

DEPARTMENT OF HEALTH AND HUMAN SERVICES

AGENCY: Office of the Secretary, Office of the Assistant Secretary for Health, Office of Adolescent Health

FUNDING OPPORTUNITY TITLE: National Resource Center for HIV/AIDS Prevention among Adolescents

ANNOUNCEMENT TYPE: New Competitive Cooperative Agreement

CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER: 93.057

DATES: To receive consideration, applications must be received by the Office of Grants Management, Office of the Assistant Secretary for Health (OASH), Department of Health and Human Services (DHHS), c/o Grants Operation Center, 1400 Key Boulevard, Suite 910, Arlington, VA 22209, no later than 6:00 P.M. Eastern Time on July 1, 2011. Applications that are electronically submitted through GrantSolutions.gov or Grants.Gov will be accepted until 9:00 P.M. on this date. Applications will not be accepted by fax or email, nor will the submission deadline be extended. Applications which do not meet the prescribed deadline requirements will be returned to the applicant unread and ineligible for review. See heading "APPLICATION and SUBMISSION INFORMATION" for information on application submission mechanisms.

EXECUTIVE SUMMARY: The Office of Adolescent Health (OAH) within the Office of the Assistant Secretary for Health (OASH) announces the availability of funds for one cooperative agreement to establish a National Resource Center that will focus on collecting, storing, disseminating and synthesizing accurate information focused on evidence-based and evidence-

informed programs and strategies for adolescent HIV/AIDS prevention, in addition to identifying and providing necessary technical assistance and training in this area. The successful applicant will be responsible for the management and maintenance of the National Resource Center which will assist in building the capacity of State, local, Tribal and other publicly administered or publicly supported adolescent HIV/AIDS prevention programs in the United States.

I. FUNDING OPPORTUNITY DESCRIPTION

AUTHORITY: Section 301 of the Public Health Service (PHS) Act.

This notice announces the availability of funds from the Minority AIDS Initiative (MAI) to establish and operate a National Resource Center with the specific focus on HIV/AIDS prevention among adolescents. This announcement seeks proposals from public and nonprofit private entities. It is anticipated that **one cooperative agreement** in the **amount of up to \$200,000** will be awarded. A cooperative agreement is an award instrument of financial assistance where "substantial involvement" is anticipated between the HHS awarding agency and the recipient during performance of the contemplated project or activity. "Substantial involvement" means that the recipient can expect Federal programmatic collaboration or participation in managing the award. The resource center funded through this cooperative agreement will be required to provide information and other resources, including training and technical assistance that will promote HIV/AIDS prevention among adolescents, in particular adolescents from minority and high-risk populations.

Background

The Minority AIDS Initiative (MAI) was created in 1998 through a partnership between the Congressional Black Caucus and the Department of Health and Human Services (HHS) to respond to the growing concern about the impact of HIV/AIDS on racial and ethnic minorities in the United States. Racial and ethnic minority communities in the United States are disproportionately impacted by this epidemic. The partnership identified the following issues as priorities: developing more effective prevention educational interventions; increasing access to HIV counseling and testing services; and ensuring that comprehensive and quality health care and drug abuse treatment services are available in these communities. The funding for MAI is designed to strengthen organizational capacity and expand HIV related services in minority communities aimed at reducing the impact of HIV/AIDS on racial and ethnic minorities.

Since FY 1999, Congress has appropriated \$50 million or more each year to support the Minority AIDS Initiative (MAI). Utilizing these funds, significant steps have been taken to respond to this unfolding crisis through capacity enhancements to mount a community-based response, delivering prevention and treatment services, and providing guided and informed technical assistance and research. A sustained commitment to these goals will ensure a durable response with a flexible resource pool that can be quickly targeted to respond to newly emerging problems and to capitalize on lessons learned. Since most minority communities have disproportionately high rates of HIV/AIDS infection, these targeted investments have been successful in identifying and addressing key barriers to allowing the Department's programs to effectively reach and serve minority communities.

Funds received by the Office of the Secretary for the MAI are disbursed to the Public Health Service agencies in HHS on a competitive basis.

The MAI's principal goal is to enhance the effectiveness of prevention and care services provided for high-risk communities. Initiatives funded through MAI closely align with the goals and objectives of the National HIV/AIDS Strategy (NHAS) by aiming to reduce new infections; increase access to care and improve health outcomes for people living with HIV; and reduce HIV-related disparities. In an effort to complement, rather than replace, other federal HIV/AIDS funding and programs, the MAI takes a multi-pronged approach that focuses simultaneously on HIV prevention, care, treatment and research administered through various federal agencies and offices, primarily through the Department of Health and Human Services.

