



## STAFF REPORT

**Report To:** Board of Supervisors      **Meeting Date:** February 18, 2021

**Staff Contact:** Nicki Aaker (naaker@carson.org)

**Agenda Title:** For Possible Action: Discussion and possible action regarding ratification of the submission of a grant application to the Nevada Department of Health and Human Services, Division of Public and Behavioral Health, requesting a total of \$277,947 for a 2-year grant from The Fund for a Healthy Nevada. (Nicki Aaker, naaker@carson.org)

Staff Summary: The Carson City Department of Health and Human Services (“CCHHS”) submitted a grant application due to a short application window. Funds are for a 2-year grant period totaling \$277,947 (\$142,524 for year 1, and \$135,423 for year 2). The grant is part of the Nevada Tobacco Control Program and does not require matching funds from Carson City.

**Agenda Action:** Formal Action / Motion      **Time Requested:** 10 minutes

---

### **Proposed Motion**

I move to ratify submission of the grant application.

### **Board's Strategic Goal**

Quality of Life

### **Previous Action**

CCHHS is currently receiving and has previously received grants from The Fund for a Healthy Nevada through the Nevada Department Health and Human Services, Division of Public and Behavioral Health for projects to discourage youth tobacco and vaping use. This grant has been received since 2015.

### **Background/Issues & Analysis**

The City's grant policy requires any grant applications over \$50,000 be approved by the Board of Supervisors prior to a grant application submittal by City staff. However, the application was due 2/5/2021 and there was not time to bring the request to the Board prior to submittal due to the timing of receiving the Request for Application from the state.

Funds from this grant would be used to continue to: (1) provide educational presentations to youth discouraging initiation of the use of tobacco products and vaping; (2) collaborate with Nevada Tobacco Prevention Coalition and other agencies to educate decision makers and the public on the benefits of policy solutions to address e-cigarette use among youth and young adults; (3) promote counter-marketing campaigns about the dangers of the use of tobacco products and e-cigarettes; (4) work with multi-unit housing complexes to increase the number of smoke-free and vaping-free policies so residents can live in an environment free from second hand smoke; and (5) facilitate referrals from providers serving youth to the My Life, My Quit Program.

This grant is leveraged with current funding from two other grants received from: (1) the Centers for Disease Control and Prevention and passed through the state to provide tobacco education and prevention activities and services; and (2) the State of Nevada funding to support education, trainings, outreach and messaging to decrease youth tobacco and e-cigarette/vaping use. The grant will allow the City to continue to provide these services.

**Applicable Statute, Code, Policy, Rule or Regulation**

NRS 354.598005(3)

**Financial Information**

**Is there a fiscal impact?** Yes

**If yes, account name/number:** Grant Fund 2756800-501225. Grant number to be determined if approved and awarded.

**Is it currently budgeted?** No

**Explanation of Fiscal Impact:** The amount in which CCHHS applied is not budgeted; however, if approved will be added to the 2nd round of budget augmentations for both revenues and expenses. No fiscal match is required and no additional full-time staff will be hired.

Not applying for the grant would lead to a decrease in the current delivery of services provided.

**Alternatives**

Do not ratify submission of grant application for the Funds For Healthy Nevada grant. Not applying would lead to a decrease in the current delivery of services up to and including service termination.

**Attachments:**

[RFA - Nevada Funds for Healthy Nevada.pdf](#)

[CCHHS Application 2.5.21.pdf](#)

**Board Action Taken:**

Motion: _____	1) _____	Aye/Nay
	2) _____	_____
		_____
		_____
		_____

\_\_\_\_\_  
(Vote Recorded By)

# The Fund for a Healthy Nevada

---

Tobacco Control Program

Request for Applications

State Fiscal Years 2022-2023



**Department of Health and Human Services  
Division of Public and Behavioral Health  
Bureau of Child, Family and Community Wellness  
Chronic Disease Prevention and Health Promotion**

**STATE OF NEVADA**

Steve Sisolak  
Governor

Richard Whitley, MS  
Director

Dec 2020  
1.0

Lisa Sherych  
Administrator

Ihsan Azzam, Ph.D., M.D.  
Chief Medical Officer

Division of Public and Behavioral Health

## Contents

Background .....	3
Project Period .....	3
Eligible Applicants .....	3
Problem/Burden .....	4
Definitions and General Purpose .....	4
Best Practices Guidebook .....	5
2022-2023 State and National Tobacco Control Goals .....	5
Leveraging Funding .....	6
Use of the Terms Application and Proposal.....	6
Components of the RFA .....	6
Component 1 .....	6
Component 2: Statewide Collaboration Initiative .....	9
Available Funding.....	9
Application and Award Process .....	10
Application Questions.....	10
Award Process.....	10
Technical Review.....	10
CDPHP Evaluation Committee .....	11
Final Decisions.....	11
Notification and Negotiation Process .....	11
Application Instructions .....	12
General Formatting.....	12
Notice of Intent.....	13
Project Narrative Instructions.....	13
Work Plan Instructions.....	13
Budget Instructions.....	13
Budget Requirements .....	14
SUBMISSION INSTRUCTIONS.....	14
APPENDIX A – PROJECT REQUIREMENTS.....	16

Reimbursement Method.....	16
Reporting Requirements.....	16
211 Information and Referral .....	17
APPENDIX B – COMPONENT 1 SCORING GUIDE .....	18
APPENDIX C – PROPOSAL CONTENT .....	19
I. APPLICANT INFORMATION .....	19
II. PROJECT NARRATIVE TEMPLATE.....	20
III. CERTIFICATION .....	21
APPENDIX D – CHECKLIST.....	22
Required Submission Items: .....	22
Optional Submission Items: .....	22

## Background

The Fund for a Healthy Nevada (FHN) was created in 1999 by Nevada Revised Statute (NRS) 439.620 using a portion of the state's share of the Master Settlement Agreement (MSA) with the tobacco industry. Based on the current state budget, the Nevada Division of Public and Behavioral Health (DPBH) is projecting a budget of \$950,000 for State Fiscal Year 2022 (SFY22) and State Fiscal Year 2023 (SFY23) from FHN to allocate to "programs that are consistent with the guidelines established by the Centers for Disease Control and Prevention (CDC) of the United States Department of Health and Human Services relating to evidence-based best practices to prevent, reduce or treat the use of tobacco and the consequences of the use of tobacco (NRS 439.630(1)(f))."

Senate Bill (SB) 421, passed in June 2011, revised the legislation under which the FHN is administered, resulting in the following changes:

- The Trust Fund for Public Health was eliminated. The money in the Trust Fund will be transferred to the FHN, increasing the FHN share of the MSA to 60%.
- The provision specifying the percentages of available revenues to be allocated from the FHN to specific programs was eliminated. Beginning in the SFY 2014-2015 budgeting process, the Department of Health and Human Services (DHHS) was required to consider recommendations submitted by the Grants Management Advisory Committee (GMAC), the Nevada Commission on Aging (CoA), and the Nevada Commission on Services for Persons with Disabilities (CSPD) when proposing a plan for allocation of FHN funds to programs. The GMAC, CoA, and CSPD must seek community input on needs when developing their recommendations.
- The provision related to Children's Health was revised to broaden the kinds of projects that may be supported with FHN. The revised legislation covers "programs that improve the health and well-being of residents of this state, including, without limitation, programs that improve health services for children."

## Project Period

The project period for this Request for Applications (RFA) will span two State Fiscal Years: 2022 and 2023. Year One of the award begins July 1, 2021 and ends June 30, 2022. Year Two of the award begins July 1, 2022 and ends June 30, 2023. All awards are subject to funding availability. Year Two of the awards are contingent on awardee progress and interim reporting in Year One.

## Eligible Applicants

**Only local health districts in Clark and Washoe Counties may apply for funds to address tobacco control within those two county jurisdictions.** For other counties, any non-profit and public agencies (including local government agencies, universities, and community colleges) may apply if interested in providing services which address tobacco control among Nevada residents. For details, please refer to the

restrictions outlined by NRS 439.630(1)(f) which directs funding to be allocated to the following by contract or grant:

- 1) To the district board of health in each county whose population is 100,000 or more for expenditure for such programs in the respective county;
- 2) For such programs in counties whose population is less than 100,000; and
- 3) For statewide programs for tobacco cessation and other statewide services for tobacco cessation and for statewide evaluation of programs which receive an allocation of money pursuant to this paragraph, as determined necessary by the Division and the district boards of health.

This RFA is seeking applicants under Paragraphs (1) and (2) of the cited statute above to administer tobacco control programs. Part (3) has already been addressed through a competitive bid process. Applicants who do not qualify under Part (1) or (2) will not have their application reviewed.

## Problem/Burden

Tobacco use is the single most preventable cause of disease, disability, and death in the United States. According to CDC, more than 480,000 people die of smoking-related illnesses in the United States each year.<sup>1</sup> Each day, an estimated 2,100 youth and young adults who have been occasional smokers become daily cigarette smokers.<sup>2</sup> According to the 2017-2019 Nevada High School Youth Risk Behavior Survey (YRBS) Comparison Report, e-cigarette use among high school students in Nevada rose from 15.0% in 2017 to 22.5% in 2019.<sup>3</sup> The Behavioral Risk Factor Surveillance System (BRFSS) data shows a nonsignificant decrease (from 16.3% to 15.7%) in Nevada adults who reported they currently smoke when comparing 2014 data to 2019.<sup>4</sup> According to the CDC, 41,000 Nevada children will die prematurely from smoking if current smoking rates persist. Annual health care costs in Nevada directly caused by smoking total \$1.1 billion.<sup>5</sup>

## Definitions and General Purpose

The purpose of the funding associated with this RFA is to administer tobacco control services consistent with CDC guidelines to improve the health and well-being of Nevada residents. To accomplish this, objectives and activities to be funded must reflect and incorporate the state and national tobacco control

---

<sup>1</sup> Centers for Disease Control and Prevention, Smoking & Tobacco Use Fast Facts. Retrieved December 3, 2020: [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/fast\\_facts/](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/)

<sup>2</sup> U.S. Department of Health and Human Services. The Health Consequences of Smoking-50 Years of Progress: A Report of the Surgeon General. Retrieved December 3, 2020: [https://www.cdc.gov/tobacco/data\\_statistics/sgr/50th-anniversary/index.htm](https://www.cdc.gov/tobacco/data_statistics/sgr/50th-anniversary/index.htm)

<sup>3</sup> University of Nevada, Reno, 2017-2019 Nevada High School YRBS Comparison Report. Retrieved December 3, 2020: <https://scholarworks.unr.edu//handle/11714/7350>

<sup>4</sup> Centers for Disease Control and Prevention, BRFSS Prevalence & Trends Data. Retrieved December 3, 2020: <https://www.cdc.gov/brfss/index.html>

<sup>5</sup> Smoke and Tobacco Use, Extinguishing the Tobacco Epidemic in Nevada. Retrieved December 3, 2020: <https://www.cdc.gov/tobacco/about/osh/state-fact-sheets/nevada/index.html>

goals and evidence-based interventions as detailed in the guidebook, *Best Practices for Comprehensive Tobacco Control Programs—2014 (Best Practices Guidebook)*.

