

North Carolina Health and Wellness Trust Fund Commission

Teen Tobacco Use Prevention and Cessation Program: Community/School Prevention Program or Special Project

Request for Proposals

CONTENTS:

PURPOSE

BACKGROUND

GENERAL GUIDELINES

THE PROGRAM

GRANT TERMS

APPLICATION PROCESS

Note: This RFP outlines the purpose and background of this initiative and also provides useful resources to which applicants can refer. In order to apply for a grant under this RFP, you are encouraged to complete an online letter of intent and full application available at the Commission's website (www.HWTFC.org). However, if you do not have Internet access, you may contact the Commission office to obtain copies of these forms.

REVIEW CRITERIA FOR APPLICATIONS

DUE DATES AND PROGRAM TIMETABLE

Health and Wellness Trust Fund Commission

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North Carolina Health and Wellness Trust Fund Commission

Teen Tobacco Use Prevention and Cessation Program *Community/Schools Initiative and Special Projects in Teen Tobacco Use Prevention and Cessation*

Request for Proposals

Purpose

The Health and Wellness Trust Fund Commission (“Commission”) announces the availability of grant funding for July 1, 2004 through June 30, 2006 to expand and enhance the statewide effort to prevent and reduce teen tobacco use. Funds will be provided to local community agencies, schools, state agencies, local government or other political subdivisions of the state and nonprofit organizations for initiatives that seek to:

- Prevent youth initiation of tobacco use,
- Eliminate youth exposure to secondhand tobacco smoke,
- Provide treatment options for teens who want to quit, and
- Eliminate health disparities among minority youth attributable to tobacco use.

These goals are linked to a document entitled: *Vision 2010: Comprehensive Plan to Prevent and Reduce the Health Effects of Tobacco Use*, published by NC Tobacco Prevention and Control Branch (TPCB), NC Department of Health and Human Services. This document is available on the web at www.communityhealth.dhhs.state.nc.us. This plan established community and school-based initiatives as a cornerstone of an effective effort to prevent and reduce the negative health effects of tobacco use, with an emphasis on evidence-based policy interventions.

Background

Tobacco use is the number one preventable cause of premature death and disease in North Carolina and the nation (U.S. Department of Health and Human Services, 2000). Tobacco use contributes to more than 15,000 deaths annually among adults in North Carolina (NC Department of Health and Human Services, 2001). While cigarette smoking among adults declined between 1965 and 1990, tobacco use by youth increased in the 1990s, and only recently experienced a slight decline (NC Department of Health and Human Services and NC Department of Public Instruction, NC Youth Risk Behavioral Survey (NC YRBS) and NC Youth Tobacco Survey (NC YTS, 2001). More startling, the Centers for Disease Control and Prevention (CDC) has clearly documented that among adults who have ever smoked daily, over 90% of first-tobacco use occurs prior to age 20. The average age of initiation for tobacco use is 13.

The NC YTS, conducted in the fall of 2001, shows that 35.8% of high school students and 17.4% of middle school students currently use a tobacco product (cigarettes, spit tobacco, cigars or pipes). Tobacco use increases by grade level: 11.0% of 6th graders compared to 44.6% of 12th graders report to be current tobacco users. Susceptibility to smoking also increases with age:

23.3% of middle school students and 25.8% of high school students were determined by survey response to be more susceptible to initiation of tobacco use.

General Guidelines

- Grant applicants are encouraged to consider adapting existing program models, where feasible, and to consider incorporating strategies from the evidence-based tobacco prevention and control interventions detailed in the Guide to Community Preventive Services, (see www.thecommunityguide.org/tobacco) and the Centers for Disease Control and Prevention (CDC) *Best Practices for Comprehensive Tobacco Control Programs*, (<http://www.cdc.gov/tobacco/bestprac.htm>). Applicants should also consider addressing the Healthy People 2010 risk reduction objectives with regard to tobacco use (<http://www.health.gov/healthypeople/default.htm>). A list of related websites is provided below as a resource for reviewing pertinent information.

