DEPARTMENT OF HEALTH AND HUMAN SERVICES

AGENCY: Office of the Secretary, Office of Public Health and Science, Office of Population Affairs, Office of Adolescent Pregnancy Programs

FUNDING OPPORTUNITY TITLE: Announcement of Availability of Funds for Adolescent Family Life (AFL) Demonstration Projects

CATALOG of FEDERAL DOMESTIC ASSISTANCE (CFDA) NUMBER: 93.995

ANNOUNCEMENT TYPE: Initial Competitive Grant

DATES: To receive consideration, applications must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, Office of Grants Management Operations Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209, Attention: Office of Population Affairs/Office of Adolescent Pregnancy Programs no later than **11 p.m. Eastern Time for electronic applications and 5:00 p.m. Eastern Time for mailed-in applications on June 22, 2010.** This application due date requirement supersedes the instructions in the application kit.

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Overview:
The Office of Adolescent Pregnancy Programs (OAPP) of the Office of Population Affairs (OPA) requests applications for care demonstration grants under the Adolescent Family Life (AFL) Demonstration Projects Program, as authorized by Title XX of the Public Health Service (PHS) Act, 42 U.S.C. 300z *et seq.* Title XX authorizes the Secretary of Health and Human Services to award grants for care demonstration projects to develop and test services for pregnant adolescents, adolescent parents, and their families. Services are intended to "enable pregnant adolescents to obtain proper care and assist pregnant adolescents and adolescent parents to become productive independent contributors to family and community life" and "to assist families of adolescents to understand and resolve the societal causes which are associated with adolescent pregnancy" (PHS Act § 2001(b)(3)). In addition, Title XX demonstration projects are required to "use such methods as will strengthen the capacity of families to deal with the sexual behavior, pregnancy, or parenthood of adolescents and to make use of support systems such as other family members, friends, religious and charitable organizations, and voluntary associations" (PHS Act § 2003). The Office of Adolescent Pregnancy Programs emphasizes the importance of conducting program evaluation to identify effective services which ameliorate any negative consequences of adolescent childbearing and to develop an array of interventions that effectively address adolescent pregnancy and childbearing. It is anticipated that up to 10 grants in the amounts of $400,000-$600,000 per year will be awarded. OAPP expects that projects dedicate 20-25% of the federal portion of the proposed budget to evaluation activities.

I. FUNDING OPPORTUNITY DESCRIPTION

This announcement seeks proposals from public and private nonprofit entities to develop, implement and evaluate innovative interventions for pregnant adolescents ages 15 -18 and their families, as well as fathers of their children and/or male partners. For purposes of the demonstration grants announced in this notice, only pregnant adolescents are eligible to receive program services at the time of program entry. However, services will continue to be provided to the parenting adolescent and her child after the baby is born until the child turns one year old. Although the Title XX legislation stipulates that specific core services must be offered by each grantee either directly or by referral, the demonstrative nature of these grants, allows grantees to implement innovative program strategies that expand the core services.

Applicants should propose a multi-site intervention which compares pregnant adolescents and their families receiving standard care services, with those receiving a care intervention that enhances the core services by adding a parental, family or male involvement intervention. Applicants will implement the standard care services as described in the Title XX legislation at one or more sites, and the enhanced model of care services at one or more other sites. Eligible sites could include schools, community centers, hospitals or clinics, etc. Under this announcement, adolescents who are pregnant and between 15 and 18 years of age (and their families) are the target group for care services intervention. The care services provided should promote the healthy development of the adolescents' children and the involvement of extended family members, fathers of their children, and/or male partners.

Description of Standard Care Services

All AFL care demonstration projects must provide standard care services that are set out in the Title XX legislation as "core services." Applicants must address how each of the following ten core services and any supplemental services will be provided, either directly or by referral:

1) pregnancy testing and maternity counseling;
2) adoption counseling and referral services which present adoption as an option for pregnant adolescents, including referral to licensed adoption agencies in the community if the eligible grant recipient is not a licensed adoption agency;
3) primary and preventive health services, including prenatal and postnatal care;
4) nutrition information and counseling;
5) referral for screening and treatment of sexually transmitted infections (STI), including HIV/AIDS;
6) referral to appropriate pediatric care;
7) educational services relating to family life and problems associated with adolescent premarital sexual relations including:
    (a) information about adoption;
    (b) education on the responsibilities of sexuality and parenting;
    (c) the development of material to support the role of parents as the providers of sex education; and
    (d) assistance to parents, schools, youth agencies and health providers to educate adolescents and preadolescents concerning self-discipline and responsibility in human sexuality;
8) appropriate educational and vocational services;
9) mental health services and referral to mental health services and to other appropriate physical health services; and
10) counseling and referral for family planning services.

Note: Funds provided under Title XX may not be used for the provision of family planning services other than counseling and referral services unless appropriate family planning services are not otherwise available in the community. In accordance with sec. 2006(a)(17) of Title XX, applicants must make maximum use of funds available under the Title X Family Planning Program in providing this required core service. According to the Title XX legislation (Section 2006(a)(18)), the acceptance by any individual of family planning services or family planning information (including educational materials) "shall be voluntary and shall not be a prerequisite to eligibility for or receipt of any other service furnished by the applicant." The U.S. Department of Health and Human Services (DHHS) supports a network of clinics offering family planning and related preventive health services. For access to the Family Planning Directory database, please visit: http://www.hhs.gov/opa/familyplanning/database/index.html. The applicant should describe linkages or referral agreements with Title X family planning providers within the area to be served.

In addition to the 10 required core services listed above, applicants for care

projects may provide any of the following supplemental services:

(1) referral to licensed residential care or maternity home services;
(2) child care sufficient to enable the adolescent parent to continue education or to enter into employment;
(3) consumer education;
(4) counseling for the immediate and extended family members of the eligible person;
(5) transportation; and
(6) outreach services to families of adolescents to discourage sexual relations among unemancipated minors.

Description of Enhanced Care Services

Receiving adequate social support is associated with positive outcomes for both the pregnant adolescent and her baby. These outcomes include improvements in the adolescent's health, higher educational attainment and fewer pregnancy complications[1]. The most frequent providers of social support to pregnant adolescents are their mothers and the fathers of their children. Applicants should propose an enhanced care intervention targeting one of the following members of the pregnant adolescent's social network: parents of the pregnant adolescent, extended family members, expectant fathers/fathers of their children, and/or male partners. Parent interventions can include guardians or another significant adult family member in the life of the adolescent. Applicants should ensure the enhanced intervention supports and complements the standard care services provided for the pregnant adolescents.

