California Department of Public Health
California Tobacco Control Program
2013-17 Local Lead Agency Comprehensive Tobacco Control Plan Guidelines

Work Statement

NOTE: This section only contains instructions specific to the requirements of this procurement, together with scoring criteria. This section MUST be read in conjunction with the *Application/Proposal/Plan Requirements and Instructions* of this procurement which contains the general instructions for responding to all California Department of Public Health/California Tobacco Control Program (CDPH/CTCP) procurements.

Background

California Health & Safety Code (HSC) Sections 104375, 104380, 104400, 104405, through 104415 designates local health departments within California as the Local Lead Agency (LLA) for the 61 health jurisdictions and describes the operations and functions of the comprehensive tobacco control program administered by LLAs. These statutes require LLAs to periodically develop and submit a comprehensive tobacco control plan (Plan); and to follow guidelines (Guidelines) issued by the CDPH/CTCP. Each LLA must obtain the involvement of local community organizations in the development of the Plan. Enabling legislation requires the Plan to comply with the HSC and provide jurisdiction-specific demographic information.

LLAs must provide local data on smoking and tobacco use, a description of program goals, objectives, activities, target populations, and evaluation. Fiscal requirements include: budget cost information and estimates for program activities, including, staffing configurations and planning office workstations and on-line needs. ~~LLAs are required to use the Online Tobacco Information System (OTIS). OTIS is a uniform data and information management system which permits comparisons of workload, unit costs, and outcome measurements on a statewide basis.~~ Revised paper submission instructions are provided in the Appendix: 2013-17 Local Lead Agency (LLA) Comprehensive Tobacco Control Plans Phase I (2013-2014) Paper Submission Instructions and Submission Checklist Cover sheet. The Guidelines provide instructions for the development and submission of a Plan consistent with HSC and legislative requirements.

Purpose

The purpose of these Guidelines is to direct each of the 61 designated tobacco control LLAs in the development of a 2013-2017 Plan as required by HSC.

Requirements

These guidelines provide direction to each of the 61 designated tobacco control LLAs, in the development, submission, and implementation of a 2013-2017 Comprehensive Tobacco Control Plan. Detailed instructions are only provided for the 2013-2014 plan period, referred to as Phase I. Release of the instructions for completing the 2014-2017 period, referred to as Phase II, is tentatively scheduled for October 2013. Submission of the Phase II Plan is tentatively scheduled for December 2013. These Guidelines are consistent with the Proposition (Prop) 99 Tobacco Tax Initiative, legislative actions, HSC, and CDPH/CTCP requirements which are summarized in the following overarching requirements:

1. Coordinate local services and statewide initiatives between Prop 99 funded agencies, government agencies, voluntary health organizations, schools, community-based organizations, and others involved in tobacco control in order to maximize resources and avoid duplication.

2. Identify and plan for the diverse ethnic and cultural differences of each community.

3. Collaborate with diverse partners to bring more skills, ideas, and resources to tobacco control efforts.

4. Focus on community-norm change strategies, instead of individual behavior change.

5. Build the capacity of local communities and agencies to address tobacco control activities and tobacco-related disparities.

6. Mobilize the community to support educational, policy, and enforcement activities.

7. Strategically use media and public relations to support or increase the effectiveness of tobacco control interventions.

8. Institutionalize programs into existing social and health service delivery systems.

9. Actively promote the statewide toll-free number for the California Smokers' Helpline (1-800-NO-BUTTS) and the Stop Tobacco Access to Kids Enforcement (STAKE) Act (1-800-5 ASK-4-ID).

10. Communicate and collaborate with statewide grantees and contractors to avoid duplication in the development of materials, to develop sound policies, and to implement effective community organizing strategies.

Allocation Agreement and Term

The Allocation Agreement term for this procurement is July 1, 2013 to June 30, 2017. The maximum allocation for each fiscal year is provided in the LLA Allocation Table published by CDPH/CTCP. Unexpended funds may be carried forward each year under procedures approved by CDPH/CTCP.

