OSHII Tribal Grants Reference Guide

TRIBAL STATEWIDE HEALTH IMPROVEMENT PARTNERSHIP GRANT

TRIBAL TOBACCO GRANT

NOVEMBER 2019
OSHII Tribal Grants Reference Guide

Minnesota Department of Health
Office of Statewide Health Improvement Initiatives
PO Box 64882,
St. Paul, MN 55164-0882
651-201-4632
www.health.state.mn.us/tribalgrants

Upon request, this material will be made available in an alternative format such as large print, Braille or audio recording.
Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>5</td>
</tr>
<tr>
<td>Grant Program Requirements and Expectations</td>
<td>5</td>
</tr>
<tr>
<td>Staffing Requirements</td>
<td>6</td>
</tr>
<tr>
<td>Program Requirements</td>
<td>6</td>
</tr>
<tr>
<td>Reporting Requirements</td>
<td>7</td>
</tr>
<tr>
<td>Quarterly Progress Reporting and Quarterly Calls</td>
<td>7</td>
</tr>
<tr>
<td>Evaluation Requirements</td>
<td>7</td>
</tr>
<tr>
<td>Communications Requirements</td>
<td>8</td>
</tr>
<tr>
<td>Acknowledgement Guidelines</td>
<td>9</td>
</tr>
<tr>
<td>Work Plan Revisions</td>
<td>9</td>
</tr>
<tr>
<td>Quarterly Reporting Due Dates</td>
<td>10</td>
</tr>
<tr>
<td>Tribal Funding Levels</td>
<td>11</td>
</tr>
<tr>
<td>Financial Requirements and Restrictions</td>
<td>12</td>
</tr>
<tr>
<td>Fiscal Responsibilities</td>
<td>12</td>
</tr>
<tr>
<td>Financial Documentation and Record Retention</td>
<td>12</td>
</tr>
<tr>
<td>Lobbying</td>
<td>13</td>
</tr>
<tr>
<td>Supplantation</td>
<td>13</td>
</tr>
<tr>
<td>Commercial Tobacco Products for Educational Purposes</td>
<td>13</td>
</tr>
<tr>
<td>Travel Expenses</td>
<td>14</td>
</tr>
<tr>
<td>Budget Revisions</td>
<td>14</td>
</tr>
<tr>
<td>Items Requiring MDH Prior Approval</td>
<td>15</td>
</tr>
<tr>
<td>Contractual Services</td>
<td>15</td>
</tr>
<tr>
<td>Out-of-state Travel</td>
<td>15</td>
</tr>
<tr>
<td>Equipment and Electronics</td>
<td>15</td>
</tr>
<tr>
<td>Communication Pieces</td>
<td>15</td>
</tr>
<tr>
<td>Evaluation Tools &amp; Results</td>
<td>16</td>
</tr>
</tbody>
</table>
Obtaining MDH Prior Approvals ........................................................................16
Unallowable Uses of Tribal Grant Funds ..............................................................17
Payment and Invoice Procedures ......................................................................18
  Monthly Invoicing..........................................................................................18
  Instructions for Completing and Submitting Monthly Invoice .......................18
Grantee Support ..................................................................................................25
  Community Specialist Role ............................................................................25
Technical Assistance ..........................................................................................26
  Purpose...........................................................................................................26
  Roles and Sources of Support........................................................................26
  Types of Technical Assistance ......................................................................26
  Evaluation Technical Assistance ....................................................................28
  Tribal Specific Technical Assistance ..............................................................29
  How to Request Technical Assistance ............................................................31
  Additional Technical Assistance Contacts ....................................................32
Tribal SHIP and Tribal Tobacco Grant Annual Requirements ............................33
  Tribal SHIP and Tribal Tobacco Annual Paperwork Due Dates ....................34
  Work Plan Instructions ................................................................................35
  Work Plan Examples .....................................................................................36
  Budget............................................................................................................37
  Budget Narrative Example .............................................................................38
Terminology .........................................................................................................40
Menu of Strategies ............................................................................................46
  Healthy Eating for Strong Native Communities Strategies ..........................46
  Active Living and Healthy Indigenous Lifeway Strategies ................................51
  Keep Tobacco Sacred Strategies ..................................................................55
Prior Approval for Grant Expenditures ..............................................................59
Introduction

This guide is for grantees of the Minnesota Department of Health (MDH) Tribal Grants Program, including both Tribal Statewide Health Improvement Partnership (SHIP) Grantees and Tribal Tobacco Grantees. It contains topics related to the 2019-2024 grant period, including program, financial, and procedural requirements that govern the grant process. It does not replace established state policies or regulations governing the administration of grants which can be found on the Minnesota Department of Administration Grant Management website (https://mn.gov/admin/government/grants/policies-statutes-forms/).

Information in this guide is based on established policies and regulations that are current as of the date of publication. Grantees are responsible for being aware of and abiding by all applicable statutes, regulations, principles, and policies; for abiding by their grant agreement with MDH; and for staying current on changes relating to the administration of grants.

This guide is subject to change.

Grant Program Requirements and Expectations

The Minnesota Legislature has made available state SHIP funds (Minn. Stat. §145.986) to tribal governments for the following purpose:

To address the leading preventable causes of illness and death such as tobacco use or exposure, poor diet, and lack of regular physical activity, and other issues as determined by the commissioner through the statewide assessment.

It has also allocated tribal tobacco funds (Minn. Stat. §144.396) specifically for reducing the prevalence of tobacco among youth and addressing tobacco-related health disparities.

Each grantee is assigned a Community Specialist to oversee their grant agreement. Community Specialists ensure grant program success and assist grantees with administrative and reporting requirements.
To ensure smooth program implementation, grantees are asked to attend and comply with the requirements outlined in this guide.

- General Requirements
- Participate in site visits, grant monitoring, and grant reconciliation processes with MDH.
- Participate in MDH-sponsored technical assistance calls, webinars, training sessions, and MDH-sponsored conference calls.
- Attend MDH-sponsored conferences, meetings, and in-person trainings.
- Ensure Tribal Grant funds are not used for lobbying, which is defined as advocating for a specific public policy after it has been formally introduced to a legislative body. See page 13 for details on lobbying.

**Staffing Requirements**

- At a minimum, designate or hire a part-time (.5 FTE) project coordinator. The project coordinator must serve as the primary contact person.
- Contact designated Community Specialist as soon as possible when staffing on the grant changes, such as hiring new staff or someone leaving the organization.

**Program Requirements**

- Submit revised work plans and budgets by their due dates. Grantees should work with their Community Specialist to finalize work plans and budgets. The revised work plan and budget (line-item and narrative) must be submitted annually and be approved by the Community Specialist.
- Contact designated Community Specialist for prior approval of any significant work plan and budget changes.
- Contact designated Community Specialist if encountering difficulty implementing activities.
Reporting Requirements

<table>
<thead>
<tr>
<th>Reporting element</th>
<th>Reporting frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity Tracker</td>
<td>Monthly for quarterly calls</td>
</tr>
<tr>
<td>Quarterly report on key activities and strategy implementation and evaluation</td>
<td>Quarterly, via calls with Community Specialist and MDH evaluation staff</td>
</tr>
<tr>
<td>In-depth evaluation project</td>
<td>Once during the five-year grant period</td>
</tr>
<tr>
<td>Tribal SHIP and Tribal Tobacco 2-page summary with success story</td>
<td>Update annually</td>
</tr>
</tbody>
</table>

Quarterly Progress Reporting and Quarterly Calls

*Quarterly progress reports shall be submitted according to the schedule starting on page 10.*

Community Specialists will provide guidance regarding the required content of the reports.

All grantees are required to submit quarterly progress reports by the deadline set by MDH (approximately 45 days after the end of the reporting period) and use the reporting template provided by MDH.

**Grantees requirements:**

- E-mail quarterly progress reports to designated Community Specialist according to the schedule below and before their mutually scheduled quarterly call.
- Utilize the quarterly progress reports to track grantee progress toward the overall goals and objectives for their program and the work plan.
- Track monthly program activities with activity tracker.
- Provide grant summary information to MDH upon request for incorporation in legislative and other MDH reports.

Evaluation Requirements

*MDH will provide additional information about evaluation in an evaluation guidance document.*

- **Staff or contractor time.** Dedicate at least 10 percent of the overall budget for evaluation.
  Evaluation funds will fund staff time for MDH-required reporting, planning, and implementation of the evaluation project. Funds may be put toward an evaluation contractor to assist with this work.
- Describe any evaluation activities in work plans and budgets and update annually.
- **Quarterly calls.** Participate in mutually scheduled quarterly calls with your Community Specialist. In addition to quarterly calls, information for reporting will also be gathered during program sharing at grantee gatherings.
- **One in-depth evaluation project completed during the contract period.** Conduct an in-depth evaluation of one component of their work with assistance and guidance from MDH, Community Specialists and/or technical assistance provider by the end of the grant period. Additional guidance on parameters will be provided in the first year of the grant.
- **Regularly update Tribal SHIP and Tribal Tobacco Grant 2 Page Summary.** Continue to update community profiles that briefly describe grant activities, milestones, and include one new success story for each grant program annually.
- **Sharing evaluation results with community stakeholders including Tribal Health Directors at MDH meetings.** Share evaluation results with community stakeholders.
- **Share evaluation materials with MDH.** Share evaluation findings, data collection instruments, and related evaluation materials with MDH.