Adolescence represents a unique opportunity for long-term impact on the HIV/AIDS epidemic in the US regarding disparities and burden of disease. Adolescents require tailored prevention strategies to address the unique biological, psychological, and social influences on their sexual behavior.ⁱ Between 2005 to 2008, adolescents did not experience the greatest burden of HIV/AIDS in our population; they are neither the fastest growing demographic for diagnoses nor the demographic with highest prevalence. However, when one looks at the trend among adolescents, it is concerning. From 2005 to 2008, the number of adolescents (13-19) diagnosed with HIV increased more than 1.3 times.ⁱⁱ Diagnoses among adolescents will shape the prevalence of HIV/AIDS as they age. Because of their young age at diagnosis, they may be a greater burden to HIV care, treatment, and retention than persons diagnosed at an older age (e.g., adolescents will spend more years living with HIV and needing to receive care than persons

diagnosed at an older age). The National Institutes of Health (NIH) Office of AIDS Research considers adolescents to be a strategic priority as the early diagnosis impacts their cognitive and biological development.ⁱⁱⁱ

Racial/ethnic disparities exist among adolescents with HIV/AIDS just as they do among adults with the disease. Black/African American adolescents have been disproportionately affected by the HIV/AIDS epidemic. In 2007, in the 34 states with long-term confidential name-based HIV infection reporting, 17% of adolescents 13 to 19 years of age were black/African American, yet 72% of HIV/AIDS diagnoses in 13 to 19 year olds were to black/African American adolescents.^{iv} Among adolescents diagnosed with HIV, the primary route of transmission has been through sexual contact, whether male-to-male (57%) or heterosexual sexual contact (34%).^v This transmission is preventable. Upon examination of HIV risk behaviors, there are many adolescents at risk of an HIV diagnosis. According to YRBS 2009 data, few adolescents have ever used injectable drugs and about half have had sexual intercourse; nearly the same proportion that have had sex did not use a condom during last sexual intercourse and about 19% drank alcohol or used drugs before that last sexual intercourse. This data demonstrates that a significant portion of adolescents, including racial/ethnic minorities, are engaging in sexual behaviors that put them at risk for HIV/AIDS infection.^{vi}

As demonstrated above, many adolescents are at risk of HIV and require prevention efforts, HIV testing, treatment, and quality care. The U.S. Centers for Disease Control and Prevention (CDC) recommends routine HIV screening in health-care settings for all adults and adolescents age 13-

64, and repeat screening at least annually for those at high risk.^{vii} However, rates of HIV testing for adolescents are low, approximately 13% overall.^{viii}

The Office of Adolescent Health (OAH) coordinates adolescent health programs and initiatives across the U.S. Department of Health and Human Services related to adolescent health promotion and disease prevention. The Office supports multi-disciplinary projects focused on improving adolescent health, collects and disseminates information on adolescent health to health professionals and the general public, and works in partnership with other HHS agencies to support evidence-based approaches to improving the health and well-being of adolescents.

The Office is responsible for implementing and administering a discretionary grant program to support evidence-based teen pregnancy prevention approaches. This funding will support one competitive cooperative agreement to public and private entities to fund medically accurate and age appropriate evidence-based programs that reduce teen pregnancy and their rigorous evaluations. The teen pregnancy prevention program also supports evidence-informed demonstration programs to develop and test additional teen pregnancy prevention models and innovative strategies and to demonstrate support for these programs through rigorous evaluations.

Purpose of the Cooperative Agreement

The purpose of the National Resource Center to be funded under this announcement is to provide information and resources and training and technical assistance that will promote HIV/AIDS prevention among adolescents. The recipient will establish a National Resource Center to provide professionals, policy makers, grantees, and citizens with timely and accurate information necessary to make well-informed decisions about HIV/AIDS prevention among adolescents.

The purpose of the National Resource Center is to build the capacity of State, local, Tribal, publicly and privately administered institutions to support adolescent HIV/AIDS prevention through the dissemination of information about evidence-based and evidence-informed programs and practices, the provision of training, technical assistance, research, and consultation.

The overall objectives of this project are to: (1) develop an interactive multi-media, web-based resource center for information focused on HIV/AIDS prevention among adolescents; (2) synthesize existing and emerging research and provide information on evidence-based and evidence-informed programs and practices, and (3) improve the capacity of program staff and communities through training and technical assistance to effectively implement and disseminate HIV/AIDS prevention programs targeting adolescents, including adolescents in high risk situations (e.g., adolescents not in school).

This proposed project will expand the NHAS goal of reducing new infections to include adolescents. Specifically, to address the following steps toward reducing new infections:

1. Expand targeted efforts to prevent HIV infection using a combination of evidence-based and evidence-informed approaches.
2. Design and evaluate innovative prevention strategies and combination approaches for preventing HIV in high-risk communities.
3. Promote age-appropriate HIV and STI prevention education for all Americans.

Description of activities to be provided

The National Resource Center will engage with federal-level work groups, state-level networks, and/or other agencies and groups as appropriate, to implement and assess the overall effort. OAH seeks applications from institutions that can demonstrate their capacity to provide overall management to a National Resource Center that collects, stores, disseminates and analyzes information focused on evidence-based and evidence-informed programs and practices for adolescent HIV/AIDS prevention, in particular programs, strategies and resources that support minority and high-risk adolescent populations. Activities will include:

- Develop, launch, and maintain a web-based National Resource Center for HIV/AIDS prevention among adolescents
- Develop a comprehensive list of training and technical assistance resources. All trainings will focus on evidence-based and evidence-informed programs and practices and provide participants with skills that can be used within their program.
- Disseminate information regarding program development, coordination, and quality of services.
- Disseminate information on the evidence-based and evidence-informed approaches to the prevention of HIV/AIDS among adolescents.
- Provide resources that will support strong evaluation of adolescent HIV/AIDS prevention programs.
- Enable information exchange among adolescent HIV/AIDS prevention program providers.
- Provide training and technical assistance that will foster innovation in programs and approaches and is based on adult learning theories.

