



Louisiana Public Health Institute (LPHI)
Rural Health Partnerships to Address Systemic Inequities and Reduce Tobacco Use
2022 Request for Applications

Overview & Background

Louisiana's Black rural communities are heavily impacted by chronic disease caused by smoking and tobacco use. History shows us that the companies that make and sell tobacco use special marketing tactics to attract African Americans (and young people) to their deadly and addictive products. Policy changes at the state, local, and systems level can positively impact health outcomes and decrease the use of tobacco. Rural Health Clinics play an important role in facilitating systems change interventions that support access to and utilization of tobacco cessation services and, ultimately, impact the health of the communities they serve.

In order to address tobacco health-related disparities in Louisiana, Louisiana Public Health Institute (LPHI) in collaboration with the [Louisiana State University Health Sciences Center's School of Public Health Tobacco Control Initiative \(TCI\)](#), proposes to partner with ten (10) rural communities to implement Project ASIRT (Addressing Systemic Inequities to Reduce Tobacco-use). Through these partnerships, LPHI will plan and implement a 12-month learning collaborative of Rural Health Clinics to assist in adoption of effective and evidence-based practices in tobacco prevention and control for their organization. This is also an opportunity for rural clinics to increase their capacity to provide comprehensive tobacco cessation services to their patients and increase their community partnerships to achieve other community goals.

Project ASIRT is funded through a grant from the [Robert Wood Johnson Foundation](#).

Louisiana Public Health Institute Overview

LPHI is a state-wide community focused non-profit organization committed to ensuring all Louisianans have just and fair opportunities to be healthy and well. We do this by creating authentic partnerships through community engagement, using data and research for action, project design and implementation, policy and advocacy, technology solutions, and providing fiscal and administrative support to community-based organizations. We are headquartered in New Orleans and have staff located in all nine (9) Louisiana Department of Health regions who work on everything from tobacco prevention and control to building healthier communities, to supporting the whole health needs of individuals and families from early childhood to older adults.

Focus of Project

This project seeks to engage local community leaders, organizations, and residents in rural communities to work towards building capacity for grassroots policy change to address systemic inequities and increase the use of traditional and non-traditional tobacco cessation programs for tobacco users who want to quit smoking.

Priority Populations

- African Americans in rural Louisiana
- The ten (10) communities of Ferriday, Jonesville, Lake Providence, Tallulah, Bastrop, Delhi, Opelousas, Kentwood, St. Joseph, Newellton

Eligible organizations and/or entities include Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)

Benefits to participating RHC's and FQHC's will include:

- Increase tobacco cessation services in rural communities
- Strengthen organizational and community capacity and skills to work on any issue to benefit the community
- Increase collaboration through partnerships
- Strengthen referral services to smoking cessation resources such as the state Quitline
- Promote positive change among communities and improve health outcomes
- Reduce tobacco use and tobacco-related health inequities

Project Approach and Activities

ASIRT Learning Collaborative

A learning collaborative is an educational approach where a group of identified stakeholders meet to share ideas, and information and build innovative solutions to address common barriers. Learning collaboratives differ from convenings in that there are a series of sessions that occur in sequence according to the goals and objectives of the project or program. LPHI will host a learning collaborative through which selected Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) will participate in educational sessions and trainings to build upon their current skills regarding tobacco cessation. LPHI, along with the RHCs and FQHCs, will play an important role in conducting systems change interventions and community engagement activities to promote healthy environments and tobacco cessation services. LPHI will provide/offer training opportunities and a forum for peer-to-peer exchange to enhance the following:

- Implement strategies from the Clinical Practice Guidelines for Treating Tobacco Use within rural primary care healthcare settings, which include provisions and

- documentation of screening, treatment, and referral
- Increase knowledge of tobacco prevention and best practices for healthcare providers and communities
- Document lessons learned and contribute to best practices reaching target community/population
- Increase understanding of referral sources for tobacco cessation
- Develop outputs – toolkits, community outreach, educational materials, media messages, task forces, new partnerships, etc.

