



Australian Government

Department of Health and Aged Care

Tackling Indigenous Smoking Regional Tobacco Control Grants (2023-24 to 2026-27) Grant Opportunity Guidelines GO6775

| | |
|------------------------------------|---|
| Opening date: | 02 February 2023 |
| Closing date and time: | 5:00pm (Canberra time) on 02 February 2023 |
| Commonwealth policy entity: | Department of Health and Aged Care (department) |
| Administering entity: | Community Grants Hub |
| Enquiries: | If you have any questions, contact the department via email: Grant.ATM@health.gov.au |
| Type of grant opportunity: | Closed non-competitive (non-application based) |

Contents

| | |
|---|-----------|
| 1. Tackling Indigenous Smoking Regional Tobacco Control Grants (2023-24 to 2026-27) Grant Opportunity..... | 4 |
| 1.1 Introduction | 5 |
| 2. About the grant program..... | 5 |
| 2.1 About the grant opportunity..... | 6 |
| 3. Grant amount and grant period | 7 |
| 3.1 Grants available | 7 |
| 3.2 Grant period | 8 |
| 4. Eligibility criteria | 8 |
| 4.1 Who is eligible for a grant? | 9 |
| 4.2 Who is not eligible for a grant? | 10 |
| 4.3 What qualifications, skills or checks are required? | 10 |
| 5. What the grant money can be used for..... | 10 |
| 5.1 Eligible grant activities | 10 |
| 5.2 Eligible locations | 11 |
| 5.3 Eligible expenditure..... | 11 |
| 5.4 What the grant money cannot be used for..... | 11 |
| 6. The assessment criteria | 12 |
| 7. How to apply..... | 13 |
| 7.1 Timing of grant opportunity processes..... | 13 |
| 7.2 Questions during the process | 14 |
| 8. The grant selection process | 14 |
| 8.1 Assessment of suitability..... | 14 |
| 8.2 Who will assess suitability?..... | 15 |
| 8.3 Who will approve grants?..... | 15 |
| 9. Notification of outcomes..... | 16 |
| 10. Successful grantees | 16 |
| 10.1 The grant agreement | 16 |
| 10.2 The Multicultural Access and Equity Policy | 16 |
| 10.1.1 Commonwealth Child Safe Framework | 16 |
| 10.1.2 National Redress Scheme | 17 |
| 10.2 How we pay the grant | 17 |
| 10.3 Grants Payments and GST | 17 |
| 11. Announcement of grants | 18 |
| 12. How we monitor your grant activity | 18 |
| 12.1 Keeping us informed | 18 |
| 12.1.1 COVID-19, natural disasters or unforeseen events/circumstances..... | 18 |
| 12.2 Reporting..... | 18 |

| | | |
|------------|--|-----------|
| 12.3 | Financial reporting | 20 |
| 12.4 | Grant agreement variations | 20 |
| 12.5 | Compliance visits | 20 |
| 12.6 | Record keeping | 20 |
| 12.7 | Evaluation | 20 |
| 12.8 | Acknowledgement..... | 21 |
| 13. | Probity | 21 |
| 13.1 | Enquiries and feedback | 21 |
| 13.2 | Conflicts of interest | 21 |
| 13.3 | Privacy | 22 |
| 13.4 | Confidential Information | 22 |
| 13.5 | Freedom of information | 23 |
| 14. | Consultation | 24 |
| 15. | Glossary | 24 |
| | Appendix A..... | 29 |
| | Tackling Indigenous Smoking Regional Tobacco Control Grants Background..... | 29 |

1. Tackling Indigenous Smoking Regional Tobacco Control Grants (2023-24 to 2026-27) Grant Opportunity

The Tackling Indigenous Smoking Program is designed to achieve Australian Government objectives. This grant opportunity is part of the above grant program which currently contributes to the Department of Health and Aged Care's Outcome 1, Program 1.3. The Department of Health and Aged Care works with stakeholders to plan and design the grant program according to the [Commonwealth Grants Rules and Guidelines](#) (CGRGs).



The grant opportunity opens
We publish the grant opportunity guidelines on [GrantConnect](#).



You do not need to complete and submit a grant application
Your suitability, including past performance, to receive a grant will be assessed using existing information held by the department.



We assess grant suitability
We assess your suitability against eligibility criteria. We assess your suitability to receive a grant against the assessment criteria including an overall consideration of value with money.



We make grant recommendations
We provide advice to the Decision Maker on the merits of the assessed information.



Grant decisions are made
The Decision Maker decides if you are suitable and successful for grant funding.



We notify you of the outcome
We advise you of the outcome.



We enter into a grant agreement
We vary grant agreement with you if successful. The type of grant agreement is based on the nature or complexity of the grant and will be proportional to the risks involved.



Delivery of grant
You undertake the grant activity as set out in your grant agreement. The Community Grants Hub manage the grant by working with you, monitoring your progress and making payments.



Evaluation of the grant opportunity
We evaluate your specific grant activity and the grant opportunity as a whole. We base this on information you provide to us and that we collect from various sources.

1.1 Introduction

These guidelines contain information for the Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2026-27 (GO5803 Grant Agreement Variation) grant opportunity.

You must read these guidelines.

This document sets out:

- the purpose of the grant program/grant opportunity;
- the eligibility and assessment criteria;
- how suitability to receive a grant is considered;
- how grantees are notified and receive grant payments;
- how grantees will be monitored and evaluated; and
- responsibilities and expectations in relation to the opportunity.

2. About the grant program

The *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2026-27 (GO5803 Grant Agreement Variation) (TIS Program 2023-24 to 2026-27)* will run over four financial years (FY).

The TIS Program 2023-24 to 2026-27 was announced as part of the *Budget Measure (2023-24) – Tackling Smoking and Vaping and Improving Cancer Outcomes* (Budget Measure (2023-24)).

It extends upon the recently established *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2025-26*. This extension includes an additional year (2026-27 FY) and increased focus on recreational vaping (vaping) prevention activities.

TIS is a well-established and internationally recognised population health promotion program that works with First Nations communities to reduce tobacco use and vaping. It has a proven track record of delivering outcomes in smoking prevention and reduction through locally tailored activities.

This will now be extended through additional funding to include the delivery of new locally tailored and targeted vaping prevention activities, supported by continued expert advice from the TIS National Best Practice Unit (NBPU), while also maintaining efforts to reduce tobacco smoking.

The additional funding considers the latest available national vaping prevalence data and will be distributed through variation of the TIS RTCG grant agreements currently in place with 26 TIS Lead Organisations, across 37 *Australian Bureau of Statistics (ABS) Indigenous regions (IREG/s)*.

Refer to Appendix A for policy and program background, including related programs and grant opportunities.

The objective of the TIS Program 2023-24 to 2026-27 is to reduce smoking and vaping rates among First Nations populations and preventing uptake. The intended outcome is a reduction in rates of chronic disease due to smoking and vaping, to continue to improve the life expectancy for First Nations people and improve birth outcomes.

The TIS Program 2023-24 to 2026-27 is administered according to the [Commonwealth Grants Rules and Guidelines](#) (CGRGs).

Alongside the First Nations investment, the Budget Measure (2023-24), more broadly funds strong action to reduce smoking and vaping rates – particularly among young Australians – through stronger legislation, enforcement, education and support. Actions include:

- stronger regulation and enforcement of all e-cigarettes, including new controls on their importation, contents and packaging, as well as stamping out the growing black market in illegal vaping;
- a new public health information campaign will be developed to discourage Australians from taking up smoking and vaping, and encourage more people to quit, along with a new National Lung Cancer Screening Program for eligible current and former smokers; and
- tax on tobacco will be increased, making cigarettes more expensive and less attractive, and all tobacco will be taxed at the same rate.

These measures aim to address the significant threat to public health caused by tobacco products and vapes. Refer to [Tackling smoking and vaping, and improving cancer outcomes – Budget 2023–24 | Australian Government Department of Health and Aged Care](#) for further information.

2.1 About the grant opportunity

The Budget Measure (2023-24) announcement brings the Australian Governments total investment in TIS Program service delivery to \$203.3 million (GST excl.) over the four-year period.

This total investment is inclusive of both existing TIS Program service delivery funding, as well as the additional Budget Measure (2023-24) funding investment now available.

