

# Uniform Notice for Funding Opportunity (NOFO)

## Summary Information

Hover over the Data Field or Section Heading for Instructions.

	Data Field	
1.	Awarding Agency Name:	/ũŝŶŽŖ ĞĐǺđ+ŵĞŶ† ŽĨ WZdŭŝĐ , ĞǺŭ†Ś
2.	Agency Contact:	Gail DeVito 217-785-1054
3.	Announcement Type:	<input checked="" type="checkbox"/> Initial announcement <input type="checkbox"/> Modification of a previous announcement
4.	Type of Assistance Instrument:	Grant
5.	Funding Opportunity Number:	
6.	Funding Opportunity Title:	Illinois Tobacco-Free Communities
7.	CSFA Number:	482-00-0911
8.	CSFA Popular Name:	Illinois Tobacco-Free Communities (ITFC)
9.	CFDA Number(s):	
10.	Anticipated Number of Awards:	66
11.	Estimated Total Program Funding:	\$3,665,595
12.	Announcement	

## Agency-specific Content for the Notice of Funding Opportunity

Click on the Section Heading to view the full instructions.

Click on the minimize icon in the upper right corner to close the instructions box, once reviewed.

### A. Program Description

The purpose of this grant is to provide funding to certified local health departments to implement strategies and activities to advance tobacco prevention and control within their jurisdictions. Under the Illinois Tobacco-Free Communities (ITFC) Program, local tobacco prevention and control programs will implement science-based, policy-focused strategies aligned with State and national goals and objectives to 1) prevent tobacco use among youth; 2) promote tobacco use cessation among adults and youth; 3) eliminate exposure to secondhand smoke; 3) eliminate exposure to secondhand smoke; and 4) identify and eliminate tobacco-related health disparities among specific population groups. Applicants will propose objectives, strategies and activities that adhere to the Centers for Disease Control and Prevention (CDC), Office on Smoking and Health, *Best Practices for Comprehensive Tobacco Control Programs (2014)*. The program consists of a required core project area and four grant enhancement project areas. Under the core project area, all grantees must implement strategies for enforcement and promotion of the Smoke-Free Illinois Act (SFIA), or a comparable local ordinance. Grant enhancement project areas, which are selected based on funding level and local needs, include development and implementation of a tobacco control media plan targeting high risk populations in the jurisdiction, tobacco cessation with referral partner healthcare and community-based organizations, youth tobacco prevention (social norms marketing campaign), and tobacco prevention and control policies.

## C. Eligibility Information

State-certified local health departments are the only organizations eligible for this grant funding opportunity. Potential grantees may apply for this grant but will not be eligible for a grant award until they are pre-qualified through the Grant Accountability and Transparency Act (GATA) Grantee portal, [www.grants.illinois.gov](http://www.grants.illinois.gov). During pre-qualification, Dun and Bradstreet verifications are performed including a check of Debarred and Suspended status and good standing with the Secretary of State. The pre-qualification process also includes a financial and administrative risk assessment utilizing an Internal Controls Questionnaire. If applicable, the entity will be notified that it is ineligible for award.

### 1. *Eligible Applicants*

State-certified local health departments are the only organizations eligible for this grant funding opportunity.

## **D. Application and Submission Information**

### **1. *Address to Request Application Package***

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at [idphgrants.com](http://idphgrants.com).

Since high-speed internet access is not yet universally available for downloading documents or accessing the electronic application, and applicants may have additional accessibility requirements, applicants may request paper copies of materials by contacting:

Gail DeVito  
Tobacco Prevention and Control Program  
Illinois Department of Public Health  
535 W. Jefferson Street  
Springfield, IL 62761  
217-795-1054 (Phone)

### **2. *Content and Form of Application Submission***

Applications should be submitted electronically through EGrAMS.

Work under this funding opportunity will occur between July 1, 2016 and June 30, 2017. Applicant must submit an Implementation Plan on forms available in EGrAMS that describes how the award will be executed. The Implementation Plan should include necessary detail to enable the agency to manage the grant agreement activity against planned project performance.

**4. *Submission Dates and Times***

September 2, 2016 at 5:00 p.m. Central Standard Time through EGrAMS. Late submissions will not be accepted for review.

**5. *Intergovernmental Review, if applicable***

N/A

**6. *Funding Restrictions***

**Use of Funds.** All grant funds must be used for the sole purposes set forth in the grant proposal and application and must be used in compliance with all applicable laws. Grant funds may not be used as matching funds for any other grant program. Use of grant funds for prohibited purposes may result in loss of grant award and/or place the grantee at risk for recouping of those funds used for the prohibited purpose.

Expenditure reports must be submitted quarterly. To be reimbursable under the Department/Office of Health Promotion Grant Agreement, expenditures must meet the following general criteria:

## E. Application Review Information

Applications will be reviewed by the IDPH tobacco control program application review committee.

### **1. *Criteria***

This grant is non-competitive. Application review and approval will be completed by the IDPH tobacco control program review committee based on prior grant guidelines, timely submission of reports and fiscal monitoring.

Grant application will be reviewed for adherence to ITFC grant application guidelines, budget preparation instructions, and requirements for core and grant enhancement Implementation Plan proposals by funding level.

## **F. Award Administration Information**

### **1. *State Award Notices***

Funds awarded to successful applicants will be provided on a reimbursement basis. The grantee will document actual expenditures incurred for conducting program activities. The grantee will submit the IDPH Reimbursement Certification Form. After IDPH review and approval of program expenditures, a voucher will be prepared and processed through the Office of the State Comptroller for payment. Reimbursement requests must be submitted quarterly. The final reimbursement must be received by IDPH within 30 days after the close of the grant period (Friday July 29, 2017).

### **2. *Administrative and National Policy Requirements***

N/A

### **G. State Awarding Agency Contact(s)**

Questions about this funding opportunity may be directed to:

Gail DeVito  
Tobacco Prevention and Control Program  
Illinois Department of Public Health  
535 W. Jefferson Street, 2nd Floor  
Springfield, IL 62761

217-785-1054 (Phone)  
217-785-1235 (Fax)  
E-mail: [Gail.DeVito@illinois.gov](mailto:Gail.DeVito@illinois.gov)

### **H. Other Information, if applicable**

The State of Illinois is not obligated to make any State award as a result of the announcement.

The grantee is required to attend a new grant year kick-off meeting, quarterly program review meetings, as well as any ad hoc meetings scheduled by IDPH when necessary to review the status of specific activities and/or performance measures. In addition, to the extent possible, grantees are encouraged to participate in cross-collaboration, stakeholder engagement, and other programmatic meetings that directly relate to the activities outlined in the grant herein.



## **Mandatory Forms -- Required for All Agencies**

- 1. Uniform State Grant Application – Available at [idphgrants.com](http://idphgrants.com) for eligible applicants  
New to EGrAMS, click [HERE](#) to see how to Get Started**
- 2. Project Narrative (included in EGrAMS application)**
- 3. Budget (included in EGrAMS application)**
- 4. Budget Narrative (included in EGrAMS application)**

Other program-specific mandatory forms:

Applicants must complete Implementation Plan Worksheets for the core project area and grant enhancement project areas selected by the applicant in accordance with the grant application guidelines; Appendix A, List of Subcontractors; and Appendix B, Personnel and Duties List.