CDPH/CTCP reserves the right to terminate the allocation agreement if the Plan submitted, awarded, negotiated, and approved by CDPH/CTCP as a result of this procurement is not implemented satisfactorily or if work is not completed by the due dates prescribed in the Plan. If an LLA is noncompliant, HSC 104380 (i) (3) grants CDPH/CTCP the authority to: (1) withhold funds, (2) terminate the agreement, (3) recoup any unexpended funds, and (4) reallocate both the withheld funds and the recouped funds of the noncompliant LLA through an agreement with a different governmental or private nonprofit agency capable of delivering services based upon LLA Guidelines for local plans and in compliance with a process determined by CDPH.

Fiscal Year (FY) funds will be allocated prospectively on a quarterly basis according to the provisions in HSC Section 104380. Prospective payments shall be deposited into an interest bearing, insured trust account. The interest earned on prospective payments is not included in the annual budget allocation projections. Interest earned is reported twice during the fiscal year in the Cost Report. Interest earned monies may be used to supplement activities in the approved plan, only in accordance with CTCP procedures in *LLA Administrative & Policy Manual, Section III, Chapter 400, Policy #4*. Refer to https://tcfor.catcp.org/ for guidance.

Funding Amount/Projected Allocations

Pursuant to HSC Section 104380, FY funds are allocated prospectively for each quarter in accordance with allocation percentages in HSC Section 104380 (d). Each LLA will receive a fiscal year allocation to implement and evaluate a comprehensive tobacco control plan that serves its local health jurisdiction (see *Table 1. LLA 2013-2017 Funding Tiers*).

CTCP projects the allocation for each of the four fiscal years of the Plan period using the HSC Section 104380 (d) percentages and anticipated tobacco tax revenues, factoring in declines or increases in tobacco consumption. LLAs will be notified of changes to the allocation projections and CDPH/CTCP will work with LLAs to make adjustments to their scope of work and budget should there be a change in the allocation based on fluctuations in tobacco tax revenue, the State budget appropriation, or court decisions.

LLAs are authorized to deposit prospective payments into an interest-bearing, insured trust account. Do not co-mingle any other tobacco monies in the trust account. The separate interest-bearing account is only for Prop 99 allocations. The interest earned on prospective payments is not included in the annual budget allocation projections. Interest earned is reported twice during the fiscal year by the LLA in their Cost Report. Interest earned monies may be used to supplement activities in the approved plan, only in accordance with CTCP requirements in *LLA Administrative & Policy Manual, Section III, Chapter 400, Policy #4.* Refer to https://tcfor.catcp.org/ for guidance.

The four State FY budget periods (July 1-June 30) for this Plan period are:

Year one: FY 2013-14 (July 1, 2013-June 30, 2014)
Year two: FY 2014-15 (July 1, 2014-June 30, 2015)
Year three: FY 2015-16 (July 1, 2015-June 30, 2016)
Year four: FY 2016-17 (July 1, 2016-June 30, 2017)

There are three funding levels for LLAs, called "tiers"; Table 1 lists each LLA by tier.

Table 1. LLA 2013-2017 Funding Tiers

Tier 1 Local health jurisdictions projected to receive a budget allocation of less than $200,000 per year.	**Tier 2** Local health jurisdictions projected to receive a budget allocation of more than $200,000 and less than $1,000,000 per year.	**Tier 3** Local health jurisdictions projected to receive a budget allocation of $1,000,000 or more per year.
Alameda, Alpine, Amador, Berkeley, Butte, Calaveras, Colusa, Contra Costa, Del Norte, El Dorado, Fresno, Glenn, Kern, Humboldt, Imperial, Inyo, Kings, Lake, Lassen, Long Beach, Madera, Marin, Mariposa, Mendocino, Merced, Modoc, Mono, Monterey, Napa, Nevada, Pasadena, Placer, Plumas, Riverside, Sacramento, San Benito, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Cruz, Shasta, Sierra, Siskiyou, Sonoma, Solano, Stanislaus, Sutter, Tehama, Trinity, Tulare, Tuolumne, Ventura, Yolo, Yuba	Orange San Bernardino San Diego San Francisco Santa Clara	Los Angeles