The proposed intervention should be informed by evidence from service providers' previous experience, child or adolescent development theory, qualitative studies, or basic research. The theoretical framework and any evidence from related research to support the intervention should be thoroughly discussed in the application.

The proposed intervention should reflect the specific needs of the target population and may include objectives related to communication skills, strengthening family units, conflict resolution strategies, or parenting skills. Each program activity should be linked directly to the program objectives. In addition, applicants should justify their proposed approach by describing the existing programming in the community or gaps in these services. Projects that aim to address gaps in the services provided by improving coordination, integration, and linkages among organizations with existing programs are strongly encouraged.

Applicants should present a well defined plan and justification for all of the following: 1) recruitment and retention of members of the pregnant adolescent's social support network including how staff will be trained to recruit and retain participants; 2) the rationale and theoretical framework for the enhanced care intervention; 3) the specific activities and components of the intervention (including dosage); 4) the specific educational materials or curricula being used (if any); 5) how the enhanced care intervention will be responsive to group differences; and 6) how the enhanced care intervention will be integrated with the core services being provided to the pregnant adolescent.

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[1] Henley, 1997; May, 1992; Renker, 1999

Description of Multi-Site Program Model
Under this announcement, strong emphasis is placed on the applicant's capacity to implement a multi-site model with 3 sites as the minimum. Sites in this model can be school-based, community-based, home-based, hospital-based or a combination. A strong multi-site design helps to prevent interaction between the standard care services group and the enhanced care intervention group, which can alter the impact of the interventions.

Project Goal and Objectives
OAPP has 3 performance measures for AFL care programs: (1) reduce the incidence of repeat pregnancies among AFL clients, (2) increase AFL care demonstration client conformance with recommended infant immunization schedules, and (3) increase the educational attainment of AFL care demonstration project clients. Successful applicants must develop these three performance measures into three viable program outcome objectives to be met within the proposed intervention. Applicants are encouraged to develop up to 3 additional programmatic outcome objectives.

Evaluation
Section 2006(b)(1) of Title XX requires each grantee to expend at least one percent, but not more than five percent, of the federal funds received under Title XX on evaluation of the project. When a more rigorous or comprehensive evaluation effort is proposed, waivers of the five percent limit on evaluation may be granted by OAPP (PHS Act § 2006(b)(1)). OAPP emphasizes rigorous evaluation of the demonstration projects it supports. To that end, OAPP is requesting applications with rigorous evaluation designs, and will waive the five percent limit for those projects. OAPP strongly recommends that applicants budget 20-25% of the federal portion of the proposed grant project for evaluation activities. Applicants should include a clear and fully developed evaluation plan. The application kit contains additional important information regarding the approach to evaluation. Applicants should work with their evaluators as the application is being prepared to ensure that the evaluation plan addresses the criteria detailed in the application kit.

AFL Care Evaluation Core Instruments
The AFL care core evaluation instruments were developed for use in AFL care demonstration projects and designed to reflect the requirements in the Title XX statute, and the AFL care performance measures. The core evaluation instruments have been approved by the Office of Management and Budget and all AFL demonstration projects are required to use them in their evaluation design. Other instruments should be used to measure performance corresponding to the additional outcome objectives proposed. Applicants must demonstrate the capacity and commitment to using the AFL care core evaluation instruments in their evaluation plan. Behavioral data is collected on the core evaluation instruments. Applicants should discuss how this information will be collected in their data collection and program management protocols. Applicants should demonstrate their willingness and capacity to participate in cross-site evaluations, which

require a rigorous evaluation design, high quality data collection procedures, and the ability to share data for inclusion in cross-site analyses. The AFL care core evaluation instruments can be found at:
http://www.hhs.gov/opa/familylife/core_instruments/index.html. The instruments are available in both English and Spanish.

II. AWARD INFORMATION

OAPP intends to make available approximately $4 million to support up to 10 care demonstration grants, funded at $400,000 -$600,000 per budget year for a project period not to exceed five years. Any application that proposes funding over the maximum $600,000 will not be considered. Funding for all approved budget periods beyond the first year of the grant is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of federal funds. The estimated start date for care demonstration grants awarded under this announcement is September 1, 2010.

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Any public or private nonprofit organization or agency 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 grant under this announcement. Faith-based organizations and American Indian/Alaskan Native/Native American (AI/AN/NA) organizations are eligible to apply for these funds. Applicants must propose services that meet the Title XX statutory requirements in order to be considered. The award will be made only to an organization or agency which has met all applicable requirements and which demonstrates the capacity to effectively implement an evaluation model as stipulated in this announcement.

Note: AFL funds may not be used for inherently religious activities, such as worship, religious instruction, and proselytization. If an organization engages in such activities, they must be offered separately in time or location from the program supported by AFL funds and participation must be voluntary for program beneficiaries. An AFL program, in providing services and outreach related to program services, cannot discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice. All adolescents, regardless of race or religion, shall be eligible to participate in an AFL program.

2. Cost Sharing

Grantees funded under this announcement will be required to match federal funding provided by the OAPP. Section 2005 (c)(2) of Title XX states that an AFL grant award may not exceed 70 percent of the total costs of the project for the first and second years, 60 percent of the total costs for the third year, 50 percent for the fourth year and 40 percent for the fifth year. The AFL non-federal share of the project costs may be

provided in cash expenditures or fairly evaluated in-kind contributions, including facilities, donated labor, materials, equipment and services. Cost sharing is a responsiveness criterion and is not a scored evaluation criterion. If needed, technical assistance may be provided to assist applicants in developing their cost sharing options.

Note: The HHS Grants Policy Statement stipulates that: "Recipient contributions may be derived from any non-federal source; from federal sources if received as fees, payments, or reimbursements for the provision of a specific service, such as patient care reimbursements received under Medicare or Medicaid; or from other program income, if authorized by [HHS]. Otherwise, unless there is specific statutory authority, federal funds may not be used to match HHS grant funds."