### Best Practices Guidebook

Evidence-based, statewide tobacco control programs that are comprehensive, sustainable, and accountable have been shown to reduce smoking rates as well as tobacco-related diseases and deaths. A comprehensive, statewide tobacco control program is a coordinated effort to establish smoke-free policies and social norms, to promote and assist tobacco users to quit, and to prevent initiation of tobacco use.<sup>6</sup> An understanding of the same framework of tobacco control interventions will allow for increased effectiveness, coordination, and the possibility of combining efforts which will necessitate recipients design programs as outlined by the *Best Practices Guidebook*.

To obtain a copy, visit:

[https://www.cdc.gov/tobacco/stateandcommunity/best\\_practices/index.htm](https://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm)

**Refer to this resource as needed when developing activities in response to this RFA.**

### 2022-2023 State and National Tobacco Control Goals

The goals outlined by CDC and currently being promoted by the Nevada Tobacco Control Program (TCP) to address the burden of tobacco use are:

- I. Prevent initiation among youth and young adults
- II. Eliminate exposure to secondhand smoke
- III. Promote quitting among adults and youth
- IV. Identify and eliminate tobacco-related disparities

“Identify and eliminate tobacco-related disparities” is a cross-cutting goal to be addressed within each of the first three goals listed above. Additionally, the strategic priorities outlined by CDC and currently being promoted by the TCP are:

- State and Community Interventions
- Mass-Reach Health Communication Interventions
- Tobacco Use and Dependence Treatment Interventions
- Surveillance and Evaluation

State tobacco control work is guided by the Nevada Tobacco Control Plan, a five-year strategic plan, which supports the State and National Control Goals. The Tobacco Control Plan outlines strategies Nevada tobacco control stakeholders are working on through 2023 and can be found online:

[http://dpbh.nv.gov/Programs/TPC/Tobacco\\_Prevention\\_and\\_Control\\_-\\_Home/](http://dpbh.nv.gov/Programs/TPC/Tobacco_Prevention_and_Control_-_Home/)

Recently, the TCP has developed a Sustainability Plan to increase the number of traditional and non-traditional partners while cultivating connections between the program and its existing stakeholders.

---

<sup>6</sup> U.S. Centers for Disease Control and Prevention (CDC), *Best Practices for Comprehensive Tobacco Control Programs – 2014*, Atlanta, GA. U.S. Department of Health and Human Services (HHS), January 2014.



Proposals are to support this plan through requirements associated with both components detailed in this RFA. Applicants may request an electronic copy of the Sustainability Plan.

### Leveraging Funding

**Program activities may not duplicate activities supported by other funding sources and grants.** However, proposed program activities may support existing or ongoing efforts that produce measurable and reportable outputs or deliverables attributable to FHN funding.

### Use of the Terms Application and Proposal

Throughout this document, the words “application” and “proposal” may be used interchangeably. Both refer to the documents applicants will submit in response to this RFA.

## Components of the RFA

There are two funding opportunity components as outlined in Table 1.

**Table 1.** Summary of RFA components and funding priorities

Component	Goals and Priorities	# of Awards	Estimated Annual Amount Available
<b>1</b>	<ul style="list-style-type: none"> <li>Prevent initiation among youth and young adults</li> <li>Promote smoke-free jurisdictions</li> <li>Promote quitting among youth</li> <li>Increase quality referrals to the state quitline</li> </ul>	3 to 5	\$765,000 Maximum
<b>2</b>	<ul style="list-style-type: none"> <li>Statewide collaboration</li> </ul>	1	\$35,000 Minimum

The number of awards [above] is subject to change depending on the actual number of applications submitted. Applicants are welcome to apply for any or all components. For advantageous considerations regarding Component 2, it is advised to also submit a strong application for Component 1. If possible, the TCP will award Component 2 to an applicant which is also awarded for Component 1.

### Component 1

Component 1 funding will be allocated to address State and National Tobacco Control Goals. This component should prioritize employing “environmental approaches that promote health and support and reinforce healthful behaviors statewide and in communities,” to the extent possible, for the majority of the objectives proposed in the applicant’s work plan (see page 21 of the *Best Practices Guidebook*).

Activities aligned with Goal I should be organized to support up to, but no more than, four objectives. Three objectives are provided, and the applicant also has the option to reuse a past objective if they

choose and applicable for the organization. For Goal II, this RFA narrows the scope of activities to support one specific objective that should identify a county or city (or another type of jurisdiction may substitute) with the intention of promoting the public health benefits of implementing a comprehensive smoke-free (or tobacco-free) policy within the identified jurisdiction. Activities may focus on the early stages of working towards such an objective. Assessing readiness through surveys or efforts to gather information from stakeholders, the local business community, or key decision-makers would be appropriate. Alternatively, activities may focus on the implementation of anticipated policies to build on prior work. In support of Goal III, applicants will need to develop activities for at least one required objective and then they may also choose to address a second objective designed to build on previous work to promote electronic referrals to the quitline from health systems or providers. Table 2 below provides additional information to help guide applicants in developing their work plans.

**Table 2.** Objectives and Work Plan Guidance

CDC Goal	#	Objective	Work Plan Guidance
<b>I. Prevent initiation among youth and young adults</b>	<b>1.1</b>	By June 30, 2022, partners and youth will educate decision makers and the public on the benefits of at least X policy solutions to address e-cigarette use among youth and young adults.	Either Objective 1.1 or 1.2 is required. May also choose both. If the applicant is working on this objective under CDC funding, they will need to develop activities distinct and specific to this proposal. One key activity should include partnering with another organization capable of effectively educating decision makers.
	<b>1.2</b>	By June 30, 2022, partners and youth will educate decision makers and the public on the benefits of one (1) statewide policy to restrict the sale of flavored tobacco products including product which contain menthol.	Either Objective 1.1 or 1.2 is required. May also choose both. One key activity should include partnering with another organization capable of effectively educating decision makers.
	<b>1.3</b>	Through June 30, 2022, continue promoting counter marketing campaigns to reach at least X youth and/or young adults with messages about the dangers of experimentation with tobacco products, including e-cigarettes and other emerging tobacco products.	Optional objective. Only existing campaigns should be supported through this objective. Applicants should note what existing campaigns they are planning to promote such as “Behind the Haze” or “Let’s Talk Vaping.” Other existing counter-marketing campaigns are also eligible to be included under this objective.
	<b>1.4</b>	[Updated objective from a previous work plan which addresses Goal I, selected by applicant if they have history working in tobacco prevention.]	Optional. If applicants choose, those with experience in tobacco control and prevention are invited to update one of their previously used objectives as long as there is not an overlap with Objectives 1.1, 1.2, or 1.3.

<b>II. Eliminate exposure to secondhand smoke</b>	<b>2.1</b>	By June 30, 2022, increase the number of jurisdiction-wide smoke/tobacco-free policies within [insert county or city name] from X to Y.	Required objective, applicants may strengthen the objective by specifying a comprehensive tobacco-free policy.
<b>III. Promote quitting among adults and youth</b>	<b>3.1</b>	By June 30, 2022, facilitate referrals from at least X providers who serve youth and/or young adults to the <i>My Life, My Quit</i> Program.	Required objective. Activities may focus on education, promotion, and/or developing referral mechanisms. The quitline vendor is willing to provide education to support organizations working on this objective.
	<b>3.2</b>	By June 30, 2022 engage [insert specific health system] providers and staff to increase the conversion rate of their electronic referrals from XX% to YY%. (The overall baseline is 3.78% for the state. The quitline vendor recommends planning on a modest increase of about 1%.)	Optional objective. May specify up to three health systems. Selected health system(s) must already electronically refer to the state quitline. The conversation rate of electronic referrals is defined by the number of enrolled participations divided by the number of electronic referrals. Specific data may be requested from the quitline vendor through the TCP. Activities should focus on educating providers to prepare participants for quitline outreach and services. The quitline vendor is willing to provide education to support organizations working on this objective.

For most objectives, applicants will need to set realistic, numerical measures in place of the “X” or “Y” placeholders in the table above. Minor changes to the objectives may be needed and applicants should add details where possible. Applicants should focus on working within the guidelines of the RFA for the purposes of the proposed work plan. Objectives may be altered and finalized later as part of the award process.

Applicants are encouraged to include well-developed activities for all three goals as part of their proposed work plan. Overall, no more than seven activities per each objective should be used and it is recommended to only list five key activities per objective to the extent the applicant finds it practical. In total, an applicant’s work plan should have between three to seven objectives.

Additionally, applicant organizations are required to include at least one paid Health Equity Internship to work on activities listed in their proposed plans for each year they are awarded. It is recommended applicants consider intern candidates having either a background or educational interest in a priority population facing health inequities or disparities according to their communities needs assessment and local data. Internships are to be for at least fifty hours but may be longer at the discretion of the applicant. Awardees will be encouraged to be open to a broad range of candidates for this internship such as seniors in high school, recent high school graduates, those who have recently received their General Educational

Diploma, as well as undergraduate and graduate college students. Awardees will receive guidance to use this internship as an opportunity to grow and improve partnerships in support of the Sustainability Plan.

Finally, to increase the possibility of combining efforts and coordinating with other awardees on tobacco control initiatives, Component 1 requires applicant organizations be a current participating member or to become a member of the Nevada Tobacco Prevention Coalition (NTPC). Additionally, applicant organizations are encouraged to participate in NTPC activities by joining at least one committee.

## Component 2: Statewide Collaboration Initiative

Like Component 1, Component 2 requires applicant organizations to be a current participating member or to become a member of the NTPC. The Coalition's mission is to: "improve the health of all Nevadans by reducing the burden of tobacco use and nicotine addiction."<sup>7</sup> Continued support and development of NTPC is crucial to facilitating statewide strategic planning to advance the State and National Tobacco Control Goals. This component of the RFA may require applicant organizations to coordinate with NTPC. The Nevada TCP will not facilitate this part of the process. For more information or to contact NTPC visit: [www.tobaccofreenv.org](http://www.tobaccofreenv.org).

**To provide basic funding for this initiative, the RFA is seeking an applicant to develop of budget at least \$35,000 to support NTPC. Only applicants which were not selected to support NTPC through FHN funding in the previous biennium will be considered for this component. Applicants interested in this initiative may request a sample scope of work to develop as part of their work plan.**

## Available Funding

Subject to legislative authorization, the DPBH is projecting \$950,000 to allocate to programs "...to prevent, reduce or treat the use of tobacco and the consequences of the use of tobacco (NRS 439.630(1)(f))." Available funding, after administrative costs and funding statewide tobacco cessation services, is estimated to be approximately \$800,000 for SFY22 (July 1, 2021 – June 30, 2022).

