Contact Information**

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CRIHB is the lead agency for this project. The Department of Research and Public Health will administer and manage this project.

CRIHB's CITE Program contact:

**Sohab Arif**

Health Education Specialist II

Email: [sohab.arif@crihb.org](mailto:sohab.arif@crihb.org)

Office: 916-929-9761 x1505

Fax: 916-263-0207

## **IX. How to Apply**

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The completed proposal must be received by October 26, 2016. The application should be submitted to CRIHB via email ([sohab.arif@crihb.org](mailto:sohab.arif@crihb.org)) or fax to Sohab's attention at 916-263-0207.

**Please indicate in the subject line of your email:** Proposal for California Indian Tobacco Education Subcontract from (name of tribe/health agency).

The proposal narrative must be responsive to this RFP.

**Application Components: All application components are provided in the enclosed attachments. Please use the attachments (A through C) for your application.**

**Attachment A: CITE Subcontract Proposal**

**Cover Page:** Provide contact information, official project contact, and project lead.

- Problem Statement:** Provide a short overview of commercial tobacco use in your community and how it relates to the burden of chronic disease in your community.
- Organizational Capacity:** Describe adequate staffing and experience to carry out the project. Include the systems and methods for financial reporting, budget

management, and administration. Describe roles and responsibilities of existing and/or proposed partnerships in addressing tobacco issues.

Outline who will have day-to-day responsibility for key tasks such as:

- leadership of the project;
- monitoring of the project's on-going progress;
- preparation of reports;
- program evaluation, etc.

C. **Budget:** A detailed budget for CITE funds is required. See Section X for more information.

D. **Authorizing Signature:** The individual authorized to request funds and enter into a contract.

### **Attachment B: CITE Project Workplan**

**Workplan:** The Workplan is to include:

- a policy, systems, and environment (PSE) goal;
- the target population;
- the number of people reached;
- objectives;
- activities;
- timelines, deadlines, and benchmarks;
- staff;
- short term and long term outcomes, partnerships and resources; and
- evaluation tracking measures

A sample Workplan is provided.

### **Attachment C. CITE Project Outcomes and Evaluation**

**Instructions:** Use instructions for guidance to complete the attachment.

**Name:** Tribe or Tribal Health Agency.

**Coverage Area:** Community.

**A. Outcomes:** Identify the outcomes that will result from implementing your planned project.

**B. Evaluation Activities:** Describe your project's planned evaluation activities.

**C. Evaluation Methods:** Describe the types of evaluation (e.g., process, outcome) and available data sources that will be used to demonstrate the effectiveness of planned interventions and activities related to outcomes. Identify the key evaluation questions

to address planned interventions, activities, and strategies, as well as how evaluation findings will be used for continuous local program and quality improvement.

## **X. Budget**

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A detailed budget for CITE funding is required. Subcontract funds may **not** be used to substitute for or replace funds already allocated or spent for the same activity. Subcontract funds may be used for project staff salaries, supplies, project-related travel, and other direct expenses related to tobacco activities. Funds may be used for activities such as:

- Meeting expenses (i.e., room rental, food for meetings convened over mealtime, materials for meetings)
- Conducting a community survey, community focus groups or forums, community meetings, interviews
- Travel to attend trainings to receive technical assistance on conducting a community health needs assessment/developing a community health improvement plan
- Publication of tobacco education materials

The Subcontract funds will be distributed as 50% of the award amount after the executed Subcontract has been received by CRIHB. Final payment will be distributed after CRIHB receives and reviews the Final Report from the Subcontractor along with all required documentation (invoice, implemented policies, publications created, data collected). Final invoice must be received by date noted in the Subcontract Agreement.

## **XI. Funding Limitations**

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All deliverables, including documents resulting from Subcontract activities (e.g., policies, survey results, education tools) must be developed during the Subcontract period. Subcontract funds may **not** be used for clinical services, purchase of furniture or equipment, to construct or renovate facilities, for lobbying, or for travel unrelated to the project.