MDH would like to review and approve Grantee’s work during the development of the following items prior to the utilization/reporting of these items.

- evaluation tools, such as surveys
- survey questions
- survey results
- focus group questions, process, and results

*See page 16 for more on obtaining prior approvals.*

### Communications Requirements

All communication materials developed with Tribal SHIP and Tribal Tobacco funds by grantees, subcontractors, or mini-grant recipients, must be approved by the Community Specialist prior to printing, posting, or release. Grantees should consult with their Community Specialist on the development of press releases, blogs, public service announcements, and news conferences.

*See page 16 for more on obtaining prior approvals.*

#### Grantees should notify their Community Specialist by e-mail:

- Before submitting an abstract or call for presentations at a national or state conference paper, an article for publication, or presentation for a conference, including a poster session, which would publicize your work. Draft versions of these items should be shared with the Community Specialist.
- Before submitting manuscripts for publication based on work funded by this grant.
- If a paper, article, presentation, or poster has been accepted for publication or a conference.
Acknowledgement Guidelines

All communications should include the MDH logo. The MDH logo and style guide can also be found on the Brand MDH website (https://www.health.state.mn.us/about/tools/branding.html). Grantees should consult with their Community Specialist to determine the acknowledgement requirements for all communication materials and publications. All press releases, public reports, and journal publications must acknowledge funding assistance from the Tribal SHIP and Tribal Tobacco Grant Programs. Funding acknowledgment is not required for some marketing and communications materials; Community Specialists will work with grantees to identify these materials.

Example acknowledgements for publications:

“This [message, publication, etc.] is made possible through a Tribal Tobacco/Tribal Statewide Health Improvement Partnership grant from the Minnesota Department of Health.”

Example acknowledgement for presentations:

“This [insert name program/project] is funded by a Tribal Tobacco/Tribal Statewide Health Improvement Partnership grant from the Minnesota Department of Health.”

Journal articles should also include the following disclaimer:

“Contents are solely the responsibility of the authors and do not necessarily represent the official views of the Minnesota Department of Health.”

Work Plan Revisions

MDH recognizes that work plans will evolve and change during the grant period. It is expected that grantees will continually update their work plans and budget to reflect their most current work.

Grantees must discuss work plan changes with their Community Specialist before implementing any changes that may impact the overall direction, scale, or intended outcomes of their work.
Quarterly Reporting Due Dates

Quarterly progress reports shall be submitted and quarterly call arranged according to the schedule below. MDH Community Specialists and Evaluation Unit will provide guidance regarding the required content of the reports.

<table>
<thead>
<tr>
<th>Year 1 Reporting Periods</th>
<th>Reporting Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quarterly Reporting Periods</strong></td>
<td></td>
</tr>
<tr>
<td>November 1, 2019 – January 31, 2020</td>
<td>March 16, 2020</td>
</tr>
<tr>
<td>February 1, 2020 – April 30, 2020</td>
<td>June 14, 2020</td>
</tr>
<tr>
<td>May 1, 2020 – July 31, 2020</td>
<td>September 14, 2020</td>
</tr>
<tr>
<td>August 1, 2020 – October 31, 2020</td>
<td>December 15, 2020</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year 2 Reporting Periods</th>
<th>Reporting Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quarterly Reporting Periods</strong></td>
<td></td>
</tr>
<tr>
<td>November 1, 2020 – January 31, 2021</td>
<td>March 17, 2021</td>
</tr>
<tr>
<td>February 1, 2021 – April 30, 2021</td>
<td>June 14, 2021</td>
</tr>
<tr>
<td>May 1, 2021 – July 31, 2021</td>
<td>September 14, 2021</td>
</tr>
<tr>
<td>August 1, 2021 – October 31, 2021</td>
<td>December 15, 2021</td>
</tr>
</tbody>
</table>

Reports for Years 3-5 will follow the same quarterly schedule.
Tribal Funding Levels

Listed below are the annual funding awards available to Tribal Governments during the five-year contract period (Nov. 1, 2019, through Oct. 31, 2024). The tribal funding levels were determined after discussions with tribal representatives. MDH presented three funding scenarios and after discussions it was collectively decided to use a base plus per capita funding formula.

<table>
<thead>
<tr>
<th>Tribal Governments</th>
<th>Tobacco</th>
<th>Tribal SHIP</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bois Forte</td>
<td>$82,460</td>
<td>$82,460</td>
<td>$164,920</td>
</tr>
<tr>
<td>Fond Du Lac</td>
<td>$96,991</td>
<td>$96,991</td>
<td>$193,982</td>
</tr>
<tr>
<td>Grand Portage</td>
<td>$79,629</td>
<td>$79,629</td>
<td>$159,258</td>
</tr>
<tr>
<td>Leech Lake</td>
<td>$135,195</td>
<td>$135,195</td>
<td>$270,390</td>
</tr>
<tr>
<td>Lower Sioux</td>
<td>$79,511</td>
<td>$79,511</td>
<td>$159,022</td>
</tr>
<tr>
<td>Mille Lacs</td>
<td>$95,276</td>
<td>$95,276</td>
<td>$190,552</td>
</tr>
<tr>
<td>Prairie Island</td>
<td>$77,091</td>
<td>$77,091</td>
<td>$154,182</td>
</tr>
<tr>
<td>Red Lake</td>
<td>$143,195</td>
<td>$143,195</td>
<td>$286,390</td>
</tr>
<tr>
<td>Upper Sioux</td>
<td>$76,562</td>
<td>$76,562</td>
<td>$153,124</td>
</tr>
<tr>
<td>White Earth</td>
<td>$134,090</td>
<td>$134,090</td>
<td>$268,180</td>
</tr>
</tbody>
</table>
Financial Requirements and Restrictions

Fiscal Responsibilities

Grantees must be good stewards of the funds they are awarded. Grantees must be fiscally responsible and should follow state laws and procedures for expending and accounting for their grant funds. Grantees must also:

- Ensure that a local match equaling at least 10% of the total funding award is provided and documented for Tribal SHIP grants. No local match is needed for Tribal Tobacco Grants.
- Prepare required reports, and trace funds to a level of expenditures adequate to establish that funds have not been used in violation of program restrictions.
- Provide for accurate, current, and complete disclosure of financial results of grant activities.
- Maintain accounting records that identify the source and use of grant funds to include awards, obligations, unobligated balances, assets, liabilities, expenditures, and income.
- Maintain internal controls that account for grant cash, property, and assets, safeguard such, and assure that they are used solely for authorized purposes.
- Determine the reasonableness and allowability of costs in accordance with program requirements and terms of the grant agreement and charge the grant for only the activities that were in the approved work plan and budget.
- Support accounting records with source documentation.
- Indirect costs are limited to your federally approved indirect cost rate or up to 10% of the total grant award.
- Submit monthly invoices according to the schedule starting on page 9. All financial transactions will be on a reimbursement basis only.
- Meet audit requirements.
- Ensure that administrative costs are explained and justifiable, and do not duplicate itemized charges.
- Allocate 10% of overall funds for evaluation and designate a person to facilitate evaluation tasks. Evaluation funds may be used for staff time or in the form of an outside evaluation contractor.

Financial Documentation and Record Retention

Grantees are responsible for keeping documentation to support all grant expenditures, including: payroll records; receipts for all grant related expenses; contracts and invoices with subcontractors, consultants, and mini-grants; travel logs; and cancelled checks. Grantees shall maintain the payroll books, payroll records, documents, accounting procedures and practices of the grant, and make them available to the state for six years from the end of the grant. Grantees may receive requests for this information, which must be submitted to MDH upon request.
Lobbying

Grant funds may not be used for lobbying, which is defined as advocating for a specific public policy after it has been formally introduced to a legislative body. However, grantees may use grant funds to educate stakeholders about the importance of policies as a public health strategy. Education includes providing facts, assessment data, reports, program descriptions, and information about budget issues and population impacts, without making a recommendation on a specific piece of legislation. Education may be provided to public policy makers, other decision makers, specific stakeholders, and the general community. Lobbying restrictions do not apply to informal or private policies.

Grantees may make healthy eating, active living, and commercial and traditional tobacco-related educational materials available to the public and governmental bodies, officials, and employees. These materials may not advocate the adoption or rejection of an official action, but may contain facts, analysis, studies, and research.