Tentative Schedule

Guidelines released	November 5, 2012
Online Information Meetings	November 7-8, 2012
Phase I Plans due	January 15, 2013 at 5:00 p.m. P.S.T.
Plans reviewed and scored:	January 16 – February 6, 2013
Plan negotiations meetings	February 7 – March 7, 2013
Agreement start date	July 1, 2013
Release Instructions for 2014-2017 Plan	October 2013
Phase II Plan due	December 2013
Agreement end date	June 30, 2017

Review and Scoring Information

This procurement consists of two phases. Phase I is for the term from July 1, 2013 to June 30, 2014. Phase II is for the term from July 1, 2014 to June 30, 2017. In Phase I, the LLA will implement the approved Phase I Comprehensive Tobacco Control Plan (Phase I Plan). In Phase I, the LLA will prepare, submit, and negotiate a Phase II Comprehensive Tobacco Control Plan (Phase II Plan). The Phase I Plan will undergo a technical review and will be scored using the scoring criteria section in this document. All instructions and scoring criteria related to Phase II are tentatively scheduled for release in October 2013.

Phase I Plan Requirements

The following is an outline of the work load during Phase I. LLAs are expected to meet these requirements with the assistance of the local coalition and program personnel.

1. **Meet Minimum Scope of Work Requirements for Tier 1**
   Refer to Table 2 for a list of Phase I minimum SOW requirements per Tier.

2. **Collect Data for CTCP Retail Environment Campaign**
   The selected agency will participate in CTCP's multi-year campaign focused on the retail environment. A specific process objective with data collection activities focused on the retail environment will be required for each LLA. Specific objective and activity language is included in Appendix A.

3. **Conduct a CX Needs Assessment**
   The LLA will conduct a formal CX Needs Assessment FY 13-14, which engages the community in identifying local tobacco control priorities for the FY 14-17 Plan period. The CX Needs Assessment findings will be reported upon with the submission of the Phase II Plan.

4. **Develop a Phase II Plan**
   Following the CX Needs Assessment, the agency will submit the CX Needs Assessment findings and a Phase II Plan for the period July 1, 2014 to June 30, 2017 to CTCP for peer review, negotiation, and approval. The Plan must be based on the CX Needs Assessment findings and local priorities. Guidelines for the Phase II Plan will be released in October 2013 (tentative). Once the Phase II Plan has been approved by CTCP, the funded agency must submit a three-year project abstract, complete all agreed-upon activities, submit six-month progress reports, attend trainings, and conform to the policies and procedures applicable to LLAs.

5. **Complete a Project Abstract after Phase I Plan Approval**
   This document is to be completed after CTCP has notified you that your Plan has been approved. It is highly encouraged to complete the abstract after approval and NOT before since CTCP may require changes to the Plan. The information provided in this document will be used to create the Project Directory that is accessed by the public and other CTCP-funded projects.

Table 2. Phase I Minimum SOW Requirements per Tier			
Requirements	**Tier 1**	**Tier 2**	**Tier 3**
Conduct a formal CX Needs Assessment	X	X	X
Three Objectives	X	X	
Four Objectives			X
One Data Collection Process Objective for the Retail Campaign and accompanying activities as specified in Appendix A. (For this objective all tiers will complete two data collection modules: the core tobacco module plus one additional module.)	X	X	X
One objective reflecting a Policy or Systems Change Outcome.	X	X	
Two objectives reflecting a Policy or Systems Change Outcome			X
Completion of Midwest Academy Chart is to be included as an activity for each policy objective in the SOW.	X	X	X
A "Policy Implementation Only" objective may only be submitted if a resolution, legislative policy, or voluntary policy is being implemented that was formally enacted as a result of the 2010-2013 Comprehensive Tobacco Control Plan.	X	X	X
Designate all objectives in the Phase I Plan as Non-primary Objectives.	X	X	X
Objectives designated as non-primary objectives will include a brief evaluation plan that provides sufficient information to determine the extent to which the objective was completed and satisfaction with key activities. A brief evaluation report must be completed for each non-primary objective.	X	X	X
No more than 10 percent of the overall budget can be allocated to the provision of direct cessation services.	X	X	X
One objective from the 2010-2013 plan period may continue or be expanded into Phase I.	optional for all tiers		
One Coalition Building Objective is highly encouraged to support the retail environment campaign and the CX needs assessment activities. Assets 2.6 or 2.7 may be selected.	optional for all tiers		