Timeline of activities

In most cases, the activities listed above will occur during each of the funded budget years, with flexibility for changes based on national or emerging trends or needs, special initiatives, and direction from OAH.

II. AWARD INFORMATION

OAH intends to make available up to \$200,000 in funding per year to support one National Resource Center. The resource center will be responsible for providing training and technical assistance, dissemination of information, research, and consultation to promote evidence-based HIV/AIDS prevention among adolescents in the United States. The cooperative agreement will be funded in annual increments (budget periods) and may be approved for a project period of up to three years. Indirect costs may not exceed ten percent of the annual award. Funding for all budget periods beyond the first year of the cooperative agreement is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

The entity that receives a Federal cooperative agreement assumes the legal and financial responsibility for the awarded funds; performance of activities approved for funding and is held to all requirements for Federal grants. The successful applicant will have lead responsibilities in all aspects of the project, including any modifications to the project, conduct of the project and preparation of any publications. Approval from the assigned Federal Project Officer will be required prior to the beginning of any activity or document performed under this award. This also includes receiving approval from the Project Officer before any activity or document is

made available to the public. Failure to seek and receive prior approval may result in the disallowance of funds.

The Project Officer will collaborate with the recipient, and provide assistance as needed with the planning, implementation and evaluation of the proposed project plan. OAH will have substantial programmatic involvement during conduct of the project through technical assistance, advice and coordination. OAH will provide assistance in the preparation and review of any reports that may be disseminated as part of a funded project.

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Any public or nonprofit private entity located in a State (which includes one of the 50 United States, the District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands) is eligible to apply for a cooperative agreement under this announcement. Faith-based organizations and American Indian/Alaskan Native/Native American (AI/AN/NA) organizations are eligible to apply for this National Resource Center for HIV/AIDS Prevention among Adolescents Cooperative Agreement.

Applicant organizations must demonstrate significant experience in the design, development, implementation, successful completion and evaluation of resource center activities, and experience with HIV prevention among adolescents. In addition, the successful applicant must demonstrate skill and experience in providing training to diverse, community-based entities.

The award will be made only to an organization or agency which has met all applicable requirements and which demonstrates the capability of providing the proposed services.

2. Cost Sharing

None required.

IV. APPLICATION AND SUBMISSION

1. Address to Request Application Package

Application kits may be obtained electronically by accessing grants.gov at <http://www.grants.gov> or GrantSolutions at <http://www.grantsolutions.gov>. Application kit requests may also be made through the Grants Operation Center at 1-888-203-6161, or email the request to OASH@LCGnet.com. Instructions for use of the GrantSolutions system can be found on the OAH web site at <http://www.hhs.gov/ash/oah/> or requested directly from the Grants Operation Center at help@grantsolutions.gov.

2. Content and Form of Application Submission

Applications must include an abstract of the proposed resource training center. The application narrative should be limited to 30 double-spaced pages using an easily readable serif typeface such as Times New Roman, Courier, or GC Times, 12- point font. The 30 page limit does not include budget; budget justification; application kit; required forms, assurances, and certifications as part of the application kit; or appendices. All pages, charts, figures and tables should be numbered.

The application narrative should be numbered separately and clearly show the 30 pages to be reviewed as part of the narrative. If the application narrative exceeds 30 pages, only the first 30

pages of the application narrative will be reviewed. Appendices may provide curriculum vitae, organizational structure, examples of organizational capabilities, or other supplemental information which supports the application. However, appendices are for supportive information only and should be limited to only that which is necessary to support the application narrative. All information that is critical to the proposed project should be included in the narrative. Appendices should be clearly labeled.

Applications must include a one-page abstract of the proposed project. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management documents.

For all non-governmental applicants, documentation of non-profit status must be submitted as part of the application. Any of the following constitutes acceptable proof of such status:

- A reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in the IRS tax code;
- A copy of a currently valid IRS tax exemption certificate;
- A statement from a State taxing body, State Attorney General, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals;
- A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status; and
- For local, nonprofit affiliates or State or national organizations, a statement signed by the parent organization indicating that the applicant organization is a local nonprofit affiliate

must be provided in addition to any one of the above acceptable proof of nonprofit status.

A Dun and Bradstreet Universal Numbering System (DUNS) number is required for all applications for Federal assistance. Organizations should verify that they have a DUNS number or take the steps needed to obtain one. Instructions for obtaining a DUNS number are included in the application package, or may be downloaded from the grants.gov website.