Awards for Component 1 will account for the burden of tobacco use (based on smoking rates and population size) and maintaining the infrastructure for adequate tobacco control program staff. Funding requests should be based on a formula of one dollar (\$1) for each smoker and funding already committed to program infrastructure. Applicants should estimate appropriate Component 1 funding requests by using 2019 BRFSS data to estimate the number of smokers within their geographical boundaries and population estimates provided by the US Census Bureau or state or local government demographer source. The TCP and evaluation committee for this RFP will carefully review proposed budgets for infrastructure. Applicants previously awarded from the prior RFA should include estimates to maintain the same number of tobacco control staff and associated costs such as indirect. These applicants should not include costs related to tobacco control staff funded by local funding sources or grants, including the CDC National and State Tobacco Control Program Cooperative Agreement. Additionally, applicants are

---

<sup>7</sup> Nevada Tobacco Prevention Coalition, *Mission and Priorities*. Retrieved December 3, 2020: <http://www.tobaccofreenv.org/about/mission-priorities/>

recommended to note staff and infrastructure costs associated with SFY21 state funding for which applicants would like considered to be funded on contingency based on the uncertainty of the overall state budget for the next biennium. New applicants, who historically have not received these funds, may use the suggested amount of \$40,000 to allocate towards infrastructure.

Funds awarded for Component 2 should be estimated based on recommendations from the board or fiscal agent of NTPC or its successor organization. The minimum amount of funding estimated to maintain NTPC is \$35,000. However, applicants are encouraged to develop a realistic budget based on the needs of the organization even if funding is limited and the proposed budget may not be fully funded.

Scoring will only impact the burden portion of the formula for funding Component 1. Determining the funding allocated for infrastructure and Component 2 will be at the discretion of the Evaluation Committee. Guidelines to estimate applicant funding requests are provided in Table 3 below:

**Table 3.** Annual funding amounts for FHN RFA State Fiscal Years 2022-2023

<b>Component</b>	<b>Funding Guideline</b>
<b>1</b>	<ul style="list-style-type: none"> <li>• Formula-based: \$1.00 x total population x smoking prevalence x the applicant score + estimated infrastructure budget</li> <li>• Estimates range from \$40,000 to \$215,000 for infrastructure budgets; the target for the infrastructure budget will vary greatly depending on the organization applying and if contingency infrastructure is included</li> </ul>
<b>2</b>	<ul style="list-style-type: none"> <li>• \$35,000 minimum</li> <li>• May apply for more funds with accompanying rationale supported by the budget and work plan</li> </ul>

## Application and Award Process

### Application Questions

Questions about the application may be submitted via email to Lily Helzer, Chronic Disease Prevention and Health Promotion Section Manager, [lhelzer@health.nv.gov](mailto:lhelzer@health.nv.gov).

### Award Process

**Applications received by the deadline, February 5, 2021, will be processed as follows:**

#### Technical Review

Staff from the State of Nevada, Division of Public and Behavioral Health, Chronic Disease Prevention and Health Promotion (CDPHP) Section will review applications to ensure minimum standards are met. Submissions must include applicant information and a project narrative ([Appendix C](#)), a work plan (Appendix E to be provided after Notice of Intent), a proposed budget (Appendix F to be provided after

Notice of Intent), and answers to all RFA components including the submission checklist ([Appendix D](#)). Proposals will be disqualified if they are received after the deadline and may be disqualified if:

- Applicant is not eligible under any state or federal statute or requirement of this RFA;
- The application is missing any of the required elements;
- The application does not conform to standards for character limits, type size, and the prohibition on attachments;
- The application is submitted by an entity that is financially unstable as evidenced by information gleaned from the Fiscal Management Checklist and accompanying fiscal documents; and/or
- The application is received after the deadline date.

### CDPHP Evaluation Committee

The Evaluation Committee will be comprised of a panel of three scorers. Nevada TCP and the GMAC will each provide a tobacco subject matter expert. The third scorer will be provided by a program impacted by tobacco control issues housed within the CDPHP but supervised outside the TCP. The Evaluation Committee will review and score the application in accordance with the Scoring Guide in [Appendix B](#). Based on the application scores determined by the Evaluation Committee, funding recommendations from GMAC will be reported to the CDPHP and then relayed to awardees in March 2021 (month subject to change). The estimated date for distribution of funds is July 1, 2021.

### Final Decisions

Recommendations from the Evaluation Committee regarding final funding decision will be made based on the following factors and considerations outlined below:

- Availability of funding;
- Need for additional statewide tobacco cessation services;
- Applicant scores;
- Past performance and outcomes;
- Local burden and disparities;
- Local tobacco control program infrastructure needs;
- Reasonable distribution of awards among the north, south, and rural parts of the state;
- Feasibility of amending awards or issuing additional awards; and
- Conflicts or redundancy with other federal, state, or locally funded programs, or supplanting (substitution) of existing funding.

### Notification and Negotiation Process

The Evaluation Committee will recommend successful applicants to the GMAC, which in turn recommends applicants to the Department of Health and Human Services Director's Office. Upon approval, applicants will be notified of their award status. The State of Nevada, Division of Public and Behavioral Health, Nevada Tobacco Control Program staff will conduct negotiations with the applicants recommended for funding to address any specific issues identified by the Evaluation Committee or GMAC. Scopes of Work

will then be adapted from finalized work plans. Adjustment of the budget and activities may be required at that time.

**All funding is contingent upon availability of funds.** Upon successful conclusion of negotiations, the State of Nevada, Division of Public and Behavioral Health, Nevada Tobacco Control Program will complete and distribute Notices of Award, general conditions, assurances, and instructions.

The proposed timeline for application and award is detailed in Table 4.

**Table 4.** Proposed timeline for application and award

Milestone	Date(s)*
RFA available	December 22, 2020
Notice of Intent due	January 12, 2021
<b>Applications due</b>	<b>February 5, 2021</b>
Application review and scored by Evaluation Committee	February 8-26, 2021
GMAC recommendations	March 2021
Report funding results	March 2021
Finalize work plans for awards	April 2021
CDPHP disseminates funding	July 1, 2021

\*subject to change

Nevada TCP is not responsible for any costs incurred in the preparation of applications. All applications become the property of the State of Nevada, Division of Public and Behavioral Health, Nevada Tobacco Control Program. Nevada TCP reserves the right to accept or reject any or all applications. Projects awarded funding are those deemed to be in the best interest of the people of the State of Nevada.

## Application Instructions

Failure to follow these instructions may result in disqualification of the application. Applicants are encouraged to participate on the RFA Technical Assistance call which will cover information about the application process. Applicants can assign appropriate representatives to participate on the call.

### General Formatting

- Applicant must use the provided project narrative, work plan, and budget templates.
- If a question does not apply to your organization or application, then you must at least respond “Not applicable.”
- For the project narrative and work plan, font must be Calibri 11-point. Margins must match that of the template (1” margins).
- Unsolicited materials will **not** be accepted. This includes support letters, cover pages, cover letters, brochures, newspaper clippings, photographs, media materials, etc.
- Applicants will be asked to attach specific documents and forms to their application. Refer to the checklist at the end of the application template ([Appendix D](#)).

- Attachments must be typed or computer-generated and formatted similar to the application. Only the following file types will be accepted: Word (.doc, .docx); Excel (.xls, .xlsx); and PDF (.pdf).

## Notice of Intent

**A brief email is sufficient for this requirement and should be sent to both email addresses below:**

[lhelzer@health.nv.gov](mailto:lhelzer@health.nv.gov) and [ztariq@health.nv.gov](mailto:ztariq@health.nv.gov)

The Notice of Intent is required to be sent by email **no later than Tuesday, January 12, 2021, 11:59PM Pacific Standard Time (PST)**. The Notice of Intent should specify the components for which the agency or program intends to apply.

## Project Narrative Instructions

All applicants applying for Component 1 funding must include a project narrative. A template for the project narrative is included in [Appendix C \(Part II\)](#). In total, there are six sections in the project narrative template. Character limits are intended to restrict narratives to approximately three pages or less. It is recommended to refer to the “Scoring Guide” in [Appendix B](#) while completing the project narrative. Note the “Strategies/Activities” section should complement the work plan submitted with the application and provide a two-year outline of activities.

[Appendix C](#) is available as a Word (.doc, .docx) document to agencies or programs that submit a Notice of Intent.

## Work Plan Instructions

All applications must include a work plan summarizing objectives and activities for the first year. Only one work plan should be submitted per application, regardless of the components included. The work plan should be organized to clearly show the goals and strategies associated with the component(s) of this RFA are being addressed. The template is available as a Word (.doc, .docx) document to agencies or programs that submit a Notice of Intent. It is recommended to only list five key activities under each objective. No more than eight activities should be listed in the work plan for any single objective.

## Budget Instructions

All applications must include detailed project budgets for both state fiscal years. The budgets should be an accurate representation of the funds needed to carry out the proposal. The budget template is available as an Excel (.xls, .xlsx) file as Appendix F to agencies or programs that submit a Notice of Intent.

**Applicants must use the budget form. Do not override formulas.**

The column for unit cost, quantity, and totals on the budget narrative should include only funds requested in this application. Budget items funded through other sources should not be included in the budget narrative description. **Ensure all figures add up correctly and totals match within and between all forms and sections.**



## Budget Requirements

Proposals funded in part or whole under NRS 439.630(1)(l) must: “Develop policies and procedures for the administration and distribution of contracts, grants and other expenditures to state agencies, political subdivisions of this State, nonprofit organizations, universities, state colleges and community colleges. **A condition of any such contract or grant must be that not more than 8 percent of the contract or grant may be used for administrative expenses or other indirect costs.** The procedures must require at least one competitive round of requests for proposals per biennium.”

Part of the reporting process requires attendance at an annual meeting alternating between regional locations. **Budgeting the travel to attend this meeting is a requirement to be considered for funding. If travel is not feasible due to a public health crisis or any other reason, then applicants will receive guidance on how to adjust their budgets as part of the award process.** More details regarding the annual meeting can be found in the section pertaining to reporting requirements ([Appendix A](#)).

**Proposals are also required to budget for at least one internship to address health equity as part of the activities in corresponding work plans.** Rate of pay and related costs such as equipment for an intern position are at the discretion of the applying organization. The minimum number of intern hours which should be budgeted for is fifty (50 hours).

Incentives are typically considered gifts and thus are often unallowable. However, an incentive can be provided to increase response rates of surveys and is an allowable expense in that case. **Prior approval is required for incentives.** For awardees directly conducting surveys, it is recommended pre-paid incentives ranging from \$1 to \$5 are used. Further information about the prior approval process and incentive guidelines is available upon request.