Grantees may use other funding sources to influence an official action of a local governmental unit or tribal government regarding commercial or traditional tobacco, healthy eating, and active living, in accordance with federal and state law, grantee policy, and funding restrictions, but they must clearly document which activities are covered by which funding source.

Grantees may not use grant funds to influence state legislation or administrative rules. Grantees may use other funding sources to influence state legislation or administrative rules regarding commercial or traditional tobacco, healthy eating, and active living in accordance with federal and state law, grantee policy, and funding restrictions, but must clearly document the alternate funding source that covers the activity.

Supplantation

Grantees must ensure grant funding does not supplant other federal, state, or local funding. Funds must be used to develop new activities, or expand or modify current activities, or replace discontinued state or federal funds.

Commercial Tobacco Products for Educational Purposes

Grant funds may be used to purchase commercial tobacco products for educational purposes only.

Grantees must ensure that all commercial tobacco products purchased are labeled or marked as being for educational purposes only.

*These requirements do not apply to purchasing or growing traditional tobacco.*
Travel Expenses

Grantees will be reimbursed for travel and per diem expenses as outlined in their Tribal Policy not to exceed the federal reimbursement rates. Federal reimbursement rates can be found on the official U.S. General Services Administration website (http://www.gsa.gov/portal/content/110007). Travel expense reimbursements are limited to $5,000 annually, not to exceed $25,000 for the five year grant cycle, as noted in the grant agreement.

Grantees will not be reimbursed for travel and per diem expenses incurred outside Minnesota unless it has received MDH’s prior written approval for out-of-state travel. Minnesota will be considered the home state for determining whether travel is out of state. International travel will not be reimbursed.

Grantees will not be reimbursed for international travel or per diem expenses incurred outside of the United States.

All out-of-state travel requires MDH prior approval.

Budget Revisions

Grantees must expend funds in accordance with the negotiated line item budgets and budget narrative approved by MDH.

If the grantee anticipates changes that are 10% or greater in the approved overall budget line items, the grantee must request a budget revision in writing and submit a revised budget to their Community Specialist for approval. MDH has authority to deny budget revision requests.
Items Requiring MDH Prior Approval

The following items require prior approval before a contract is signed or an expense is incurred.

Contractual Services

Grantees may contract (also known as subcontract) with another person or organization to perform part of the grantee duties. Grantees may also offer mini-grants to another organization to perform part of the work plan duties. Prior approval is required from MDH for all subcontracts or mini-grants over $3,000.

Grantees are responsible for holding any subcontractors and mini-grant recipients to the same required grant fiscal standards. Grantee funding restrictions apply to all subcontractor or mini-grant recipients.

Requirements for consultants or contractors:

▪ Must be selected and vetted based on demonstrated expertise and merit.
▪ Work must be directly grant related.
▪ Must be included in the final work plans or budgets (by the end of the grant period).
▪ May not be selected if listed on the state’s prohibited vendors list (www.mmd.admin.state.mn.us/debarredreport.asp)
▪ May not be selected if they have a conflict of interest to employees or officials of the grant.
▪ May not receive payment for grant writing.

Out-of-state Travel

All out-of-state travel requires prior approval and must relate to grant duties or activities. 

MDH has the authority to deny out-of-state travel.

Equipment and Electronics

▪ Equipment over $3,000 and electronics purchases such as digital cameras, computers, phones, GPS units, interactive whiteboards, video cameras, LCD Projector, etc.

Communication Pieces

The following communication pieces require prior approval:

▪ Ads for radio, television, movie theaters, newspapers
▪ Printed and electronic marketing materials (posters, fliers, newsletters, brochures, fact sheets, displays)
▪ News/press releases, letters to the editor, public service announcements, news conference materials
▪ Scripts for radio/TV programming
▪ PowerPoint presentations
▪ Letters that are part of a larger outreach effort
▪ Promotional items
▪ Sponsorships
▪ Signs
▪ Surveys

Evaluation Tools & Results

In consultation with grantees, the Evaluation Unit would like to review and approve the following items prior to these being utilized/reported.

▪ evaluation tools, such as surveys
▪ survey questions
▪ survey results
▪ focus group questions, process, and results

Obtaining MDH Prior Approvals

To obtain MDH prior approvals, grantees must complete and submit the Prior Approval form (Appendix C) to their Community Specialist.

For communication pieces, a draft or proof document must be included with the prior approval request.

For budget revisions that are 10% or greater in approved budget line items, grantees should send an e-mail with the request to their designated Community Specialist.

Community Specialists will respond to prior approval requests within three to five business days; grantees should plan accordingly.
Unallowable Uses of Tribal Grant Funds

Unallowable costs are expenditures for which grant funds cannot be used. MDH has the authority to disallow expenditures not preapproved. Community Specialists review invoices and reserve the right to question or take action on inappropriate uses of funds. Unallowable uses of Tribal SHIP and Tribal Tobacco funds include, but are not limited to, the following:

▪ Alcohol or any illegal substance
▪ Any cost not directly related to the Tribal SHIP and Tribal Tobacco grants
▪ Bad debts or personal debts
▪ Capital improvements (unless pre-approved) or construction projects
▪ Cash assistance paid directly to individuals to meet their personal or family needs
▪ Contributions or donations
▪ Costs incurred prior to or after the grant award (unless otherwise indicated)
▪ Direct patient medical services or care
▪ Fines and penalties
▪ Goods or services for personal use
▪ Grant writing
▪ Interest
▪ Lobbying at the federal or state level
▪ Losses on agreements or contracts
▪ Mischarging of costs
▪ Nicotine replacement therapies (NRT) or pharmaceutical medications for cessation
▪ Political campaigns on behalf of, or in opposition to, any candidate for public office
▪ Research
▪ Sponsorships of events, trainings, or advertisements that are not directly related to the Tribal SHIP and Tribal Tobacco grants
▪ Supplanting of funds from other sources
▪ Treatment of a disease or disability
Payment and Invoice Procedures

Per the grant agreement, if deliverables are not completed satisfactorily, the state has the authority to withhold funds, recover funds, or both, as well as to terminate the grant agreement. Refer to the grant agreement for more details.

MDH has authority to deny reimbursement for work deemed unsatisfactory, or performed in violation of federal, state, or local law, ordinance, rule, or regulation, as well as costs not preapproved nor in accordance with approved work plan activities and strategies, as noted in this guide.

* A local match equaling at least 10 percent of the total funding award is required for Tribal SHIP grants. *

Monthly Invoicing

All grantees must submit monthly invoices by the due dates listed below using the standard Tribal SHIP and Tribal Tobacco invoicing forms. Invoices should be submitted electronically via the Microsoft Excel document (not PDF) as an e-mail attachment to designated Community Specialist.

All financial transactions will be on a reimbursement basis only. From Office of Grants Management Policy 08-08, a “cost reimbursement payment” is a type of grant payment in which the grantee incurs the expenses before requesting repayment from the grantor. This means the cost must be paid by the grantee before it can be reimbursed. Expenditures on the invoice submitted to MDH should agree with expenditure accounting records.¹

Grantee reimbursement requests must correspond to the line items in the approved budget. Community Specialists will review each invoice against the approved grant budget, and grant expenditures to-date before approving payment.

**MDH has authority to deny invoices submitted more than 30 days after the submission dates specified below.**

Instructions for Completing and Submitting Monthly Invoice

Grantees will use the same invoice template (Microsoft Excel document) every month throughout the grant period. Each month, grantees will update the invoice with monthly expenditure details and send to their Community Specialist.

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¹ [http://mn.gov/admin/images/grants_policy_08-08.pdf](http://mn.gov/admin/images/grants_policy_08-08.pdf)
Beginning the first of the month, grantees may begin completing the invoice for the month. Invoice categories include:

- Salary and Fringe Benefits
- Contractual Services
- Travel In-state
- Travel Out-of-state
- Supplies and Equipment
- Other
- Administrative Costs

For each of the categories (except Administrative Costs), provide the amount spent, along with a brief description of each expense.

Community Specialists will review the invoice. If approved, the Community Specialist will sign the invoice and send it to MDH Financial Management for processing. If the Community Specialist has questions about invoice expenditures, they will follow-up to clarify and revise as needed.

MDH Financial Management will process invoices and submit reimbursement within 30 days from the date received. **By statute, the state has 30 days from the receipt of the invoice at MDH to issue payment.**
# Invoicing Due Dates

Monthly invoices shall be submitted according to the schedule below. Community Specialists will provide guidance regarding the required content of the invoices.