To reflect this additional funding investment, the TIS Program 2023-24 to 2026-27 grant opportunity consolidates existing grant agreements with the 26 TIS Lead Organisations, with the additional Budget Measure (2023-24) funding, to ensure delivery of activities to prevent the uptake of smoking and vaping among First Nations people until 2027. This will be facilitated through variation of grant agreements and release of these Guidelines, which have been updated to include further action on vaping.

The *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2025-26* Grant Opportunity Guidelines GO5803 released on GrantConnect on 18 November 2022, are now superseded by these Guidelines.

The key priorities of the TIS Program 2023-24 to 2026-27 are to:

- achieve national coverage through service delivery defined by IREG;
- maintain a focus on priority groups, including remote communities, youth, and pregnant women;
- strengthen the focus on population health activities; and
- maintaining efforts to reduce smoking rates among First Nations people to 27 percent or less by 2030 (National Preventive Health Strategy 2021-2030 target).

The grant activity will be measured against the TIS Performance Indicators:

- Eligible, evidence-based population health promotion activities are being implemented, monitored and improved upon (if necessary);
- Activities are reaching intended audiences;
- Eligible TIS activities and messaging are co-designed with local Aboriginal and Torres Strait Islander peoples to ensure they are culturally safe for the local community;

- Formal and informal partnerships are engaged and facilitate support for eligible TIS activities;
- Intended audiences have increased awareness about how to access quit support;
- Intended audiences have increased intentions to remain smoke-free, quit and/or stay quit;
- Intended audiences have increased intentions to make and/or keep environments smoke-free;
- Intended audiences have increased intentions to make and/or keep environments vape-free; and
- Intended audiences have increased intentions to remain vape free, quit and/or stay quit.

TIS Performance Indicator measures are clearly articulated in the TIS Program Monitoring and Evaluation Framework, now also reflecting the Government’s increased priority and investment in vaping prevention activities delivered through TIS.

3. Grant amount and grant period

3.1 Grants available

The Australian Government has made available a total of \$203.3 million (GST excl.) over four years for TIS Program 2023-24 to 2026-27 service delivery grants. The TIS Program 2023-24 to 2026-27 grant opportunity will run from 2023-24 to 2026-27 FY.

The available funding is targeted to IREGs to ensure TIS Program national coverage and address vaping alongside existing efforts to reduce smoking prevalence amongst First Nations people and communities.

The available annual and total grant funding amounts (excluding GST) to deliver the TIS Program 2023-24 to 2026-27 in each IREG is provided below in Table 1.

Table 1: Grant Opportunity Funding Available by Indigenous Region (IREG) (GST exclusive)

| IREG ID | Indigenous Region (IREG) | Jurisdiction | 2023-24 IREG funding allocation | 2024-25 IREG funding allocation | 2025-26 IREG funding allocation | 2026-27 IREG funding allocation | Total IREG funding allocation |
|---------|-----------------------------|--------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|-------------------------------|
| 101 | Dubbo | NSW | \$843,840 | \$864,092 | \$881,372 | \$898,116 | \$3,487,420 |
| 102 | North-Eastern NSW | NSW | \$1,138,168 | \$1,165,484 | \$1,188,792 | \$1,211,376 | \$4,703,820 |
| 103 | North-Western NSW | NSW | \$1,053,252 | \$1,078,528 | \$1,100,096 | \$1,120,996 | \$4,352,872 |
| 104 | NSW Central and North Coast | NSW | \$2,901,216 | \$2,970,844 | \$3,030,260 | \$3,087,832 | \$11,990,152 |
| 105 | Riverina - Orange | NSW | \$1,687,436 | \$1,727,932 | \$1,762,488 | \$1,795,972 | \$6,973,828 |
| 106 | South-Eastern NSW | NSW | \$1,685,164 | \$1,725,604 | \$1,760,116 | \$1,793,556 | \$6,964,440 |
| 107 | Sydney - Wollongong | NSW | \$1,897,748 | \$1,943,292 | \$1,982,156 | \$2,019,816 | \$7,843,012 |
| 201 | Melbourne | VIC | \$1,480,780 | \$1,516,316 | \$1,546,640 | \$1,576,024 | \$6,119,760 |

| | | | | | | | |
|-----|------------------------------|-----|-------------|-------------|-------------|-------------|--------------|
| 202 | Victoria excl. Melbourne | VIC | \$2,743,176 | \$2,809,012 | \$2,865,192 | \$2,919,628 | \$11,337,008 |
| 301 | Brisbane | QLD | \$1,897,748 | \$1,943,292 | \$1,982,156 | \$2,019,816 | \$7,843,012 |
| 302 | Cairns - Atherton | QLD | \$1,138,168 | \$1,165,484 | \$1,188,792 | \$1,211,376 | \$4,703,820 |
| 303 | Cape York | QLD | \$1,606,828 | \$1,645,388 | \$1,678,296 | \$1,710,180 | \$6,640,692 |
| 304 | Mount Isa | QLD | \$1,084,608 | \$1,110,636 | \$1,132,848 | \$1,154,372 | \$4,482,464 |
| 305 | Rockhampton | QLD | \$1,295,504 | \$1,326,596 | \$1,353,124 | \$1,378,832 | \$5,354,056 |
| 306 | Toowoomba - Roma | QLD | \$1,308,348 | \$1,339,748 | \$1,366,540 | \$1,392,504 | \$5,407,140 |
| 307 | Torres Strait | QLD | \$816,692 | \$836,292 | \$853,016 | \$869,220 | \$3,375,220 |
| 308 | Townsville - Mackay | QLD | \$1,205,120 | \$1,234,040 | \$1,258,720 | \$1,282,632 | \$4,980,512 |
| 401 | Adelaide | SA | \$1,392,640 | \$1,426,060 | \$1,454,580 | \$1,482,216 | \$5,755,496 |
| 402 | Port Augusta | SA | \$1,522,112 | \$1,558,640 | \$1,589,812 | \$1,620,016 | \$6,290,580 |
| 403 | Port Lincoln - Ceduna | SA | \$1,126,416 | \$1,153,448 | \$1,176,516 | \$1,198,868 | \$4,655,248 |
| 501 | Broome | WA | \$816,692 | \$836,292 | \$853,016 | \$869,220 | \$3,375,220 |
| 502 | Geraldton | WA | \$1,660,524 | \$1,700,376 | \$1,734,380 | \$1,767,380 | \$6,862,660 |
| 503 | Kalgoorlie | WA | \$1,672,412 | \$1,712,548 | \$1,746,796 | \$1,779,984 | \$6,911,740 |
| 504 | Kununurra | WA | \$871,940 | \$892,864 | \$910,720 | \$928,020 | \$3,603,544 |
| 505 | Perth | WA | \$800,496 | \$819,704 | \$836,096 | \$851,980 | \$3,308,276 |
| 506 | South Hedland | WA | \$2,082,316 | \$2,132,288 | \$2,174,932 | \$2,216,252 | \$8,605,788 |
| 507 | South-Western WA | WA | \$1,022,028 | \$1,046,556 | \$1,067,520 | \$1,087,800 | \$4,223,904 |
| 508 | West Kimberley | WA | \$852,124 | \$872,572 | \$890,020 | \$906,928 | \$3,521,644 |
| 601 | Tasmania | TAS | \$842,580 | \$862,800 | \$880,056 | \$896,776 | \$3,482,212 |
| 701 | Alice Springs | NT | \$1,020,164 | \$1,044,648 | \$1,065,540 | \$1,085,784 | \$4,216,136 |
| 702 | Apatula | NT | \$871,940 | \$892,864 | \$910,720 | \$928,020 | \$3,603,544 |
| 703 | Darwin | NT | \$625,000 | \$640,000 | \$652,800 | \$665,200 | \$2,583,000 |
| 704 | Jabiru - Tiwi | NT | \$871,940 | \$892,864 | \$910,720 | \$928,020 | \$3,603,544 |
| 705 | Katherine | NT | \$2,122,596 | \$2,173,536 | \$2,217,004 | \$2,259,124 | \$8,772,260 |
| 706 | Nhulunbuy | NT | \$1,775,812 | \$1,818,428 | \$1,854,796 | \$1,890,036 | \$7,339,072 |
| 707 | Tennant Creek | NT | \$721,432 | \$738,744 | \$753,516 | \$767,832 | \$2,981,524 |
| 801 | Australian Capital Territory | ACT | \$716,420 | \$733,612 | \$748,284 | \$762,500 | \$2,960,816 |

3.2 Grant period

The maximum grant period is four years. You must complete your grant activities by 31 October 2027.