3. Evaluator Requirements

Section 2006(b)(2) of Title XX requires that evaluations of AFL demonstration projects be conducted by an organization or entity independent of the AFL grantee. To accomplish this, applicants should collaborate with an independent evaluator affiliated with a college or university located in their state. OAPP recommends that applicants select a lead evaluator who has experience conducting and managing intensive evaluations similar to those proposed. Since AFL grantees are expected to disseminate and publish findings from their projects, the selected evaluator should have experience publishing academic manuscripts and presenting at professional conferences.

IV. APPLICATION AND SUBMISSION INFORMATION

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 OPHS Office of Grants Management, 1101 Wootton Parkway Suite 550, Rockville, MD 20852; telephone 240-453-8822 or fax 240- Instructions for use of the GrantSolutions system can be found on the OPA website at http://hhs.gov/opa or requested from the OPHS Office of Grants Management.

2. Content and Form of Application

In preparing the application, it is important to follow ALL instructions and public policy requirements provided in the application kit. Applications must be submitted on the forms supplied and in the manner prescribed in the application kit provided by the OAPP. Applicants are required to submit an application 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 grant award. The application narrative should be limited to 50 double-spaced pages with one-inch margins, using an easily readable 12-point font. All pages, figures, and tables must be numbered sequentially. If the page limit is exceeded, only the first 50 pages of the application will be reviewed. The page limit does not include appendices and required forms. The application package should not be stapled or bound.

As part of the application form, a budget narrative is required. This narrative should thoroughly describe how the proposed categorical costs are derived. The necessity, reasonableness, and allocability of the proposed costs should be discussed.

Matching funds and/or specific contributions proposed to meet the cost sharing requirement must be fully identified and described. For in-kind contributions, the source of the contribution and how the valuation of that contribution was determined must also be described.

The narrative description of the project should include the following:

Summary (1 page)

Applicants should provide a brief description of the proposed demonstration project indicating whether it is for a local or statewide project; the type of organization applying (school, state agency, voluntary agency, etc.); the geographic area to be served (urban, rural, suburban); a description of the target population to be served; a description of the program intervention; and a brief description of the overall project aims and project plan.

Description of Applicant Organization (2-3 pages)

Applicants should describe the decision-making authority and structure of the organization (e.g., relationship to the Board of Directors), including its resources, experience, existing program units and/or those to be established if funding is obtained. This description should include personnel, percentage of time on project, and facilities, and include evidence of the organization's capacity to provide the timely and effective use of resources needed to implement the project, collect necessary data and conduct a thorough evaluation.

Need Statement (5-7 pages)

Applicants should describe the need for the proposed care services in the target area by discussing the results of a thorough needs assessment of the geographic area to be served. This information should include statistical data documenting the incidence of adolescent births and sexually transmitted infections; socio-economic conditions; existing gaps in services for pregnant adolescents; disparities, and unmet or priority needs in the proposed service area.

Rationale (3-4 pages)

Applicants should describe the theoretical basis for the project including the rationale for selecting the intervention(s) proposed and how this approach is based upon previous practice, community needs assessment or review of the literature.

Program Outcome Objectives (4 pages)

Applicants should describe the goals of the project and up to 6 outcome objectives that clearly identify the expected results or benefits of the demonstration project. Three of the outcome objectives should be the required AFL care performance objectives as described in the Goal and Objectives section of this announcement. Objectives should be specific, measurable, achievable, realistic, and time-bound.

Care Demonstration Model (10-15 pages)

Applicants should thoroughly describe the intervention, including how the applicant will implement care services at different sites. Applicants should also describe how each of the required ten core services and any supplemental services will be provided. Plans

for recruitment and retention, intervention group assignment procedures, coordination with other service providers, case management, and follow-up procedures should be discussed.

Work Plan and Timetable (1 page)
Applicants should provide a detailed work plan and timetable for the first year of the project. The work plan should include the program and evaluation activities associated with the core services and enhanced care services interventions. The work plan should also anticipate the time required for planning and further development of the interventions. A work plan for the first two years should be included in the appendices.

Documentation of Community Support and Commitment (2-3 pages)
Applicants should provide copies of letters of support from community agencies in their service area. Two to three letters of support should be included in the appendices. Memoranda of Understanding (MOUs) from each participating site, partner, and external resource (if applicable) should also be included in the appendices. The MOUs should detail the exact level of involvement, responsibility and time or resource commitment.

Continuation of Funding (1 page)
Applicants should describe the plan for continuation of services at the termination of this federal funding. The OAPP cannot guarantee that funding will be available annually or at the end of the five-year grant cycle. Financial sustainability plans should be included in the appendices.

Evaluation Plan (20-30 pages):
Applicants should provide a clear and fully developed evaluation plan in accordance with the detailed evaluation information included in the application kit. Applicants are encouraged to identify anticipated problems with the evaluation and discuss how they will address these issues. The evaluation plan should clearly describe the proposed objectives; data collection instruments, including information regarding reliability and validity of instruments; data collection methods and schedule; and the data analysis plan, including proposed statistical tests. The applicant's presentation of a detailed evaluation plan should be described as outlined in the Evaluation section of the application kit.

Appendices
A detailed list of information that should be included in the appendices is provided in the application kit.

Please note: The order of the sections of the application narrative is based on the maximum score for each criterion and is not indicative of how the application narrative should be organized. **Detailed information regarding the organization and composition of each of the above listed sections of the application narrative can be found in the application kit.**

Applicants should be familiar with Title XX of the Public Health Service Act in its entirety to ensure that they have complied with all applicable requirements. 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 necessary to obtain one. Instructions for obtaining a DUNS number are included in the application package, and a link to information about how to obtain a DUNS number is located on the OPA web site http://www.hhs.gov/opa/grants/toolsdocs/toolsdocs.html.

3. Submission Dates and Times

To be considered for review, applications must be received by the Office of Grants Management, Office of Public Health and Science, Department of Health and Human Services, c/o Grant Application Center, by 11:00 p.m. Eastern Time for electronic applications and 5:00 p.m. Eastern Time for mailed applications on the application due date. Applications will be considered as meeting the deadline if they are received on or before the deadline. The application due date requirement in this announcement supersedes the instructions in the application form.