<table>
<thead>
<tr>
<th>Year 1 Invoicing Periods</th>
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<tbody>
<tr>
<td><strong>Month</strong></td>
</tr>
<tr>
<td>November 2019</td>
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<tr>
<td>December 2019</td>
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<tr>
<td>January 2020</td>
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<td>February 2020</td>
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<td>April 2020</td>
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<td>May 2020</td>
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<td>July 2020</td>
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<td>September 2020</td>
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<td>Month</td>
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<td>July 2021</td>
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<td>September 2021</td>
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### Year 3 Invoicing Periods

<table>
<thead>
<tr>
<th>Month</th>
<th>Period Begins</th>
<th>Period Ends</th>
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Grantee Support

MDH OSHII Community Specialists
First line of contact for your needs.

LaRaye Anderson
Office of Statewide Health Improvement Initiatives
85 East Seventh Place, Suite 220
P.O. Box 64882
St. Paul, MN  55164-0882
Phone: 218-368-0372
E-mail: LaRaye.Anderson@state.mn.us

Sarah Brokenleg
Office of Statewide Health Improvement Initiatives
85 East Seventh Place, Suite 220
P.O. Box 64882
St. Paul, MN  55164-0882
Phone: 612-394-6228
E-mail: Sarah.Brokenleg@state.mn.us

Community Specialist Role

Community Specialists (CS) serve as grant managers, and are the primary contact for grantees seeking information or assistance from MDH. Community Specialists often facilitate communication between grantees and TA providers. Community Specialists will be responsible for reviewing and documenting grantees’ implementation of Tribal SHIP/Tribal Tobacco efforts according to their project application, grant agreement, and program requirements. In addition, CSs will conduct financial monitoring on the spending of MDH grant funds. This is accomplished through the review of quarterly reports, on-site review of the project, and fiscal records to ensure the scope of work as outlined in the respective grant applications is being fulfilled and funds are expended and accounted for properly. In short, Community Specialists are responsible for grant management and monitoring for their grantees.
Technical Assistance

Purpose
The purpose of the Minnesota Department of Health’s Office of Statewide Health Improvement Initiative’s (OSHII) training and technical assistance (TA) is to build the capacity of its grantee staff and partners to ensure they have the knowledge, skills, abilities, and resources they need to successfully implement OSHII strategies. OSHII’s approach to training/TA will support both strategy-specific and foundational skills to advance policy, systems, and environmental (PSE) change work in obesity prevention and commercial tobacco control.

Roles and Sources of Support
MDH staff are available for individualized consultation and support through e-mail and phone. Staff are to act in a connecting capacity. Community Specialists (CS) can provide information directly to grantees, or they may refer grantees on to American Indian Cancer Foundation (AICAF), other external resources or peers. Contracted TA providers like AICAF serve as an extension of MDH OSHII by providing support to communities in specific technical areas.

Types of Technical Assistance

Group Training Events
- Mandatory Grantee Gatherings
- Conference Calls
- Webinars

Individual Assistance
- Community Specialists
- Ongoing 1:1 consultations (See TA request process)

Peer Learning Opportunities
- 1:1 Networking
- Basecamp
- Program Sharing at Grantee Gatherings

Online Resources
- Basecamp

Mandatory Grantee Gatherings
There are two annual grantee gatherings that are mandatory for the grant coordinators, one in the spring (May/June) and one in the fall (September/October). These gatherings must be attended by the coordinators for these programs as a requirement to receive state funds. Supervisors and Tribal Health Directors are also welcome, but their attendance is not mandatory. MDH uses these meetings to convey grant requirements, train Tribal SHIP and
Tribal Tobacco grant coordinators, create space for peer-to-peer learning through program sharing, and offer other presentations and trainings related to this work.

**Conference Calls & Webinars**

Strategy-specific and foundational skill conference calls and webinars will be held on an as needed basis. Participation is highly recommended. All calls will be announced by e-mail and on Basecamp. For the list of past webinar recordings, please follow this path on Basecamp: Tribal Grantees > Docs & Files > AICAF Technical Assistance > AICAF Webinars List.

**Peer Learning Opportunities: Basecamp**

OSHII does provide Basecamp as a platform to facilitate peer-to-peer sharing about health improvement work in Minnesota. The breadth and depth of the resources and discussion will depend on the active engagement of the group members. Grant contact information, work plan and budget templates, guidance documents, past gathering presentations, a schedule of conferences and webinars related to this work and more are available on this site.

Tribal grantees can join Basecamp by e-mailing their CS or [health.makingitbetter@state.mn.us](mailto:health.makingitbetter@state.mn.us) and requesting access.
Evaluation Technical Assistance

MDH OSHII Evaluation and Surveillance Unit

The OSHII Evaluation and Surveillance Unit is excited to continue the evaluation work from the previous round of Tribal SHIP and Tribal Tobacco. Our team now has a dedicated evaluation liaison, Jacob Walker-Swaney (Piqua Shawnee, Potawatomi descendant) for both Tribal SHIP and Tribal Tobacco evaluation. In addition, we have a whole team dedicated to all the applicable SHIP and Tobacco settings as resources for all your evaluation questions.

Evaluation and Surveillance Unit Approach

OSHII’s Evaluation and Surveillance Unit provides evaluation technical assistance by engaging tribal grantees through one-on-one communication with the designated evaluation liaison. Our plan is to use the Indigenous Evaluation Framework to guide evaluation efforts, however, the Evaluation Unit is happy to use other frameworks or evaluation methods grantees desire.

Indigenous Evaluation Framework

In response to the Stakeholder Input Process American Indian Community Project (SIPAIC) Report of 2014, the Evaluation and Surveillance Unit is excited to use the American Indian Higher Education Consortium’s (AIHEC) Indigenous Evaluation Framework for Tribal SHIP and Tribal Tobacco.

Other Evaluation Frameworks

The Evaluation Unit is willing to support grantee’s desires in using an evaluation framework of grantee’s desire, but we would like to review the framework prior to evaluation work commencing to be on the same page as grantees and provide proper support.
Tribal Specific Technical Assistance

AICAF's POLICY AND PREVENTION PROGRAM

AICAF APPROACHES
The AICAF prevention and policy program provides effective and sustainable approaches by engaging American Indian and Alaska Native (AI/AN) communities to:

- Bring attention to AI/AN cancer burdens and solutions
- Advance capacity through training, technical assistance, and resources
- Increase availability of reliable AI/AN cancer data

OPPORTUNITIES FOR TECHNICAL ASSISTANCE
AICAF seeks to advance the capacity of individuals working in chronic disease prevention programs within American Indian communities to determine their best health practices utilizing:

- Policy, System, and Environmental Change (PSE) Assistance
  - PSE change presentation/training
  - Facilitate community conversations to identify PSE change strategies and solutions
  - Community visioning activity
  - Identify community health and priority strategies
  - Action planning
- Tribal Policy Development and Implementation Assistance
  - Policy drafting workshop/training
  - Policy development and review
  - Connecting to legal aid for policy, ordinance, and resolution drafting
  - Presenting to tribal leadership
- Ongoing available support in coalition building (assistance, resources and trainings)
- Community engagement strategy development & event planning for creating community buy-in
- Making the case for change (providing fact-based data and information on health, prevention and wellness)
- Grant proposal review support to assist with sustainability of initiatives
- Adverse Childhood Experiences Study (ACEs) & Resiliency Training
PROGRAM FOCUS AREAS

- Tribal Health Equity
- Tobacco
- Healthy Eating
- Physical Activity
- PSE Strategy Assistance
- ACEs

CONNECT WITH AICAF

Our resources are available at [www.americanindiancancer.org](http://www.americanindiancancer.org) to learn more about AICAF strategies to eliminate the cancer burden on American Indian families.
How to Request Technical Assistance

You can request technical assistance one of two ways:

1. Contact your CS detailing your TA needs. From there, your CS will do one of the following:
   - Refer you to an OSHII content/setting expert
   - Refer you to an external TA provider
   - Connect you with another grantee in a similar situation and/or region

2. Contact a TA provider or OSHII evaluation expert directly. Determine which provider would best serve your needs, and contact them directly. Please be sure to copy your CS on the e-mail.

Initial responses to TA requests will occur within 72 hours.
Additional Technical Assistance Contacts

Evaluation Technical Assistance

Contact: Jacob Walker-Swaney
MDH OSHII
85 East 7th Place, Suite 220
PO Box 648852
St. Paul, MN 55164-0882
Phone: 651-201-3667
E-mail: jacob.walker-swaney@state.mn.us

Tribal Specific Technical Assistance

Contact: Chris Johnson
American Indian Cancer Foundation
3001 Broadway St. NE, Suite 185
Minneapolis, MN 55413
Phone: 612-314-4848
E-mail: cjohnson@aicaf.org
Tribal SHIP and Tribal Tobacco Grant Annual Requirements

Annual requirements include an updated work plan, budget and budget narrative each year.

As a reminder: Tribal SHIP funding should only be used to address healthy eating and active living strategies, while tobacco strategies should only be addressed using Tribal Tobacco funds.