4. Eligibility criteria

We cannot consider your suitability to receive a grant if you do not satisfy all the eligibility criteria. We cannot provide a grant if you receive funding from another government source for the same purpose.

4.1 Who is eligible for a grant?

To be eligible for a grant agreement variation, you must be an existing TIS Lead Organisation, delivering the TIS Program 2023-24 to 2025-26 in IREG/s (Eligible Location/s) approved by the department delegate, as listed below in Table 2.

Table 2: TIS Lead Organisations (Eligible Organisations)

| Legal Name of TIS Lead Organisation | Eligible Location/s IREG ID | ABN |
|---|------------------------------|-------------|
| Aboriginal Health Council of South Australia Limited | 402 | 89287854542 |
| Aboriginal Health Council of Western Australia | 505 | 48114220478 |
| Aboriginal Medical Services Alliance Northern Territory | 704 | 26263401676 |
| Anyinginyi Health Aboriginal Corporation | 707 | 97329483372 |
| Apunipima Cape York Health Council Limited | 303 | 26089437717 |
| Bega Garnbirringu Health Services Incorporated | 503 | 47976288533 |
| Central Australian Aboriginal Congress Aboriginal Corporation | 701, 702 | 76210591710 |
| Danila Dilba Biluru Butji Binnilutlum Health Service Aboriginal Corporation | 703 | 57024747460 |
| Flinders Island Aboriginal Association Incorporated | 601 | 22604123914 |
| Galambila Aboriginal Corporation | 104 | 23584198987 |
| Geraldton Regional Aboriginal Medical Service | 502 | 98653603543 |
| Grand Pacific Health Limited | 106 | 49062587071 |
| Griffith Aboriginal Medical Service Aboriginal Corporation | 105 | 98484570405 |
| Institute for Urban Indigenous Health Ltd | 301, 302, 304, 305, 306, 308 | 32140019290 |
| Katherine West Health Board Aboriginal Corporation | 705 | 23351866925 |
| Kimberley Aboriginal Medical Services Limited | 501, 504, 508 | 67169851861 |
| La Perouse Local Aboriginal Land Council | 107 | 89136607167 |
| Mawarnkarra Health Service | 506 | 68139453348 |
| Miwatj Health Aboriginal Corporation | 706 | 96843428729 |
| Nunkuwarrin Yunti of South Australia Incorporated | 401 | 59643754108 |
| South West Aboriginal Medical Service | 507 | 98241772591 |
| The Victorian Aboriginal Health Service Co-operative Limited | 201, 202 | 51825578859 |
| Torres Health Indigenous Corporation | 307 | 84645746728 |
| Wellington Aboriginal Corporation Health Service | 101, 102, 103 | 21471474869 |
| Winnunga Nimmitjiah Aboriginal Health and Community Services Ltd | 801 | 52618179061 |
| Yadu Health Aboriginal Corporation | 403 | 92498922417 |

The list of TIS Lead Organisations (Eligible Organisations) in Table 2 includes all organisations who were approved by the department delegate to deliver the TIS Program 2023-24 to 2025-26 in IREG/s (Eligible Location/s), as selected through the targeted competitive grant opportunity *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2025-26* under GO5803.

4.2 Who is not eligible for a grant?

You are not eligible to for this grant opportunity if you:

- are not listed as an eligible organisation in section 4.1, and
- are an organisation, or your project partner is an organisation, included on the [National Redress Scheme's website](#) on the list of 'Institutions that have not joined or signified their intent to join the Scheme.'

Any organisation that is, or has recently been, under special administration or grant administration or review by the department may be subject to additional conditions in the grant agreement.

Any organisation that has not attended TIS CEO briefings regarding the TIS program extension to include vaping by the department may be subject to additional conditions in the grant agreement.

4.3 What qualifications, skills or checks are required?

The department recognises the Australian Government's response to the Royal Commission into Institutional Responses to Child Sexual Abuse, and the [Commonwealth Child Safe Framework](#). As such, the department expects that all grant recipients comply with all Australian law relating to employing or engaging people who work or volunteer with children. This includes working with children checks and mandatory reporting; and the department may request an annual statement of compliance with this requirement. These details will be outlined in the grant agreement variation.

5. What the grant money can be used for

5.1 Eligible grant activities

To be eligible, your grant activity must:

- be delivered with a preventive population health approach that effectively achieves the required reach to all First Nations people within the IREG/s for which you are the TIS Lead Organisation
- directly relate to TIS Program objectives for 2023-24 to 2026-27, which include:
 - community education and engagement (training, social activities, and events);
 - developing smoke free policies in social settings (workplaces, cars, homes, sporting, and community events);
 - mass media/social media campaigns (television, radio, print media, social media);
 - promotional resources (posters, pamphlets, smoke free signage);
 - community events (World No Tobacco Day, NAIDOC, fun runs);
 - anti-vaping activities;
 - vaping prevention resources; and
 - targeted vaping prevention messaging.

Eligible grant activities include:

- TIS Program marketing, promotional activities, and merchandise; and
- in-person attendance at NBPU TIS training sessions and TIS Program workshops for the jurisdiction where your ABS IREG is geographically located.

5.2 Eligible locations

TIS Program service areas are defined as ABS Indigenous Regions (IREGs 2021). Lead organisations are expected to deliver the TIS RTCG Program to all First Nations people and communities within the IREG for which they service.

You are only eligible to deliver the TIS Program 2023-24 to 2026-27 in the IREG/s for which you are the approved TIS lead organisation and/or an approved formal partner. There is only one TIS lead organisation in each IREG. Please refer to the [ABS 2021 Indigenous Regions map](#) to confirm the geographical area (IREG) that you have agreed to cover as a Lead Organisation.

More information about the TIS Program, including the map displaying Lead Organisation for each IREG, can be found on the [Tackling Indigenous Smoking website](#) at <https://tacklingsmoking.org.au>.

5.3 Eligible expenditure

You can only expend grant funding on the eligible grant activities listed in item 5.1 (Eligible Activities) or other project activities agreed to by the department.

Eligible grant expenditure includes:

- staff wages and training (i.e., TIS Program workforce development and training in delivering preventive population health approaches);
- travel and accommodation costs related to TIS Program activities (e.g., outreach);
- administration costs related to TIS Program activities (i.e., Activity Work Planning and performance reporting, data collection, and national evaluation-related activities);
- administrative costs related to hosting TIS Program consortium and/or partnership arrangements (not exceeding 15 per cent of the total value of the grant);
- other reasonable operational expenses required to deliver the TIS Program; and
- commercial vehicle leasing company costs directly related to delivery of TIS Program activities.

You must expend grant funding on eligible grant activities in accordance with your approved Activity Work Plan (AWP) on an annual basis each financial year over the grant period.

5.4 What the grant money cannot be used for

Ineligible grant activities include:

- wages, training, and travel costs for non-TIS Program staff;
- sporting team sponsorships;
- purchase of land;
- major capital expenditure including vehicle purchase, major construction, capital works and temporary buildings;
- retrospective costs of TIS Program activities;
- costs incurred in the preparation of a grant application or related documentation;

- Nicotine Replacement Therapies (NRTs) or other smoking cessation products or services;
- direct or indirect delivery of smoking cessation services;
- international travel;
- activities for which other Commonwealth, state, territory, or local government bodies have primary responsibility, including smoking cessation supports in correctional settings; and
- activities not directly related to achieving the objectives of the TIS Program.

6. The assessment criteria

The following assessment criteria will be used to assess suitability of TIS Lead Organisations to receive a grant variation offer. Both criteria have equal weighting.

Assessment Criterion 1 - Currently undertaking the same, or very similar activities

To meet this criterion, the department will assess that you are a TIS Lead Organisation who is currently delivering the TIS Program 2023-24 to 2025-26 in IREG/s (Eligible Location/s), as listed in Table 2 of these Guidelines.

TIS Lead Organisations listed in Table 2, were approved by the department delegate as the most suitable organisation in the respective IREG/s to deliver TIS activities in relation to smoking and vaping prevention from 2023-24 to 2025-26. As such, TIS Lead Organisations were recently assessed as part of the targeted competitive grant opportunity (GO5803) and found to be suitable overall across:

- Organisational Governance and Risk Management;
- Organisational Capacity and Capability, and Suitability of the Activity; and
- Understanding of the Target Population.