Food is generally not an allowable expense outside of travel. **Prior approval is required for non-travel food purchases.** Per Diem rates (as set by the U.S. Government Services Administration) or less should be followed and written documentation of approval should accompany reimbursement requests. Approval for food purchases will only be given on a case-by-case basis for activities directly relating to youth tobacco prevention policies. An estimated number of meals with planned locations for the requested period should be provided with an approval request. An awardee, contractor, or subrecipient may not exceed more than 5% of their total FHN budget (or annual maximum of \$2,000, whichever is less) for food expenses unrelated to travel.

Other expenses generally not allowable include tobacco cessation materials and items to be distributed to the general public instead of youth.

## SUBMISSION INSTRUCTIONS

**An electronic copy of all application components attached to an email is required and should be sent to both:** [lhelzer@health.nv.gov](mailto:lhelzer@health.nv.gov) and [ztariq@health.nv.gov](mailto:ztariq@health.nv.gov)

**Applications must be received no later than Friday, February 5, 2021, at 11:59PM PST.** A notice of receipt will be issued via email within three business days of submission. Please contact Lily Helzer, [lhelzer@health.nv.gov](mailto:lhelzer@health.nv.gov) immediately if a notice of receipt is not obtained three business days after

submission. **Late submissions will be disqualified.** The Nevada Division of Public and Behavioral Health, Nevada Tobacco Control Program is not responsible for lost or failed email delivery.

## APPENDIX A – PROJECT REQUIREMENTS

### Reimbursement Method

Payments to awardees funded through categorized budgets will be based on quarterly or monthly reimbursement of actual expenditures incurred. Expenses must be included on the approved budget, allocable to the award, and allowable under all applicable statutes, regulations, policies, and procedures.

### Reporting Requirements

The initial reporting template will be provided and completed by the awardee based on information from the awardee’s approved work plan. Awardees will be required to submit quarterly progress reports approximately 15 days following the end of each quarter and maintain evaluation comments from prior quarter’s reports within a fiscal year. The evaluation comments should be addressed within subsequent reports as appropriate. After each quarterly submission, the awardee’s reports will be emailed to them with evaluation comments at least six weeks before the next quarterly report is due.

Awardees will be required to participate on four group technical assistance (TA) calls each fiscal year with or without additional partners or stakeholders. An annual partner meeting may substitute for one group call. The reporting and TA call schedule is illustrated in Table 5.

**Table 5.** Proposed schedule for quarterly reports and group TA calls

SFY	Quarter Period	Due Date for Quarterly Report	Date and Time for group TA call
22	Quarter 1 (July 1-September 30, 2021)	October 15, 2021	September 10, 2021 10:00 AM
22	Quarter 2 (October 1-December 31, 2021)	January 15, 2022	December 10, 2021 10:00 AM
22	Quarter 3* (January 1-March 31, 2022)	April 15, 2022	March 11, 2022 10:00 AM
22	Quarter 4 (April 1-June 30, 2022)	July 15, 2022	June 10, 2022 10:00 AM
23	Quarter 1 (July 1-September 30, 2022)	October 15, 2022	September 9, 2022 10:00 AM
23	Quarter 2 (October 1-December 31, 2022)	January 15, 2023	December 9, 2022 10:00 AM
23	Quarter 3 (January 1-March 31, 2023)	April 15, 2023	March 10, 2023 10:00 AM
23	Quarter 4 (April 1-June 30, 2023)	July 15, 2023	June 9, 2023 10:00 AM

\*Interim report used to determine and confirm SFY 23 funding.

Awardees will be required to attend an annual two-day meeting. Applicants must budget for this event accordingly. Likely awardees will receive a survey or opportunity to provide input to finalize meeting details. Below is a tentative schedule for these partner meetings (Table 6).

**Table 6.** Tentative schedule for partner meetings

SFY	Proposed Meeting Location	Tentative Date Range
22	TBD (Las Vegas, rural, or virtual)	January – June 2022
23	Carson City or Reno	January – March 2023

### 211 Information and Referral

To provide a single point of entry to assist consumers and families with reliable, appropriate information, referral and assistance, a statewide resource helpline has been established in Nevada. All awardees **will be required** to provide agency and program information to the 2-1-1 service provider. Go to the Nevada 211 website -- <https://www.nevada211.org/> -- to learn how to submit or revise information.

## APPENDIX B – COMPONENT 1 SCORING GUIDE

Scoring Guide	Total Points
<b><u>Narrative (20 points)</u></b>	
<b>Purpose:</b> Addresses and articulates the burden of tobacco?	3
<b>Funding Request:</b> Appropriate amount requested, and 2019 BRFSS Smoking Prevalence data was used to determine population burden? (Y/N)	2
<b>Client Demographics (Burden, Disparities, and Population Characteristics):</b> Extent to which the applicant describes the specific target or priority population(s) in their jurisdiction; utilization of data and activities to identify or address disparities	5
<b>Year 1 Strategies/Activities: 1)</b> Two-year outline of strategies and activities to be implemented to achieve project outcomes is clear, concise, and feasible; <b>2)</b> Strategies referenced or proposed are evidence-based and consistent with <i>Best Practices Guidebook</i>	5
<b>Year 2 Strategies/Activities: 1)</b> Two-year outline of strategies and activities to be implemented to achieve project outcomes is clear, concise, and feasible; <b>2)</b> Strategies referenced or proposed are evidence-based and consistent with <i>Best Practices Guidebook</i>	5
<b><u>SFY 22 Work Plan (100 points)</u></b>	
Work plan is logical and organized; all required work plan components included (outputs, indicators, and completeness of template)	10
Objective(s) consistently use SMART (specific, measurable, attainable, relevant, timely) criteria	10
Extent activities use evidence-based interventions to address the specific component/goals/strategies in the work plan	25
Potential impact or reach of key activities	15
Disparities addressed, and appropriate target populations identified	15
<b>Supports RFA requirements</b> [examples below] <ul style="list-style-type: none"> <li>Objective listed under Goal 1 results in a specific output which relates to policy impacting youth or youth adults</li> <li>Objective listed under Goal 3 results in youth being referred to the <i>My Life, My Quit</i> Program.</li> </ul>	25
<b><u>SFY 22-23 Budgets (30 points)</u></b>	
Budget instructions followed	6
Extent the budgets support the work plan and RFA priorities and requirements	12
History of spending funds with the CDPHP, adhering to guidelines and oversight, and timely submission of requests for reimbursements [only applicable for current or former awardees]	12

**State of Nevada  
 Department of Health and Human Services  
 Division of Public and Behavioral Health  
 Request for Applications  
 Fund for a Healthy Nevada**

**APPENDIX C – PROPOSAL CONTENT**

This appendix is available as a Word (.doc, .docx) document after submitting a Notice of Intent.

**I. APPLICANT INFORMATION**

<b>Agency Name</b>	
<b>Legal Name</b>	
<b>Also Known As</b>	
<b>Mailing Address</b>	
<b>City, State, Zip Code</b>	
<b>Main Organization Phone</b>	
<b>Main Organization Fax</b>	
<b>Organization Email Address</b>	
<b>Website Address</b>	
<b>Indicate One – Non-Profit or For-Profit Organization</b>	
<b>Accreditation and Expiration Date (if applicable)</b>	
<b>Tax Identification Number</b>	
<b>Primary Organization Contact, Land and Cell Phone Numbers, Email</b>	
<b>Primary Program Contact, Land and Cell Phone Numbers, Email</b>	
<b>Primary Fiscal Contact, Land and Cell Phone Numbers, Email</b>	
<b>NAME OF PROGRAM OR TITLE OF PROJECT for which funds are requested</b>	
<b>Total Amount of Funding Requested for Two Years</b>	

## II. PROJECT NARRATIVE TEMPLATE

Provide an overview of the proposed program or project using the following template.

<b>Component 1 Project Narrative Template</b>
<b><u>1-Purpose (500-character limit)</u></b>
<b><u>2- Annual Funding Request Breakdown* (500-character limit)</u></b> Tobacco use burden (show formula): Program infrastructure (and specify number of positions supported): Total request:
<b><u>3-Client Demographics (1,500-character limit)</u></b>
<b><u>4-Year 1 Strategies/Activities (2,000-character limit)</u></b>
<b><u>5-Year 2 Strategies/Activities (2,000-character limit)</u></b>

\*Only Component 1 funding should be included in the project narrative

Note that character limits are **“with spaces”** and should restrict the project narrative to three or less pages.

### III. CERTIFICATION

Verify your organization has read, understands, and agrees to the instructions and requirements as listed in this document. An authorized official of the applicant organization must sign and date below.

\_\_\_\_\_  
Signature, Title

\_\_\_\_\_  
Date



**State of Nevada**  
**Department of Health and Human Services**  
**Division of Public and Behavioral Health**  
**Tobacco Control Program**  
**Request for Applications**  
**Fund for a Healthy Nevada**

## APPENDIX D – CHECKLIST

### Required Submission Items:

- Signed Certification
- Appendix C – Proposal Content
- Appendix D – Submission Checklist
- Appendix E – Work Plan (Template available after submitting a Notice of Intent)
- Appendix F – Budget (Template available after submitting a Notice of Intent)

### Optional Submission Items:

- Memorandums of Understanding with partner agencies (if applicable)
- Agreements with sub-awardees (if applicable)
- Current List of Board of Directors or Other Governing Board (if applicable) including affiliations and terms of office
- Auditor’s Letter and Schedule of Findings and Questioned Costs from most recent OMB A-133 Audit (if agency receives more than \$750,000 annually in federal funds)
- Most recent Financial Status Report or Financial Statement (if OMB A-133 Audit not applicable)

Note: Optional items are not needed for applicants awarded through the FHN RFA for State Fiscal Years 2020-2021 by the TCP. However, optional items may be required later during the award process at the request of the TCP.

*This page intentionally left blank.*

**State of Nevada  
 Department of Health and Human Services  
 Division of Public and Behavioral Health  
 Tobacco Control Program  
 Request for Applications  
 Fund for a Healthy Nevada**

## APPENDIX D – CHECKLIST

### Required Submission Items:

- Signed Certification
- Appendix C – Proposal Content
- Appendix D – Submission Checklist
- Appendix E – Work Plan (Template available after submitting a Notice of Intent)
- Appendix F – Budget (Template available after submitting a Notice of Intent)

### Optional Submission Items:

- Memorandums of Understanding with partner agencies (if applicable)
- Agreements with sub-awardees (if applicable)
- Current List of Board of Directors or Other Governing Board (if applicable) including affiliations and terms of office
- Auditor’s Letter and Schedule of Findings and Questioned Costs from most recent OMB A-133 Audit (if agency receives more than \$750,000 annually in federal funds)
- Most recent Financial Status Report or Financial Statement (if OMB A-133 Audit not applicable)

Note: Optional items are not needed for applicants awarded through the FHN RFA for State Fiscal Years 2020-2021 by the TCP. However, optional items may be required later during the award process at the request of the TCP.

