

**Napa County
Tobacco Master Settlement Agreement (MSA) & General Fund
Grant Application Criteria for Fiscal Year 2022-2023**

Application Cover Sheet

Organization Information (please write/type above the line)

_____ Name	_____ Contact Name
_____ Address	_____ Contact Phone Number
_____ Fax Number	_____ Contact Email

Proposal Overview

Program/Service Title	
Brief Description	

Proposal Funding

Total FUNDING Request	\$
Total PROPOSAL Budget	\$
Total AGENCY Budget	\$
Does your proposal contemplate an existing program or service or is this new? (Please indicate "existing" or "new")	
If this is existing, does Napa County already provide funding for this program or service? If so, please provide the amount awarded <u>and</u> the agreement number; include all funding, not only MSA	

Organization Signature

By signing below, the applicant confirms that they have the authority to submit this application on behalf of the applying organization and that the organization meets all minimum qualifications, including the grant policy criteria, and that all other statements and material submitted as part of this application are true and accurate.

_____ Applicant Printed Name & Title	_____ Applicant Signature	_____ Date
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Overview

Napa County intends to award Tobacco Master Settlement Agreement (MSA) Funds and General Funds that potentially span up to a three-year grant period for programs and services that are intentionally responsive to our community’s needs and are impactful. Proposals for innovative, creative, and flexible programs or services that are *otherwise* financially sustainable in the future and support community priorities within the specific areas of food insecurity, housing instability, behavioral healthcare, and physical healthcare for vulnerable populations (older adults, those with pre-existing health conditions, and those who otherwise lack access to critical services) are the allowable areas for this grant.

Award Amounts

The total funding the County Board of Supervisors is making available during this three-year period (Fiscal Years 22-23, 23-24, and 24-25) is \$6.3 million dollars with \$2.1M being allocated per fiscal year (\$1.1M per year in MSA funds and \$1.0M per year in General Funds for a total of \$2.1M) for this competitive grant award process. Grant awards may be requested for one-year, two-year, or three-year terms; if more than one year, the multi-year agreements will be annual agreements with automatic renewal provisions.

To ensure funding availability exists for subsequent years while also allowing for significant stable investments over time, the County plans to strike a balance of single year grant awards (a minimum of 30% of the total funds available) and multi-year grant awards (up to a maximum of 70% of the total funds available). To support the creation of significant proposals, no cap or maximum will be set for proposals or organizations with the expectation that significant requests be well-supported both programmatically and fiscally. If a lesser term and/or a lower amount than requested is awarded, budgets will be accordingly adjusted downward. Up to 10% of the funds awarded may be used for indirect administrative costs.

Submissions that do not adhere to the requirements set forth in this application will not be considered.

Eligible Applicants/Minimum Qualifications

Please initial to certify that your organization meets each of the following minimum qualifications:

Initials	Minimum Qualifications
	a) Applicants must be a legally formed local non-profit organization exempt from State and Federal taxation. Upon request, non-profit applicants must submit a copy of the ruling or final determination letter from the IRS regarding non-profit status.
	b) To be eligible to apply for these grant funds, applicants must not be excluded, suspended, debarred, or otherwise ineligible to participate in the Federal Health Care Programs. However, applicants are eligible to apply for these grant funds if they have been reinstated to participate in the Federal Health Care Programs after a period of exclusion. Applicants must not have been convicted of a criminal offense related to the provision of health care items or services.
	c) All applicants must have a Napa County mailing address and be a current provider of services in Napa County.
	d) Applicants must: 1) Comply with all applicable federal, state, and local regulations regarding smoking in the workplace; 2) Have a policy relating to the use of tobacco products by staff and/or volunteers and/or clients; and 3) Have a tobacco use prevention practice incorporated in the proposed program. Upon request, applicants shall provide evidence of such policies and practices.