Grantees must submit the following documents to MDH by the due dates listed on page 34.

- [ ] Work Plan
- [ ] Budget
- [ ] Budget Narrative

Please send the above required documents to your Community Specialist on or before the due date provided on page 34 by 5:00 P.M.

You may submit documents earlier if you complete them prior to the deadline. Submit all documents as attachments in an e-mail addressed to your Community Specialist.

LaRaye Anderson
218-368-0372
LaRaye.Anderson@state.mn.us

Sarah Brokenleg
612-394-6228
Sarah.Brokenleg@state.mn.us
Tribal SHIP and Tribal Tobacco Annual Paperwork Due Dates

Annual paperwork (work plan, budget, and budget narrative) will be due to your Community Specialist by 5 p.m. on the below due date.

<table>
<thead>
<tr>
<th>Grant Year</th>
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Templates for your annual work plan, budget, and budget narratives will be available on Basecamp in the Docs & Files folder under Grant Forms.
Work Plan Instructions

MDH developed this menu of strategies to include those with demonstrated effectiveness based on research and proven best practices, and from recommendations from the Stakeholder Input Process American Indian Community Project (SIPAIC). One of the aims of the SIPAIC was to identify how evidence-based practices and other promising practices could be culturally adapted for American Indian communities to address obesity and commercial tobacco abuse and exposure.

This menu of strategies is organized by healthy eating, active living and commercial tobacco. You are allowed to do this work in five setting areas: Schools, Worksite, Community, Child care, and Healthcare. Definitions of these settings are available in Appendix A: Terminology.

Strategies are noted by a rectangular bullet (□)
Activities are noted by a circle bullet (○)

- Supporting a community mindset for healthy and indigenous foods
  - Example Activities
    - Coalition building and strategic planning: identify and engage existing groups and leaders to build partnerships and foster collaboration on a mutually agreed vision
    - Food sovereignty assessment and plan development
    - Experiential learning opportunities: wild rice camps, maple sugar camps, foraging, three sister’s gardens

Please provide a work plan for the upcoming grant period listed on page 34.

- Select at least 2-4 healthy eating or active living activities in any setting.
- Select at least 2-4 commercial tobacco prevention activities in any setting.

*Be sure to denote whether the activity is focused on the 60+ population with a red asterisk*.

If you do not see a strategy or activity here that you would like to include in your work plan, please contact your Community Specialist (CS) to discuss the proposed activity. For more information about strategies and activities in the menu, please contact your CS.
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<th>Work Plan Examples</th>
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**Tribal Tobacco Grant Workplan and Timetable: November 2019 - October 2020**
Budget

*Tribal SHIP funding should only be used to address healthy eating and active living strategies, while tobacco strategies should only be addressed using Tribal Tobacco funds.*

<table>
<thead>
<tr>
<th>Expenses by Category</th>
<th>Tribal SHIP</th>
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<td>Salaries and Fringe Benefits</td>
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<td>Contractual Services</td>
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<td>Total Amount</td>
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Budget Narrative Example

Salary and Fringe Benefits

XXXXXXX, Community Wellness Educator will spend 50% (0.5 FTE) of her time working with the Tribal SHIP grant. She will be responsible for most of the grant duties such as education, planning, and implementation of activities as shown in the work plan. The individual’s annual salary is $XXXXXXX and will be covered for the 12 months of the grant period. The fringe benefits were calculated on the yearly salary of $XXXXXXX, our current fringe benefit percent is 52%. This includes FICA, SUTA, Pension, Health, Dental, Disability, and Life.

XXXXXXX, Community Health Nurse will spend 20% of her time overseeing the Tribal SHIP grant and serving as supervisor. The individual’s annual salary is $XXXXXXX and will be covered for the 12 months of the grant period. The fringe benefits were calculated on the yearly salary of $XXXXXXX our current fringe benefit percent is 52%. This includes FICA, SUTA, Pension, Health, Dental, Disability, and Life.

Total Salary Requested: $XXXXXXX
Total Fringe Requested: $XXXXXXX

Total Salary and Fringe: XXXXXXXX

Contractual Services

$500 for a consultant to assess feasibility and teach how to most effectively collect sap. Considering tubing system and building a mobile sugar shack with new evaporator.

Total costs of contractual services: $500

Travel

Staff is expected to travel to attend meetings, trainings, and conferences where the attendee will be giving a presentation and/or the training will lead to related skill development and/or policy changes related to the strategies. Travel costs include mileage, hotel, and meals.

Mileage- in state ($2,500): Mileage to various trainings, meetings, and conferences throughout the grant period. I expect to travel around 5000 miles. The GSA mileage rate is 0.575

Hotels- in state ($1,100): Various hotels for trainings, meetings, and conferences throughout the grant period. Estimated 10 nights at an average of $100/night.

Meals ($500): Cost for meals when on travel. I estimate that I will travel for around 56 quarters x ~ $11.5/quarter. Amount decreased accounting for included meals.

Total In-state Travel: $4,000

Airfare- out of state ($550): Roundtrip flight to NCTOH Conference in Austin, TX
Hotel- out of state ($450): NCTOH Conference- 3 nights at $150/night

**Total Out of state Travel:** $1,000

**Total travel:** $5,000

### Supplies and Equipment

Food Supplies ($4,000): This includes the cost of food and food supplies for program-related events we proposed such as the cooking classes, gardening classes, and the worksite wellness classes as described in the strategies and work plan. This also includes cost of food for hosting collaborative meetings, community events, demonstrations, etc.

Office Supplies/Equipment ($297.18): This includes the cost of printing paper, tape, pens, markers, post-its, highlighters, etc. These supplies would be necessary to help with of planning activities and general office functions.

Program Supplies ($5,860): This also includes the cost of supplies and equipment needed for proposed activities.

- Garden Supplies: This includes the cost of wood, screws, soil, compost, soil tests, signage, seeds, starter plants, fruit trees, hoop houses, and various garden tools/equipment.
- Healthy Powwow Physical Activity supplies: This includes the cost of water, signage, cones, and other supplies we may need
- Educational and promotional materials: This includes the cost of such as brochures, curriculum, displays, etc.
- Incentives: Incentives will be used to encourage participation and draw people in for our collaborative community events. Examples include t-shirts, tote-bags, etc.

**Total Supplies and Equipment:** $10,157.18

### Other

Copying ($800): Monthly copying fee at 52.50/month.

Registration fees ($800): I expect to attend at least 4 conferences and trainings, estimating registration fees to be around $200 per event.

**Total Other:** $1600

### Administrative/Indirect Costs

Rent-Office ($1,800): This includes the cost of rent for the Wellness Educator’s office

Total Indirect Cost ($17,258.77): The indirect cost rate for our tribe is 26.47%

**Total Administrative/Indirect Cost:** $19,058.70
Terminology

**Activities**

Selected from the menu of strategies, activities are approaches taken to implement a particular strategy. For example, Farm to School is an approach within the “Building Local Food Economies” strategy.

**Administrative costs**

Administrative costs, or indirect costs, include items such as: accounting, human resources, general administration, rent, and costs for upkeep and maintenance of facilities, not including repairs or capital expenditures. Salaries for supervisory staff can also be considered an administrative expense. Items covered by the administrative rate cannot be itemized on the invoice.

**Best practices**

New ideas or lessons learned about effective program activities that have been developed and implemented in the field and have been shown to produce positive outcomes.

**Budget**

The budget is the financial plan of action for how a grantee will spend its funds. The budget is included in the application but is sometimes revised during grant agreement negotiations.

**Child care setting**

In the context of Tribal SHIP, child care is defined as a part of the community setting where a group of young children (of any ages between 6 weeks and age 6 or kindergarten entry) are cared for or educated.

The following are examples of child care settings, also called early care and education settings or early childhood programs:

- Child care centers
- Head Start programs
- Early Head Start programs
- Preschools
- (Licensed) family child care
- (Legally unlicensed) Family, Friend and Neighbor care
- Early Childhood Family Education (ECFE)
- School-based programs serving children younger than school-age, including School Readiness and Early Childhood Special Education programs
**Healthcare setting**

In the context of Tribal SHIP, the healthcare setting is defined as any setting where a provider of health services or health information practices. The following are considered health care settings:

- Hospitals/health systems
- Clinics
- Community clinics
- WIC offices
- Community Health Rep Service Agencies
- Student Health Services

**Community engagement**

The process of working collaboratively with and through groups of people to address issues affecting the wellbeing of those people.

**Community specialist**

Community Specialists serve as grant managers and are the primary contact for grantees seeking information or assistance from MDH. Grantees are assigned to a Community Specialist. Community Specialists are responsible for grant management and monitoring of their grantees.