## APPENDIX C – PROPOSAL CONTENT

### I. APPLICANT INFORMATION

<b>Agency Name</b>	Carson City Health and Human Services
<b>Legal Name</b>	City of Carson City
<b>Also Known As</b>	CCHHS
<b>Mailing Address</b>	900 East Long Street
<b>City, State, Zip Code</b>	Carson City, Nevada 89706
<b>Main Organization Phone</b>	775-887-2190
<b>Main Organization Fax</b>	775-887-2248
<b>Organization Email Address</b>	<a href="mailto:naaker@carson.org">naaker@carson.org</a>
<b>Website Address</b>	Gethealthycarsoncity.org
<b>Indicate One – Non-Profit or For-Profit Organization</b>	Non-Profit
<b>Accreditation and Expiration Date (if applicable)</b>	Public Health Accreditation, expiration: September 2021
<b>Tax Identification Number</b>	88-60000189
<b>Primary Organization Contact, Land and Cell Phone Numbers, Email</b>	Nicki Aaker (W) 775-283-7704; <a href="mailto:naaker@carson.org">naaker@carson.org</a>
<b>Primary Program Contact, Land and Cell Phone Numbers, Email</b>	Azucena Ledezma Rubio (Suzie) (W) 775-283-7201; <a href="mailto:arubio@carson.org">arubio@carson.org</a>
<b>Primary Fiscal Contact, Land and Cell Phone Numbers, Email</b>	Bretta Inman (W) 775-283-7228; <a href="mailto:binman@carson.org">binman@carson.org</a>
<b>NAME OF PROGRAM OR TITLE OF PROJECT for which funds are requested</b>	Tobacco Prevention and Control Program
<b>Total Amount of Funding Requested for Two Years</b>	Year 1: \$142,524 Year 2: \$135,423

## II. PROJECT NARRATIVE TEMPLATE

Provide an overview of the proposed program or project using the following template.

<b>Component 1 Project Narrative Template</b>	
<b><u>1-Purpose (500-character limit)</u></b>	Carson City Health and Human Services will implement evidenced-based strategies based on the CDC's best practice to prevent the initiation of tobacco product use, reduce exposure to secondhand smoke, and exercise efforts to identify and reduce tobacco related health disparities. Using collaboration and education to create changes in policy, systems, and environment will serve to reduce the burden of tobacco use, in Carson City and other surrounding counties.
<b><u>2- Annual Funding Request Breakdown* (500-character limit)</u></b>	Tobacco use burden (show formula): $20.5\% \times 57,344 = 11,756$ Program infrastructure (and specify number of positions supported): Program infrastructure includes staff salaries from personnel and contractual cost; operating and other costs for program to complete SOW, and indirect that cover facility and administrative cost. Positions include: 1 Project Coordinator, 1 Community Health Worker, 1 Public Health Nurse, 1 Fiscal Staff, and 1 Program Director. Infrastructure funding: \$109,200 for YR1 and \$102,400 for YR2 Total request: Yr1-\$142,524; Yr2-\$135,423
<b><u>3-Client Demographics (1,500-character limit)</u></b>	<b><u>3-Client Demographics (1,500-character limit)</u></b> Carson City, projected population in 2021 is 57,344 with 11.3% poverty rate according to the world population review that uses U.S. census data. According to the DPBH 2019 report, in the 2017 Behavioral Risk Factor Surveillance System (BRFSS), 17.6% of Nevadans were current smokers and 5.4% of Nevadans were current e-cigarette users. In the "balance of state", where Carson City falls, 20.5% of adults were current smokers and 7.3% adults were current e-cigarette users. The BRFSS correlates higher smoking rates in adults with low SES at 37.9%; and prevalence of e-cigarette use significantly higher among young adults 18-24. The 2019 UNR High School Youth Risk Behavior Survey (YRBS) found 43.5% of Nevadan high school students had tried electronic vapor products. In Carson City, 38.8% of high school students were using e-cigarettes and 60.4% have tried e-cigarettes. In the 2019 UNR Middle School YRBS, 23.6% of Carson City middle school students were using e-cigarettes and 35.9% have tried e-cigarettes and 11.6% had tried cigarettes. The 2020 National Youth Tobacco Survey estimated a decline in youth use of tobacco products but there were no significant decreases in cigarettes, hookah, pipe tobacco or heated tobacco products. The data confirmed a surge in youth using disposable e-cigarettes with more than 8 out of 10 using flavored products. In additional almost a quarter of high school users use e-cigarettes every day, which indicates a dependency on nicotine.
<b><u>4-Year 1 Strategies/Activities (2,000-character limit)</u></b>	<b><u>1.1</u></b> Coordinated with local coalition(s) to address policy solutions for e-cigarette use among youth and young adults. Assess decision makers by provide educational materials and presentations to improve youth tobacco prevention policies. <b><u>1.2</u></b> Assess and provide schools and youth organizations with educational presentations to discourage initiation of youth from tobacco products. Assessment of marketing tools promoting pro-health message related to tobacco. <b><u>1.3</u></b> Assess flavoring restriction policies on flavored tobacco products through stakeholders, retailer, decision makers and youth/young adults to address health disparities.

Support and provide education materials on awareness about flavored tobacco products among minority groups.

**2.1** Attend a local or national conference to improve knowledge and strategies.

Assess the development of policy in low SES communities within Carson City.

Increase MUH with smoke-free policies with an emphasis on low income and priority populations.

Continue to support tobacco-free polices campus through participation in meetings and technical assistance.

**3.1** Assess and evaluate providers serving youth and young adults.

Assist with the education and promotion of cessation resources for youth and young adults.

**4B-Year 2 Strategies/Activities (2,000-character limit):**

**1.1** Coordinated with local coalition(s) to address policy solutions for e-cigarette use among youth and young adults.

Assess decision makers by providing educational materials and presentations to improve youth tobacco prevention policies.

**1.2** Assess and provide schools and youth organizations with educational presentations to discourage initiation of youth from tobacco products.

Assessment of marketing tools promoting pro-health message related to tobacco.

**1.3** Assess flavoring restriction policies on flavored tobacco products through stakeholders, retailer, decision makers and youth/young adults to address health disparities.

Support and provide education materials on awareness about flavored tobacco products among minority groups.

**2.1** Attend a local or national conference to improve knowledge and strategies.

Assess the development of a smoke-free policy in low SES communities within Carson City.

Increase MUH with smoke-free policies with an emphasis on low income and priority populations.

Continue to support tobacco-free polices campus through participation in meetings and technical assistance.

**3.1** Assess and evaluate providers serving youth and young adults.

Assist with the education and promotion of cessation resources for youth and young adults.

\*Only Component 1 funding should be included in the project narrative

Note that character limits are **“with spaces”** and should restrict the project narrative to three or less pages.

### III. CERTIFICATION

Verify your organization has read, understands, and agrees to the instructions and requirements as listed in this document. An authorized official of the applicant organization must sign and date below.

A. Aaker, Director                      2/5/2021  
Signature, Title                                      Date

# Directions said to only include Year 1 Work Plan

## Carson City Health and Human Services Tobacco Control Program Annual Work Plan July 2021 to June 2022

Date: 02/05/2021 Version: 0.1

<b>Component 1: Tobacco Prevention and Control</b>					
<b>Goal 1: Prevent initiation among youth and young adults</b>					
<i>Annual Objectives</i>	<i>Activities</i>	<i>Outputs</i>	<i>Timeline Begin/Completion</i>	<i>Evaluation Measure (indicator)</i>	<i>Responsible Persons (positions or vendor)</i>
<b>1.1</b> By June 30, 2022, partners and youth will educate decision makers and the public on the benefits of at least 1 policy solutions to address e-cigarette use among youth and young adults.	1.1.1 Work with at least one (1) coalition to address e-cigarette use among youth and young adults.	Strategies and Model language	July 1, 2021- June 30, 2022	# of strategies	Project Coordinator Community Health Worker
	1.1.2 Identify at least two (2) decision makers including K-12 schools or other youth-focused organizations to improve youth tobacco prevention policies.	Model policy to be shared  List of schools and contacts  List of school policies	July 1, 2021- June 30, 2022	# of schools or organizations identified  # of policies shared with organization	Project Coordinator Public Health Nurse
	1.1.3 Develop at least one (1) presentation to educate stakeholders/ organizations / schools or youth to promote policies related to addressing e-cigarette use among youth and young adults.	Presentation  TA notes/materials	July 1, 2021- June 30, 2022	# of presentations  # of stakeholders /organizations / schools reached	Project Coordinator Public Health Nurse



	1.1.4 Identify educational materials for decision makers/stakeholders/organizations on benefits of at least one (1) policy to address e-cigarette use among youth and young adults.	Educational Materials Distribution plan	July 1, 2021- June 30, 2022	# of educational materials  # of educational material distributed	Project Coordinator Community Health Worker
	1.1.5 Assess marketing tools which will supporting efforts to educate stakeholders/organizations/schools on the benefits of youth tobacco prevention policies.	Assessment(s)	July 1, 2021- June 30, 2022	# of tools assessed  # of youth tobacco prevention policies	Project Coordinator Community Health Worker Public Health Nurse
1.2 By June 30, 2022, partners and youth will educate decision makers and the public on the benefits of one (1) statewide policy to restrict the sale of flavored tobacco products including product which contain menthol.	1.2.1 Collaborate with statewide, local entities or other community organizations to educate youth/young adult and decision makers on the issue of flavoring tobacco products including products that contain menthol and the policy benefit of sale restrictions.	Meeting Notes	July 1, 2021- June 30, 2022	# of policy/committee meeting scheduled  # of policy/committee meeting attended	Project Coordinator Community Health Worker Public Health Nurse  Partners: SNHD, WCHD, Coalitions and NTPC
	1.2.2 Implement culturally competent media materials (either online, radio, TV, or other out of home messaging) to educate the	Media message(s)	July 1, 2021- June 30, 2022	# of media message  # Reach	Project Coordinator Community Health Worker

	youth/youth adults, retailers and decision makers about the issue of flavored tobacco products and benefits of policy to restrict the sale of flavored tobacco products.				
	1.2.3 Develop effort to survey flavoring trend in tobacco products in youth/young adults and minority groups.	Flavoring Trends	July 1, 2021- June 30, 2022	# of communication to develop efforts	Project Coordinator Community Health Worker Intern
	1.2.4 Provide at least one presentation to educate decision makers/stakeholders/organizations on the benefits of one (1) statewide policy to restrict the sale of flavored tobacco products including products which contain menthol.	Presentations Reach	July 1, 2021- June 30, 2022	# of Presentations # of reach by type	Project Coordinator Community Health Worker Public Health Nurse
	1.2.5 Develop, update, and distribute educational materials (flyers, pamphlets, posters, banners, etc.) to educate youth/young adult, parents and decision makers on the issue of flavoring tobacco products including products that contain	Flavoring educational materials	July 1, 2021- June 30, 2022	# of flavoring educational materials disseminated  Distribution plan	Project Coordinator Community Health Worker Intern

	menthol and the policy benefit of sale restrictions among associated health disparities.				
	1.2.6 Participate or promote at least one event or recognition to raise community awareness about flavored tobacco products among associated health disparities.	Events participated in or promoted	July 1, 2021- June 30, 2022	# of events identified # of events promoted or participated in.	Project Coordinator Community Health Worker Public Health Nurse
1.3 Through June 30, 2022, continue promoting counter marketing campaigns to reach at least 500 youth and/or young adults with messages about the dangers of experimentation with tobacco products, including e-cigarettes and other emerging tobacco products.	1.3.1 Collaborate with partners to strategies about messaging regarding the dangers of experimentation with tobacco products, including e-cigarettes and other emerging tobacco products.	Meeting Agenda and Notes	July 1, 2020 – June 30, 2021	# of meeting attended	Project Coordinator Community Health Worker Public Health Nurse
	1.3.2 Identifying and examine point of sale tactics such as channels/ messaging.	List of Point of Sale advertising	July 1, 2020 – June 30, 2021	# of channels/ messaging  Summary of examined channels	Project Coordinator Intern