The department will assess this criterion by confirming that you are an approved TIS Lead Organisation as listed in Table 2, and that your organisation is undertaking the same or very similar activities as demonstrated in your Activity Work Plan and Application Form responses, 2023-24 to 2025-26.

Assessment Criterion 2 - Value with relevant money assessment

To meet this criterion, confirmation that value with relevant money will continue to be provided. A future commitment and capability to have an increased focus on vaping while maintaining efforts on tobacco must be indicated.

The following documentation submitted to the department by TIS Lead Organisations as a recent *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2025-26* grant opportunity applicant, will be reviewed to confirm this:

- Application Form responses, 2023-24 to 2025-26;
- Activity Work Plan (proposed), 2023-24;
- 3-Year Project Plan, 2023-24 to 2025-26;
- Indicative Budget, 2023-24 to 2025-26;
- Risk Management Plan, 2023-24 to 2025-26; and
- Other relevant materials, e.g., organisations workplace smoking policy.

Past performance records of TIS Lead Organisations, held by the department and Department of Social Services (DSS), will also be considered, including:

- history of meeting performance reporting requirements;
- Activity Work Plans, including delivery of vaping prevention activities; and
- satisfactory attendance at TIS CEO briefings and NBPU hosted workshops, especially 2023 meetings which outlined vaping prevention requirements for TIS Lead Organisations.

7. How to apply

No application is needed

Eligible Organisations do not need to submit an application for this grant opportunity. The department will assess your suitability to receive a grant variation against the assessment criterion, using the information and documentation identified in Section 6 of these Guidelines.

You must read all available documentation about the grant opportunity provided on GrantConnect. Any alterations and addenda¹ will be published on GrantConnect and by registering on this website, you will be automatically notified of any changes. GrantConnect is the authoritative source for grants information, however, the department takes no responsibility if a registered user fails to become aware of any addendum notices or of other published material.

Registered users are encouraged to regularly check GrantConnect for updates. If you need further guidance around the process, please contact us at Grant.ATM@health.gov.au.

Joint (Consortium) arrangements

We recognise that some TIS Lead Organisations currently deliver the TIS Program in formal partnership with other organisations (e.g., a partnership in the form of subcontracting). Formal partnerships for the purposes of delivering the TIS Program 2023-24 to 2026-27 within an IREG include appropriate financial administration, reporting and participation in evaluation activities. TIS Lead Organisations may also support delivery of activities through informal community-level (e.g., delivery in schools).

In both circumstances, it is the TIS Lead Organisation that enters into a grant agreement variation with the department and formal arrangements must be in place with all parties within the consortia. The TIS Lead Organisation will be the primary contact for the TIS Program 2023-24 to 2026-27, including the recipient for all payments and for all payment and reporting milestones.

7.1 Timing of grant opportunity processes

If you are successful, we expect you will be able to commence Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2026-27 (GO5803 Grant Agreement Variation) on execution.

Table 3: Expected timing for this grant opportunity

| Activity | Expected Timeframe |
|---------------------------|--------------------|
| Open on GrantConnect | Up to 1 week |
| Assessment of suitability | Up to 1 week |

¹ Alterations and addenda include but are not limited to corrections to currently published documents, changes to close times, Questions and Answers (Q&A) documents and Frequently Asked Questions (FAQ) documents.

| | |
|---|--------------|
| Approval of grant agreement variations | Up to 1 week |
| Provision of grant agreement variations | 1-4 weeks |
| End date of grant activity or agreement | 30/06/2027 |

7.2 Questions during the process

If you have questions relating to the grant, technical issues or process, please contact Grant.ATM@health.gov.au. The department will respond to emailed questions within three working days. Only invited organisations' questions will be responded to during the GrantConnect open period.

Requests for clarification may form the basis of a response that will be posted on the [GrantConnect](#) website in the Frequently Asked Questions document relating to this grant opportunity. All questions will be de-identified. Registered applicants will be notified of updates to the documents via email from the GrantConnect website.

8. The grant selection process

8.1 Assessment of suitability

We first review your eligibility to receive funding against the eligibility criteria in section 4.

Only eligible organisation/s will move to the next stage. We consider eligibility and suitability through a closed non-competitive, non-application-based process. We then review your suitability to receive a grant variation against the assessment criteria (see section 6).

We will use the Descriptive Classification rating Scale below.

Table 4: Descriptive Classification Rating Scale

| Rating (for individual criterion) | Rank |
|---|--------------------------|
| Criterion met and evidence is available and provides support for claims against this criterion. | Suitable |
| Criterion met and evidence is available and provides support for claims against the criterion. Grant agreement variation to have specific conditions determined by the assessment process or other considerations made by the Decision Maker. | Suitable with Conditions |
| Criterion is not met, and evidence is unavailable. | Not Suitable |

You must be rated as Suitable to be considered for a funding agreement. We consider your suitability, based on:

- whether you are currently undertaking the same, or very similar activities, that you are a TIS Lead Organisation currently approved by the department delegate to deliver the TIS Program 2023-24 to 2025-26 in IREG/s (Eligible Location/s) through the targeted competitive grant opportunity *Tackling Indigenous Smoking Regional Tobacco Control Grants 2023-24 to 2025-26* under GO5803, as listed in Table 2 of these Guidelines; and

- whether review of your past performance, including documentation submitted to the department, during the *Smoking Regional Tobacco Control Grants 2023-24 to 2025-26* grant opportunity targeted competitive grant round, continues to provide value with relevant money.²

If rated as Suitable with Conditions, you will still be considered for a funding agreement, however your funding agreement will include additional specific conditions. This may include but is not limited to agreement by your organisation to:

- satisfactorily attend TIS CEO briefings and NBPU hosted workshops, where there:
 - has been non-attendance at 2023 meetings which outlined vaping prevention requirements for TIS Lead Organisations, and/or
 - is a history of organisation consistent non-attendance at TIS CEO briefings and NBPU hosted workshops;
- include or strengthen vaping prevention activities and/or references in your AWP/s; and
- other considerations made and specified by the Decision Maker.

8.2 Who will assess suitability?

Suitability will be assessed by departmental officers from Family, Chronic Disease and Preventative Health Branch, First Nations Health Division and may include an independent representative.

During this process we may seek additional information about TIS Lead Organisations, and may do this from within the Commonwealth, even if the sources are not nominated by you as referees. We may also consider information about TIS Lead Organisations that is available through the normal course of business.

departmental officers from Family, Chronic Disease and Preventative Health Branch, First Nations Health Division who assess suitability, will make a recommendation to the Program Delegate regarding the assessment, to approve for a grant variation.

8.3 Who will approve grants?

The Assistant Secretary of the Family, Chronic Disease and Preventative Health Branch, First Nations Health Division decides which grant variations to approve considering the recommendations of the assessment and the availability of grant funds for the purposes of the grant Program.

The decision of the Assistant Secretary is final in all matters, including:

- the approval of the grant variation;
- the additional funding amount to be awarded; and
- the terms and conditions of the grant variation.

There is no appeal mechanism for decisions to approve or not approve a grant variation.

² See Glossary for the definition of 'relevant money'.

9. Notification of outcomes

We will advise you of the outcome of this process in writing, including any specific conditions attached to the grant agreement variation.

10. Successful grantees

10.1 The grant agreement

You must enter into a legally binding grant agreement with the Commonwealth. We use the whole-of-government grant agreement templates in this program and will select the most appropriate depending on the size and complexity of your grant activities.

Each agreement has general terms and conditions that cannot be changed. We will use a schedule to outline the specific grant requirements.

We must execute a grant agreement with you before we can make any payments. We are not responsible for any of your expenditure until a grant agreement is executed. If you choose to start your grant activities before you have an executed grant agreement, you do so at your own risk.

Your grant agreement may have specific conditions determined by the assessment process or other considerations made by the Decision Maker. We will identify these in the agreement.

The Commonwealth may recover grant funds if there is a breach of the grant agreement.

You will have 20 days from the date of a written offer to execute this grant agreement with the Commonwealth ('execute' means both you and the Commonwealth have signed the agreement). During this time, we will work with you to finalise details.