Phase I Plan Components

The Phase I Plan consists of eight components. Table 3 outlines the Phase I Plan Components and maximum points possible for each component. ~~Additional instructions for completing the Plan and forms in OTIS may be found in the *Application/Proposal/Plan Requirements and Instructions* on the Tobacco Control Funding Opportunities and Resources (TCFOR) Web site (http://tcfor.catcp.org). Refer to the OTIS Help Section for the User Guide and a detailed video training program on how to complete forms in OTIS.~~

I. Agency contact information

Component Description: Provide basic contact information for the agency and the agency's project director, fiscal contacts, health officer, and signatory.

Instructions: Complete instructions are found in: *Application/Proposal/Plan Requirements and Instructions*.

Minimum Requirements: Provide all basic contact information.

II. Demographic Profile

Component Description: This data provides a general description of the local health jurisdiction's demographics. It helps reviewers by providing context for the SOW.

Instructions: Complete the two required fields on the Demographic Profile form. Complete instructions are found in the section *Application/Proposal/Plan Requirements and Instructions*.

Minimum Requirements:
Provide geographic characteristics of the local health jurisdiction in the two required fields.

III. Media Profile

Component Description: The information in this component provides a description of the top five most commonly used media outlets in the LLA's geographic region. The description provides the name of the outlet, the format (radio, television, print media, etc.), and the primary language of the outlet. The purpose of this information is to provide reviewers a general understanding of the media capacity of the local health jurisdiction.

~~*Instructions: See OTIS User Guide, Section C: Background Information, pages 35-37.*~~

Minimum Requirements:
Properly identify the top five major media outlets serving the local health jurisdiction.

IV. Evaluator Information

Component Description: LLAs must work with a qualified Local Program Evaluator (LPE) to design the evaluation plan.

Instructions: Complete instructions are located in the section *Application/Proposal/Plan Requirements and Instructions.*

- Evaluator Profile
  The LPE enters his/her contact information and a description of his/her evaluation training in the LPE Directory. The LPE must complete the profile in the electronic LPE Directory accessed at ~~http://www.tcsotis.org/public/evaluator/~~.
  https://otis.catcp.org/public/evaluator/index.cfm?fuseaction=main.signin

- Evaluator Certification of Plan
  The LPE certifies the amount of time he/she spent with the LLA providing consultation on the SOW evaluation plans. Every plan must include this certification, even if the evaluator is a member of the LLA staff. The certification must be completed prior to submission. Do not leave this activity to the last day of Plan submission.

Minimum Requirements:
The LPE must certify that he/she provided a minimum of four hours of consultation in the development of the SOW evaluation plans. The LLA must link a LPE to their plan.

V. Coalition Information

Component Description: Coalition information is provided by completing two forms, the Coalition Functioning form and the Coalition Membership form. The Coalition Functioning form provides general information about the structure and function of each coalition administered or maintained by the LLA. The Coalition Membership form describes the composition of the overall coalition, including the demographic and/or cultural representation of each member.

Instructions:

- Coalition Functioning Form
  This form needs to be completed for each coalition administered or maintained by the LLA. The following information is to be included:
  - Name of coalition
  - Year founded
  - Chair and co-chair (if applicable)
  - Coalition type
  - Coalition by-laws or formalized procedures
  - Mission statement
  - Number of members
  - Operating procedures and frequency of meetings

- Names of subcommittees
- Recruitment methods
- Orientation process
- Training descriptions
- Communication systems
- Date and results of most recent coalition functioning survey
- Date for the next coalition survey and the instrument to be used to assess the coalition functioning
- Description of coalition member roles
- Task Plan for conducting the 2014-17 Communities of Excellence needs assessment

- Coalition Membership Form
  This form needs to be completed for each coalition administered or maintained by the LLA. The following information is to be included:
  - Coalition member name or identification number and agency affiliation
  - Constituency represented
  - Ethnicity/race
  - Priority Population representation/expertise