Program Requirements/Application Content

The National Resource Center is expected to maintain a web-based resource center of current, evidence-based information and training resources regarding HIV/AIDS prevention among adolescents. The successful applicant should be competent in the design and development of web-based training materials and possess the infrastructure to execute the activities required under this cooperative agreement. The applicant should clearly demonstrate knowledge of HIV/AIDS related issues and how adolescents are impacted.

Scope of the Project

The recipient selected to establish the National Resource Center is expected to: (1) develop an interactive multi-media, web-based resource center for information focused on HIV/AIDS prevention among adolescents; (2) synthesize existing and emerging research and provide information on evidence-based and evidence-informed programs and practices; and (3) improve the capacity of program staff and communities through training and technical assistance to effectively implement and disseminate HIV/AIDS prevention programs targeting adolescents and adolescents in high-risk situations (e.g., adolescents not in school).

Activities will include:

- Develop, launch, and maintain a web-based National Resource Center for HIV/AIDS prevention among adolescents
- Develop a comprehensive list of training and technical assistance resources. All trainings will focus on evidence-based and evidence-informed programs and practices and provide participants with skills that can be used within their program
- Disseminate information regarding program development, coordination, and quality of services
- Disseminate information on the evidence-based and evidence-informed approaches to the prevention of HIV/AIDS among adolescents
- Provide resources that will support strong evaluation of adolescent HIV/AIDS prevention programs
- Enable information exchange among adolescent HIV/AIDS prevention program providers
- Foster innovation in programs and approaches by providing training and technical assistance based on adult learning theories

The successful applicant will describe an overall project plan to successfully implement, conduct and evaluate the activities described in this announcement. At a minimum, the application should describe how the applicant will address the following:

Program Planning, Management and Evaluation

- Present a strategy for on-going communication with the project officer.
- Present a clear description of the proposed project, including S.M.A.R.T. goals and objectives. Develop a mechanism for continuous assessment of the training and technical

assistance needs of organizations and providers implementing adolescent HIV/AIDS prevention programs.

- Incorporate NHAS strategies into activities as they relate to HIV/AIDS and adolescents.
- Maintain data that is incorporated into annual progress reports on all activities supported with cooperative agreement funds, which includes at minimum the following information:
 - a. Title and type of activities and events, including technical assistance and training
 - b. Tracking of website traffic and consumer demographics
 - c. Dissemination of information
 - d. Requests for consultation
 - e. Expenditure report
 - f. Other reporting requirements as defined by OAH
- Provide for an ongoing evaluation plan that assesses the total program, as well as the following metrics:
 - a. Number of events or trainings, type and date of trainings;
 - b. Number of persons attending or trained;
 - c. Where appropriate, number of clinics or other sites that are providing HIV testing as a result of new training; and
 - d. An end-user satisfaction metric (to be identified by applicant)

Website Development

Applicants should propose a strategy to successfully develop and launch a web-based resource center. The recipient selected for award will be responsible for developing, launching and

maintaining a web-based National Resource Center for HIV/AIDS prevention among adolescents. Content of the web-based resource center should include but is not limited to: online modules with downloadable materials and skill building activities; technical assistance and training calendar of events; links to federal agencies also disseminating and conducting research and evaluation of HIV/AIDS prevention programs; bi-lingual materials as applicable; and library search page on HIV/AIDS prevention and adolescents. The resource center is expected to consult with the Project Officer on additional content. All materials available on this website should be in compliance with Section 508 of the Rehabilitation Act of 1973.

Management of Information and Training Resources

The successful applicant will propose a strategy for ensuring the availability and accessibility of the most current research findings related to adolescent HIV/AIDS prevention information, education and clinical services for HIV/AIDS testing. The Resource Center is expected to implement this strategy in consultation with the Project Officer. At a minimum, the successful applicant will address the following:

- Maintain a web-based system for the retrieval and dissemination of current, evidence-based information and research findings related to adolescent HIV/AIDS prevention.
- Identify and/or develop adolescent-specific evidence-based training resources on HIV/AIDS issues that are accessible upon request at low or no cost.

All materials developed or utilized by the National Resource Center must be 508 compliant and must be reviewed and approved by the Project Officer prior to dissemination.

Dissemination of Evidence-based Programs and Practices

A component of this cooperative agreement will be focused on the dissemination of evidence-based programs and practices that can be used by the National Resource Center and consumers.

The successful applicant will demonstrate familiarity with the literature on HIV/AIDS prevention among adolescent and should be able to link this research to consumers to help them make well-informed decisions about HIV/AIDS prevention among adolescents. In order to do this, the successful applicant will:

- Stay informed of the current research on evidence-based programs and practices specific to HIV/AIDS prevention among adolescents as well as best practices from the field.
- Develop strategies to translate relevant research into effective educational and clinical practice through training and dissemination activities.

Capacity Building

The Resource Center is expected to enhance the capacity of State, local, Tribal, and other publicly and privately administered institutions that support adolescent HIV/AIDS prevention providers and organizations through the dissemination of evidence-based programs and practices, and the provision of training, technical assistance, research, and consultation. This includes, but is not limited to the provision of information and education materials and resources, the provision of on-site or web-based trainings, as well as supporting technical assistance activities.