The offer may lapse if both parties do not sign the grant agreement within this time. Under certain circumstances, we may extend this period. We base the approval of your grant on the information currently held by the department.

You may request changes to the grant agreement. However, we will review any required changes to these details to ensure they do not impact the grant as approved by the Decision Maker.

10.2 The Multicultural Access and Equity Policy

The Australian Government's [Multicultural Access and Equity Policy](#) obliges Australian Government agencies to ensure their policies, programs and services - including those provided by contractors and service delivery partners – are accessible to, and deliver equitable outcomes for, people from culturally and linguistically diverse (CALD) backgrounds.

Grant applicants should consider how they will ensure their services will be accessible to people from CALD backgrounds. For example, service delivery partners may require cultural competency skills. In addition, services, projects, activities or events may require the use of professional translating or interpreting services in order to communicate with clients who have limited English proficiency.

10.1.1 Commonwealth Child Safe Framework

The Royal Commission into Institutional Responses to Child Sexual Abuse highlighted the need for organisations to adopt child safe practices including appropriate screening of staff, mandatory reporting and adoption of the National Principles for Child Safe Organisations. The Australian Government committed to a new Commonwealth-wide framework to protect children and young people it is responsible for – the [Commonwealth Child Safe Framework \(CCSF\)](#).

The Australian Government is considering appropriate ways to apply the requirements of the CCSF to grant recipients. A child safety clause will be included in a grant agreement where the Commonwealth considers the grant is for services directly to children, and/or activities that involve contact with children that is a usual part of, and more than incidental to, the grant activity.

A child safety clause may also be included in the grant agreement if the Commonwealth considers the grant activity involves children more broadly.

The successful applicant will be required to comply with all child safety obligations included in the grant agreement or notified to the successful applicant prior to execution of the grant agreement.

Irrespective of the child safety obligations in the grant agreement, you must always comply with your state and territory legislative requirements for working with children and mandatory reporting.

10.1.2 National Redress Scheme

The [National Redress Scheme](#) for Institutional Child Sexual Abuse Grant Connected Policy makes non-government institutions named in applications to the Scheme, or in the Royal Commission into Institutional Responses to Child Sexual Abuse that do not join the Scheme, ineligible for future Australian Government grant funding. The National Redress Scheme Grant Connected Policy came into effect on 1 January 2021.

10.2 How we pay the grant

The grant agreement will state the maximum grant amount to be paid.

We will not exceed the maximum grant amount under any circumstances. If you incur extra costs, you must meet them yourself.

We will make payments according to an agreed schedule set out in the grant agreement. Payments are subject to timely and acceptable submission of reports; and/or grantees satisfactorily meeting attendance responsibilities at TIS CEO briefings and NBPU hosted workshops, in-line with the grant agreement. Grantee responsibilities are outlined in Section 12.2 of these Guidelines.

The Grantee may seek, and we may provide written approval to retain all or part of any Surplus and Uncommitted Funds (as defined in Section 15 Glossary) and treat those funds as part of the Grant provided under, and subject to, the grant agreement. The written approval may be subject to conditions.

10.3 Grants Payments and GST

Payments will be GST Exclusive. If you are registered for the [Goods and Services Tax \(GST\)](#), where applicable, we will add GST to your grant payment and issue you with a [Recipient Created Tax Invoice](#).

Grants are assessable income for taxation purposes, unless exempted by a taxation law. We recommend you seek independent professional advice on your taxation obligations or seek assistance from the [Australian Taxation Office](#). We do not provide advice on your taxation circumstances.

11. Announcement of grants

If successful, your grant will be listed on the GrantConnect website 21 calendar days after the date of effect as required by section 5.3 of the [CGRGs](#).

12. How we monitor your grant activity

12.1 Keeping us informed

You should let us know if anything is likely to affect your grant activity or organisation.

We need to know of any key changes to your organisation or its business activities, particularly if they affect your ability to complete your grant, carry on business and pay debts due. We need to know current details of your formal partner/s including TIS funding and staff.

You must also inform us of any changes to your:

- name;
- addresses;
- nominated contact details; and
- bank account details.

If you become aware of a breach of terms and conditions under the grant agreement, you must contact us immediately.

You must notify us of events relating to your grant and provide an opportunity for the Minister or their representative to attend.

12.1.1 COVID-19, natural disasters or unforeseen events/circumstances

As a result of COVID-19, natural disasters or unforeseen events/circumstances, organisations may need to identify alternative methods of grant activities/service delivery. The department will support flexibility in the delivery of planned activities/services to enable contracted organisations to adapt to the changing environment. The department will be considered in its approach to reporting over this time and be flexible in reporting requirements under the terms of the Schedule.

12.2 Reporting

You must submit reports for each IREG as per the reporting requirements outlined in the grant agreement. We will provide you with templates which may be offline, online or both during the grant period for these reports, along with clear guidance about which templates to use when.

We will expect you to report on:

- planned activities to be delivered by you and/or your formal partner/s in each financial year across the IREG for which you are applying;
- progress against agreed grant activity milestones and outcomes;
- expenditure of the grant by you and your formal partner/s; and
- activities that may be required for performance and/or evaluation purposes.

The reporting templates will provide you with clear guidance about the information you will need to provide and by when, including the amount of detail required and evidence that you have appropriately sought and incorporated feedback from the NBPU.

We will monitor progress by assessing reports you submit and may conduct site visits or request records to confirm details of your reports if necessary. Occasionally we may need to re-examine claims, seek further information, or request an independent audit of claims and payments.

It is important to note that upon execution of this grant agreement variation, TIS Lead Organisations will be required to plan (AWP) and report on activities that reduce vaping among First Nations people and communities, while also maintaining efforts to reduce tobacco smoking, relative to the additional grant funding made available under this variation.

Performance reports

Performance Reports must:

- include evidence of your progress towards completion of agreed activities and outcomes;
- include evidence that NBPU TIS has reviewed your report and feedback has been given due consideration;
- state the total eligible expenditure incurred to date;
- be submitted in the appropriate format on the templates provided which may be offline, online or both during the grant period;
- Be submitted by the report due date (you can submit reports ahead of time if you have completed relevant activities); and
- indicate the TIS Performance Indicators that are relevant to each activity.

You must discuss any reporting delays with Community Grants Hub (CGH) as soon as you become aware of them.

Ad-hoc Reports

We may ask you for Ad-Hoc Reports on your grant. This may be to provide an update on progress, or any significant delays or difficulties in completing the delivery of TIS Program in your IREG. We may ask you for updates on formal partner/s and partnership arrangements.

Final Report

When the four-year grant activity period ends, you must submit a Final Report.

The Final Report is to contain information on the performance of the project during the activity period 1 July 2023 to 30 June 2027, on a template that will be supplied.

Submission of Reports

You must submit reports in line with the processes and timeframes as outlined in the [grant agreement](#). This includes seeking feedback from the NBPU TIS on draft workplans, budgets and reports prior to finalisation and submission to the department. Sample templates are provided for these reports in the grant agreement. Reports will include:

- annual activity workplan and budget;
- six-monthly performance report/s; and
- annual financial report.

The grantee will also be responsible for:

- meeting the terms and conditions of the grant agreement and managing the grant activity efficiently and effectively;
- complying with record keeping, reporting and acquittal requirements as set out in the grant agreement;
- working constructively with the National Coordinator and the NBPU;
- in-person attendance at NBPU training sessions and workshops, by TIS teams in the state/territory for which the IREG/s you service is geographically located;
- satisfactory attendance at TIS CEO briefings and NBPU TIS hosted workshop, noting that if the CEO is unavailable to attend, written approval for attendance by a relevant executive proxy must be sought by the organisation from the department in advance of the meeting, and NBPU TIS advised of the approved proxy; and
- participating in all grant TIS Program evaluation activities as required under the grant agreement.

We will monitor progress by assessing reports you submit and may conduct site visits or request records to confirm details of your reports if necessary. Occasionally we may need to re-examine claims, seek further information or request an independent audit of claims and payments.

12.3 Financial reporting

You must submit financial reports in line with the grant agreement.

We will ask you to report on the expenditure of the grant using a financial declaration and/or an income and expenditure statement and/or an audited income and expenditure statement.

12.4 Grant agreement variations

We recognise that unexpected events may affect your progress. In these circumstances, you can request a variation to your grant agreement. You can request a variation by contacting your Funding Arrangement Manager (FAM) listed on the agreement.