Table 3. Phase I Plan Components and Maximum Points	Maximum Points
I. Agency Contact Information	0
II. Demographic Profile	0
III. Media Profile	0
IV. Evaluator Selection	0
V. Coalition Information	15
VI. Scope of Work (Phase I only)	45
• Objectives	
• Intervention activities	
• Evaluation Plan	
VII. Narrative Summary/ Theory of Change	15
VIII. Budget Justification	25
Total	**100**

VI. SOW: Objectives, Intervention Activities, Evaluation Plan

Component Description: The Phase I SOW is a one year plan for FY 2013-14. It provides a detailed "road map" that describes:

- Objectives – specific goals
- Interventions – the methods by which they will be achieved
- Evaluation Plans – how the effort will be measured

Specifically, the SOW identifies objectives, activities to achieve the objectives, an evaluation design and plan for each objective, target audiences, timelines, responsible parties, products that are subject to copyright, a percent deliverable tied to tangible products or services to be produced or conducted, and tracking measures that will be used to verify completed activities. The SOW is to be consistent with the requirements described in these Guidelines. See Table 2 for an overview of the minimum SOW requirements per tier.

a. Objectives

Instructions: Develop a one-year SOW consistent with the requirements provided in these Guidelines. Objectives included in the one-year Phase I plan must be based on indicators and assets that were assessed in 2009 as part of the CX needs assessment submitted in the 2010-2013 Comprehensive Tobacco Control Plan. There are two exceptions to this requirement: 1) the mandatory retail campaign objective and 2) an objective focusing on coalition or partner development (i.e., an objective that is based on Asset 2.6 or 2.7). Expanding youth and adult engagement, non-traditional partners, and the diversity of partners will support the retail campaign as well as other tobacco control work. Complete instructions are found in the *Application/Proposal/Plan Requirements and Instructions*.

b. Intervention Activities

Component Description: The Intervention Activity Plan reflects an understanding of the role of community norms in influencing tobacco-use related behaviors. It reflects a coordinated and integrated approach that includes a variety of activities to accomplish the objective.

Instructions: Complete instructions are found in: *Application/Proposal/ Plan Requirements and Instructions*.

c. Evaluation Plan

Component Description: Evaluations measure the extent to which the objectives were achieved, provides information that will inform and improve the intervention, and disseminates the findings to the community, key opinion leaders, and/or public health professionals working in tobacco control.

Instructions: An evaluation must be conducted for each objective in the SOW. It needs to describe the evaluation design, sampling strategy, sample sizes, types of evaluation activities proposed, data collection methods, data analysis, and dissemination of findings. Evaluations must be appropriate to the designation of objectives as "non-primary" objectives. At least ten percent of the overall budget must be allocated to evaluation. Complete instructions are found in: *Application/Proposal/Plan Requirements and Instructions.*

Each objective should include a Brief Evaluation Report consistent with guidelines for writing an abstract described in "*Tell Your Story - Guidelines for preparing a complete, High Quality Final Evaluation Report."* This document can be accessed at http://www.cdph.ca.gov/PROGRAMS/TOBACCO/Pages/CTCPEvaluationPublications.aspx.

VII. Narrative Summary and Theory of Change:

Description: The narrative includes the following four fields, each of which must provide full detail on:

- Community Assessment Analysis: Describe the major findings and conclusions from the CX needs assessment conducted in 2009 (and submitted in the 2010-2013 Comprehensive Tobacco Control Plan) to support and justify why the objective was included in the SOW. If you are including an objective based on Assets 2.6, or 2.7 and it was not previously assessed, then provide information that supports selecting an objective linked to one of these assets. For the retail campaign objective, see the sample provided in Appendix A.
- Major Intervention Activities: Narratively summarize the key intervention activities to be conducted that will lead to accomplishment of the objective.
- Theory of Change: Provide a brief description of the assumptions that support why the activities will lead to accomplishment of the objective.
- Evaluation Summary Narrative: Briefly summarize the major evaluation activities, dissemination of findings, the rationale for the overall evaluation plan and discuss how these activities will assist your project to determine the extent to which the objective was completed and provide information that will inform or help improve future interventions.

Instructions: Complete instructions are found in: *Application/Proposal/Plan Requirements and Instructions* on https://tcfor.catcp.org/.