National:

- www.thecommunityguide.org/tobacco
- www.tobaccofreekids.org
- www.cdc.gov/tobacco
- www.tobacco.neu.edu
- www.tobacco.who.int
- www.cdc.gov/tobaccosgrp.htm
- www.epa.gov/iaq/ets
- www.nci.nih.gov
- www.ama-assn.org/smokelessstates
- www.lungusa.org/tobacco
- www.phs.bgsu.edu/sshp/rwj/rwj.htm
- <http://www.cancer.org>

North Carolina:

- www.realityunfiltered.com
- www.stepupnc.com
- www.expeltobacco.com
- www.communityhealth.dhhs.state.nc.us (Includes the Tobacco Prevention and Control Branch)
- www.nchealthyschools.org
- www.nchealthaction.org
- www.ncpreventionpartners.org

The Program

Who May Apply

Under the NC General Statutes, an organization is eligible to receive a grant from the Commission if it fits into any of the following categories:

- A state agency,
- A local government or other political subdivision of the state or a combination of such entities (includes local education agency and/or public charter schools), and
- A nonprofit organization which has as a significant purpose promoting the public's health, limiting youth access to tobacco products, or reducing the health consequences of tobacco use (includes any nonprofit organization interested in preventing and reducing teen tobacco use).

Other entities interested in reducing use of tobacco products may apply in partnership with an eligible organization, which is functioning as the lead applicant for the grant. This lead applicant bears responsibility for fiscal and overall management.

Objectives and Initiatives of the Community/Schools Initiative and Special Projects in Teen Tobacco Use Prevention and Cessation

The Community/Schools Initiative and Special Projects in Teen Tobacco Use Prevention and Cessation will consider grants from applicants for the following purposes:

- **Initiate new community/school partnerships and collaborations.** It is anticipated that grants will be awarded to applicants that are structured as follows:
 - Lead Applicant Organization: Typically, a public health organization or local education agency or public charter school, this entity bears the responsibility for overall program and fiscal management.
 - Application Partnership: This is a formal agreement among community-based organizations, including the lead applicant, to implement the proposed program. These organizations are listed as co-applicants, and could include public health organizations, local education agencies, public charter schools, youth organizations, voluntary agencies, non-profits, faith communities, and substance abuse programs, among others.
 - Collaborating Organizations/Individuals: The Commission encourages the broadest possible coalition building among diverse organizations, dedicated to achieving the goals of this Initiative. Collaborating entities may include, but are not limited to, community organizations and individuals such as health care providers, concerned volunteers, and parents who are committed participants in the proposed program. These entities are **not** listed as co-applicants.
- **Build on existing Community and/or School partnerships and collaborations.** Funds will also be available to organizations currently conducting tobacco use prevention activities, including existing HWTF funded Community/School Partnerships for enhancement of those activities. It is anticipated that most of these enhancement grants will be awarded to applicants that are structured as described above. Applicants that

currently operate independently are strongly encouraged to seek community partners as well as collaborating organizations and individuals.

- **Special Opportunities Projects in Teen Tobacco Use Prevention and Cessation.** Funds will be available for statewide, regional or local projects that fill gaps and build capacity for evidence based and innovative intervention strategies and expand networks actively pursuing teen tobacco prevention and control efforts, especially for population groups that experience higher than average rates of tobacco use or exposure to secondhand smoke (i.e. youth service industry workers). Applications will be sought for (but not limited to) the following areas where there are clear needs and demands for resources:
 - Spit Tobacco Prevention, Education and Control interventions and networks for communities and schools;
 - Policy analysis and development in teen tobacco prevention and control;
 - Statewide or Regional Networks in teen tobacco prevention and control to enhance tobacco prevention and control through collaborations of statewide or regional entities (e.g. collaborations of regional local health departments and community based agencies, colleges, faith-based communities, businesses that cater to teens) to add needed infrastructure and evidence-based interventions for teen tobacco prevention and control;
 - Special Innovations in teen tobacco use prevention, cessation and control. These projects are testing new intervention strategies in one or more of the four goal areas and must be accompanied by a strong evaluation component (e.g. greater than 10% of the budget must be spent to test and evaluate the strategy).

- **Special Projects to reach minority populations or other populations identified with tobacco-related disparities**
 - Funds will be available for statewide (including existing HWTFC funded Priority Population Grantees), regional or local projects that fill gaps, enhance and build capacity for evidence based intervention strategies to reach minority population groups and populations that experience higher than average rates of tobacco use or exposure to secondhand smoke (i.e., youth service industry workers, etc). Applications will be sought, but not limited to faith based initiatives in teen tobacco prevention and control; statewide or regional networks in teen tobacco prevention and control; and special innovations in teen tobacco use prevention, cessation and control to reach diverse populations. Innovative projects that are testing new intervention strategies to reach minority teens must be accompanied by a rigorous evaluation component (e.g. greater than 10% of the budget must be spent to test and evaluate the strategy).