**Culturally Responsive Indigenous Evaluation**

Evaluation that is grounded in Indigenous knowledge and theory and may use Indigenous research methods to design and implement an evaluation study. It is conducted for the benefit of Indigenous governments or communities, but may not be exclusively Indigenous led.

**Environmental change**

Environmental change is a physical or material change to the economic, social or physical environment. Examples are incorporating sidewalks, walking paths, and recreation areas into community development design; and an elementary school making healthy snacks and beverages available in all of its vending machines.

**Evaluation**

The systematic and intentional process of collecting and gathering information about a program for the purpose of planning, decision-making, program improvement, or reporting.

**Evaluation plan**

An evaluation plan describes steps to monitor and evaluate the program, and how evaluation results will be used for program improvement and decision making.
Focus area
Indicates whether the strategy and activities listed in the work plan addresses healthy eating, active living or commercial tobacco-free living efforts of: tobacco cessation, tobacco education, decreased exposure to commercial tobacco, or increased access to traditional tobacco.

Grant agreement
A legal document used for granting money to a variety of entities. Those entities can include non-profit organizations, city or county governments, for-profit organizations, higher education institutions, tribal governments, and individuals.

Grant monitoring
A process whereby the programmatic and business management performance of a grant are continuously reviewed through the collection and assessment of information gathered from audit, financial, and interim and annual reports; continuation applications; correspondence; and grantee corrective action, as needed.

Grantee
Tribal SHIP or Tribal Tobacco grantee is defined as any organization that is awarded Tribal SHIP or Tribal Tobacco funding through a Minnesota Department of Health grant agreement. It is the entity that is awarded funds and agrees to and signs the grant agreement document.

Grantee duties
These are the tasks and responsibilities in the grant agreement that the grantee must perform.

Health equity
When all people have the opportunity to realize their full health potential — the highest level of health possible for that person — without limits imposed by structural inequities. Achieving equity comes from within communities and is created by working toward just economic, social and environmental conditions that promote holistic well-being.

Health in all policies
An approach to tribal policy that weighs the potential health impacts of decisions, seeking to avoid harmful health impacts and improve community health outcomes.

Implementation
In the context of the TFC Grant, implementation means the process of developing, adopting, implementing, enforcing, maintaining, and evaluating activities and strategies.

Invoice
The document the grantee uses to receive payment for activities and expenses incurred as part of the grant activities.
**Local match**

A local match of 10 percent of the total funding award is required on Tribal SHIP grants. The local match may include cash contributions and in-kind match, and may include assistance from community partners.

- **Cash match** is money spent for Tribal SHIP-related costs. Cash match may come from county or city levies and/or funds contributed by partners or other third-party sources.
- **In-kind match** is a non-cash contribution of the fair market value of goods or services that support Tribal SHIP activities, contributed by the grantee, partners or other third parties. Examples of in-kind contributions are time contributed by the Tribal SHIP staff supervisor, donated meeting space, donated printing, etc.

Grantees are expected to report local match on monthly invoices.

**Policy, systems, and environmental (PSE) change**

Making changes at the policy, systems and/or environmental level to create a broader impact in advancing health and achieving health equity.

A policy strategy may be a law, ordinance, resolution, mandate, regulation, or rule (both formal and informal). Examples are laws and regulations that restrict smoking in public buildings and organizational rules that provide time off during work hours for physical activity. Subtypes of policies include:

- **Public policy**: A set of agreements about how government shall address societal needs and spend public funds that are articulated by leaders in all three branches of government and embedded in many different policy instruments (e.g., ordinances and resolutions).
- **Organizational policies**: A set of rules and understandings that govern behavior and practice within a business, nonprofit or government agency.
- **Regulatory policies**: Rules and regulations created, approved, and enforced by governmental agencies, generally at the federal or state level.

Systems strategies are changes that impact all elements of an organization, institution, or system; they may include a policy or environmental change strategy.

Environmental strategies involve physical or material changes to the economic, social, or physical environment.

**Prior approval**

The written permission provided by MDH before the grantee may deviate from the approved budget and/or project plans for certain expenditures.

**Progress report**

A report that grantees submit to the Community Specialist that details the accomplishments, challenges, and programmatic work of the grantee at specified intervals.
Reach

Reach is the extent to which a program impacts its intended audience and refers to the estimated number of unique individuals or sites (schools, businesses, etc.) potentially impacted by Tribal SHIP and Tribal Tobacco strategies. This count is an estimate rather than a headcount. The count never exceeds a community census figure.

Reimbursement basis only (or cost reimbursement payment)

This is a type of grant payment in which the grantee incurs the expenses before requesting repayment from the grantor. This means the cost must be paid by the grantee before it can be reimbursed. Expenditures on the invoice submitted to MDH should agree with expenditure accounting records.

Research

Research includes activities that have the purpose of producing public health knowledge that is relevant across settings and populations, and is not simply aimed at informing the program or population being studied.

School setting

School includes the classroom (not limited to health and physical education), school nutrition services, the school grounds or campus, a two-mile perimeter surrounding the school for walking or biking to school and related committee groups such as school wellness councils, Parent/Teacher Associations, etc. The following are examples of the school setting:

- Public Kindergarten – 12th Grade
- Private Kindergarten – 12th Grade
- Community, technical, private, and state colleges and universities
- Alternative schools
- After-school programs
- School-aged child care

Setting

The type of place or organization in which the strategies and activities are being implemented. Setting examples include: School, Worksite, Community, Clinic, and Child care.

Strategy

The overarching approach taken to achieve policy, system, or environmental change and supported by the activities being implemented in the work plan.

Subcontract/subcontractor

An agency that a grantee contracts with to perform some or all of the grantee’s duties listed in the grant agreement between the grantee and the state.
**Systems change**

Changes that impact all elements of an organization, institution, or system; they may include a policy or environmental change strategy. Two examples include a school district implementing healthy lunch menu options in all school cafeterias in the district, and a tribal public health department implementing a healthy meeting policy that allows only healthy snacks and beverages at all meetings that take place at the health department.

**Termination**

Permanent withdrawal of a grantee's authority to obligate previously awarded grant funds before that authority would otherwise expire, including the voluntary relinquishment of that authority by the grantee.

**Terms of award/grant agreement**

All legal requirements imposed on a grantee by MDH, whether by statute, regulation, or terms in the grant agreement. The grant agreement includes both standard and TFC specific provisions that are necessary to attain the objectives of the grant, facilitate post-award administration of the grant, conserve grant funds, or otherwise protect MDH’s interests.

**Unallowable cost**

This is a proposed cost that may not be purchased nor reimbursed with TFC funds.

**Unobligated balance**

This is a portion of the TFC grant funds that have not been obligated by the recipient at the close of the budget period.

**Work plan**

A work plan is an outline of planning and implementation activities that will lead to success in achieving program objectives within a specific timeframe.

**Worksite setting**

A worksite is defined as a location, permanent or temporary, where an employee performs work or work-related activities. Worksite facilities include lunchrooms, restrooms, breakrooms, vehicles used for work and parking facilities. If specified, it can also include the grounds around the worksite. The following are examples of the worksite setting:

- Tribal Offices
- Manufacturing plans
- Retail
- Food service
- School (employees)
- Transportation
- Wholesale
- Agriculture Construction
- Health care (employees)
Menu of Strategies

Healthy Eating for Strong Native Communities Strategies

Increase healthy food availability by preserving and reclaiming food sovereignty, cultural traditions and Native food systems through the following strategies:

- Supporting a community mindset for healthy and indigenous foods

  *Example Activities*

  - Identify and engage existing groups and leaders to build partnerships and foster collaboration on a mutually agreed vision through coalition building and strategic planning
  - Food sovereignty assessment and plan development
  - Host experiential learning opportunities: wild rice camps, maple sugar camps, foraging, three sister’s gardens
  - Host intergenerational nutrition classes with a focus on Indigenous and healthy foods
    - Foraging classes for local foods
    - Incorporate food tastings
  - Provide teachings in healthy and/or traditional indigenous food practices and techniques for youth, elders, head start and school cooks
  - Provide support and resources for backyard agriculture, cultural, medicinal and educational gardens
  - Partner with SNAP-Ed programs to increase educational opportunities to families
  - Implement similar SNAP-Ed healthy eating curriculums in communities that currently do NOT have SNAP-Ed Coordinators
  - Create and share Farm to School program best practices and resources
  - Revise curriculums to include culturally relevant nutrition education and activities around healthy eating and Indigenous foods.
    - For example adapt the “Yummy curriculum” to be inclusive of “My Native Plate” and include working with elders and other language learners to translate songs into Ojibwe and Dakota.
  - Participate in a community food network
Train and educate health and education professionals on how to increase children’s healthy eating and counsel parents about their children’s diet.

Increase breastfeeding policies and support for breastfeeding moms across community settings (worksites, farmer’s markets, casinos, clinics, etc.)
  - Identify and promote breastfeeding areas

Adopt policy for early childhood nutrition centers/Headstart that promotes local and Indigenous foods.