VIII. Budget Justification:

Description: The Budget Justification (BJ) is an easy to follow narrative of the costs associated with implementation of the scope of work (SOW). The budget categories listed below are sequenced in the same order as they appear in the Online Tobacco Information System (OTIS) budget justification index. The BJ

requires enough detail to clearly explain why the expense is necessary and how the cost is calculated.

Instructions: Develop a one-year budget justification consistent with the requirements and criteria provided in the Plan Guidelines. The annual budget justification total dollar amount may not exceed the FY 2013-2014 total allocation (refer to Table 1 for annual allocations by tier). Complete category description and information may be found in *Application/Proposal/Plan Requirements and Instructions* document within https://tcfor.catcp.org/. Additionally, refer to the *OTIS User Guide* for upload instructions.

- Provide a budget justification that supports and connects to all activities in the SOW.
- Describe staff positions, subcontractors and consultants using titles that are consistent in both SOW responsible party and budget justification categories.
- Propose expenses comparable to staffing skills and qualifications, identify capability to complete all project activities.
- Fund a project lead position with a time base sufficient to provide complete project management and administrative oversight. Refer to Policy Manual, Chapter 400, Policy #03, *"Staffing, Administrative and Travel Requirements"* for additional information.
- Designate one lead staff position to oversee project evaluation and coordinate evaluation staff or evaluation consultant's effort and activities.
- The designated evaluation lead must provide a ten percent minimum effort equal to a 100 percent FTE (four hours weekly) to oversee project evaluation.
- Budget accurate operating expenses to achieve activity completion in the SOW
- Budget both required and optional travel and training to meet CTCP travel requirements and achieve completion of the SOW activities.
- The Other Costs budget category must be consistent with CTCP policies and directly support activities in the SOW such as educational materials, behavior modification materials, media advertising placement, and sponsorship, if applicable.
- List indirect costs. Indirect Costs should be consistent with agency requirements and comply with CDPH/CTCP policy.

Budget Categories

1. **Personnel Costs**
   Refer to *Application/Proposal/Plan Requirements and Instructions* document. Designate a lead staff responsible for overseeing and coordinating evaluation activities. The designated staff must work a 10 percent minimum equal to a full time equivalent (FTE) (four hours weekly) to oversee project evaluation.

2. **Fringe Benefits**
   Refer to *Application/Proposal/Plan Requirements and Instructions* document*.* Refer to Section 20 of Exhibit D(S): Special Terms and Conditions in the Contract Documents section of the TCFOR Web page for these guidelines which provides guidance for allowable expenses in Fringe Benefits (not applicable to local health departments).

3. **Operating Expenses**
   Refer to *Application/Proposal/Plan Requirements and Instructions.*

4. **Equipment Purchases**
   Refer to Application/Proposal/Plan Requirements and Instructions. Equipment purchases must meet the CTCP minimum software/hardware specifications as outlined in the Appendix: Computer Hardware/Software Minimum Specifications. All equipment purchase requests will be considered on a case-by-case basis. Further instructions for data collection equipment purchases will be provided by CTCP.

5. **Travel/Per Diem and Training**
   Refer to *Application/Proposal/Plan Requirements and Instructions* document*.* Budget $750 per person for the following required travel/meetings/conferences:

   - CX Training: Budget for one to two staff to attend in FY 2013-2014.
   - LLA Guidelines Information Meeting and Technical Assistance Sessions: Budget for two days for one to two staff and the project evaluator to attend in FY 2013-14.
   - Regional/Local Spokesperson and Press Conference Support Trainings: Budget for one to two staff and/or coalition members
   - Annual Capitol Information and Education Days April/May, Sacramento: Budget for two days to attend in each fiscal year. In FY 2013-14 the training will be a one day event with an optional meet and greet the night before.
   - Project Director's Meeting: Budget for three days for one to two staff to attend in FY 2013-2014.