Goals and Strategies: The Commission is most interested in funding intervention strategies that are known to be effective. Each Community/Schools Prevention Program Grant and Special Projects Grant recipient must use the funds to carry out activities that support the four goals and objectives listed below. The strategies listed below each goal/objective are proven to be successful and serve as guidance to grant applicants. Applications should be based on identified needs of their local area or region. The Commission does not require that a grant applicant address each goal area listed below, however the Commission strongly encourages community and school grantees to carry out strategies and activities that support a more comprehensive approach. Special Projects grantees work may be more focused in one goal area, but model

programs should be designed to test broader applicability. The Commission encourages grantees to integrate strategies and activities when possible in order to impact each of the goal areas. Proposed funding must be commensurate with the size and scope of the proposed project.

GOAL 1: PREVENT YOUTH INITIATION OF TOBACCO USE

OVERALL OBJECTIVES:

- A. Increase the proportion of young people in middle school and high school that have never smoked**
- B. Increase the proportion of school districts that are 100% tobacco-free for all students, staff and visitors on all school property at all times** (the model 100% tobacco-free school policy prohibits tobacco use for students, staff and visitors on all school property at all times in their local education agency).

Strategies:

1. Empower youth to function as advocates for evidence-based tobacco use prevention programs and policies.
2. Promote effective tobacco use prevention policies in schools and communities.
3. Empower youth and adult role models to advocate for 100% tobacco-free schools.
4. Work in concert with HWTFC media team to generate pro-health media coverage, both to stimulate and publicize youth-led interventions.
5. Raise awareness of the dangers associated with tobacco advertising that is targeted towards youth.
6. Assure a comprehensive approach to tobacco use prevention in middle schools, high schools and colleges, including community colleges.
7. Promote and support law enforcement efforts to reduce youth access to tobacco products.
8. Work with the HWTFC media team to place advertisements aimed at reduced teen tobacco initiation.

GOAL 2: SIGNIFICANTLY REDUCE YOUTH EXPOSURE TO SECONDHAND SMOKE

OVERALL OBJECTIVES:

- A. Increase the proportion of school districts that are 100% tobacco-free for all students, staff and visitors on all school property at all times.** (*Note: This objective is listed again because of its impact under both Goal 1 and Goal 2).*
- B. Increase smoke-free policies in both indoor and outdoor areas frequented by youth, such as: restaurants, recreation facilities, bowling alleys, malls, movie theaters, homes, parks, amusement areas, college dorms and facilities, sports venues and ball fields.**

Strategies:

1. Educate the public and decisionmakers on the health hazards of secondhand smoke, especially exposure of children and adolescents in their homes, schools and community settlements including asthma-related health risks.
2. Work with HWTFC media team to place effective educational advertisements on the dangers of secondhand smoke.
3. Develop smoke free policies for both indoor and outdoor areas frequented by youth.
4. Earn pro-health news media coverage, including editorials, for youth programs and policies that reduce secondhand smoke.
5. Raise public awareness in underserved racial, ethnic, age and income groups that are more adversely affected by secondhand smoke.

GOAL 3: PROVIDE TREATMENT OPTIONS FOR YOUTH WHO WANT TO QUIT

OVERALL OBJECTIVES:

- A. Increase the number of middle and high school students who have access to effective tobacco use cessation resources.**
- B. Increase students and/or youth enrollment in cessation programs.**
- C. Increase the number of quit attempts by youth.**
- D. Increase the number of quit attempts by pregnant teens.**

Strategies:

Note: This is an arena where there are limits to data on what is evidence based. Special Innovations projects are particularly applicable.

1. Promote and provide access to effective cessation and treatment options,
2. Promote the national Quitlines of the National Cancer Institute (NCI) 1-877-44-UQUIT to teens/young people and the people who influence teens such as parents and teachers; promote the American Legacy Foundation (ALF) for pregnant teens/young people and their partners through 1-866-667-8278. Promote the web-based QuitNet and promote the Not-on-Tobacco (N-O-T) teen cessation program and the new N-O-T website in schools and community settings (Note: *The N-O-T program is funded and provided by separate Commission funding*).
3. Promote tobacco use cessation resources available at NCI and ALF websites that have instant messaging counseling available at NCI site that will appeal to youth.
4. Study programs that empower youth as peer counselors for cessation.
5. Work with HWTFC media team to earn pro-health news media coverage and editorials promoting cessation among youth and their families as role models.
6. Provide training and technical assistance for pediatricians and medical/dental offices to prioritize effective cessation and treatment options.
7. Support voluntary initiatives from private and public insurers to expand coverage for smoking cessation/treatment benefits.
8. Work with the HWTFC media team to place advertisements aimed at increasing awareness to teen cessation opportunities.