You should not assume that a variation request will be successful. We will consider your request based on provisions in the grant agreement and the likely impact on achieving outcomes.

12.5 Compliance visits

We may visit you during or at the completion of your grant activity to review your compliance with the grant agreement. We will provide you with reasonable notice of any compliance visit.

12.6 Record keeping

We may also inspect the records you are required to keep under the grant agreement.

12.7 Evaluation

We will evaluate the grant opportunity to measure how well the outcomes and objectives of the overall TIS program have been achieved. Independent evaluation processes help inform the future direction and priorities of the program and identify potential opportunities for

improvement. Consistent with a continuous quality improvement approach, all TIS funded organisations including grant recipients are expected to participate in evaluation activities. We may use information from your application and reports for this purpose. We may also interview you or ask you for more information to help us understand how the grant impacted you and to evaluate how effective the Program was in achieving its outcomes.

Your grant agreement will require you to provide regular, timely and accurate information and data related to your TIS Program-funded grant activities for independent national evaluation purposes. We may contact you up to two years after you finish your grant for more information to assist with national evaluations.

12.8 Acknowledgement

If you make a public statement about the TIS Program grant activities, we require you to acknowledge the grant by using the following statement:

'This Tackling Indigenous Smoking (TIS) Program activity received grant funding from the Australian Government.'

13. Probity

The Australian Government will make sure that the grant opportunity process is fair, according to the published guidelines, incorporates appropriate safeguards against fraud, unlawful activities and other inappropriate conduct, and is consistent with the CGRGs.

These guidelines may be amended periodically by the department. When this happens, the revised guidelines will be published on GrantConnect.

13.1 Enquiries and feedback

The department's [Complaint Handling Process](#) applies to complaints about this grant opportunity. All complaints about a grant process must be provided in writing.

Any questions you have about grant decisions for this grant opportunity should be sent to Grant.ATM@health.gov.au.

If you do not agree with the way the department has handled your complaint, you may complain to the [Commonwealth Ombudsman](#). The Ombudsman will not usually look into a complaint unless the matter has first been raised directly with the relevant Commonwealth entity.

The Commonwealth Ombudsman can be contacted on:

Phone (Toll free): 1300 362 072

Email: ombudsman@ombudsman.gov.au

Website: [Home – Commonwealth Ombudsman](#)

13.2 Conflicts of interest

Any conflicts of interest could affect the performance of the grant opportunity or program. There may be a conflict of interest, or perceived conflict of interest, if the department's staff, any member of a committee, an advisor, and/or you or any of your personnel:

- has a professional, commercial or personal relationship with a party who is able to influence the selection process, such as an Australian Government officer;
- has a relationship with, or interest in, an organisation which is likely to interfere with or restrict the applicants from carrying out the proposed activities fairly and independently, and/or
- has a relationship with, or interest in, an organisation from which they will receive personal gain because the organisation receives a grant under the grant program/ grant opportunity.

If you identify an actual, apparent, or perceived conflict of interest, you must inform the department in writing immediately.

Conflicts of interest for Australian Government staff will be handled as set out in the [Australian Public Service Code of Conduct \(Section 13\(7\)\)](#) of the [Public Service Act 1999](#). Committee members and other officials including the decision maker must also declare any conflicts of interest.

We publish our conflict of interest policy on the [Australian Public Service Commission's website](#).

13.3 Privacy

We treat your personal information according to the [Privacy Act 1988](#) and the [Australian Privacy Principles](#). This includes letting you know:

- what personal information we collect;
- why we collect your personal information; and
- who we give your personal information to.

Your personal information can only be disclosed to someone else for the primary purpose for which it was collected unless an exemption applies.

The Australian Government may also use and disclose information about grant applicants and grant recipients under this grant opportunity in any other Australian Government business or function. This includes disclosing grant information on GrantConnect as required for reporting purposes and giving information to the Australian Taxation Office for compliance purposes.

We may share the information you give us with other Commonwealth entities for purposes including government administration, research or service delivery, according to Australian laws.

You must declare your ability to comply with the *Privacy Act 1988* (the Act) and the Australian Privacy Principles and impose the same privacy obligations on officers, employees, agents and subcontractors that you engage to assist with the activity, in respect of personal information you collect, use, store, or disclose in connection with the activity. Accordingly, you must not do anything, which if done by the department would breach an Australian Privacy Principle as defined in the Act.

13.4 Confidential Information

Other than information available in the public domain, you agree not to disclose to any person, other than us, any confidential information relating to the grant process and/or Grant Opportunity Guidelines – GO6775 TIS Program 2023-24 to 2026-27

agreement, without our prior written approval. The obligation will not be breached where you are required by law, Parliament or a stock exchange to disclose the relevant information or where the relevant information is publicly available (other than through breach of a confidentiality or non-disclosure obligation).

We may at any time require you to arrange for you, your employees, agents or subcontractors to give a written undertaking relating to non-disclosure of our confidential information in a form we consider acceptable.

We will keep any information in connection with the grant agreement confidential to the extent that it meets all of the three conditions below:

1. you clearly identify the information as confidential and explain why we should treat it as confidential;
2. the information is commercially sensitive; and
3. revealing the information would cause unreasonable harm to you or someone else.

We will not be in breach of any confidentiality agreement if the information is disclosed to:

- the committee and other Commonwealth employees and contractors to help us manage the program effectively;
- employees and contractors of our department so we can research, assess, monitor and analyse our programs and activities;
- employees and contractors of other Commonwealth agencies for any purposes, including government administration, research or service delivery;
- other Commonwealth, State, Territory or local government agencies in program reports and consultations;
- the Auditor-General, Ombudsman or Privacy Commissioner;
- the responsible Minister or Parliamentary Secretary; and/or
- a House or a Committee of the Australian Parliament.

The grant agreement may also include any specific requirements about special categories of information collected, created or held under the grant agreement.

13.5 Freedom of information

All documents in the possession of the Australian Government, including those about this grant opportunity, are subject to the [Freedom of Information Act 1982](#) (FOI Act).

The purpose of the FOI Act is to give members of the public rights of access to documents held by Australian Government entities. Under the FOI Act, members of the public can seek access to documents held by the Australian Government. Access may be refused if a document contains “exempt” material, such as commercially valuable information or the personal or business information of a third party.

All Freedom of Information requests must be referred to the Freedom of Information Coordinator in writing.

By mail: Freedom of Information Coordinator
 FOI Unit
 Department of Health and Aged Care
 GPO Box 9848
 CANBERRA ACT 2601

By email: foi@health.gov.au

14. Consultation

Consultation has been undertaken as part of the development of the TIS Program. Input was sought by TIS Program experts and relevant other government agencies involved in the delivery of First Nations population health grant activities. Comprehensive consultation with key stakeholders including TIS Program staff and local Indigenous community members, has been undertaken as part of the robust, independent TIS Program evaluation.

15. Glossary

| Term | Definition |
|---|---|
| Aboriginal and Torres Strait Islander/First Nations population | all the inhabitants of a particular place who are of Aboriginal and/or Torres Strait Islander descent, identifying as Aboriginal and/or Torres Strait Islander and accepted by the Indigenous community in which he or she lives. |
| Australian Bureau of Statistics (ABS) Indigenous regions (IREGs 2021) | <p>also, IREG or ABS IREG used interchangeably. The TIS Program service areas are defined as ABS Indigenous Regions (IREGs 2021).</p> <p>IREGs are large geographic areas built from whole Indigenous Areas and are based on historical boundaries. The larger population of Indigenous regions enable highly detailed analysis.</p> <p>Indigenous Regions were originally designed based on the former Aboriginal and Torres Strait Islander Commission boundaries, which are no longer maintained.</p> <p>They are created by combining one or more Indigenous Areas. Changes to Indigenous regions are determined through consultation with the ABS Centre for Aboriginal and Torres Strait Islander Statistics based on statistical and community requirements.</p> |
| Accountable authority | see subsection 12(2) of the Public Governance, Performance and Accountability Act 2013 |
| administering entity | when an entity that is not responsible for the policy, is responsible for the administration of part or all the grant administration processes |