	1.3.3 Identify a map of tobacco retailers in e-cig marketplace in low SES location or among those with health disparities.	Map of tobacco retailer	July 1, 2020 – June 30, 2021	# Map of tobacco Retailers	Project Coordinator Intern
	1.3.4 Identify, develop, and distribute educational materials to inform youth and young adults about the dangers of experimentation with tobacco products or emerging tobacco products.	Community Educational Materials	July 1, 2021- June 30, 2022	# of materials developed / identified  # of materials distributed # Reach by type	Project Coordinator Community Health worker
	1.3.5 Provide at least one (1) presentation to youth and/or young adults about the dangers of experimentation with tobacco products, including e-cigarettes and other emerging tobacco products.	Educational presentations  Pre and post surveys	July 1, 2021- June 30, 2022	# Reach  # of presentations  Analysis of pre and post surveys	Project Coordinator Public Health Nurse Community Health Worker

	1.3. 6 Promote a counter-marketing Campaign or Initiative to educate and increase awareness about youth tobacco prevention.	Counter-marketing Campaign or Initiative	July 1, 2021- June 30, 2022	# of counter-marketing campaigns or initiatives promoted  # Reached	Project Coordinator Community Health Worker
--	---	--	-----------------------------	---	--

<b>Component 1: Tobacco Prevention and Control</b>					
<b>Goal 2: Eliminate exposure to secondhand smoke</b>					
<b>Annual Objectives</b>	<b>Activities</b>	<b>Outputs</b>	<b>Timeline Begin/Completion</b>	<b>Evaluation Measure (indicator)</b>	<b>Responsible Persons</b>
<b>2.1</b> By June 30, 2022, increase the number of jurisdiction-wide smoke/tobacco-free policies within Carson City from 0 to 1.	2.1.1 Attend a local or national conference or seminar to improve knowledge and strategies on tobacco prevention and control	Conference agenda and notes	July 1, 2021- June 30,2022	# of conferences attended	Project Coordinator Community Health Worker Public Health Nurse
	2.1.2 Survey Carson City residence on smoke-free policies.	Survey	July 1, 2021- June 30, 2022	# of surveys distributed # of surveys returned/ results	Project Coordinator Community Health Worker Public Health Nurse Intern
	2.1.3 Increase the number of multi-unit housing complexes with smoke-free policies by at least one (1) apartment building or	Multi-Unit Housing smoke-free policies	July 1, 2021- June 30, 2022	# of MUH complexes with smoke-free policies # of units	Project Coordinator Community Health Worker Public Health Nurse Intern

	apartment complex with an emphasis on low income and priority populations living in multi-unit housing (MUH) in Carson City.			# of Smoke-free units	
	2.1.4 Multi-Unit Housing Smoke-Free Toolkit for property managers and owners.	Multi-Unit Housing Smoke-Free Toolkit and materials	July 1, 2021- June 30, 2022	# of Multi-Unit Housing Smoke-Free Toolkit distributed	Project Coordinator Community Health Worker Public Health Nurse
	2.1.5 Identify and provide technical assistance to property managers to implement tobacco-free policies at multi-housing units.	Cessation resources	July 1, 2021- June 30, 2022	# of complexes engaged for TA  # of MUH smoke-free materials/resources provided	Project Coordinator Community Health Worker Public Health Nurse
	2.1.6 Coordinate and provide signage to at least one (1) venue to promote a more smoke-free community.	Smoke-free signage	July 1, 2021- June 30, 2022	# of signs distributed	Project Coordinator Intern
	2.1.7 Continue to educate and provide technical assistance to support tobacco-free campus policies at colleges/universities.	Meeting agenda and notes	July 1, 2021- June 30, 2022	# of meetings/notes	Project Coordinator

<b>Component 1: Tobacco Prevention and Control</b>					
<b>Goal 3: Promote quitting among adults and youth</b>					
<b>Annual Objectives</b>	<b>Activities</b>	<b>Outputs</b>	<b>Timeline Begin/Completion</b>	<b>Evaluation Measure (indicator)</b>	<b>Responsible Persons</b>
<b>3.1</b> By June 30, 2022, facilitate referrals from at least 1 provider who serve youth and/or young adults to the My Life, My Quit Program.	3.1.1 Identify providers serving youth and/or young adults	List of providers	July 1, 2021- June 30, 2022	# of providers identified and type	Project Coordinator Community Health Worker Intern
	3.1.2 Develop at least one (1) survey examining current use or interest of use in referral systems.	Survey	July 1, 2021- June 30, 2022	# of Survey(s) Developed	Project Coordinator Community Health Worker Public Health Nurse
	3.1.3 Survey identified providers for interest of use/current use of referrals systems in their practices.	Survey of use of referral system(s)	July 1, 2021- June 30, 2022	# of providers reached  # of provider who were surveyed  # of surveys results	Project Coordinator Community Health Worker Public Health Nurse Intern
	3.1.4 Provide referral information to providers who serve youth and/or young adults.	Educational information about My Life My Quit	July 1, 2021- June 30, 2022	# of providers reached and type  # of My Life My Quit information disseminated	Project Coordinator Public Health Nurse

	3.1.5 Promote the Nevada Tobacco Quitline and My Life My Quit, youth cessation Quitline, to encourage quitting among youth and young adults.	NTQ Messaging Name of identified occasions	July 1, 2021- June 30, 2022	# of occasions promoted # of reach	Project Coordinator Community Health Worker Public Health Nurse
--	--	---	--------------------------------	---------------------------------------	---



**BUDGET NARRATIVE**  
(Form Revised June 2019)

Year One Budget: July 1, 2021 through June 30, 2022

<b>Total Personnel Costs</b>	including fringe	<b>Total:</b>	<b>\$</b>	<b>54,312</b>
------------------------------	------------------	---------------	-----------	---------------

**List staff, positions, percent of time to be spent on the project, rate of pay, fringe rate, and total cost to this grant.**

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Months worked Annual</u>	<u>Amount Requested</u>
<u>Project Coordinator:</u> <u>Azucena Ledezma Rubio</u>	\$53,670.42	38.920%	43.750%	12	100.00%	\$32,620

This position directs the overall operation of the scope of work; responsible for overseeing the implementation of project activities, coordination with other agencies, development of materials, provisions of in-services and training, conducting meetings; designs and directs the gathering, tabulating and interpreting of required data, responsible for overall program evaluation and for staff performance evaluation; and is the responsible authority for ensuring necessary reports/documentation are submitted to grantor/CDC. This position relates to all program objectives.

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Annual</u>	<u>Amount Requested</u>
<u>Part-Time Staff:</u> <u>Toni Orr, Public Health Nurse</u>	\$36,915.67	3.500%	50.000%	12	100.00%	\$19,104

This position will assist project coordinator on tasks relates to all program objectives.

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Annual</u>	<u>Amount Requested</u>
<u>Part-Time Staff: Health Equity Intern</u>	\$2,500.00	3.500%	100.000%	12	100.00%	\$2,588

This position will be for a health equity Intern who will assist project coordinator on tasks relates to program objectives such as conducting reports, surveys and other tasks as needed.

**\*Insert new row for each position funded or delete this row.**

<b>Total Fringe Cost</b>	<b>\$9,872</b>	<b>Total Salary Cost:</b>	<b>\$44,439</b>
<b>Total Budgeted FTE</b>	<b>1.93750</b>		

<b>Travel</b>	<b>Total:</b>	<b>\$11,872</b>
---------------	---------------	-----------------

Identify staff who will travel, the purpose, frequency and projected costs. Utilize GSA rates for per diem and lodging (go to [www.gsa.gov](http://www.gsa.gov)) and State rates for mileage (58.0 cents) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification.

**Out-of-State Travel**

	<u>Cost</u>	<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
<u>The National Conference on Tobacco or Health (NCTOH) June 28-30, 2022</u>					<b>\$4,751</b>
Airfare: \$450 cost per trip (Reno to Minneapolis) x 1 of trips x 3 of staff	\$450	1		3	\$1,350
Baggage fee: \$40 amount per person x 2 of trips x 3 of staff	\$40	2		3	\$240
Per Diem: \$ 96 per day per GSA rate for area x 1 of trips x 3 of staff	\$96	1	4	3	\$1,152

Lodging: \$ 148 per day + \$11.89 tax = \$160 x 1 of trips x 4 of nights x 3 of staff	\$160	1	3	3	\$1,440
Ground Transportation: \$ 25 per r/trip x 2 days x 2 of trips x 3 of staff	\$25	2	2	3	\$300
Mileage: (rate per mile .56 x # of 30 miles per r/trip) x 1 of trips x 3 of staff	\$16.800	2		3	\$101
Parking: \$14 per day x 1 of trips x 4 of days x 3 of staff	\$14	1	4	3	\$168

**Justification:**

The Project coordinator, Part-time and Contractual staff will travel to the National Conference on Tobacco or Health to convene with state and national tobacco professionals to learn about best practices and policies in the tobacco control field including cessation and health systems transformation, communication and media, education and surveillance, tobacco product regulation, nicotine and the science of addiction

**In-State Travel**

**\$7,121**

		<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
<u>Partners Meeting ( Las Vegas, Rural or Virtual)</u>	<u>Cost</u>				
Airfare: \$425 ( Reno to Las Vegas) x 1 of trips x 3 of staff	\$425	1		3	\$1,275
Baggage fee: \$40 amount per person x 2 of trips x 3 of staff	\$40	2		3	\$240
Per Diem: \$ 61 per day per GSA rate for area x 1 of trips x 3 of staff	\$61	1	4	3	\$732
Lodging: \$ 120 per day + \$8.38% tax = \$130 x 1 of trips x 3 of nights x 3 of staff	\$130	1	3	3	\$1,170
Ground Transportation:(\$50 car/day x 2 trips x 2 days	\$50.00	1	2		\$100
Mileage: 0.56 x 30 miles per r/trip) x 2 of trips x 3 of staff	\$16.800	2		3	\$101
Parking: \$14 per day x 1 of trips x 4 of days x 3 of staff	\$14	1	4	3	\$168

**Justification:**

Project Coordinator, Public Health Nurse and Community Health Worker will travel to Las Vegas, NV to attend a partner's meeting to convene with tobacco control partners to discuss grant related progress and issues related to tobacco control.