Submission Mechanisms

The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications, as described in the following sections. Applicants will receive notification from the OPHS Office of Grants Management confirming the receipt of applications submitted using any of these mechanisms. Applications submitted to the OPHS 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 grant 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 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, you may access the Grants.gov website portal. All OPHS funding opportunities and application kits are made available on Grants.gov. If your organization has/had a grantee business relationship with a grant program serviced by the OPHS Office of Grants Management, and you are applying as part of ongoing grantee related activities, please access GrantSolutions.gov.

Electronic grant application submissions must be submitted no later than 11:00 p.m. Eastern Time on the deadline date specified in the DATES section of the announcement using one of the electronic submission mechanisms specified below. All required hardcopy original signatures and mail-in items must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd.,

Suite 100, Arlington, VA 22209, no later than 5:00 p.m. Eastern Time on the next business day after the deadline date specified in the DATES section of the announcement. Applications will not be considered valid until all electronic application components, hardcopy original signatures, and mail-in items are received by the OPHS Office of Grants Management according to the deadlines specified above.

Paper grant application submissions must be submitted no later than 5:00 p.m. Eastern Time on the deadline date specified in the DATES section of the announcement. The address to be used for paper application submissions is Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209.

The application deadline date requirement specified in the announcement supersedes the instructions in the application form. Application submissions that do not adhere to the due date requirements will be considered late and will be deemed ineligible, and may be returned to the applicant unread.

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 OPHS grant opportunities. Organizations must successfully complete the necessary registration processes in order to submit an application. Information about this system as well as the required registration process 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 grant 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 Office of Grants Management at the address specified above, and if required, must contain the original signature of an individual authorized to act for the applicant agency and assume for the organization the obligations imposed by the terms and conditions of the grant 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, OPHS 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 only include 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 OPHS has no responsibility for any application that is not validated and transferred to OPHS 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 OPHS Office of Grants Management, c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, 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 OPHS 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

OPHS is a managing partner of the GrantSolutions system. GrantSolutions is a full life-cycle grants management system managed by the Administration for Children and Families, 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). OPHS 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 grant 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 OPHS Office of Grants Management at the address specified above.

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 only include 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 hardcopy original signatures, and mail-in items. As items are received by the OPHS 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 grant 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 Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209, on or before 5:00 p.m. Eastern Time on the deadline date specified in the DATES section of the announcement.

4. Intergovernmental Review

Applications for AFL grants must meet the following requirements (each year).

(1) Requirements for Review of an Application by the Governor: Section 2006(e) of Title XX requires that each applicant shall provide the governor of the state in which the applicant is located a copy of each application submitted to the OAPP for a grant for a demonstration project for services under this Title. The governor

has 60 days from the receipt date in which to provide comments to the applicant. An applicant may comply with this requirement by submitting a copy of the application to the governor of the state in which the applicant is located at the same time the application is submitted to OAPP. To inform the governor's office of the reason for the submission, a copy of this notice should be attached to the application.

(2) Requirements for Review of an Application Pursuant to Executive Order 12372 (SPOC Requirements): Applications under this announcement are subject to the review requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs," as implemented by 45 CFR part 100, "Intergovernmental Review of Department of Health and Human Services Programs and Activities." Executive Order 12372 authorizes state and local government review of proposed federal assistance applications. As soon as possible, the applicant (other than federally-recognized Indian tribal governments) should contact the State Single Point of Contact (SPOC) for each state in the area to be served. The application kit contains the currently available listing of the SPOCs which have elected to be informed of the submission of applications. For those states not represented on the listing, further inquiries should be made by the applicant regarding submission to the relevant SPOC. Information about the SPOC is located on the OMB Web site http://www.whitehouse.gov/omb/grants_spoc/. The SPOC should forward any comments to the OPHS Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852. The SPOC has 60 days from the closing date of this announcement to submit any comments.

5. Funding Restrictions

Budget Request: If funding is requested in an amount greater than the ceiling of the award range, the application will be considered non-responsive and will not be entered into the review process. The application will be returned with notification that it did not meet the submission requirements.

Grant funds may be used to cover costs of personnel, consultants, equipment, supplies, grant-related travel, and other grant-related costs. Grant funds may not be used for building alterations or renovations, construction, fund raising activities, political education or lobbying. Guidance for completing the application can be found in the "Program Guidelines," which is included in the application kit.

Applicants for discretionary grants 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. The basis for determining the allowability and allocability of costs charged to Public Health Service (PHS) grants is set forth in 45 CFR parts 74 and 92. If applicants are uncertain whether a particular cost is allowable, they should contact the OPHS Office of Grants Management at 240-453-8822 for further information.

6. Other Submission Requirements

Organizations applying for funds under the AFL Demonstration Projects Program must

submit documentation of nonprofit status with their applications. If documentation is not provided, the applicant will be considered non-responsive and will not be entered into the review process. The organization will be notified that the application did not meet the submission requirements. Any of the following serves as acceptable proof of nonprofit status:

- a reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent listing of tax-exempt organizations described in section 501(c)(3) of the IRS 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
- any of the above proof for a state or national organization and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

V. APPLICATION REVIEW INFORMATION

1. Criteria

Eligible competing grant applications will be externally reviewed by a multi-disciplinary panel of independent reviewers and subsequently reviewed by federal staff. All competing grant applications will be assessed and scored by the panel of independent reviewers according to the following criteria:

1) Evaluation Plan: The evaluation plan and the extent to which it is linked directly to the program objectives, including the following elements:

1) evaluation objectives and hypotheses;
2) logic model;
3) study design (experimental/quasi-experimental design);
4) process and outcome evaluation protocols;
5) sampling strategy and sample size estimation procedures;
6) intervention group assignment procedures;
7) recruitment and retention plan;
8) data collection and analysis plan;
9) use of the AFL core evaluation instruments;
10) institutional review board submission plan;
11) experience of the independent evaluation team in working with similar projects; and
12) dissemination plan (**35 points**).

2) Program Model: The applicant's description of the standard care services intervention and the enhanced care services intervention, including the following elements:

1) the application's clarity in presenting the organizational model for service delivery;
2) the appropriateness of the design;
3) proposed educational materials;
4) recruitment and retention plan for participants;
5) intensity of interventions (dosage); and
6) detailed staff training **(25 points)**.