| Term | Definition |
|-------------------------------|--|
| assessment criteria | are the specified principles or standards, against which applications will be judged. These criteria are also used to assess the merits of proposals and, in the case of a competitive grant opportunity, to determine application rankings. |
| CEO (Chief Executive Officer) | Within the TIS Program, the reference of CEO relates to an individual who is responsible for making major corporate decisions, managing overall operations, and setting the TIS Lead Organisations strategic direction. Where a CEO is unavailable to meet the agreed conditions of the grant agreement, written approval for a relevant executive proxy must be sought by the organisation from the department and NBPU advised. For example, in the circumstance where a CEO is unavailable to attend an NBPU-hosted CEO briefing. |
| commencement date | the expected start date for the grant activity |
| completion date | the expected date that the grant activity must be completed, and the grant spent by |
| co-sponsoring entity | when two or more entities are responsible for the policy and the appropriation for outcomes associated with it |
| date of effect | can be the date on which a grant agreement is signed or a specified starting date. Where there is no grant agreement, entities must publish information on individual grants as soon as practicable. |
| decision maker | the person who decides to award a grant |
| e-cigarette | also known as electronic nicotine delivery systems (ENDS) and sometimes electronic non-nicotine delivery systems (ENNDS) heat a liquid to create aerosols that are inhaled by the user. These so-called e-liquids may or may not contain nicotine (but not tobacco) but also typically contain additives, flavours and chemicals that can be toxic to people's health. |
| eligibility criteria | refer to the mandatory criteria which must be met to qualify for a grant. Assessment criteria may apply in addition to eligibility criteria. |
| Commonwealth entity | a Department of State, or a Parliamentary Department, or a listed entity or a body corporate established by a law of the Commonwealth. See subsections 10(1) and (2) of the PGPA Act |

| Term | Definition |
|---|---|
| <u>Commonwealth Grants Rules and Guidelines (CGRGs)</u> | establish the overarching Commonwealth grants policy framework and articulate the expectations for all non-corporate Commonwealth entities in relation to grants administration. Under this overarching framework, non-corporate Commonwealth entities undertake grants administration based on the mandatory requirements and key principles of grants administration. |
| grant | for the purposes of the CGRGs, a 'grant' is an arrangement for the provision of financial assistance by the Commonwealth or on behalf of the Commonwealth: <ul style="list-style-type: none"> a. under which relevant money³ or other <u>Consolidated Revenue Fund</u> (CRF) money⁴ is to be paid to a grantee other than the Commonwealth; and b. which is intended to help address one or more of the Australian Government's policy outcomes while assisting the grantee achieve its objectives. |
| grant activity/activities | refers to the project/tasks/services that the grantee is required to undertake |
| grant agreement | sets out the relationship between the parties to the agreement, and specifies the details of the grant |
| <u>GrantConnect</u> | is the Australian Government's whole-of-government grants information system, which centralises the publication and reporting of Commonwealth grants in accordance with the CGRGs |
| grant opportunity | refers to the specific grant round or process where a Commonwealth grant is made available to potential grantees. Grant opportunities may be open or targeted and will reflect the relevant grant selection process. |
| grant Program | a 'Program' carries its natural meaning and is intended to cover a potentially wide range of related activities aimed at achieving government policy outcomes. A grant Program is a group of one or more grant opportunities under a single [entity] Portfolio Budget Statement Program. |
| grantee | the individual/organisation which has been selected to receive a grant |

³ Relevant money is defined in the PGPA Act. See section 8, Dictionary.

⁴ Other CRF money is defined in the PGPA Act. See section 105, Rules in relation to other CRF money.

| Term | Definition |
|---|--|
| PBS Program | described within the entity's Portfolio Budget Statement , PBS Programs each link to a single outcome and provide transparency for funding decisions. These high-level PBS Programs often comprise several lower levels, more publicly recognised Programs, some of which will be Grant Programs. A PBS Program may have more than one Grant Program associated with it, and each of these may have one or more grant opportunities. |
| Population health activity | Programs or services that aim to improve the health of the population through interventions which promote behaviour changes to reduce susceptibility to (tobacco related) morbidity and mortality; alter the environment to promote the health of the population and promote interventions that remove or mitigate population health (tobacco) hazards. Population health refers to the health status and health outcomes within a group of people rather than considering the health of one person at a time. |
| selection criteria | comprise eligibility criteria and assessment criteria. |
| selection process | the method used to select potential grantees. This process may involve comparative assessment of applications or the assessment of applications against the eligibility criteria and/or the assessment criteria. |
| Surplus and Uncommitted Funds | means surplus and uncommitted funds provided by the Commonwealth through previous grant agreements relating to activities which are the same as or similar to the Activity and which are confirmed by final financial statements provided under the previous grant agreements. |
| Tackling Indigenous Smoking (TIS) Program target population | refers all Aboriginal and Torres Strait Islanders people residing in a nominated ABS IREG, particularly those not accessing Aboriginal Community Controlled Health Organisations. |
| Tackling Indigenous Smoking (TIS) Worker | employee whose position is funded by RTCG funds. Role and responsibilities are dedicated to the delivery of locally tailored and evidence based eligible TIS activities within the approved IREG/s for their TIS lead organisation. This activity delivery includes collecting monitoring and evaluation data in line with the program's CQI approach. |

| Term | Definition |
|---|--|
| Tackling Indigenous Smoking (TIS) Coordinator | employee whose position is funded by RTCG funds. Role and responsibilities are dedicated to the direct supervision of TIS workers in the delivery of locally tailored and evidence based eligible TIS activities within the approved IREG/s for their TIS lead organisation. TIS coordinators will also have responsibility for using monitoring and evaluation data for activity CQI. They may also be involved in TIS performance reporting. Coordinators will play a role in direct liaison with NBPU. |
| value with money | <p>value with money in this document refers to ‘value with relevant money’ which is a judgement based on the grant proposal representing an efficient, effective, economical, and ethical use of public resources and determined from a variety of considerations.</p> <p>When administering a grant opportunity, an official should consider the relevant financial and non-financial costs and benefits of each proposal including, but not limited to:</p> <ul style="list-style-type: none"> • the quality of the project proposal and activities. • fitness for purpose of the proposal in contributing to government objectives. • that the absence of a grant is likely to prevent the grantee and government’s outcomes being achieved; and • the potential grantee’s relevant experience and performance history. |
| Vaping | <p>the act of using an e-cigarette, or ‘vape,’ which are lithium battery-powered devices that use cartridges filled with liquids, or ‘juice.’ The liquids typically contain nicotine, artificial flavourings, and various chemicals, some of which have been shown to be toxic. The liquid is heated into an aerosol, or vapour, and inhaled into the user’s lungs.</p> <p>https://lungfoundation.com.au/lung-health/protecting-your-lungs/e-cigarettes-and-vaping/</p> |
| Vaping, recreational | use of e-cigarettes (vapes) for purposes other than as a smoking cessation aid. |

Appendix A.

Tackling Indigenous Smoking Regional Tobacco Control Grants Background

1. Indigenous Australians Health Programme

The Indigenous Australians' Health Programme (IAHP), established on 1 July 2014, provides First Nations people with access to effective high quality, comprehensive, culturally appropriate, primary health care services in urban, regional, rural and remote locations across Australia. This includes delivery of services through Aboriginal Community Controlled Health Services (ACCHS), wherever possible and appropriate, as well as mainstream services delivering comprehensive, culturally appropriate primary health care.

The IAHP is made available under Outcome 1 – Health Policy, Access and Support, Program 1.3 – First Nations Health from the department's Portfolio Budget Statement.

2. National Agreement on Closing the Gap

The new National Agreement on Closing the Gap commits all governments to a new era of partnership and shared decision-making to close the gap in life outcomes for First Nations people. It recognises that First Nations people know what is best for their people and communities. It also acknowledges that the unique strengths of First Nations knowledges and cultures are critical to driving real change. At the centre of the national agreement are four priority reforms to ensure we as governments change the way we work with First Nations peoples:

Priority Reform 1: Formal partnerships and shared decision making;

Priority Reform 2: Building the community-controlled sector;

Priority Reform 3: Transforming government organisations; and

Priority Reform 4: Shared access to data and information at a regional level.

The Tackling Indigenous Smoking Regional Tobacco Control Grant (TIS RTCG) Program aligns with the new national agreement and recognises that self-determination, partnership and shared decision making as the best way to close the gap in health outcomes for First Nations people.