The successful applicant will be responsible for all costs associated with administering and managing training activities and other components (e.g., educational materials, classroom and training sites, etc.) of this cooperative agreement. The successful applicant will be responsible for maintaining budget flexibility in order to accommodate unanticipated or emerging training needs and costs throughout the entire award period.

The Resource Center will be required to work closely with the Project Officer to accomplish the objectives of this cooperative agreement. The successful applicant will be required to participate in up to two meetings per year with the Project Officer and other OAH staff at the OAH Office in Rockville, MD or at an alternate location as specified. In addition, the successful applicant will be required to participate in at least one conference call per month with the Project Officer and others as necessary. The budget should include these projected costs for conference calls and travel to meetings with the Project Officer.

In responding to this announcement, applicants should familiarize themselves with:

- Department of Health and Human Services Departmental Priorities
- National HIV/AIDS Strategy
- Centers for Disease Control and Prevention Division of HIV/AIDS Prevention (CDC DHAP)
- Office of Adolescent Health Teen Pregnancy Prevention Research Evidence Review and the CDC DHAP's Diffusion of Effective Behavioral Interventions (DEBI)
- Healthy People 2020 – objectives for Adolescent Health and HIV
- 2006 Centers for Disease Control and Prevention "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings"

- Centers for Disease Control and Prevention National Network of STD/HIV Prevention Training Centers
- Health Resources Services Administration Adolescent Health Program
- National Adolescent Health Information and Innovation Center
- AIDS.gov

3. Submission Dates and Times

The Office of the Assistant Secretary for Health (OASH) provides multiple mechanisms for the submission of applications, as described in the following sections. Applicants will receive notification via mail from the OASH Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OASH Office of Grants Management after the deadlines described below will not be accepted for review. Applications which do not conform to the requirements of the cooperative agreement announcement will not be accepted for review and will be returned to the applicant. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the Grants.gov and GrantSolutions.gov systems is highly encouraged. Applications may only be submitted electronically via the electronic submission mechanisms specified below. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review.

In order to apply for new funding opportunities which are open to the public for competition, applicants may access the Grants.gov website portal at <http://www.grants.gov>. All OASH funding opportunities and application kits are made available on Grants.gov. If an applicant organization has/had a grantee business relationship with a grant program serviced by the OASH

Office of Grants Management, and is applying as part of ongoing grantee related activities, please access <http://www.GrantSolutions.gov>.

Electronic grant application submissions must be submitted no later than 9:00 P.M. Eastern Time on the deadline date specified in the DATES section of the announcement using one of the electronic submission mechanisms specified. All required hardcopy original signatures and mail-in items must be received by the Office of Grants Management, Office of the Assistant Secretary for Health (OASH), Department of Health and Human Services (DHHS) c/o Grants Operation Center, 1400 Key Boulevard, Suite 910, Arlington, VA 22209, no later than 6:00 p.m. Eastern Time on the next business day after the deadline date specified in the DATES section of the announcement. Hard copy applications must be received no later than 6:00 P.M. Eastern Time on the deadline specified in the Dates section of this announcement.

Applications will not be considered valid until all electronic application components, hardcopy original signatures, and mail-in items are received by the OASH Office of Grants Management according to the deadlines specified above. Application submissions that do not adhere to the due date requirements will be considered late and will be deemed ineligible. Applicants are encouraged to initiate electronic applications early in the application development process, and to submit early on the due date or before. This will aid in addressing any problems with submissions prior to the application deadline.

Electronic Submissions via the Grants.gov Website Portal

The Grants.gov Website Portal provides organizations with the ability to submit applications for OASH grant opportunities. Organizations must successfully complete the necessary registration

processes in order to submit an application. Information about this system is available on the Grants.gov website, <http://www.grants.gov>. In addition to electronically submitted materials, applicants may be required to submit hard-copy signatures for certain program-related forms, or original materials as required by the announcement. It is imperative that the applicant review both the cooperative agreement announcement, as well as the application guidance provided within the Grants.gov application package, to determine such requirements. Any required hard-copy materials, or documents that require a signature, must be submitted separately via mail to the Grants Operation Center at the address specified above, and if required, must contain the original signature of an individual authorized to act for the applicant agency, and the obligations imposed by the terms and conditions of the cooperative agreement award. When submitting the required forms, do not send the entire application. Complete, hard-copy applications submitted after the electronic submission will not be considered for review.

Electronic applications submitted via the Grants.gov Website Portal must contain all completed online forms required by the application kit, the Program Narrative, Budget Narrative and any appendices or exhibits. Any files uploaded or attached to the Grants.gov application must be of the following file formats – Microsoft Word, Excel or PowerPoint, Corel WordPerfect, ASCII Text, Adobe PDF, or image formats (JPG, GIF, TIFF, or BMP only). Even though Grants.gov allows applicants to attach any file format as part of their application, OASH restricts this practice and only accepts the file formats identified above. Any file submitted as part of the Grants.gov application that is not in a file format identified above will not be accepted for processing and will be excluded from the application during the review process.