Adopt nutritional standards for non-meal foods in schools (snacks, celebrations, sales)

Integrating indigenous and healthy foods into community outlets

Example Activities

- Assess food sovereignty in community food systems for integration of indigenous and healthy foods and plan development
- Create and implement policy encouraging healthy and Indigenous powwow concessions
- Create and implement policy and/or systems changes supporting healthy vending options in community spaces
  - Create incentives for vendors offering healthy options
  - Post nutritional information for all items
- Plan and host farmers markets
- Increase breastfeeding policies and support for breastfeeding moms across community settings (worksites, farmer’s markets, casinos, clinics, etc.)
  - Identify and promote breastfeeding areas
- Adopt policy for early childhood nutrition centers/Headstart that promotes local and Indigenous foods
- Adopt nutritional standards for non-meal foods in schools (snacks, celebrations, sales)
- Implement menu changes and increased healthy and Indigenous options in food programs such as Elderly Nutrition Programs
- Create policy/environmental changes that promote calorie labeling for retail outlets such as restaurant menu changes and convenience store offerings
- Support the provision of school salad bars
- Adopt policy that supports healthy beverages with kid’s meals in retail environment
- Adopt policy that supports healthy meal standards in retail environment
- Adopt policy to incorporate child and adult care food program standards into child care licensing laws
- Increase collaboration with other tribal food programs.
- Food shelves, USDA’s Food Distribution Program on Indian Reservations (FDIPR), Elder Nutrition, SNAP, SNAP-Ed, etc.

- **Building local food economies**

  *Example Activities*
  - Provide support to sustain community kitchens
  - Plan and host farmers markets
  - Identify local food hubs: [National Good Food Network Food Hub Center](http://www.ngfn.org/resources/food-hubs)
  - Implement and provide support for mobile markets
  - Increase breastfeeding policies and support for breastfeeding moms across community settings (worksites, farmer’s markets, casinos, clinics, etc.)
    - Identify and promote breastfeeding areas
  - Adopt policy for early childhood nutrition centers/Headstart that promotes local and Indigenous foods
  - Provide fruit and vegetable boxes for tribal members

- **Increasing local agricultural and food production**

  *Example Activities*
  - Support cultural plant restoration, identify edible trails and promote harvesting
  - Implement producer and rancher trainings
  - Promote and provide support for community agriculture
  - Increase breastfeeding policies and support for breastfeeding moms across community settings (worksites, farmer’s markets, casinos, clinics, etc.)
    - Identify and promote breastfeeding areas
  - Adopt policy for early childhood nutrition centers/Headstart that promotes local and Indigenous foods
  - Increase access to the number of school teaching gardens
  - Provide fruit and vegetable boxes for tribal members

- **Ensuring sustainable development and practices**

  *Example Activities*
  - Assess and create potential land management plans
  - Increase water protection
  - Plan and host Gathering of Native American (GONA) community events and facilitator trainings
    - Support the development of a community readiness assessment
  - Host Adverse Childhood Experiences (ACEs) training for community and train the trainer for staff
- Provide other trauma informed trainings including trainings around understanding Historical trauma
- Pursue motivational interviewing training as well as other trainings that assist with 1:1 coaching
- Attend Technology of Participation (ToP) or world café trainings that will assist with group facilitation, strategic planning and consensus workshops

- Community-Clinic Linkages
  
  **Example Activities**

  - Implement or provide support to the Diabetes Prevention Program
  - Increase breastfeeding policies and support for breastfeeding moms across community settings (worksites, farmer’s markets, casinos, clinics, etc.)
    - Identify and promote breastfeeding areas
  - Partner with local health system to provide fruit and vegetable prescriptions for any person with a child
  - Develop and implement and elder nutrition screening initiative
    - Implement a checklist screening procedure can assist in finding whether a patient may be at nutritional risk.
      - For example: [The Nutrition Screening Initiative’s DETERMINE CHECKLIST](https://nutritionandaging.org/toolkit-the-nutrition-screening-initiatives/)
PROMOTING INDIGENOUS HEALTH

HEALTHY EATING FOR STRONG NATIVE COMMUNITIES

APPENDIX B

NOVEMBER 2019

50
Active Living and Healthy Indigenous Lifeway Strategies

- **Working on assessment**: host activities that gauge the readiness for change by convening leadership, workers, and guests to identify community needs, assets, current health behavior and perspectives in the community. Use this information to engage them in determining culturally appropriate strategies to increase physical activity opportunities in the community, schools, after school programs and worksites.

  **Example Activities**
  - Administer community assessments to gauge need for physical activity opportunities
  - Create an asset map to determine existing physical activity resources
  - Facilitate community visioning sessions to create community buy-in

- **Working on engagement and education**: facilitate and host activities that encourage tribal leadership support and engagement, community engagement and uphold cultural connectedness, healing and practicing tradition with youth and community.

  **Example Activities**
  - Identify and engage existing groups and leaders to build partnerships and foster collaboration on a mutually agreed vision through coalition building and strategic planning
  - Host experiential opportunities such as culture classes and camps:
    - Canoe journey, drum group, maple sugar and ricing camps
  - Host healthy powwows that promote physical activity for all attendees
  - Plan and host Gathering of Native American (GONA) community events and facilitator trainings
    - Support the development of a community readiness assessment
  - Host Adverse Childhood Experiences (ACEs) training for community and train the trainer for staff
  - Provide other trauma informed trainings including trainings around understanding historical trauma
  - Pursue motivational interviewing training as well as other trainings that assist with 1:1 coaching
  - Attend Technology of Participation (ToP) or world cafe trainings that will assist with group facilitation, strategic planning and consensus workshops
  - Implement physical activity clubs like lacrosse, stick ball, hoop dancing and powwow dancing with cultural education
  - Provide before and/or after school programming that increases physical activity opportunities
    - Open gym opportunities
    - Intramural sports
- Increase availability of safe outdoor recreation
- Implement Earn-a-Bike programs
  - Maintenance classes, group rides, education, bike distribution
- Create bicycle friendly improvements to the local infrastructure
  - Bicycle racks, bike education classes, fix-it stations, bike lock lending program, bike library
- Improve caregiver supports for physical activity, both indoors and outdoors

### Improving environmental supports for physical activity, both indoors and outdoors

**Example Activities**

- Support any enhancement of safety to increase access of indoor/outdoor spaces
  - e.g. animal control policy initiatives, procedures or enforcement support
- Develop transportation policies to increase access
- Offer accessible physical activity classes
  - Mobility and scheduling
- Identify plans to grow infrastructure
- Improve built environment for walking, bicycling, swimming and other physical activities

### Increasing availability of and access to physical activity in the school setting

**Example Activities**

- Implement active classrooms
- Implement active recess
  - Incorporate active cultural wellness activities including traditional games like lacrosse and stick ball, hoop dancing and powwow dancing, increasing equipment
  - Indoor recess training, payment for substitute and per diem/mileage for teacher trainings, staff supplies
- Provide Intramurals and open gym opportunities
- Increase availability of safe outdoor recreation (includes improving built environment)
- Develop and implement Safe Routes to School (SRTS) programming
  - Walk! Bike! Fun! Curriculum, SRTS Plans, travel plans, remote drop-off, bike share program, school assemblies, bike safety courses

### Increasing availability of and access to physical activity in the worksite setting

**Example Activities**

- Implement lunchtime workout programs
  - Walking, yoga, biking, tai chi, weight lifting, etc.
- Provide space and small workout equipment (dumbbells, exercise balls, exercise mats, etc.)
- Adopt policy to allow flexible scheduling
- Promote and implement walking programs including group walks, walking meetings, etc.
- Increase opportunities and create programming for active commuting
- Increase walkability around worksites
  - Development of sidewalks, paths and safe outdoor spaces
- Create a Bicycle Friendly Business program that provides resources for improvements
  - Bicycle racks, bicycle incentives for customers/staff, bike education classes, fix-it stations, bike lock lending program, bike library, etc.

Community-Clinic Linkages

Example Activities

- Implement Falls Prevention programming and training opportunities
- Implement Wisdom Steps programming
ACTIVE LIFESTYLES FOR STRONG NATIVE COMMUNITIES

PROMOTING INDIGENOUS PHYSICAL WELLNESS

- Indigenous games: lacrosse, stickball, running, double ball, canoeing, archery
- Fitness activities: running, walking, biking, basketball, volleyball, swimming, dancing

- Promote physical activity in annouenements.
  - Include planned fitness activities in powwow schedules.

- Designate spaces and provide equipment for fitness activities.
  - Organize clubs for powwow dancing and Indigenous games.

- Endorse and pass policies to promote physical activity.
  - Allocate funding to increase physical activity opportunities.
  - Offer health insurance plans that incentivize physical activity.