3. National Aboriginal and Torres Strait Islander Health Plan 2021-2031

The [National Aboriginal and Torres Strait Islander Health Plan 2021–2031](#) (Health Plan) changes the way governments work with First Nations people to achieve better health outcomes. Developed in real partnership with First Nations people, it reflects their priorities and embeds a holistic perspective of First Nations health. This perspective recognises the influence of social factors, and the strengths of culture as a protective influence on physical, social and emotional wellbeing.

The plan focuses on preventing health issues before they occur. It aims to embrace the skills and knowledge held by First Nations people and communities to; make healthy decisions, and effectively navigate the health system This includes through the delivery of health care that is; place based, person centred, culturally safe and responsive.

The TIS RTCG Program recognises that holistic and place-based care will provide the best opportunity for First Nations people to live long, healthy lives that are centred in culture. It enables access to services that are prevention-focused, culturally safe and responsive, equitable and free of racism.

4. National Preventive Health Strategy 2021 to 2031

The National Preventive Health Strategy 2021 to 2031 (National Preventive Health Strategy) provides the overarching, long-term approach to health prevention in Australia by building systemic change to ensure the best outcomes for all Australians. It identifies areas of focus for the next 10-years and outlines the key achievements Australia should be striving for by 2030.

The National Preventive Health Strategy recognises that ending the tobacco epidemic is a priority for all Australian governments and has a high-level of continued public support for policy measures to reduce tobacco-related harm. Significantly reducing and eventually eliminating tobacco use in Australia would dramatically reduce illness, increase quality of life and wellbeing, and reduce health, social and economic inequalities for smokers, their families and the wider Australian community.

Smoking prevalence remains disproportionately high among First Nations populations in comparison with the general population (particularly in remote areas). It also remains one of the main factors influencing the lower life expectancy of First Nations people.

In accordance with targets identified in the National Preventive Health Strategy 2021-2030, the Australian Government has committed to reducing smoking rates among First Nations people to 27 percent or less by 2030. This sets an ambitious target of reducing First Nations smoking rates by 10 percent within 10 years (2030).

5. Tackling Indigenous Smoking - Program Background

The objective of the TIS Program is to reduce smoking rates among First Nations populations by preventing the uptake of smoking, e-cigarettes and promoting smoking cessation. Reductions in smoking prevalence will reduce rates of chronic disease and continue to improve the life expectancy for First Nations people.

The Australian Bureau of Statistics' (ABS) smoking prevalence data indicates that smoking rates for First Nations people are decreasing but remain unacceptably high, with smoking rates at almost four times the rate of other Australians. Smoking remains a leading cause of burden of disease amongst First Nations people, with smoking causing half of the deaths of First Nations adults aged 45 years and over.

The TIS Program, which commenced as part of the 2008 Closing the Gap Agreement, is a well-established and internationally recognised population health promotion program that works with First Nations communities to reduce tobacco use.

Independent evaluations and best practice resources have identified that the population health approach of the TIS Program is internationally renowned, efficient, effective, culturally appropriate, and codesigned with First Nations people through an ongoing Continuous Quality Improvement (CQI) approach.

More information about the TIS Program can be found on the [Tackling Indigenous Smoking website](https://tacklingsmoking.org.au) at <https://tacklingsmoking.org.au>.

6. Service Delivery

Regional Tobacco Control Grants (2022)

The Australian Government provided existing TIS RTCG Program (2022) funding to 39 organisations, which employed approximately 220 First Nations staff across a national network of regionally based teams. An independent evaluation of the TIS Program estimated that at that point, current RTCG support was reaching approximately 76 percent of all First Nations people. Research findings also indicated that the TIS Program was having the desired positive impact on smoking related community attitudes and behaviours.

Regional Tobacco Control Grants (2023-24 to 2025-26)

A key priority for the TIS RTCG Program (2023-24 to 2025-26) iteration is to strengthen the geographic reach and impact of the Program to ensure First Nations peoples, in all regions, have access to TIS Program support.

From 1 July 2023, the TIS Program (GO503) expanded its coverage from 76 percent to 100 percent to assist First Nations people to ultimately quit tobacco use, defined according to the ABS Indigenous Regions 2021 (IREG). There are 26 organisations leading delivery across 37 IREGs, in collaboration with their formal partners.

This approach ensures all First Nations people and communities will have access to TIS Program support and to ultimately support the reduction of smoking prevalence, in First Nations peoples, by 10 percent by 2030, in line with the targets identified in the National Preventive Health Strategy.

More information about the TIS Program service areas can be found on the [Tackling Indigenous Smoking website](https://tacklingsmoking.org.au) at <https://tacklingsmoking.org.au>.

Regional Tobacco Control Grants 2023-24 to 2026-27 (GO5803 Grant Agreement Variation) (TIS Program 2023-24 to 2026-27)

In May 2023 the Budget Measure (2023-24) – Tackling Smoking and Vaping and Improving Cancer Outcomes announcement, committed additional funding to extend the existing and recently established TIS 2023-24 to 2025-26 Program service delivery.

This TIS extension includes an additional year (2026-27 FY) and increased focus on vaping prevention activities. Funding will be distributed to the 27 existing TIS 2023-24 to 2025-26 Lead Organisations to expand delivery of eligible activities in their IREG's (GO5803 Deed of Variations).

The TIS program has a proven track record of delivering outcomes in smoking prevention and reduction through locally tailored activities. This success will be expanded through additional funding to include the delivery of new locally tailored and targeted vaping prevention activities such as vaping prevention resources, community events, targeted messaging and training workshops, supported by expanded expert advice. The additional funding is informed by vaping prevalence data and distributed by IREG/s.

From 2025-26 FY onwards, Tackling Indigenous Smoking will be made available under Outcome 1.5 – Preventative Health and Chronic Disease Support Program.

TIS Program funding will continue to invest in time-limited national projects and activities to support the objective of the TIS Program, particularly regarding priority groups, such as pregnant women, youth and remote communities. National Project priorities and related funding allocations are set by the department and informed by independent evaluation findings. The department has established administrative arrangements to support the delivery of national reach and priority projects that ensure appropriate transparency, accountability, and value with relevant money.

Alongside this, the 2023-24 budget measure now provides additional targeted investment in vaping prevention projects to ensure complementary activities will increase the reach and saturation of anti-vaping messages in the community.

7. National Support

TIS Program Lead Organisations are supported by the TIS Program National Coordinator, Professor Tom Calma AO, and the National Best Practice Unit (NBPU).

The TIS Program National Coordinator (NC) undertakes a range of duties to support the TIS Program through the advocacy and promotion of smoking cessation and reduction in First Nations populations. The NC also works with the department to provide high-level advice and insights, support and leadership to assist in the shaping of policy and program approaches with TIS RTCG Program recipients.

The TIS Program NC and the NBPU will play a critical role in supporting the implementation of the TIS Program to ensure the activities are evidence-based and informed by CQI approaches. The NC and NBPU has been established to provide tailored support to organisations funded under the TIS Program and will undertake periodic site visits over the project period as required.

The TIS Program extension will include support by an expanded National Support role and dedicated expertise in relation to vaping prevention activities and managing national projects. All TIS Program Lead Organisations are expected to develop close working relationships with the TIS Program NC and the NBPU to ensure localised TIS Program activities continue to align to the overall objectives of the TIS Program.

8. Tackling Indigenous Smoking – Evaluation

The TIS Program is a multi-component program that delivers evidence-based activities and focuses on tobacco reduction outcomes. Importantly, it promotes culturally tailored approaches designed for and by First Nations peoples.

The purpose of the TIS Program evaluation component is to assess the extent to which best practice and evidence-based interventions are in place and are effectively implemented to meet the objectives of the Program. The evaluation processes use a combination of qualitative and quantitative data to assess implementation quality and efficiency of regional TIS service delivery and national supports.

The Cultural & Indigenous Research Centre Australia (CIRCA) has been commissioned by the department from 1 July 2022 to 30 June 2027 (period) to evaluate the TIS Program's implementation of best practice, evidence base and effectiveness. The Australian National

University has also been commissioned over the period to assess the TIS Program's impacts and outcomes and links to broader research and national data services.

The TIS program Monitoring and Evaluation Framework, and associated implementation arrangements and evaluations, will now also reflect the Government's increased priority and investment in vaping prevention activities delivered through TIS.