GOAL 4: ELIMINATE TOBACCO ATTRIBUTED HEALTH DISPARITIES AMONG MINORITY (AFRICAN AMERICANS, HISPANIC/LATINOS AND NATIVE AMERICANS) OR OTHER YOUTH POPULATIONS IDENTIFIED WITH TOBACCO-RELATED DISPARITIES.

PLEASE NOTE: CDC defines Disparity as a disproportionate health burden compared to the US population as a whole. The NC TPCB defines disparity for this program as a disproportionate burden from the health consequences of tobacco use compared with the NC population as a whole. This grant Process seeks applicants to work toward “Parity” – the state or condition of being the same in health burden - by bringing the most at risk groups to a level of risk equal to the lowest risk groups. In practical terms this application seeks to decrease tobacco use prevalence for the groups with the highest rates of smoking, tobacco use and exposure to secondhand smoke and increase cessation for the groups with the lowest quit rates. This requires involving minority and disparate populations (in proportion to their population in the state, region or community) in planning, decision-making and by providing proportionate access to resources.

OVERALL OBJECTIVES

- A. **Increase the proportion of minority/disparate middle school and high school students who make tobacco use quit attempts.**
- B. **Increase the proportion of minority/disparate middle school and high school students who are educated as to the health consequences of tobacco use and the benefits of quitting, and who have access to effective tobacco use cessation resources.**
- C. **Increase the proportion of minority/disparate pregnant teens who make tobacco use quit attempts, who are educated as to the health consequences of tobacco use during pregnancy and who have access to effective cessation resources.**
- D. **Decrease the proportion of minority/disparate middle school and high school students who smoke cigarettes.**
- E. **Decrease the proportion of minority/disparate middle school and high school students who are exposed to secondhand smoke.**

Strategies:

1. Increase diversity of youth leaders, community groups and organizations representing underserved populations actively involved at the local level in prevention of teen tobacco use such that they are proportionate to the overall population in the school/community.
2. Increase the number of schools with large minority or rural populations that adopt a 100% tobacco-free school policy (the model 100% tobacco-free school policy prohibits tobacco use for students, staff and visitors on all school property at all times in their local education agency).
3. Train diverse youth as peer counselors.
4. Work with the HWTF Media team to develop culturally appropriate campaigns to promote smoke free policies for both indoor and outdoor areas frequented by youth (diverse environments i.e. restaurants, bowling centers, grocery stores, homes).
5. Develop culturally appropriate youth leadership models such as UJIMA, a youth-led and adult supported African American model tobacco use prevention program to reach youth. The UJIMA program was developed through the African American Action Team of the Tobacco Prevention and Control Branch. (more information on UJIMA is provided at www.stepupnc.com).
6. Emphasize the influence of adult role models on the initiation of tobacco use among ethnic communities.
7. Promote and provide culturally appropriate cessation programs.
8. Promote tobacco use prevention efforts through pro-health media coverage aimed at specific disparate populations.
9. Work in conjunction with the HWTF Evaluation Team and Office of Minority Health/Health Disparities (OMHHD) to identify groups and evaluate efforts.
10. Provide training and technical assistance to youth leaders, community groups and organizations representing underserved populations for tobacco use cessation counseling.

Grant Terms

The Commission will award grants to new local programs or to enhance existing local programs. The local Grant awards will mainly range annually from **\$65,000- \$100,000**, however large population counties, multi-county collaborations and special projects can apply for funding beyond that range with strong justification. Project funding will be commensurate with the size and scope of the proposed activities. **Subject to availability of funds, and further subject to**

annual satisfactory program evaluation and continuation plans, the awards will be for July 1, 2004 through June 30, 2006.

Grants will be disbursed as follows: up to three months startup funding at the beginning of the funding cycle, followed by an equal monthly advance, beginning with month two. These monthly advances will be triggered by submission of monthly reports detailing expenditures incurred in the previous month.

The Commission expects to receive more funding requests than can be awarded. Therefore, submission of a grant application does not guarantee receipt of an award. Additionally, grants that are funded may not be funded at their requested amount. The grant size may vary by circumstances, need and program model. The Commission reserves the right to conduct pre-award interviews or on-site assessments.