All required mail-in items must be received by the due date requirements specified above. Mail-in items may include only publications, resumes, or organizational documentation. When submitting the required forms, do not send the entire application. Complete hard-copy applications submitted after the electronic submission will not be considered for review. Upon completion of a successful electronic application submission via the Grants.gov Website Portal, the applicant will be provided with a confirmation page from Grants.gov indicating the date and time (Eastern Time) of the electronic application submission, as well as the Grants.gov Receipt Number. It is critical that the applicant print and retain this confirmation for their records, as well as a copy of the entire application package.

All applications submitted via the Grants.gov Website Portal will be validated by Grants.gov. Any applications deemed "Invalid" by the Grants.gov Website Portal will not be transferred to the GrantSolutions system, and OASH has no responsibility for any application that is not validated and transferred to OASH from the Grants.gov Website Portal. Grants.gov will notify the applicant regarding the application validation status. Once the application is successfully validated by the Grants.gov Website Portal, applicants should immediately mail all required hard copy materials to the OASH Office of Grants Management, c/o Grants Operation Center, 1400 Key Boulevard, Suite 910, Arlington, VA 22209, to be received by the deadlines specified above. It is critical that the applicant clearly identify the Organization name and Grants.gov Application Receipt Number on all hard copy materials.

Once the application is validated by Grants.gov, it will be electronically transferred to the GrantSolutions system for processing. Upon receipt of both the electronic application from the Grants.gov Website Portal, and the required hardcopy mail-in items, applicants will receive

notification via mail from the OASH Office of Grants Management confirming the receipt of the application submitted using the Grants.gov Website Portal. Applicants should contact Grants.gov regarding any questions or concerns regarding the electronic application process conducted through the Grants.gov Website Portal.

Electronic Submissions via the GrantSolutions System

OASH is a managing partner of the GrantSolutions.gov system. GrantSolutions is a full life-cycle grants management system managed by the Administration for Children and Families (ACF), Department of Health and Human Services (HHS), and is designated by the Office of Management and Budget (OMB) as one of the three Government-wide grants management systems under the Grants Management Line of Business initiative (GMLoB). OASH uses GrantSolutions for the electronic processing of all grant applications, as well as the electronic management of its entire Grant portfolio.

When submitting applications via the GrantSolutions system, applicants are still required to submit a hard copy of the application face page (Standard Form 424) with the original signature of an individual authorized to act for the applicant agency and assume the obligations imposed by the terms and conditions of the cooperative agreement award. If required, applicants will also need to submit a hard copy of the Standard Form LLL and/or certain Program-related forms (e.g., Program Certifications) with the original signature of an individual authorized to act for the applicant agency. When submitting the required hardcopy forms, do not send the entire application. Complete hard-copy applications submitted after the electronic submission will not be considered for review. Hard-copy materials should be submitted to the OASH Office of Grants Management at 1101 Wootton Parkway, Suite 500, Rockville, MD 20852.

Electronic applications submitted via the GrantSolutions system must contain all completed online forms required by the application kit, the Program Narrative, Budget Narrative and any appendices or exhibits. The applicant may identify specific mail-in items to be sent to the Office of Grants Management (see mailing address above) separate from the electronic submission; however, these mail-in items must be entered on the GrantSolutions Application Checklist at the time of electronic submission, and must be received by the due date requirements specified above. Mail-in items may include only publications, resumes, or organizational documentation.

Upon completion of a successful electronic application submission, the GrantSolutions system will provide the applicant with a confirmation page indicating the date and time (Eastern Time) of the electronic application submission. This confirmation page will also provide a listing of all items that constitute the final application submission including all electronic application components, required hard-copy original signatures, and mail-in items. As items are received by the OASH Office of Grants Management, the electronic application status will be updated to reflect the receipt of mail-in items. It is recommended that the applicant monitor the status of their application in the GrantSolutions system to ensure that all signatures and mail-in items are received.

Mailed or Hand-Delivered Hard Copy Applications

Applicants who submit applications in hard copy (via mail or hand-delivered) are required to submit an original and two copies of the application. The original application must be signed by an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the cooperative agreement award.

Mailed or hand-delivered applications will be considered as meeting the deadline if they are received by the Office of Grants Management, Office of the Assistant Secretary for Health (OASH), Department of Health and Human Services (DHHS), c/o Grants Operation Center, 1400 Key Boulevard, Suite 910, Arlington, VA 22209, on or before 6:00 p.m. Eastern Time on the deadline date specified in the DATES section of the announcement. The application deadline date requirement specified in this announcement supersedes the instructions in the application kit. Applications that do not meet the deadline will be returned to the applicant unread.

4. Intergovernmental Review

This program is not subject to the intergovernmental review requirements of Executive Order 12372, Intergovernmental Review of Federal Programs, as implemented by 45 CFR Part 100.

5. Funding Restrictions:

The allowability, allocability, reasonableness, and necessity of direct and indirect costs that may be charged to OASH grants are outlined in the following documents: OMB Circular A-21 (Institutions of Higher Education); OMB Circular A-87 (State and Local Governments); OMB Circular A-122 (Nonprofit Organizations); and 45 CFR Parts 74 and 92, (Hospitals). Copies of the Office of Management and Budget (OMB) Circulars are available on the Internet at www.whitehouse.gov/omb/grants/grants_circulars.html.