3) Need for Project: The applicant's presentation of the need and rationale for the project, including a thorough community needs assessment and a clear description of the target population **(20 points)**.

4) Program Capacity and Past Experience: The applicant's clear description of their capacity to implement the program, including personnel and other resources; experience and expertise in providing multi-site programs for youth; and demonstration of the program staff's ability to effectively serve the target population, including cultural competency of staff and appropriateness of selected curricula (**10 points**).

5) Community Support: Demonstration of community commitment to the project, as demonstrated by letters of commitment and willingness to participate in the project's implementation and acceptance of referrals, as demonstrated by memoranda of understanding (in Appendices) from proposed project sites, evaluator, referral partners, and outside resources, as applicable (**10 points**).

2. Review and Selection Process

Final grant award decisions will be made by the Deputy Assistant Secretary for Population Affairs (DASPA). In making these decisions, the DASPA will take into account the extent to which applications recommended for approval will provide an appropriate geographic distribution of resources, the priorities in sec. 2005(a), and other factors including the following:

1) recommendations and scores of applications submitted by the review panels;
2) the geographic area to be served, specifically whether the target service area is among the underserved areas and populations;
3) the reasonableness of the estimated cost of the project based on factors such as the incidence of adolescent births in the geographic area to be served and the availability of services for adolescents in this geographic area; and
4) the adequacy of the evaluation plan.

Note: Special consideration may be granted to underserved areas and populations not currently receiving Title XX funding for care programs. The DASPA has the discretion not to consider, for this announcement, current Title XX care grantees that are already funded under the Title XX program. If there are multiple applicants from within the same state, agency collaboration is encouraged. The DASPA may elect to award one grant per state if multiple applications are received from the same state.

3. Anticipated Announcement and Award

OAPP anticipates announcing and awarding grantees under this announcement by September 1, 2010.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices

OAPP does not release information about individual applications during the review process until final funding decisions have been made. When final funding decisions have been made, the applicant's authorized representative will be notified of the outcome of their application by postal mail. The official document notifying an applicant that an application has been approved for funding is the Notice of Grant Award signed by the Grants Management Officer, OPHS Office of Grants Management, which specifies to the grantee the amount of money awarded, the purposes of the grant, the length of the project period, terms and conditions of the grant award, and the amount of funding to be contributed by the grantee to project costs.

2. Administrative and National Policy Requirements

The regulations set out at 45 CFR parts 74 and 92 are the Department of Health and Human Services (HHS) rules and requirements that govern the administration of grants. Part 74 is applicable to all recipients except those covered by part 92, which governs awards to state and local governments. Applicants funded under this announcement must be aware of and comply with these regulations. The CFR volume that includes parts 74 and 92 may be downloaded from http://www.access.gpo.gov/nara/cfr/waisidx_09/45cfrv1_09.html.

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 program or project which will be financed with federal money and the percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

3. Reporting

Applicants funded under this grant announcement will be required to electronically submit an End-of-Year Report as well as a Financial Status report 90 days after the grant budget period ends.

VII. AGENCY CONTACTS

1. Administrative and Budgetary Contacts Requirements

For information related to administrative and financial/budgetary requirements, contact the OPHS Office of Grants Management, 1101 Wootton Parkway, Suite 550, Rockville, MD 20852; or call 240-453-8822.

2. Program Contacts Requirements

For information related to the OAPP program requirements, contact the OPHS OAPP, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852; or call 240-453-2828 to answer questions and provide technical assistance on the preparation of grant applications. Questions may also be directed to the OAPP staff via e-mail at oapp@hhs.gov. If contacting the OAPP by e-mail, please include the phrase "AFL Care Question" in the subject heading.

3. Application Submission Requirements

For information related to the grant application submission process, contact the Grant Application Center, Office of Grants Management Operations Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209; or call 1-888-203-6161.

VIII. OTHER INFORMATION

1. Protection of Human Subjects

The applicant must comply with the HHS Protection of Human Subjects regulations (which require Institutional Review Board review and approval), set out at 45 CFR part 46, if applicable. General information about Human Subjects regulations can be obtained through the Office for Human Research Protections (OHRP) website at http://www.hhs.gov/ohrp , via email at ohrp@hhs.gov or toll free at (866) 447-4777.

2. Curricula Review

Applicants who are approved for funding will be required to submit all proposed curricula and educational materials to OAPP for review and approval prior to use in the project. The review shall ensure that the materials are medically accurate, consistent with Title XX policies on religion, and in compliance with the statutory prohibitions against advocating, promoting, encouraging, or providing abortions. Curricula and educational materials should be described in the application but materials should not be submitted with the grant application.

3. Applicant Technical Assistance

The OAPP is committed to providing technical assistance to help prospective applicants at no cost. The OAPP will offer one interactive online webinar designed to assist the public in learning more about the purposes and requirements of the Title XX program, the application process, budgeting information, and considerations that might help to improve the quality of grant applications. The OAPP strongly encourages applicants to participate in the online webinar. The OAPP recommends that key staff personnel participate such as a program evaluator, a financial representative, a grant writer, and the program director. Please be aware that in order to participate in the online workshop, participants must have internet access and a telephone line. Participants will be able to ask questions and receive pertinent feedback during this workshop via the computer.

Applicants may register using the form available in the application kit and may also refer to the OPA website at http://www.hhs.gov/opa for the technical assistance

workshop and registration information. All participants must pre-register for the webinar.

4. Annual Grantee Conference

Each year, OAPP hosts an annual grantee conference for AFL care demonstration project grantees. Grantees are required to set aside grant funds to cover all costs of attending the OAPP Annual Conference including transportation and lodging at conference site. The project director and evaluator are required to attend and/or participate in the annual conference.

5. Technical Assistance Workshops for Grantees

OAPP is committed to providing quality training opportunities for grantee staff. OAPP's technical assistance objective is to improve the skills of primarily front-line staff by providing skills-based training. Each year, OAPP offers training opportunities using modalities specifically designed for grantee staff including face-to-face workshops, net conferences, and e-learning modules. All workshops are offered free of charge; however, grantees may be expected to use grant funds to cover travel and lodging for attendees. On average, OAPP offers 3 face-to-face workshops per year to which grantees may send 2 staff members for each workshop. Applicants should set aside funds within the annual budget to offset the costs of attending OAPP-sponsored training. It is advisable to estimate transportation and lodging costs based on attending workshops in the Washington, DC area.