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	e) All applicants and all grant-funded activities, programs, services, and undertakings must comply with all applicable laws, including those pertaining to civil rights, confidentiality and privacy, regulatory compliance, and, where applicable, employment and housing.
	f) All funding awarded must be used for the provision of services to residents of Napa County.
	g) If applying as a member of a collaborative proposal, all participating providers in a collaborative must be represented in awarded contracts as signatories, each with specified amounts under the contract, and all participating providers must meet all elements of these minimum qualifications.
	h) Applicants must acknowledge receipt of these grant funds from Napa County in any publication or marketing about the program/service.

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Proposal Narrative

Please submit electronically to msa@countyofnapa.org using 12-point Arial or Times New Roman font, single-spaced and 1-inch margins, **no more than 3 pages total.**

Focus Areas

Please identify the primary focus area(s) for the program you are proposing in this application (must check one):

- Food Insecurity
- Housing Instability
- Physical Healthcare for Vulnerable Populations
- Behavioral Healthcare

Requested Period Supported by Application (check one box)

- 1 Year 2 Year 3 Year

If your project is supported, but not for the requested period, are you requesting to be considered for a lesser number of years, including 1 year? Yes No

Program/Service Description

Programs will be rated by an Ad Hoc Committee and will be evaluated based upon a clear explanation of the following information both in the application and panel presentation. Applicants are encouraged to be thorough and complete in their written submissions and to include detailed budgets.

- a. Program/Service Alignment: i) explain the program/service being proposed; ii) reference any community-wide strategic plan, community health improvement plan, or other current assessment or data collected that supports the proposed program/service and target population this program/service aims to address; iii) include information that supports the length of period for which you are seeking grant funding; and iv) if this is a program currently funded by MSA, describe any performance challenges you encountered in the first six months of this current fiscal year's grant award (i.e., the information contained in your 6-month report).
- b. Target Population: i) describe the specific population this program/service is targeting; ii) describe the acuity and vulnerability of the target population; and iii) identify the total unduplicated persons anticipated to be served on an annual basis; and iv) estimate the percentage of those served remotely versus in-person given your service model.
- c. Coordination/Continuum of Care: i) explain the extent to which this program coordinates with other existing programs and service providers as part of a continuum (i.e., including referral sources, the coordination/collaboration with other services/providers as part of the service delivery, and the coordination that occur upon completion/discharge), and ii) the connection to Napa County programs/services/target populations.
- d. Financial Sustainability/Leveraging: i) indicate the number of years MSA has been a funding source for this program/service (include the current fiscal year); ii) to maximize impact and sustainability, indicate the extent to which you are leveraging/braiding other funding to support this program/service, including Federal and State funding and be specific about the funding; and iii) provide your organization's assessment of the Federal and State funding opportunities that you anticipate over the next one to three years for this specific program/service, and how these opportunities were considered in the length of time you are requesting grant funds.

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Budget

A budget describing how these grant funds will be used as explained, and budgets that support the proposed program period. The budget must show in line-item detail, as shown on the attached sample budget, the proposed expenditures for the program/service. Up to 10% of the funds awarded may be used for indirect administrative costs. If a collaborative proposal is submitted, each participating organization must submit a separate budget detailing their budget and requested expenditures under the collaborative.

If the program is an existing one, include a copy of the prior year's budget. If the funding requested will be used to fund a portion of a larger program, include a copy of the overall program budget. The budget must also show other funding sources that the applicant has applied for and/or secured for the proposed program during the grant period.

Presentation

Proposal presentations will occur following the submission of applications. Applicants will be invited to present their proposals to the County's review panel who will finalize their funding recommendations after the presentations.

Application Checklist

A complete application should consist of 6 pages and be assembled in the following order:

- Signed Cover Sheet – 1 page
- Minimum Qualifications Verification – 1 page
- Proposal Narrative – 3 pages
- Budget Template – 1 page

To be considered, applications must be submitted electronically by 5pm on April 6, 2022 to msa@countyofnapa.org. Submissions that do not follow the requirements set forth in this application may not be considered by the review panel.