Applicants are expected to anticipate and justify their funding needs and the activities to be carried out with those funds in preparing the budget and accompanying narrative portions of their applications. If applicants are uncertain whether a particular cost is allowable, they should contact the OASH Office of Grants Management at (240) 453-8822 for further information

6. 508 Compliance

All materials developed and disseminated through this cooperative agreement must meet compliancy standards to be accessible to all and be able to be posted on the website as appropriate. All materials shall be compliant with Section 508 of the Rehabilitation Act of 1973, as amended. The HHS Web Standards that need to be followed can be found at <http://www.hhs.gov/web>. The Usability Standards can be found at <http://www.usability.gov>.

V. APPLICATION REVIEW INFORMATION

1. Criteria

Eligible applications will be reviewed by a multi-disciplinary panel of independent reviewers and will be assessed using the following criteria:

A) The degree to which the project plan adequately describes the applicant's project objectives, the methods for achieving S.M.A.R.T project goals and objectives, evidence of the ability to collect and report on all the data required for this project, the ability to monitor progress in the development and implementation of the projects, the ability to involve consumers and the results or benefits expected (15 points).

B) The extent to which the proposed National Resource Center activities will promote HIV/AIDS prevention among adolescents, in particular minority and high-risk populations , as evidenced by the applicant's ability to address the following (45 points total):

- i) requirements set out under “Program Requirements /Application Content” and the “Scope of the Project” of this announcement (40 points); and

ii) development of capacity among State, local, Tribal and other publicly administered or publicly supported adolescent HIV/AIDS prevention persons and organizations through the dissemination of evidence-based programs and practices, through the provision of training, technical assistance, research and consultation (5 points).

C) The competence of the organization and project staff in relation to the services to be provided, including expertise in HIV/AIDS prevention among adolescents; experience collecting, storing, disseminating, and synthesizing information; experience providing training and technical assistance; experience designing and developing web-based training materials; and experience developing, implementing, and evaluating programs (15 points).

D) The administrative and management capability and competence of the applicant (6 points).

E) The extent to which the proposed training approach will provide the necessary resources for consumers of the National Resource Center to instill preventive health and healthy sexual behavior among adolescents; increase condom use among sexually active participants; and increase HIV testing among adolescents (5 points).

F) The capacity of the applicant to support coordination of OAH partnerships between CDC's Division of HIV/AIDS Prevention, CDC's National Network of STD/HIV Prevention Training Centers and Aids.gov through this cooperative agreement (4 points).

G) The extent to which the applicant provides a detailed budget and line item justification for all operating expenses that is consistent with the proposed program objectives and activities (10 points).

2. Review and Selection Process

Final award decisions will be made by the Director of the Office of Adolescent Health. In making these decisions, the Director will fund one project which will, in his or her judgment, best promote the purposes stated in the funding announcement, within the limits of funds available for such project, and will consider:

- 1) recommendations of the review panel and the availability of funds;
- 2) Federal reviews for programmatic and grants management compliance;
- 3) the reasonableness of the estimated cost to the government considering the available funding and anticipated results; and
- 4) the likelihood that the proposed project will result in the benefits expected.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

OAH does not release information about individual applications during the review process. When final funding decisions have been made, each applicant will be notified by letter of the outcome. The official document notifying an applicant that a project application has been approved for funding is the Notice of Grant Award (NGA), signed by the OASH Grants Management Officer. This document specifies to the cooperative agreement the amount of money awarded, the purposes of the cooperative agreement, the length of the project period, terms and conditions of the award, and the amount of funding, if any, to be contributed by the cooperative agreement to project costs. In addition, the NGA identifies the Grants Management

Specialist and the Project Officer assigned to the cooperative agreement. This successful applicant will be awarded for a project period of up to three years. The successful applicant will be funded in annual increments (budget periods). Funding for all approved budget periods beyond the first year of the cooperative agreement is contingent upon satisfactory progress of the project, efficient and effective use of cooperative agreement funds and the continued availability of funds.

2. Administrative and National Policy Requirements

The successful applicant will be responsible for the overall management of activities within the scope of the approved project plan and will work closely with the project officer. The project officer will review and approve all aspects of the planning, implementation and evaluation of the project components, as well as plans for the use of resources as part of this cooperative agreement. In accepting this award, the successful applicant stipulates that the award and any activities thereunder are subject to all provisions in 45 CFR parts 74 and 92 currently in effect or implemented during the period of the grant.

The OASH requires all successful applicants to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the OASH mission to protect and advance the physical and mental health of the American people.

When issuing statements, press releases, requests for proposals, bid solicitations, and other documents describing projects or programs funded in whole or in part with Federal money, all grantees shall clearly state the percentage and dollar amount of the total costs of the project which will be financed with Federal money and the percentage and dollar amount of the total costs of the project that will be financed by nongovernmental sources.

Federal cooperative agreement support must be acknowledged in any publication developed using MAI funds. All publications developed or purchased with MAI funds must be consistent with the requirements of the program. The cooperative agreement will be expected to make available, at cost, all materials developed with MAI funds as requested by other MAI projects.