- Create policies that require daily structured physical activity and sets limits on screen time.
- Enact policy to keep playgrounds safe and open during non-school hours.

- Recommend tailored physical activity plans and refer to resources and programs.
  - Recommend screen time limits for youth.

- Establish a community garden with the support of an organized committee.
  - Provide incentives to youth and elders to help maintain garden.

- Enact policies that protect lands for harvesting, hunting and fishing.
  - Develop and maintain safe community areas by installing lights, trails, crosswalks, bike lanes and attractive landscaping.

- Offer free or low-cost memberships.
  - Organize fitness activities that appeal to diverse audiences.
Keep Tobacco Sacred Strategies

- **Working on assessment**: host activities that gauge the readiness for change by convening leadership, workers, and guests to identify community needs, assets, current health behavior and perspectives in the community. Use this information to engage them in determining culturally appropriate strategies to reduce commercial tobacco smoke exposure on campus, at the worksite and in the community.

  - *Example Activities*
    - Administer community assessments to gauge the need for tobacco opportunities
    - Create an asset map to determine existing tobacco resources
    - Facilitate community visioning sessions to create community buy-in

- **Working on engagement and education**: facilitate and host activities that encourage tribal leadership support and engagement, community engagement, and uphold cultural connectedness, healing and practicing tradition with youth and community.

  - *Example Activities*
    - Identify and engage existing groups and leaders to build partnership and foster collaboration on a mutually agreed vision through coalition building and strategic planning
    - Provide traditional tobacco education for community members
    - Encourage traditional tobacco use at ceremonies, powwows and other events
    - Engage community with knowledge of cultural practices for traditional tobacco use and harms of commercial tobacco use
    - Plan and host culture classes and camps: Canoe journey, drum group, maple sugar and ricing camps, language camps
    - Plan and host Gathering of Native American (GONA) community events and facilitator trainings
      - Support the development of a community readiness assessment
    - Host Adverse Childhood Experiences (ACEs) training for community and train the trainer for staff
    - Provide other trauma informed trainings including trainings around understanding historical trauma
    - Pursue motivational interviewing training as well as other trainings that assist with 1:1 coaching
    - Attend Technology of Participation (ToP) or world cafe trainings that will assist with group facilitation, strategic planning and consensus workshops
    - Implement language revitalization efforts where lessons focus on traditional tobacco teachings
O Incorporate traditional tobacco knowledge and practices into education, workday, and community events
O Utilize signage to promote traditional cultural values around tobacco
O Promote culturally relevant anti-commercial tobacco messaging at events such as powwows/wacipi
O Implement social media campaigns, photo voice projects and digital story-telling initiatives
O Provide presentations that encourage indigenous lifeways and knowledge sharing for community members
O Provide education on electronic cigarettes, otherwise known as vaping, to schools, tribal leadership and community members

☐ Increase access to traditional tobacco

Example Activities
O Encourage traditional tobacco use at ceremonies, powwows and other events
O Promote and sustain traditional tobacco agriculture and medicine gardens
O Host traditional tobacco harvesting events
O Partner with other community events to provide opportunities to harvest and grow traditional tobacco.

☐ Decrease exposure to commercial tobacco smoke where community members live, work and play, such as tribal buildings and vehicles, tribal housing, hotel spaces, meeting spaces, sports complexes, playgrounds and healthcare campuses (Commercial tobacco free environments):

Example Activities
O Enact a school/worksite/community policy and practices that disallows commercial tobacco use indoors and 25-50 feet outside of building entrances while encouraging traditional tobacco use
O Encourage traditional tobacco at ceremonies, powwows and other events
O Enhance enforcement practices for new and existing commercial tobacco policies
O Update existing commercial tobacco policies to include electronic cigarettes

☐ Cessation and Community-Clinic Linkages

Example Activities
O Increase cessation support and/or linkages to cessation services into high-priority health- or social service-related services or programs (e.g., provider education networks (asthma, diabetes, or HIV/AIDS), WIC services.)
o Work with community partners to develop or enhance a peer-to-peer outreach model, such as a community health reps or other peer support model, to integrate cessation support into housing, clinics, or other community settings.

o Integrate community-partnered cessation education, support, and/or referral into places frequented by community members (e.g., places of worship, barber or beauty shops, community recreation centers.)

o Promote and refer cessation clients to the AI Quitline

o Strengthen paid benefits for cessation treatment and support

o Promote resources for culturally specific cessation through existing and new communication avenues

o Partner with your health system to implement I-Quits Toolkit (clinical systems innovation project through AICAF)

o Certified Tobacco Treatment Specialist Training (to provide on-site clinical cessation services/counseling and resources)

o Incorporate commercial tobacco treatment in existing programs such as substance abuse and behavioral health
SACRED TRADITIONAL TOBACCO
FOR HEALTHY NATIVE COMMUNITIES

A BALANCED COMMUNITY FOR HEALTH

- Tribal leadership support & engagement
- Cultural connectedness & healing
- Community engagement
- Practicing tradition with youth

COMMUNITY CENTER

- Enact tribal ordinance that disallows harmful tobacco use inside building and 25 feet outside building.
- Encourage traditional tobacco for gifts and offerings at ceremonies and events.

TRIBAL COUNCIL AND GOVERNMENT CENTER

- Enact tribal tobacco policies that will improve community health.
- Prioritize and support positive community health initiatives.

TRIBAL CLINIC

- Provide direct support to quit with culturally specific cessation.

COMMUNITY TOBACCO GARDEN

- Grow traditional tobacco and provide education for community members.

SCHOOL

- Incorporate traditional tobacco knowledge and practices into education.

DANCE GROUNDS

- Use only traditional tobacco. Do not allow cigarette smoking.

SIGNAGE

- Use signage to promote traditional American Indian cultural values around tobacco and solutions.

NATIVE LANGUAGE CAMP

- Engage community with knowledge of cultural practices for traditional tobacco use.

RETAIL/CONVENIENCE STORE

- Eliminate sale of flavored tobacco and e-cigarette products.
- Limit marketing of commercial tobacco and ensure youth do not have access.
Prior Approval for Grant Expenditures

Grantees must submit this form for all expenditure requests requiring prior approval to their Community Specialist. Community Specialists will strive to review requests within 3 to 5 business days.

Grantee organization: Click here to enter text.

Staff person submitting request: Click here to enter text.

Date submitted to Community Specialist for review: Click here to enter a date.

Please indicate which type of revision or expenditure is being requested and answer the questions in that section. Please limit answers to 3-5 sentences.

☐ Contractual Services  ☐ Out-of-state Travel  ☐ Equipment and Electronics
☐ Other Costs  ☐ Communication Pieces

Contractual Services (of $3,000 or more)

1. Identify the intended recipient of the contract/mini-grant (organization, person, title), time period of the contract/mini-grant (start and end dates, estimated hours), and the total amount of the contract/mini-grant. Please attach any supporting documents such as draft contract language or contract/mini-grant application.
   Click here to enter text.

2. Which activity(ies) or strategy(ies) will the contract/mini-grant cover? What is the rationale for the contractor/mini-grant support?
   Click here to enter text.

3. What duties and what measures of success have been established?
   Click here to enter text.

4. How will the contract/mini-grant be monitored and managed?
   Click here to enter text.

Out-of-state Travel

1. Identify the conference name, location, and dates of the conference you wish to attend:
   Click here to enter text.
2. Why is this a good use of your TFC grant funds and how does this apply to your grant work?

Click here to enter text.

3. Please enter an estimate per person for the conference.

- Conference registration fee: $Click here to enter text.
- Travel (airfare, taxi and/or other means): $Click here to enter text.
- Hotel/lodging: $Click here to enter text.
- Meals (breakfast, lunch, dinner): $Click here to enter text.
- Other: $Click here to enter text.
- Total Cost Per Person: $Click here to enter text.
- Grant Total: $Click here to enter text.

*Consult with MDH for the meal reimbursement rates for the city traveling to for the conference. MDH funds do not cover reimbursement for alcohol purchases.

Equipment (of $3,000 or more) and Electronics

1. Identify the type and cost of the equipment or electronic purchase requested:
   Click here to enter text.

2. Why is this item needed and how does it directly support your grant work?
   Click here to enter text.

Communication Pieces

1. Please provide a brief description of the specific target audience for this piece and how it will support your overall program goals and communications objectives.
   Click here to enter text.
   Attach a draft or proof document for all communication pieces.
Evaluation Pieces

1. Please provide a brief description of the specific target audience for this evaluation tool and evaluation activity.

   Click here to enter text.

   Attach evaluation tools and/or evaluation results for review.

For Office Use Only

☐ Reviewed by Community Specialist
☐ Approved
☐ Denied
☐ Needs Follow-up: Click here to enter text.