Dated:

_____

Susan B. Moskosky, MS, RNC
Acting Director
Office of Population Affairs

Department of Health and Human Services
Office of the Secretary, Office of Public Health and Science
Office of Population Affairs

Office of Adolescent Pregnancy Programs

Adolescent Family Life (AFL) Demonstration Projects
2010 CARE SERVICES GRANT

Programmatic Materials Application Kit

NOTE: Please be sure to carefully read the following package in detail as the materials contain specific requirements which applicants must meet to be considered for funding.

OFFICE OF ADOLESCENT PREGNANCY PROGRAMS
CARE SERVICES

Table of Contents for Programmatic Materials

The COMPLETE Programmatic Application Kit includes the following items:

"2010 AFL CARE Services Programmatic Information (administrative enclosures)"

- ✓ Cover Letter from Director, Office of Adolescent Pregnancy Programs
- ✓ AFL Grant Writing Technical Assistance Workshops Registration Information (form)
- ✓ Application Submission Notification (form)
- ✓ Application Mailing Instructions
- ✓ Congressional District Notice (letter)
- ✓ Notification of Project Management (form)
- ✓ "DUNS" Notice
- ✓ Enclosure #1 - Title XX Legislation of the Public Health Service Act
- ✓ Enclosure #2 - Questions and Answers Concerning the AFL Demonstration Grants
- ✓ Enclosure #3 - Evaluation Guidance
- ✓ Enclosure #4 - Core and Supplemental Services Matrix
- ✓ Enclosure #5 - Program Narrative (General Guidance)
- ✓ Enclosure #6 - Additional Requirements
- ✓ Enclosure #7 - Assurances Required by Title XX of the Public Health Service Act
- ✓ Enclosure #8 - Sample Sliding Fee Scale
- ✓ Enclosure #9 - Logic Model Example
- ✓ Enclosure #10 - Application Checklist

Please carefully check that all programmatic kit materials *and* grants management kit materials have been properly downloaded for a complete application kit!

DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary
Assistant Secretary for Health
Office of Public Health and Science
Washington, DC 20201

April 13, 2010

Dear Colleague:

Thank you for your interest in the Adolescent Family Life (AFL) Demonstration Grant Program supported by the Office of Adolescent Pregnancy Programs (OAPP). The enclosed kit contains all necessary forms and information to complete the application for the **AFL CARE DEMONSTRATION PROJECTS.** This Request for Applications is for AFL care demonstration projects to develop, and test services for pregnant adolescents, adolescent parents, and their families. Services are intended to enable pregnant adolescent to obtain proper care and assist pregnant adolescents and adolescents parents to become productive independent contributors to the family and the community life. The targeting age is 15 -18 and their parents.

The closing date for this grant announcement is **JUNE 22, 2010.** Applications must be received no later than **11:00 p.m. Eastern Time for electronic applications and 5:00 p.m. Eastern Time for mailed-in applications** on the application due date. Applications will not be accepted by fax or email, nor will the submission deadline be extended. Applications which do not meet the deadline will be returned to the applicant. Grant awards will be issued no later than September 30, 2010.

Please be sure to carefully read the Request For Applications (RFA) Notice and all the application materials in detail, as the kit and Notice contain many specific requirements which applicants must meet to be considered for funding.

All DHHS applicants, grantees and contractors must obtain a Data Universal Numbering System (DUNS) number from Dun & Bradstreet when applying for Federal assistance. Organizations should verify that they have a DUNS number or take the steps necessary to obtain one. Instructions for obtaining a DUNS number are included in this application package, and may also be downloaded from the OPA website (http://www.hhs.gov/opa/).

The OAPP has scheduled an internet-based technical assistance net-conference to help prospective applicants learn more about the purposes and requirements of the Title XX program, how to apply for funds under this program announcement, program eligibility requirements, the application selection process, and considerations that might help to improve the quality of grant applications. The net-conference will be recorded in its entirety and will subsequently be available on the internet (known as Net Replay) for prospective applicants to view until the closing date for this RFA. The net-conference requires pre-registration. Please refer to the application kit for registration information.

If you have any questions concerning the financial or budgetary aspect of your application, please contact the Grants Management Office at (240) 453-8822. For programmatic questions, please contact the OAPP Program Office at (240) 453-2828.

We appreciate your interest in the Adolescent Family Life Program.

Sincerely Yours,

Alicia Richmond Scott

Alicia Richmond Scott, M.S.W.
Director
Office of Adolescent Pregnancy Programs
Office of Population Affairs

Registration Form
Grant-Writing Technical Assistance Workshops

The Office of Adolescent Pregnancy Programs (OAPP) has scheduled an interactive web-based net conference workshop to help prospective applicants with this particular funding opportunity. Participants will be able to learn more about the purposes and requirements of the Title XX program, how to apply for funds under this program announcement, program eligibility requirements, the application selection process, and considerations that might help to improve the quality of grant applications. The net conference is offered at no cost, however all participants **MUST** pre-register using the attached form.

Each registered participant will be notified via fax or e-mail of the exact time and log-in procedure upon receipt of the completed registration form.

INSTRUCTIONS:
Each participant must pre-register by completing the attached form and returning it to OAPP by fax at (240) 453-2829. Registrations MUST be received no less than 24 hours prior to the net-conference.

The net conference session is limited to 150 registered participants. All participants will be registered on a first come-first served basis. EACH attendee must complete a registration form.

Workshop Date:

- May 7, 2010

Workshop Time:

- 1:00pm – 3:00pm EST.

Address and logistical information will be faxed or e-mailed back to you upon receipt of your Registration. If you experience difficulties registering, please call (240) 453-2828 for assistance.

Please note: Net Conferencing requires a computer with an internet connection and phone line. Participants will need to download Microsoft Live Meet software (available free of charge) **at least 15 minutes prior** to the start of the net conference workshop. More information will be provided upon registering for the net conference workshop.