As a condition of receiving a program grant award, the Commission requires that each grantee participate in a state-level outcomes study as well as a monthly activity tracking system called Program Tracking System or PTS. Applicants should include 4-5 hours/month of staff time for the program activity tracking system and 7-8 hours/month of staff time for the state-level outcomes study. Additional local evaluation efforts are permitted but need to be justified.

The Tobacco Prevention and Control Branch (TPCB) will collaborate with the UNC School of Family Medicine, as the HWTFC Outcomes Evaluation Contractor, to provide training and technical assistance in the proper use of the computer-based activity tracking system and in submitting the information for central data processing. As part of the state-level outcomes study, the UNC School of Family Medicine may require specific reports or information, make periodic site visits and may conduct telephone interviews, as needed, to document program implementation and operation.

Applicants are also required to submit both an interim (6-month) and an annual progress and financial report to the Commission (user-friendly forms will be available on the Commission's website). A final cumulative progress report and financial report will be due 30 days after the end of the grant period.

To avoid any real conflict of interest or perceived conflict of interest with tobacco manufacturing and related entities, grant recipients must not currently accept any grants or anything of value from any tobacco manufacturer, distributor, or other tobacco-related entities. The only exception is when these grant funds or items of value are totally for NON-tobacco related purposes and do not present any danger of either promotion or use of tobacco products, or otherwise conflict with policies and programs known to prevent and reduce teen tobacco use.

Use of Grant Funds

Funds may be used for planning, staff salaries, project-related travel, supplies, a limited amount of equipment, and other direct expenses essential to the project. The Commission anticipates that one Full-Time Employee (FTE) of dedicated staff will be needed for most funded programs and should be accounted for either in the proposed budget or as an in-kind contribution.

Applicants may subcontract for proposed services after notice to the Commission. The special project funds may be used for research/demonstration studies, if the research is directly linked back to teen tobacco use program evaluation purposes and dissemination. The Commission discourages the use of grant funds to pay indirect costs. Any allocated funds that are used to pay

indirect costs must be clearly identified along with justification for the expense. Indirect costs include operating and maintaining buildings, grounds, and equipment; depreciation; administrative salaries; general telephone expenses; general travel; and general office supplies. Also, Commission funds may **not** be used for capital expenditures or equipment expenses over \$3,000 per unit. Computers, including laptops, are an acceptable expenditure with justification. Commission funds may not support any efforts to engage in any political activities or lobbying including, but not limited to, support of or opposition to candidates, ballot initiatives, referenda, or other similar activities. These funds may not be for research studies, unless this research is directly linked to evaluation purposes, or to substitute for funds currently supporting similar services.

Funds used to promote the programs and policies through paid or earned media **MUST** be planned and implemented in concert with the HWTFC media team and carrying the HWTFC name, logo and brand. The HWTFC Teen Tobacco Prevention Campaign is branded "Tobacco.Reality.Unfiltered" or T.R.U. All developed media pieces aimed at changing teen tobacco behavior, programs or policy change should fit as part of the T.R.U. campaign and carry the Brand. Information on T.R.U. can be found at: www.realityunfiltered.com.

Auditing and Reporting Requirements

All grantees are required to comply with G.S. 143-6.1. Complete details are available at www.ncauditor.net. In general this state law requires that all grant recipients that are nongovernmental entities and receive at least \$15,000 but less than \$300,000 in combined state funds annually, must file with each of the funding entities, a sworn accounting of receipts and expenditures of these funds. All grant recipients that are nongovernmental entities and receive \$300,000 or more in combined state funds annually, must file with the State Auditor and the funding entities an audited financial statement as prescribed by the State Auditor.

A single audit is required if a unit of government or public authority expends \$300,000 or more of combined state awards in either a federal program (such as a state match) or a state program. Nongovernmental entities are not required to perform a single audit; based only on state awards expenditures.

Application Process

The Commission has established an online application process for awarding funds under this Initiative. All applicants must submit a complete written application in order to be considered. Questions concerning application preparation should be submitted electronically or in writing to the Commission. Conference calls will be held in mid-March 2004 to answer any questions that applicants have in developing their proposals (please see timetable below for dates) as necessary.