		<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
<u>Strategic Planning: Sacramento to Reno</u>	<u>Cost</u>				
Airfare: \$425 ( Reno to Las Vegas) x 1 of trips x 2 of staff	\$425	1		2	\$850
Baggage fee: \$40 amount per person x 2 of trips x 2 of staff	\$40	2		2	\$160

Per Diem: \$ 61 per day per GSA rate for area x 1 of trips x 2 of staff	\$61	1	4	2	\$488
Lodging: \$ 120 per day + \$8.38% tax = \$130 x 1 of trips x 3 of nights x 2 of staff	\$130	1	3	2	\$780
Ground Transportation:\$50 car/day x 2 trips x 2 days	\$50.00	1	3		\$150
Mileage: 0.56 x 30 miles per r/trip) x 2 of trips x 2 of staff	\$16.800	2		2	\$67
Parking: \$14 per day x 1 of trips x 4 of days x 2 of staff	\$14	1	4	2	\$112

**Justification:**

Board members of the Nevada Tobacco Prevention Coalition (NTPC) , Project Coordinator and Proxy ( Community Health worker or Public Health Nurse) will travel to Las Vegas, NV to attend a strategic planning meeting to convene with tobacco control partners to discuss grant related progress and issues related to tobacco control.

<u>Local Travel:</u>	<u>Cost</u>	<u># of Miles</u>	<u># of days</u>	<u># of Staff</u>	
Mileage: \$0.56 rate per mile x 650 of miles x 2 of staff	\$0.560	650		2	\$728

**Justification:**

Local travel is routine traveling to attend meeting, events, policy work or to complete SOW related activities.

**Operating** **Total: \$6,550**

List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated program supplies should be included. If providing meals, snacks, or basic nutrition, include these costs here.

Office supplies \$30 amount x 2 of FTE staff x 12 of months	\$720.00
Laptop to be used for intern projects	\$1,600.00
Adobe acrobat suite/pro DC \$890 x 3 Staff	\$2,670.00
Microsoft office software \$200 for12 months x 3 of Staff	\$600.00
Shutterstock ( \$20 services x 12 months)	\$240.00
Canva ( \$15 x 12 months)	\$180.00
Communications: Cell phone and service-pay as you go ( \$25 services x 12 months)	\$300.00
Communications: ZOOM ( \$20 services x 12 months)	\$240.00

Justification: Office supplies, cell phone and subscriptions such as Zoom, Shutterstock and Canva are needed during the year to for communication and completion of activities in the scope of work. Computer software such as Microsoft office and Adobe suites are charged to each employee by cities IT department, therefore these items need to be included. Laptop will be used for intern to complete projects related to SOW.

**Equipment** **Total: \$0**

List Equipment purchase or lease costing \$5,000 or more, and justify these expenditures. Also list any computers or computer-related equipment to be purchased regardless of cost. All other equipment costing less than \$5,000 should be listed under Supplies.

Describe equipment \$0.00

**Contractual** **\$52,650**

**Identify project workers who are not regular employees of the organization. Include costs of labor, travel, per diem, or other costs. Collaborative projects with multiple partners should expand this category to break out personnel, travel, equipment, etc., for each site. Sub-awards or mini-grants that are a component of a larger project or program may be included here, but require special justification as to the merits of the applicant serving as a "pass-through" entity, and its capacity to do so.**

Name of Contractor: Marathon, Community Health Worker **Total \$30,000**

Method of Selection: One of the contract staffing agencies approved by the Carson City Board of Supervisors (Marathon Staffing, Manpower, Arco Services Corp. or Talent Framework)

Period of Performance: July 1, 2021- June 30, 2022

Scope of Work: Contracted Staff will average 25 hours per week to meet program activities including conducting presentations, designing educational materials and social media postings, attending meetings with stakeholders and other assignments as needed by the Tobacco Prevention and Control Program at CCHHS.

\* Sole Source Justification:

Budget

Personnel:25 hours/week  
x \$22.78 x 52 weeks  
(34% agency fee added)

\$30,000.00

Travel: See Travel above

\$0.00

**Total Budget \$30,000.00**

Method of Accountability:

Define - The Project Coordinator is responsible for supervising the contracted community health worker position. Progress and performance are achieved by viewing timesheets, calender, monthly meetings to discuss projects and documentation.

Name of Contractor: Media Company- TBD **Total \$6,000**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2021- June 30, 2022

Scope of Work: Media company that assists with tracking and reporting of analytic when creating infographics, short videos, and/ or social media advertisements.

\* Sole Source Justification:

Budget

Personnel \$6,000.00  
Travel \$0.00

**Total Budget \$6,000.00**

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports, and evaluation of data collected.

Name of Contractor: Out - of - Home Media - TBD **Total \$7,000**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2021- June 30, 2022

Scope of Work: Traditional Advertisement will be used to raise awareness through various channels including news paper articles, billboards, TV, radio and other.

\* Sole Source Justification:

Budget

Personnel \$7,000.00  
Travel \$0.00

**Total Budget \$7,000.00**

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports.

Name of Contractor: Local Coalition Project: TBD **Total \$5,000**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2021- June 30, 2022

Scope of Work: Collaborating with coalitions to work on tobacco control and prevention issues through one or more of the following: partnered sponsorships, surveillance, creations of infographics, short videos, and/or social media content.

\* Sole Source Justification:

Budget

Personnel	\$5,000.00
Travel	\$0.00
<b>Total Budget</b>	<b>\$5,000.00</b>

Method of Accountability:

Define - The Project Coordinator is responsible for supervising collaboration with local coalition(s). Coalition(s) will provide information and reporting for accountability purposes.

Name of Contractor: Survey software and/ or company - TBD

**Total \$4,650**

Method of Selection: Carson City policies will be used to determine selection of survey software and/ or company for analytics. An oral or written quote will be needed.

Period of Performance: July 1, 2021- June 30, 2022

Scope of Work: Conducting surveillance by creating an instrument survey and measure responses for providers/client usage of cessation resources or youth and young adults on issues such as point of sale, flavoring trends, or other tobacco related. This may include incentives to increase response rates for surveys if appropriate.

\* Sole Source Justification:

Budget

Company/software	\$4,500.00
Incentives	\$150.00
<b>Total Budget</b>	<b>\$4,650.00</b>

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports, and evaluation of data collected.

<b>Training</b>	<b>Total:</b>	<b>\$3,623</b>
Describe training	\$0.00	
NCTOH registration fee x 3 Staff	\$1,455.00	
Community Health Worker (CHW I) Course: This course will provide a fundamental understanding of health equities and disparities to better serve the community X 2 staff	\$1,758.00	
Community Health Worker (CHW I) Certification x 2 staff	\$150.00	
Community Health Worker (CHW I) education supplies /memberships x 2 staff	\$260.00	

List all cost associated with Training, including justification of expenditures. The registration fee for NCTOH is needed to attend a best practice tobacco control conferences which includes cessation and health systems transformation, communication and media, education and surveillance, tobacco product regulation, nicotine and the science of addiction. The community health worker course will provide a fundamental understanding of health equities and disparities to better serve the community along with the certification and additional trainings offered through membership.

<b>Other</b>	<b>Total:</b>	<b>\$2,960</b>
--------------	---------------	----------------

Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as audit costs, car insurance, client transportation, etc. Stipends or scholarships that are a component of a larger project or program may be included here, but require special justification.

Copier/Printer Lease: \$30 amount x 12 months	\$360
Postage/Shipping: \$25 per mo. x 12 months	\$300

Educational material printing services per year	\$1,500
Signage	\$800

Justification: *Cost for CCHHS for employees to perform job duties and assignments. Educational material printing cost is to provide educational information related to program to general public, providers, other agencies, and local K-12 school districts and high educational Institutions. Signage is for organization requesting smoke-free signage. These signs may be to new placement or used to replace existing/damage signage.*

<b>TOTAL DIRECT CHARGES</b>	<b>\$131,967</b>
-----------------------------	------------------

<b>Indirect Charges</b>	<b>Indirect Rate:</b>	<b>8.000%</b>	<b>\$10,557</b>
-------------------------	-----------------------	---------------	-----------------

**Indirect Methodology:** Explain how indirect is calculated (e.g. 8% of all direct expenses per Federally approved indirect agreement). This funding has an 8% limit on indirect. This funding has an 8% limit on indirect. Indirect charges include facilities and administration. Facility costs include depreciation on buildings, operations and maintenance expenses (utilities, desk telephone). Administration costs include general administration such as director's office, accounting (both at health department and City), information technology, and human resources.

<b>TOTAL BUDGET</b>	<b>Total:</b>	<b>\$142,524</b>
---------------------	---------------	------------------

Applicant Name: Carson City Health and Human Services

**BUDGET NARRATIVE**  
(Form Revised June 2019)

Year Two Budget: July 1, 2022 through June 30, 2023

<b>Total Personnel Costs</b>	including fringe	<b>Total:</b>	\$	<b>55,946</b>
------------------------------	------------------	---------------	----	---------------

**List staff, positions, percent of time to be spent on the project, rate of pay, fringe rate, and total cost to this grant.**

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Months worked Annual</u>	<u>Amount Requested</u>
<u>Project Coordinator:</u> <u>Azucena Ledezma Rubio</u>	\$56,360.41	38.920%	43.750%	12	100.00%	\$34,254

This position directs the overall operation of the scope of work; responsible for overseeing the implementation of project activities, coordination with other agencies, development of materials, provisions of in-services and training, conducting meetings; designs and directs the gathering, tabulating and interpreting of required data, responsible for overall program evaluation and for staff performance evaluation; and is the responsible authority for ensuring necessary reports/documentation are submitted to grantor/CDC. This position relates to all program objectives.

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Annual</u>	<u>Amount Requested</u>
<u>Part-Time Staff:</u> <u>Toni Orr, Public Health Nurse</u>	\$36,915.67	3.500%	50.000%	12	100.00%	\$19,104

This position will assist project coordinator on tasks relates to all program objectives.

	<u>Annual Salary</u>	<u>Fringe Rate</u>	<u>% of Time</u>	<u>Months</u>	<u>Percent of Annual</u>	<u>Amount Requested</u>
<u>Part-Time Staff: Health Equity Intern</u>	\$2,500.00	3.500%	100.000%	12	100.00%	\$2,588

This position will be for a health equity Intern who will assist project coordinator on tasks relates to program objectives such as conducting reports, surveys and other tasks as needed.