Department of Health & Human Services
OFFICE OF POPULATION AFFAIRS
OFFICE OF ADOLESCENT PREGNANCY PROGRAMS

PLEASE FILL OUT THE FIELDS BELOW TO SUBMIT YOUR REGISTRATION FOR THE OAPP TECHNICAL ASSISTANCE WEBINAR ON MAY 7, 2010

PLEASE FAX THE COMPLETED FORM TO (240) 453-2829

PARTICIPANT NAME:		
ORGANIZATION:		
ADDRESS:		
CITY:	**STATE:**	**ZIP CODE:**
PHONE:	**FAX NUMBER:**	**EMAIL:**

PLEASE SELECT ONE OF THE FOLLOWING:

- ☐ Direct Services (Clinical/Support Services)
- ☐ Program Administrator (Director/Coordinator)
- ☐ Evaluator
- ☐ Grant Writer
- ☐ Other: (Please List)

TYPE OF ORGANIZATION (PLEASE CHECK ONE)

☐ State Government	☐ Local Government	☐ Indian Tribe
☐ Faith-based	☐ College/University	☐ Hospital
☐ Community Based Organization (CBO)		☐ Other (Specify)

Are you a current AFL Grantee?	☐ Yes:	☐ Care	☐ Prevention	☐ No

Office of Adolescent Pregnancy Programs
CARE SERVICES

Application Submission Notification

Directions: Applicants ***MUST*** complete and submit this form via fax **or** email at the time of application submission using the fax and email information below. OAPP will use this form to track grant applications throughout the grant submission and review process. Failure to return this form as instructed could result in a lost or misdirected application.

FAX: 240-453-2829
OR
EMAIL: oapp@hhs.gov

Applicant Organization Name & Address (*exactly* as it appears on application):

Person responsible for application submission (*exactly* as it appears on application)
Name:_____
Telephone:_____
Email Address:_____

How are you submitting your grant application?

- ☐ Grants.gov (internet-based system)
- ☐ GrantSolutions.gov (internet-based system)
- ☐ Mailed-in a paper application (with 2 additional copies)
- ☐ Hand-delivered paper application (with 2 additional copies)

IMPORTANT NOTE: Agencies that choose to submit applications electronically ***MUST*** provide the application number that was automatically generated during the grant submission process in the space provided below. (Hand-delivered and mailed-in applications will not be assigned numbers.)

Electronic Application Number:_____

If you have questions concerning this form, please call 240-453-2828.

Application Mailing Instructions

Applications will not be accepted by fax!

If you choose to submit a hard copy of your application (instead of an electronic application), please mail your grant application package to:

Office of Grants Management/Office of Public Health and Science (OPHS)
Department of Health and Human Services (DHHS)
c/o Grant Application Center
1515 Wilson Blvd., Suite 100
Arlington, VA 22209
Attention: Office of Population Affairs/Office of Adolescent Pregnancy Programs

Please include the following on the lower left corner of your mailing envelope:

AFL CARE DEMONSTRATION PROJECTS
(NEW GRANT APPLICATION)

DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary
Assistant Secretary for Health
Office of Public Health and Science
Washington, DC 20201

DEAR APPLICANT:

Effective January 1, 1999, when submitting an application, please include the correct (verified) Congressional District/District on the SF 424, Application for Federal Assistance, in block 14. Confirmation of the Congressional District/Districts for your organization can be obtained by logging on to the Internet website, www.census.gov/geo/www/cd108th ; go to "Constituent Services," then to "Elected Officials" and enter your zip code.

It is imperative that the correct Congressional District/Districts be included on the SF 424. The staff of the Congressional Liaison Office (CLO) previously provided verification of this information. However, due to staff reductions, the CLO will no longer check the accuracy of the Congressional District/District as provided by the Grants Management staff.

Your elected officials must receive notification when Federal funds are awarded to their constituency. In addition, we have been informed that we should include the nine-digit zip code on all grant correspondence. Please provide your nine-digit zip code on the SF 424, item 5, applicant address.

If you have questions, contact this office at (240) 435-8822.

OPHS Office of Grants Management
1101 Wooton Parkway, Suite 550
Rockville, MD 20852

Congressional District Notice

NOTIFICATION OF PROJECT MANAGEMENT

1. **Please provide us with the Name, Title and Address of the Project Director if not the same as the Authorized Representative signing the application.**

   NAME_____

   TITLE_____

   ADDRESS_____

   CITY _____ STATE _____

   NINE-DIGIT ZIP CODE_____

   PHONE #_____FAX # _____

   E-MAIL_____

2. **Please provide us with the Name, Title and Address of your Business Manager.**

   NAME_____

   TITLE_____

   ADDRESS_____

   CITY _____ STATE _____

   NINE-DIGIT ZIP CODE_____

   PHONE #_____FAX # _____

   E-MAIL_____

3. **Please provide us with the Name, Title and Address (other than the Project address) of the higher level "authorized official."**

   NAME_____

   TITLE_____

   ADDRESS_____

   CITY _____ STATE _____

   NINE-DIGIT ZIP CODE_____

   PHONE #_____FAX # _____

   E-MAIL_____

"DUNS" NOTICE

All DHHS contractors, grantees, and grant applicants have a "DUNS" number. You must obtain the number directly from Dun and Bradstreet. There is no cost for the service, but it does take some time to get the number.

Sign up now and avoid the rush at:
https://eupdate.dnb.com
(select "D&B D-U-N-S Number" tab)

For further information go to:
http://www.ccr.gov
(select "find my DUNS number" tab)

Or call 1-866-705-5711 for more information

Enclosure # 1

TITLE XX -- ADOLESCENT FAMILY LIFE DEMONSTRATION PROJECTS

§2001. [300z] Findings and purposes

(a) The Congress finds that -

(1) in 1978, an estimated one million one hundred thousand teenagers became pregnant, more than five hundred thousand teenagers carried their babies to term, and over one-half of the babies born to such teenagers were born out of wedlock;

(2) adolescents aged seventeen and younger accounted for more than one-half of the out of wedlock births to teenagers;

(3) in a high proportion of cases, the pregnant adolescent is herself the product of an unmarried parenthood during adolescence and is continuing the pattern in her own lifestyle;

(4) it is estimated that approximately 80 per centum of unmarried teenagers who carry their pregnancies to term live with their families before and during their pregnancy and remain with their families after the birth of the child;