6. **Sub-contractors/Consultants**
   Refer to *Application/Proposal/Plan Requirements and Instructions* document*.* If the Primary Agency designated as the LLA intends to subcontract 60 percent or more of their tobacco control FY allocation to one agency to implement their comprehensive tobacco control plan**, a subcontractor sub-budget must be provided** ~~the sub-contractor is required to enter a sub-budget in the Online Tobacco Information System (OTIS identified sub-contractor will receive OTIS notification they need to enter budget information. If the sub-contractor is not listed as an OTIS approved user, the Primary~~

~~Agency must request an OTIS user account for the sub-contractor. Subcontractor indirect cost is equal to the primary agency.~~

7. **Other Costs**
   Refer to Application/Proposal/Plan Requirements and Instructions. Advocacy Campaign Materials may not be purchased. Please leave this sub-line item blank. For Behavior Modification Materials, include a narrative justification such as, "BMMs are provided to program participants to ~~motivate and/or~~ reinforce positive behavior, participation, or involvement and requires action on the part of the recipient to receive the BMM. The cost of the BMM may not exceed $50 in value, per person, per year."

8. **Indirect Expenses**
   Refer to *Application/Proposal/Plan Requirements and Instructions.* Indirect Expenses must not exceed 15 percent of Total Personnel Expenses (Salary plus Fringe Benefits total).

Additional Budget Documents Required:

~~Upload Instructions: Refer to the *OTIS User Guide, Section G: Additional Documents*, for data entry instructions on the following documents.~~

1. Non Prop-99 Additional Tobacco Control Funding
This form provides a brief description of additional funds the Primary Agency has available for non-Prop 99 tobacco control activities (e.g., American Legacy Foundation, Prop 10, Master Settlement Agreement, etc.)

~~**2. Certification of Non-Acceptance Form**~~
~~LLAs are required to certify they do not receive funding from, or have an affiliation or agreement relationship with a tobacco company, any of its subsidiaries, or parent company, during the term of the prospective allocation (July 1, 2013 – June 30, 2017). LLAs are required to sign and submit this form.~~

~~**3. Agency Documentation Requirements Form**~~
~~CDPH may audit agreements at any time. The documentation required for each audit may typically include, but is not limited to the items listed in the Agency Documentation Requirements. All applicants are required to sign and submit this form.~~

Scoring Criteria

All Plans will undergo a review and will be scored using the criteria listed below. Phase I (FY 13-14) plans will be scored internally by CTCP staff. Phase II (FY 2014-2017) Local Lead Agency Plans will be scored through a peer review process that may include CTCP staff, community agency staff, other local lead agency staff, and/or tobacco control experts from other states. Following the review, CDPH/CTCP will negotiate the scope of work and budget with the LLA to ensure that documents conform to these Guidelines and CDPH/CTCP policies.

Coalition Information: 15 Points

- Coalition Functioning Form
  - Demonstrates there is a fully functioning adult coalition by including the coalition name, year founded, contact information of chair and co-chair, coalition type, by-laws or formalized procedures, mission statement, and the number of members.
  - Demonstrates the coalition has operating procedures, indicates frequency of meetings, subcommittees, recruitment methods, an orientation process, trainings, communication systems, date of the most recent assessment, assessment results, and plans for the next assessment and members' roles.
  - Demonstrates a task plan for conducting the 2014-17 Communities of Excellence Needs Assessment, which lists responsible parties and projected completion period.
- Coalition Membership Form
  - Demonstrates diverse coalition membership which includes community representation extending beyond traditional health, education, and social service organizations.
  - Demonstrates cultural, ethnic, and/or other priority populations are represented in proportion to their overall population in the geographical area served.
  - Demonstrates participation and involvement of local community organizations with special experience or expertise in community health education against tobacco use and representation of high risk populations.

SOW: Objectives, Intervention, and Evaluation: 45 Points

Objectives:

- Must be consistent with minimum SOW requirements listed in ~~Table 3~~ Table 2.
- A policy change objective is included and is based upon the narrative needs assessment findings and would result in a population-based outcome that is commensurate with the resources available.
- Objectives clearly define who or what is expected to change, how much change is expected to occur (without including ranges), where the change is expected to occur, and when the change is expected to occur.