Technical Assistance

RHC's and FQHC's will participate in monthly technical assistance sessions, provided by TCI, TFL, and other cessation experts to support in project implementation. Technical Assistance will be tailored to the unique needs of each clinic/health center and will be a space to create and follow up on project action plans, identify key staff and partners for project implementation, and to identify solutions to potential project barriers and challenges.

Media Campaign

RHC's and FQHC's will help to develop and utilize existing media resources in the ASIRT digital media toolkit to educate the community on tobacco use and promote cessation service via social media, print ads, palm cards, posters, or other approved marketing channels.

The 12-month grant cycle is from February 1, 2023, to January 31, 2024.

Application and Selection Criteria

LPHI seeks submissions via the [online application form](#). See the Appendix for application questions.

Applications will be evaluated based on:

- Eligibility in accordance with organizational type (RHCs and FQHCs) and population focus: African Americans in the 10 rural Louisiana communities
- Alignment with the goal of the program: to address tobacco health-related disparities in Louisiana's rural communities
- Ability to display the organization's capacity for the successful completion of this grant project and associated activities
- Clear history of working with the community within targeted rural geography
- Demonstrated ability to incorporate clinical practice guidelines and implement them within a quality improvement process
- Ability to participate in virtual meetings and training sessions with the organization's technology and equipment

If selected for this project, RHCs and FQHCs will commit to a 12-month relationship with LPHI and TCI to accomplish/complete the following:

- Complete health center/clinic and provider assessments and help facilitate patient health assessments and tobacco cessation clinical health assessment
- Create a 3- year work plan to implement a comprehensive clinical workflow for tobacco treatment
- Participate in educational sessions and trainings via the virtual learning collaborative
- Participate in monthly technical assistance calls to implement phase 1 of the 3- year work plan
- Embed tobacco use screening and treatment and/or referral fields into existing electronic health records (EHR) systems
- Communicate and promote any tobacco cessation services offered by the health provider throughout the community
- Connect patients, other community members and leaders/key decision-makers to this project
- Develop a referral relationship between rural health centers and community-based organizations to support clients in quitting tobacco
- Collaborate on the development of a community-centered tobacco cessation program
- Maintain reporting and budgeting processes

Other Required Documents

The required document listed below must be submitted with the application.

- If organization is a 501c3, please provide copy of the IRS letter.
- If organization is a Rural Health Clinic, please provide copy of the certification from the National Association of Rural Health Clinics or Louisiana Department of Health.

Monitoring and Evaluation

LPHI has identified clear outcomes for the proposed project, as well as a plan to measure effectiveness and evaluate impacts. Organizations will be required to submit the following:

- Standardized progress report detailing project activities and accomplishments
- A six-month and final financial report
- Comprehensive twelve (12) month final project and finance report

LPHI will provide reporting templates for the required Progress Reports and Financial Reports.

Grant Funds

Grants will be made in the amount of up to \$10,000.00 US Dollars. The funds will be distributed to the selected organization in the following installments based on completed deliverables.

Payments will be made in 2 installments of up to \$5,000 each. The first payment will be issued within thirty (30) days after full execution of the grant agreement and completion of clinical and provide assessment. The final payment will be made upon receipt and approval of completed participation in learning collaborative and final report.

Payment	Amount	Deliverable <i>(dates provided after selected)</i>
1 st	50% of total budget	Signed Grant Agreement Complete Clinic/Health Center and Provider Assessment Complete 3-year Workplan
2 nd Final	Up to 50% of total balance	Complete 90% of Learning Collaborative/TA sessions Complete Final Report on Progress of Project Goals

Terms of Payment

Payments will be paid by LPHI within thirty (30) working days after receipt of reports and upon review of services performed. LPHI reserves the right to hold payments or only pay a partial payment if funds are not being utilized appropriately.