3. Requirement for Central Contractor Registration (CCR)

Unless you are exempted from this requirement under 2 CFR 25.110, you as the recipient must maintain the currency of your information in the CCR until you submit the final financial report required under this award or receive the final payment, whichever is later. This requires that you review and update the information at least annually after the initial registration, and more frequently if required by changes in your information or another award term.

Central Contractor Registration (CCR) means the Federal repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the CCR Internet site (currently at <http://www.ccr.gov>).

4. Requirement for Data Universal Numbering System (DUNS) Numbers

If you're authorized to make sub-awards under this award, you must notify potential sub-recipients that no entity may receive a sub-award from you unless the entity has provided its DUNS number to you. Also, you may not make a sub-award to an entity unless the entity has provided its DUNS number to you:

Data Universal Numbering System (DUNS) number means the nine-digit number established and assigned by Dun and Bradstreet, Inc. (D&B) to uniquely identify business entities. A DUNS number may be obtained from the D&B on the Internet (currently at <http://fedgov.dnb.com/webform>)

5. Reporting

For each year of the project period, the successful applicant is required to submit a non-competing application which includes an annual progress report, project work plan, budget, and budget justification for the upcoming year. Cooperative Agreements are also required to submit quarterly Federal financial reports.

New awards (“Type 1”) issued under this funding opportunity announcement are subject to the reporting requirements of the Federal Funding Accountability and Transparency Act (FFATA) of 2006 (Pub. L. 109–282), as amended by section 6202 of Public Law 110–252, and implemented by 2 CFR Part 170. Grant and cooperative agreement recipients must report information for each first-tier sub-award of \$25,000 or more in Federal funds and executive total compensation for the recipient’s and sub-recipient’s five most highly compensated executives as outlined in Appendix A to 2 CFR Part 170 (available online at http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&tpl=/ecfrbrowse/Title02/2cfr170_main_02.tpl) Competing continuation (“Type 2”) awardees are subject to this requirement and will be so notified in the Notice of Award.

VII. AGENCY CONTACTS

For questions regarding administrative and budgetary requirements, the submission process or cooperative agreement requirements, please contact the OASH, Office of Grants Management, Grants Operation Center at 1-888-203-6161, e-mail: OASH@LGCnet.com For questions

regarding program requirements, please contact Ms. Lillian Sowah, Office of Adolescent Health, by email at Lillian.Sowah@hhs.gov, by phone at (240) 453-8134 or by fax at (240) 453-2801.

VIII. OTHER INFORMATION

OAH Web site at <http://www.hhs.gov/ash/oah/>

Definitions: For the purposes of this announcement, the following definitions apply:

Application – a request for financial support of a project submitted to the OASH Grants Management Office on specified forms and in accordance with instructions provided.

Cooperative agreement – an award instrument of financial assistance where "substantial involvement" is anticipated between the HHS awarding agency and the recipient during performance of the contemplated project or activity. "Substantial involvement" means that the recipient can expect Federal programmatic collaboration or participation in managing the award. The entity that receives a Federal cooperative agreement assumes the legal and financial responsibility and accountability for the awarded funds and performance of activities approved for funding and is held to all requirements for Federal grants.

Evidence-based – relevant scientific evidence that has undergone comprehensive review and rigorous analysis.

Evidence-informed – strategies or approaches that are based on scientific underpinnings and lead to an increase in effectiveness.

National Resource Center – one center that will promote HIV/AIDS prevention among adolescents. A National Resource Center provides professional, policy makers, grantees, and citizens with timely and accurate information and resources such as training and technical assistance necessary to make well-informed decisions about HIV/AIDS prevention among adolescents.

Project – those activities described in the cooperative agreement application and supported under the approved budget.

S.M.A.R.T – Objectives that are: Specific, Measurable, Achievable, Realistic, and Time-framed.

Dated: July 5, 2011

Evelyn M. Kappeler

Acting Director, Office of Adolescent Health

ⁱ Teal Pedlow C, Carey MP. Developmentally-appropriate sexual risk reduction interventions for adolescents: rationale, review of interventions, and recommendations for research and practice. *Am Behav Med*. 2004 June; 27(3):172-184.

ⁱⁱ Calculations based on information from 37 states and 5 U.S. dependent areas with confidential name-based HIV infection reporting. CDC. [HIV Surveillance Report, 2008](#); vol. 20. Published June 2010. Accessed 10/1/2010. Table 1b.

ⁱⁱⁱ “HIV/AIDS and Adolescents.” 31st Meeting of Office of AIDS Research Advisory Council. National Institutes of Health.

^{iv} Centers for Disease Control and Prevention. [HIV/AIDS Surveillance Report, 2007](#). Vol. 19. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2009.

^v Ibid.

^{vi} Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance – United States, 2009. Surveillance Summaries, June 4, 2010. MMWR 2010; 59(No. SS-5).

^{vii} CDC. Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings. MMWR 2008; 55 (RR14).

^{viii} Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance – United States, 2009. Surveillance Summaries, June 4, 2010. MMWR 2010; 59(No. SS-5).