Intervention Activities:

- Overall, a well-organized and detailed "road map" of the project is provided which describes:
  - How much will be done;
  - Where activities will occur;
  - What will be done (e.g., educational methods, advertising, public relations, etc.);
  - Completion of the Midwest Academy Strategy Chart for every policy objective

    - Responsible parties (e.g., staff, subcontractors, consultants, coalition members);
    - Appropriate timelines (start and end dates); and
    - Tracking measures to verify completion of activities.
- The magnitude, quantity, and activities planned are sufficient in their power to achieve the stated objectives.
- The Intervention Activity Plan demonstrates coordination and collaboration with CTCP statewide training and technical assistance agencies, statewide advocacy campaigns, and promotion of statewide 800 numbers (e.g., California Smokers' Helpline, Stop Tobacco Access to Kids Enforcement Act), where appropriate.
- For each activity that involves developing original material, the Material Development Form is completed. It is demonstrated that the steps for material development will include contacting the Tobacco Education Clearinghouse of California to verify if a material already exists and contacting TEAM Lab @USC for assistance on developing that item, conducting appropriate field/pilot testing, ensuring information is factually correct and cited, obtaining appropriate model, photo and copyright releases, and reflects the use of professional production values.

Evaluation:

- At least 10 percent of the total deliverables/budget is allocated to evaluation.
- An appropriate evaluation plan is included for each objective in the SOW. The evaluation plan is appropriate in terms of the evaluation design, sampling strategy, sample size, type of evaluation activities proposed, start and end dates, data collection methods, data analysis, and dissemination of findings.
- The evaluation measures the extent to which each objective was achieved, provides information that will inform and improve the intervention, and disseminates the findings to the community, key opinion leaders, or public health professionals working in tobacco control, as appropriate.
- Includes a Brief Evaluation Report for each objective.
- The quality of the objectives and evaluation plans indicates a qualified LPE provided at least four hours of consultation to the Primary Agency.

Narrative Summary and Theory of Change: 15 Points

- Provides a community needs assessment which justifies the indicators and/or assets selected and the objectives included in the Intervention Plan:
    - Incorporates and synthesizes findings from the 2009 CX Needs Assessment (submitted in the 2010-2013 Comprehensive Tobacco Control Plan).
    - For the retail campaign objective, the community needs assessment incorporates findings from the sample provided in Appendix A.
    - For an objective based on Asset 2.6 or 2.7 and which was not assessed in the 2009 CX Needs Assessment, quantitative and qualitative data are provided which support the selection of the Asset and aim of the objective.

- Through the analysis, demonstrates that the objectives and activities are appropriate to the specific community(ies) and address high priority sub-communities or populations based on need.
- Describes a reasonable rationale explaining why the proposed activities are the best approach to achieving the objectives.
- Describes a reasonable, realistic, and appropriate evaluation plan for each objective.

Budget Justification: 25 points

- The budget justification must adhere to and follow the instructions in the Guidelines.
- Spelling must be correct. Formulas and totals must calculate correctly throughout the budget justification. Narrative information must be specific, easy to follow and clearly supports the SOW.
- Position titles in the budget justification must be consistent with titles used in the scope of work Responsible Parties field.
- The agency must provide funding for a Project Director/Project Coordinator that meets the requirements of Chapter 400, Policy # 3 in the LLA Administrative and Policy Manual. A lead staff must be designated for evaluation oversight at a minimum of four (4) hours weekly (equivalent to 10% of a 100 percent FTE position).
- Provide a list of fringe benefits. Fringe benefits must be consistent with agency policies and requirements.
- These two categories are required: "Operating Cost" & "Network Communication" (OTIS, Partners, TCFOR); and, use complete and accurate formulas to justify Space Rent/Lease.
- Equipment narratives must be specific, explaining: need (well justified), which staff will utilize each item, and how the equipment will be utilized.
- Identify travel costs consistent with the SOW activities; and, reflects participation in CTCP required conferences, trainings, and meetings.
- Provide a brief narrative for "Behavior Modification Materials" that purchased items are in compliance with current California Department of Public Health guidelines and are only provided to participants in tobacco control activities. Also, include the narrative statement that: "BMM's will not exceed $50/per person/year".
- Indirect Costs listed are consistent with agency requirements and comply with CDPH/CTCP policy.