Use of Grant Award Funds

Grant funds are to be used solely and only for the Grantee's specific purposes as described in the grant application. Grant funds may not be used for any other purposes without LPHI's prior written approval. No funds under this agreement shall be used for the purpose of lobbying or for any political campaign.

Organization Funding Restrictions

- LPHI will **NOT** fund political parties, candidates or partisan political organizations, or **fundraising events**.
- Applicants must **NOT** accept funds from any **tobacco company** or any business that includes the name of tobacco or vaping products or whose primary operations includes sales of tobacco products during the grant cycle. Grantees must sign a statement acknowledging this restriction.
- Funds **cannot** be used for expenses incurred prior to signing of the agreement.

Request for Applications Timeline and Process

Important Dates	Important Benchmarks
November 10, 2022	RFA Release Date - The RFA will be made available on the LPHI website.
November 30, 2022	LPHI Informational Session – A conference call will be held with all interested applicants to discuss this grant opportunity.
December 7, 2022	Submission Deadline - Grant applications must be received, via online submission process by noon (CST).
January 6, 2023	Award Notification - Applicants will be notified of funding decisions via email.
January 25, 2023	Contract Signing Deadline - Grant contracts must be signed and returned to LPHI by this date.
February 28, 2023	Required Meetings: Grant Kick-Off Meeting

Application Submission Information

Use the enclosed application template in Appendix A to gather information for the [online application form](#).

Please submit the completed application on or before **December 7, 2022, by 12:00 pm noon CT**.

For questions on the project or application, please contact Stephanie Kennedy at skennedy@lphi.org. Please use the template in Appendix A to gather information for your application.

LPHI will host an informational call about this grant on November 30, 2022. Meeting details will also be available at lphi.org/asirt.

Appendix A

Application Form Template

Applications will only be accepted through the [online application form](#)

ORGANIZATION PROFILE

Name of Organization: _____

Physical Address: _____

Mailing Address: _____

Tax ID Number: _____

Contact person for this application

Name: _____

Title: _____

Email address: _____

Phone number: _____

Authorization information

Person Authorized to Sign Contract

Name: _____

Title: _____

Email address: _____

Phone number: _____

Please confirm that organization is a Rural Health Clinic and/or Federally Qualified Health Center.

PROJECT QUESTIONS

(Each answer should be less than 500 words.)

1. Organizational Capacity: please provide the following
 - History and mission of organization.
 - List all clinical locations and address.

- Select the parishes that your organization currently serve:
 - Concordia
 - Catahoula
 - East Carroll
 - Madison
 - Morehouse
 - Richland
 - St. Landry
 - Tangipahoa
 - Tensas

- Select the community that your organization would implement this project in: (See drop-down list)
 - Bastrop in Morehouse Parish
 - Ferriday in Concordia Parish
 - Delhi in Richland Parish
 - Jonesville in Catahoula Parish
 - Kentwood in Tangipahoa Parish
 - Lake Providence in East Carroll Parish
 - Newellton in Tensas Parish
 - Opelousas in St. Landry Parish
 - St. Joseph in Tensas Parish
 - Tallulah in Madison Parish

- Describe the community that your clinic/health center(s) serves (parish name, race, and other demographics).

- Select the populations served by organization (See drop-down list):
 - Caucasian
 - African-American
 - Latino or Hispanic
 - Asian
 - Native American
 - Native Hawaiian or Pacific Islander
 - Other

- What percentage of your clients/patients are Black or African American (priority population for this grant)?

- Clinic/Health Center's programs and services provided. Also, specify any community health or health care programs.
- Number of community members served in 2021.
- What is the organization's technology capacity regarding access to the internet and ability to participate on video meetings and video trainings?
- Electronic Health Record System (name, version, how long you have been on the system, how long you plan to be on the system).
- Key accomplishments of organization.
- Organizational goals – list at least three goals that you have for your organization in the next 12 to 18 months.

