

MaineHealth Center for Tobacco Independence
Request for Grant Partners
Local Lead Agency for LGBTQ Tobacco Prevention and Control efforts

Purpose:

The intent of this request is to solicit proposals to identify a grant partner as required in US CDC RFA-DP20-2001 (National and State Tobacco Control Program). This grant partner would undertake efforts specific to the “Community Based Disparities Requirement” as indicated on numerical pages 14-17 of the Notice of Funding Announcement ([NOFO](#)). Maine CDC has identified that the focus for these “community based” efforts will be Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ) persons.

Background:

The MaineHealth Center for Tobacco Independence (CTI) is a contractor of the Maine CDC for tobacco prevention and control purposes, and currently serves as the Domain 2 Vendor of the Maine Prevention Services (MPS) Initiative (RFP# 201602047). In this role, CTI maintains a network of 14 sub-recipients (District Tobacco Prevention Partners | DTPP) to undertake local level tobacco prevention and control efforts. Since inception of MPS (<https://www.maine.gov/dhhs/mecdc/population-health/prevention/maine-prevention-services.shtml>), the contracted sub-recipients serve within the auspices of Maine’s Local Public Health Infrastructure and established Public Health Districts.

As it relates to the expectations within the NOFO, Maine CDC and CTI are soliciting proposals from organizations in Maine that have the historical experience, community connections/standing and current capacity to collaborate, contractually, in the manner articulated and required by US CDC.

The identified grant partner will become, after award from US CDC, a sub-recipient of CTI as a DTPP and part of the MPS Initiative. However, there will be considerable coordination with both Maine CDC and US CDC in order to support planning and implementation efforts.

US CDC Notice of Funding Announcement Expectations:

US CDC funds all States to undertake comprehensive tobacco prevention and control efforts; Maine is in the midst of preparing its application, due to US CDC by April 3, 2020.

As part of the NOFO, US CDC maintains expectations as it relates to a “Local Lead Agency” that will undertake efforts on behalf of a “specific population.” For the sake of brevity of this document, interested parties are encouraged to refer to numerical pages 14-17 of the attached NOFO for further detail on US CDC expectations for this process. Please note, US CDC has also posted answers to submitted questions (<https://www.cdc.gov/tobacco/about/foa/national-state-tobacco-control-program/faq/index.html>).

Process to Identify a Grant Partner:

CTI is supporting these efforts on behalf of Maine CDC in its role as Domain 2 for MPS. CTI will utilize an intentional process for broad distribution of this opportunity. It will be posted on CTI’s Website (www.CTIMaine.org), and CTI staff will request that it is distributed through the following channels:

- Maine CDC Tobacco & Substance Use Program Listserv
- District Coordinating Councils through the District Liaisons

- Statewide Coordinating Council for Public Health
- Tobacco associated NGO listservs, including the American Lung Association, the American Heart Association, the American Cancer Society Cancer Action Network, and the Maine Public Health Association
- Among CTI's own communication channels, including our Biweekly Update and the MaineHealth Center for Health Improvement

Messages distributed through these channels will include the request to further disseminate through pertinent networks / listservs.

Maine CDC and CTI staff will review applications jointly according to the rubric listed below.

Important Dates:

Questions must be submitted, in writing, by March 20, 2020, 5:00PM. In order to uphold the intent of this process and ensure equal access to the same information, CTI and Maine CDC will not engage in verbal discussion of this process with interested applicants. Answers will be provided regarding materials or expectations already been published by US CDC or about processes already known to Maine CDC and CTI; answers will not be provided to questions that are more in the purview of US CDC.

Answers will be provided via email by March 27, 2020, 5:00PM. Please note, in order to receive answers, CTI must receive email contact in order to distribute information.

Applications must be submitted, via email to no later than 5:00PM on April 10, 2020 in order to be considered as part of this process.

All correspondence, including application submission, should be to:
TobaccoPreventionServices@mainehealth.org.

As identified in the NOFO, the grant partner does not need to be identified prior to Maine CDC submitting its application to US CDC. However, CTI anticipates naming the grant partner no later than April 30, 2020 to allow for sufficient planning time prior to formal grant award.

Application:

Interested parties shall submit an application that includes the information articulated below.

Applications are required to be less than three pages, total, with margins no less than one inch, in Times New Roman font of no less than size 11, and with no less than 1.15 spacing. Applications are not required to total three pages, and brevity that allows for conveyance of pertinent details is appreciated. If an application exceeds three pages, any information contained on subsequent pages will not be considered as part of the review process.

Please note that the intent of the application process is not to begin with strategy development. Rather, the process is intended to identify an organization or "local agency" (as described further within the NOFO) that has the historical and current capacity to: partner with both CTI and the Maine CDC as it relates to US CDC expectations; and address the undue burden of tobacco use and exposure within the

LGBTQ community/ities. Much of the information below comes directly from the NOFO, and reviewers will be looking to see how applications align with US CDC expectations both listed here and in the NOFO itself.

- Introduction (5 Points)
 - o Provide an overview of your organization and some of the previous and current efforts of focus.
 - o If there are core values or principals that your organization maintains, please articulate such as well as how these values influence daily operations and / or strategic planning.
- Historical & Current Capacity (15 Points)
 - o Identify experience and capacity undertaking policy, systems and environmental change strategies. If there are examples specific to tobacco prevention and treatment, please ensure to highlight this.
 - o Describe previous instances where your agency was the recipient of federal funds that were the result of a sub-recipient agreement and multiple parties were involved. Discuss mechanisms that have been utilized.
 - o Demonstrate historical experience of successfully working within or serving the LGBTQ communities and articular impact/improvement in at least one social determinants of health.
 - o Discuss how the recipient will recruit and select individuals that understand the unique cultural, gender and identity characteristics of the selected population for an advising group within the first three months to assist with selecting the community.
 - o Identify how communities' members involved in the leadership, staffing or advising roles within the agency.
- Staffing Model (5 Points)
 - o Identify whether there is a current staff member who would fill the anticipated position, or multiple staff. If not, identify the processes and timelines for how a person would be brought on board to support these activities.
 - o Describe how other staff within the organization will support efforts, whether through in-kind contributions or paid.
- Geographic Area that will be served (5 Points, specific to the third bullet)
 - o Please identify the geographic service area that you anticipate you propose to serve.
 - o Maine CDC and CTI are open to any geographically defined area within Maine for this particular effort, but – in alignment with MPS efforts – efforts should be at no less than a County level and preferably at the Public Health District, or Districts, level.
 - o Applicants must explain the reasoning for selecting this particular geographic area.
- Data (5 Points)
 - o Identify data collection processes that have considered the health and health risk behaviors of the LGBTQ population in the identified area. If none are available, indicate such.
 - o Indicate your capacity to partner and support data collection processes expected by US CDC.
 - o Based on the population historically served, please identify pertinent data points, including but not limited to:
 - Number of individuals served, as well as the types of services provided
 - Pertinent demographic characteristics of those served, including age, and others deemed appropriate
- Primary Point of Contact, both email and phone (No Points assigned)