Applicants are strongly encouraged to use the online capabilities found at www.hwtfc.org for submitting applications; however, written applications will be accepted through the mail as well. Please contact the Commission to receive an application by mail. Mailed applications should contain three sets - an original plus two copies – to be mailed to the Commission. Faxed copies will not be accepted. All mailed proposals must be typed or printed in ink in 12-point type on 8 1/2" by 11" white or light colored paper. To the extent possible, applicants applying my mail

should also provide an electronic copy in a format such as a formatted diskette or via e-mail using Microsoft Word.

Note: The Commission does not guarantee that any additional materials included as appendices will be considered in the review process.

The complete application should include the following sections:

- I. **The Applicant Organization:** Names, Addresses, and Contacts of the Applicant and Partners as required
- II. **Proposal Summary**
Briefly summarize: the applicant organization, what your organizations views as the goals and objectives of the proposed project, and a description of how you propose to achieve those goals and objectives. Include the amount of funds requested.
- III. **Description of Need for Establishing a New Program, for Enhancement of Existing Program, or for Special Project:** *(More information is available from the Tobacco Prevention and Control Branch at www.communityhealth.dhhs.state.nc.us or at the Centers for Disease Control and Prevention (CDC) at www.cdc.gov/tobacco).*
- IV. **Proposed Program Plan:** The Applicant will answer a series of questions about:
 - A. Program Goals and Objectives
 - B. Evidence-based Programs
 - C. Target Audience Involvement
 - D. History of Program Outcomes
- V. **Organizational Capacity:** The Applicant will answer a series of questions about:
 - A. Overview of the Lead Applicant Organization
 - B. Staffing for the Grant
 - C. Evidence of Organizational Experience
 - D. Partnerships and Collaborations
 - E. Media Collaboration and Support
 - F. Youth Involvement and Collaboration
- VI. **Outcomes and Evaluation Plan:** Local evaluation and Progress Tracking System information as required.
- VII. **Proposed Budget and Fiscal Information:** Submit a proposed program budget in the form found on the online application or distributed by HWTF. Include line-item budgets with narratives to support the line items.

Budget Note: *Program grantees are required to include Training and Development expenses in the Annual Budget Section of the proposal. Grantees are required to attend all regional and Statewide Tobacco Prevention and Control Coalition meetings including: New Grantee Kickoff event, Local Coalition Coordinator meetings, Youth Summits/Institutes, ?Y Training Events and other State TPCB Training Events. A minimum of \$1,500 per individual (up to three) attending these events should be included to support expenses for all of the trainings listed above.*

In addition, grantees may choose to budget an additional \$1,800 per individual (up to two) to attend the annual national tobacco control conference or regional tobacco use prevention and cessation training.

VI. Additional Materials – to be sent by mail or email:

1. Letters of Agreement (consent) from all partnering entities
2. At least three (3) Letters of Support from collaborating individuals or organizations
3. In addition to the letters of support, applicants are also encouraged to submit letters of commitment from local media outlets reflecting the outlet’s pledge to provide free media in a specific formula to match any media paid for out of Commission funds, and in case of existing programs, evidence of media support in prior efforts
4. Evidence of non-profit governmental status>VITitle and Certification Form: This is part of the application form. Please sign and mail to the Commission.

Review Criteria for Applications

Applications submitted in response to this RFP will be evaluated and ranked by an objective review panel of Commission members based on advice from Commission staff and outside experts. The Commission will consider how many will be served by the grant, the cost of administering the grant, community capacity building, sustainability of the grant, whether the grant has measurable outcomes, and the existence of teen tobacco cessation activities in the area. Proposals will be evaluated based upon the following criteria:

- **Description of Need for Establishing a New Program, for Enhancement of Existing Program, or for Special Project: 10% of Total Score**
- **Proposed Program Plan: 45% of Total Score**
- **Organizational Capacity: 25% of Total Score**
- **Outcomes and Evaluation Plan: 10% of Total Score**
- **Proposed Budget and Fiscal Information: 10% of Total Score**

Due Dates and Program Timeline

March 5, 2004	RFP announcement
March 18 and 19, 2004 3:30-5:00 PM	Technical Assistance conference calls for grant applicants Pre-registration required: contact Sherry Heuser at sherry.heuser@ncmail.net Email questions regarding the RFP to hwtfc@ncmail.net
March 31, 2004	APPLICATIONS DUE
March 31 - April 16, 2004	Proposal Review Process

Week of April 26, 2004	Presentation of recommendations to the Health and Wellness Trust Fund Commission
Week of May 3, 2004	Awards announced