**\*Insert new row for each position funded or delete this row.**

<b>Total Fringe Cost</b>	<b>\$10,330</b>	<b>Total Salary Cost:</b>	<b>\$45,616</b>
<b>Total Budgeted FTE</b>	<b>1.93750</b>		

<b>Travel</b>	<b>Total:</b>	<b>\$3,518</b>
---------------	---------------	----------------

Identify staff who will travel, the purpose, frequency and projected costs. Utilize GSA rates for per diem and lodging (go to [www.gsa.gov](http://www.gsa.gov)) and State rates for mileage (58.0 cents) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification.

<b>Out-of-State Travel</b>	<b>\$0</b>
----------------------------	------------

**Justification:**  
Not Applicable

<b>In-State Travel</b>	<b>\$3,518</b>
------------------------	----------------

<u>Stakeholder Meeting Sacramento to Reno</u>	<u>Cost</u>	<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
Airfare:\$425 cost per trip (Sacramento to Reno ) x1 of trips x 1 of staff	\$425	1		1	\$425
Baggage fee: \$40 amount per person x 1 of trips x 1 of staff	\$40	2		1	\$80
Per Diem: \$61 per day per GSA rate for area x 1 of trips x 2 of staff	\$66	1	4	1	\$264

Lodging: \$102 per day + \$8.44 tax = \$110 x 1 of trips x 3 of nights x 1 of staff	\$110	1	3	1	\$330
Ground Transportation: \$50 car/day x 1 trips x 2 days	\$50.00	1	3		\$150
Mileage: (\$0.56 x 30 of miles per r/trip) x 2 of trips x 1 of staff	\$16.800	2		1	\$34
Parking: \$14 per day x 1 of trips x 4 of days x 1 of staff	\$14	1	4	1	\$56

**Justification:**

Contractual staff, community health worker, will travel to Reno, NV to attend a stakeholder meeting to convene with tobacco control partners to discuss grant related progress and issues related to tobacco control.

**Strategic Planning:**

**Sacramento to Reno**

	<u>Cost</u>	<u># of Trips</u>	<u># of days</u>	<u># of Staff</u>	
Airfare: \$425 cost per trip (Sacramento ) x1 of trips x 1 of staff	\$425	1		1	\$425
Baggage fee: \$40 amount per person x 1 of trips x 1 of staff	\$40	2		1	\$80
Per Diem: \$66 per day per GSA rate for area x 1 of trips x 1 of staff	\$66	1	4	1	\$264
Lodging: \$102 per day + \$8.44 tax = \$110 x 1 of trips x 3 of nights x 1 of staff	\$110	1	3	1	\$330
Ground Transportation: \$50 car/day x 1 trips x 3 days	\$50.00	1	3		\$150
Mileage: (\$0.56 x 30 of miles per r/trip) x 2 of trips x 1 of staff	\$16.800	2		1	\$34
Parking: \$14 per day x 1 of trips x 4 of days x # of staff	\$14	1	4	1	\$56

**Justification:**

Board members of the Nevada Tobacco Prevention Coalition (NTPC) , Project Coordinator and Contractual Staff, will travel to Reno, NV to attend a strategic planning meeting to convene with tobacco control partners to discuss grant related progress and issues related to tobacco control.

**Local Travel:**

	<u>Cost</u>	<u># of Miles</u>	<u># of days</u>	<u># of Staff</u>	
Mileage: \$0.56 rate per mile x 750 of miles x 2 of staff	\$0.560	750		2	\$840

**Justification:**

Local travel is routine traveling to attend meetings, events, policy work or to complete SOW related activities.

<b><u>Operating</u></b>	<b>Total:</b>	<b>\$4,950</b>
-------------------------	---------------	----------------

List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated program supplies should be included. If providing meals, snacks, or basic nutrition, include these costs here.

Office supplies \$30 amount x 2 of FTE staff x 12 of months	\$720.00
Adobe acrobat suite software \$890 x 3 Staff	\$2,670.00



Microsoft office software \$200 for 12 months x 3 of Staff	\$600.00
Shutterstock ( \$20 services x 12 months)	\$240.00
Canva ( \$15 x 12 months)	\$180.00
Communications: Cell phone and service-pay as you go ( \$25 services x 12 months)	\$300.00
Communications: ZOOM ( \$20 services x 12 months)	\$240.00

Justification: *Office supplies, cell phone and subscriptions such as Zoom, Shutterstock and Canva are needed during the year to for communication and completion of activities in the scope of work. Computer software such as Microsoft office and Adobe suites are charged to each employee by cities IT department, therefore these items need to be included.*

<b>Equipment</b>	<b>Total:</b>	<b>\$0</b>
------------------	---------------	------------

**List Equipment purchase or lease costing \$5,000 or more, and justify these expenditures. Also list any computers or computer-related equipment to be purchased regardless of cost. All other equipment costing less than \$5,000 should be listed under Supplies.**

Describe equipment	\$0.00
--------------------	--------

<b>Contractual</b>		<b>\$55,650</b>
--------------------	--	-----------------

**Identify project workers who are not regular employees of the organization. Include costs of labor, travel, per diem, or other costs. Collaborative projects with multiple partners should expand this category to break out personnel, travel, equipment, etc., for each site. Sub-awards or mini-grants that are a component of a larger project or program may be included here, but require special justification as to the merits of the applicant serving as a "pass-through" entity, and its capacity to do so.**

Name of Contractor: Marathon, Community Health Worker **Total \$30,000**

Method of Selection: One of the contract staffing agencies approved by the Carson City Board of Supervisors ( Marathon Staffing, Manpower, Arco Services Corp. or Talent Framework)

Period of Performance: July 1, 2022- June 30, 2023

Scope of Work: *Contracted Staff will average 25 hours per week to meet program activities including conducting presentations, designing educational materials and social media postings, attending meetings with stakeholders and other assignments as needed by the Tobacco Prevention and Control Program at CCHHS.*

\* Sole Source Justification:

Budget

Personnel: 25 hours/week x \$22.78 x 52 weeks ( 34% agency fee added)	\$30,000.00
--	-------------

Travel: See Travel above	\$0.00
--------------------------	--------

<b>Total Budget</b>	<b>\$30,000.00</b>
---------------------	--------------------

Method of Accountability:

Define - *The Project Coordinator is responsible for supervising the contracted community health worker position. Progress and performance are achieved by viewing timesheets, calander, monthly meetings to discuss projects and documentation.*

Name of Contractor: Media Company - TBD **Total \$6,500**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2022- June 30, 2023

Scope of Work: *Media company that assists with tracking and reporting of analytic when creating infographics, short videos, surveillance and social media advertisements.*

\* Sole Source Justification:

Budget

Personnel	\$6,500.00
Travel	\$0.00

<b>Total Budget</b>	<b>\$6,500.00</b>
---------------------	-------------------

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports, and evaluation of data collected.

Name of Contractor: Out - of - Home Media: TBD **Total \$8,000**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2022- June 30, 2023

Scope of Work: Traditional Advertisement will be used to raise awareness various channels include news paper articles, billboards, TV, radio and other..

\* Sole Source Justification:

Budget

Personnel	\$8,000.00
Travel	\$0.00
<b>Total Budget</b>	<b>\$8,000.00</b>

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports.

Name of Contractor: Local Coalition Project: TBD **Total \$6,500**

Method of Selection: Carson City policies will be followed by needing an oral or written quote.

Period of Performance: July 1, 2022- June 30, 2023

Scope of Work: Collaborating with coalitions to work on tobacco control and prevention issues through one or more of the following: partnered sponsorships, surveillance, creations of infographics, short videos, and/or social media content.

\* Sole Source Justification:

Budget

Personnel	\$6,500.00
Travel	\$0.00
<b>Total Budget</b>	<b>\$6,500.00</b>

Method of Accountability:

Define - The Project Coordinator is responsible for supervising collaboration with local coalition(s). Coalition(s) will provide information and reporting for accountability purposes.

Name of Contractor: Survey software and/ or company TBD **Total \$4,650**

Method of Selection: Carson City policies will be used to determine selection of survey software and/ or company for analytics. An oral or written quote will be needed.

Period of Performance: July 1, 2022- June 30, 2023

Scope of Work: Conducting surveillance by creating an instrument survey and measure responses for providers/client useage of cessation resources or youth and young adults on issues such as point of sale, flavoring trends, or other tobacco related. This may include incentives to increase reponse rates for surveys if appropriate.

\* Sole Source Justification:

Budget

Company/software	\$4,500.00
Incentives	\$150.00
<b>Total Budget</b>	<b>\$4,650.00</b>

Method of Accountability:

Define - The Project Coordinator and Department Director are responsible for supervising the contracts. Progress will be outlined in the quarterly reports, and evaluation of data collected.



<b>Training</b>	<b>Total:</b>	<b>\$2,318</b>
Describe training	\$0.00	

Community Health Worker ( CHW II)  
 Course: This course will provide a fundamental understanding of health equities and disparities to better serve the community. X 2 staff

\$1,758.00

Community Health Worker ( CHW II)  
 Certification x 2 staff  
 Community Health Worker ( CHW II)  
 education supplies /memberships x 2 staff

\$300.00

\$260.00

List all cost associated with Training, including justification of expenditures. The community health worker course will provide a fundamental understanding of health equities and disparities to better serve the community along with the certification and additional trainings offered through membership.

<b>Other</b>	<b>Total:</b>	<b>\$3,010</b>
--------------	---------------	----------------

Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as audit costs, car insurance, client transportation, etc. Stipends or scholarships that are a component of a larger project or program may be included here, but require special justification.

Copier/Printer Lease: \$30 amount x 12 months \$360

Postage/Shipping: \$25 per mo. x 12 months \$300

Educational material printing services per year \$1,500

Signage \$850

Justification: Cost for CCHHS for employees to perform job duties and assignments. Educational material printing cost is to provide educational information related to program to general public, providers, other agencies, and local K-12 school districts and high educational Institutions. Signage is for organization requesting smoke-free signage. These signs may be to new placement or used to replace existing/damage signage.

<b>TOTAL DIRECT CHARGES</b>	<b>\$125,392</b>
-----------------------------	------------------

<b>Indirect Charges</b>	<b>Indirect Rate: 8.000%</b>	<b>\$10,031</b>
-------------------------	------------------------------	-----------------

**Indirect Methodology:** Explain how indirect is calculated (e.g. 8% of all direct expenses per Federally approved indirect agreement). This funding has an 8% limit on indirect. This funding has an 8% limit on indirect. Indirect charges includes facilities and administration. Facility costs include depreciation on buildings, operations and maintenance expenses (utilities, desk telephone). Administration costs include general administration such as director's office, accounting (both at health department and City), information technology, and human resources.

<b>TOTAL BUDGET</b>	<b>Total:</b>	<b>\$135,423</b>
---------------------	---------------	------------------