2. Clinical Practice Guidelines for Tobacco Cessation

- Describe the tobacco cessation services offered by health center provided to patients and community members?
- Describe any challenges faced in delivering these services.
- Describe your interest and past experience in participating in learning collaboratives centered on incorporating best practices for clinical quality improvement, including tobacco cessation at your organization.
- What do you hope to enhance related to tobacco cessation within your organization's practice? (See drop down list.)
 - Tobacco screening protocols
 - Improving documentation of tobacco screening
 - Brief-intervention for tobacco cessation
 - Referral systems for tobacco cessation
 - Certified Tobacco Treatment Specialist Training
 - Communicate and promote any tobacco cessation services

○ Other: Please specify _____

- List the clinical providers and staff who would be available to attend Learning Collaborative sessions on tobacco cessation interventions.
- Does your clinic/health center currently refer patients to 1-800-QuitNow, the LA Tobacco Quitline?
- Describe if and how your clinic/health center provides outreach services to community members.

3. Community Engagement and Activities

- How would your clinic/health center incorporate this project with its other community programs and activities?
- What are some other priority health and social issues that your community is dealing with now?
- Describe any other community mobilization or advocacy activities that your organization is currently involved in.
- Are you currently involved in a Healthy Communities Coalition? (See Appendix C for contact information of LPHI staff that can provide coalition information.)

4. Financial Information and Budget

- Please complete the program expense form for the organization's proposed grant using the template in the RFA Appendix B. This can be in the form of a Word document or PDF that is uploaded. Please note that indirect costs should be at or below 12 percent of the total direct costs.
- Describe any other existing sources of funding for this work.

5. Monitoring and Evaluation

Clinics/Health Centers will be required to submit quarterly reports and a final report that describes program activities and impact including a financial report.

- Describe clinic/health center's ability to submit required reports.
- Describe clinic/health center's current capacity for monitoring and evaluation (ex: tracking progress & measuring outcomes).
- Please list the top three impacts that your clinic/health center would like to have on your community with this grant project.

Appendix B

Budget Form Template

The budget is to be developed to cover the time period of **February 15, 2023, to February 15, 2024**. Budgets should be based on the best available estimates of time and expense, and itemized expenses should include all estimated expenses for the year. A budget narrative is also needed to provide details that explain the proposed expenses and justify their use for the project.

Expense Categories	Proposed Budget Amount	Justification
Staff Salaries		
Related Fringe Benefits		
External Consultant/Professional Fees		
In-state Travel		
Conferences, Meetings and/or Staff Training		
Office Supplies and Materials		
Office Space Rent		
Other:		
Direct Cost Total		
Indirect Cost (<i>max of 12% of direct costs</i>)		
Grand Total		

Appendix C

Healthy Community Coalitions Contact Information

For more information on pre-existing coalitions in your community, please contact the following LPHI staff members:

Region - Parish	Community	Staff Contact Info – Regional Managers
4 - St. Landry	Opelousas	Mitzi Lasalle (318) 794-1861 mlasalle@lphi.org
6 - Concordia	Ferriday	Mitzi Lasalle (318) 794-1861 mlasalle@lphi.org
6 - Catahoula	Jonesville	Mitzi Lasalle (318) 794-1861 mlasalle@lphi.org
8 - Morehouse	Bastrop	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 - Cell jhaneline@lphi.org
8 - Richland	Delhi	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 – Cell jhaneline@lphi.org
8 - East Carroll	Lake Providence	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 – Cell jhaneline@lphi.org
8 - Tensas	Newellton	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 - Cell jhaneline@lphi.org
8 - Tensas	St. Joseph	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 - Cell jhaneline@lphi.org
8 - Madison	Tallulah	Jennifer Haneline (318) 361-7235 - Office (318) 537-5023 - Cell jhaneline@lphi.org
9 - Tangipahoa	Kentwood	Jaime Bruins Cyprian, MPH (985) 974-7247 - Cell jcyprian@lphi.org