(5) pregnancy and childbirth among unmarried adolescents, particularly young adolescents, often results in severe adverse health, social, and economic consequences including: a higher percentage of pregnancy and childbirth complications; a higher incidence of low birth weight babies; a higher infant mortality and morbidity; a greater likelihood that an adolescent marriage will end in divorce; a decreased likelihood of completing schooling; and higher risks of unemployment and welfare dependency; and therefore, education, training, and job research services are important for adolescent parents;

(6) (A) adoption is a positive option for unmarried pregnant adolescents who are unwilling or unable to care for their children since adoption is a means of providing permanent families for such children from available approved couples who are unable or have difficulty in conceiving or carrying children of their own to term; and

(B) at present, only 4 per centum of unmarried pregnant adolescents who carry their babies to term enter into an adoption plan or arrange for their babies to be cared for by relatives or friends;

(7) an unmarried adolescent who becomes pregnant once is likely to experience recurrent pregnancies and childbearing, with increased risks;

(8) (A) the problems of adolescent premarital sexual relations, pregnancy, and parenthood are multiple and complex and are frequently associated with or are a cause of other troublesome situations in the family; and

(B) such problems are best approached through a variety of integrated and essential services provided to adolescents and their families by other family members, religious and charitable organizations, voluntary associations, and other groups in the private sector as well as services provided by publicly sponsored initiatives;

(9) a wide array of educational, health, and supportive services are not available to adolescents with such problems or to their families, or when available frequently are fragmented and thus are of limited effectiveness in discouraging adolescent premarital sexual relations and the consequences of such relations;

(10)(A) prevention of adolescent sexual activity and adolescent pregnancy depends primarily upon developing strong family values and close family ties, and since the family is the basic social unit in which the values and attitudes of adolescents concerning sexuality and pregnancy are formed,

programs designed to deal with issues of sexuality and pregnancy will be successful to the extent that such programs encourage and sustain the role of the family in dealing with adolescent sexual activity and adolescent pregnancy;

(B) Federal policy therefore should encourage the development of appropriate health, educational, and social services where such services are now lacking or inadequate, and the better coordination of existing services where they are available; and

(C) services encouraged by the Federal Government should promote the involvement of parents with their adolescent children, and should emphasize the provision of support by other family members, religious and charitable organizations, voluntary associations, and other groups in the private sector in order to help adolescents and their families deal with complex issues of adolescent premarital sexual relations and the consequences of such relations; and

(11)(A) there has been limited research concerning the societal causes and consequences of adolescent pregnancy;

(B) there is limited knowledge concerning which means of intervention are effective in mediating or eliminating adolescent premarital sexual relations and adolescent pregnancy; and

(C) it is necessary to expand and strengthen such knowledge in order to develop an array of approaches to solving the problems of adolescent premarital sexual relations and adolescent pregnancy in both urban and rural settings.

(b) Therefore, the purposes of this subchapter are -

(1) to find effective means, within the context of the family, of reaching adolescents before they become sexually active in order to maximize the guidance and support available to adolescents from parents and other family members, and to promote self discipline and other prudent approaches to the problem of adolescent premarital sexual relations, including adolescent pregnancy;

(2) to promote adoption as an alternative for adolescent parents;

(3) to establish innovative, comprehensive, and integrated approaches to the delivery of care services both for pregnant adolescents, with primary emphasis on unmarried adolescents who are seventeen years of age or under, and for adolescent parents, which shall be based upon an assessment of existing programs and, where appropriate, upon efforts to establish better coordination, integration, and linkages among such existing programs in order to -

(A) enable pregnant adolescents to obtain proper care and assist pregnant adolescents and adolescent parents to become productive independent contributors to family and community life; and

(B) assist families of adolescents to understand and resolve the societal causes which are associated with adolescent pregnancy;

(4) to encourage and support research projects and demonstration projects concerning the societal causes and consequences of adolescent premarital sexual relations, contraceptive use, pregnancy, and child rearing;

(5) to support evaluative research to identify effective services which alleviate, eliminate, or resolve any negative consequences of adolescent premarital sexual relations and adolescent childbearing for the parents, the child, and their families; and

(6) to encourage and provide for the dissemination of results, findings, and information from programs and research projects relating to adolescent premarital sexual relations, pregnancy, and parenthood.

§2002. [300z-1] Definitions; regulations applicable

(a) For the purposes of this subchapter, the term -

(1) "Secretary" means the Secretary of Health and Human Services;

(2) "eligible person" means -

(A) with regard to the provision of care services, a pregnant adolescent, an adolescent parent, or the family of a pregnant adolescent or an adolescent parent; or

(B) with regard to the provision of prevention services and referral to such other services which may be appropriate, a nonpregnant adolescent;

(3) "eligible grant recipient" means a public or nonprofit private organization or agency which demonstrates, to the satisfaction of the Secretary -

(A) in the case of an organization which will provide care services, the capability of providing all core services in a single setting or the capability of creating a network through which all core services would be provided; or

(B) in the case of an organization which will provide prevention services, the capability of providing such services;

(4) "necessary services" means services which may be provided by grantees which are -

(A) pregnancy testing and maternity counseling;

(B) adoption counseling and referral services which present adoption as an option for pregnant adolescents, including referral to licensed adoption agencies in the community if the eligible grant recipient is not a licensed adoption agency;

(C) primary and preventive health services including prenatal and postnatal care;

(D) nutrition information and counseling;

(E) referral for screening and treatment of venereal disease;

(F) referral to appropriate pediatric care;

(G) educational services relating to family life and problems associated with adolescent premarital sexual relations, including -

(i) information about adoption;

(ii) education on the responsibilities of sexuality and parenting;

(iii) the development of material to support the role of parents as the provider of sex education; and

(iv) assistance to parents, schools, youth agencies, and health providers to educate adolescents and preadolescents concerning self-discipline and responsibility in human sexuality;

(H) appropriate educational and vocational services;

(I) referral to licensed residential care or maternity home services; and

(J) mental health services and referral to mental health services and to other appropriate physical health services;

(K) child care sufficient to enable the adolescent parent to continue education or to enter into employment;

(L) consumer education and homemaking;

(M) counseling for the immediate and extended family members of the eligible person;

(N) transportation;

(O) outreach services to families of adolescents to discourage sexual relations among unemancipated minors;

(P) family planning services; and

(Q) such other services consistent with the purposes of this subchapter as the Secretary may

approve in accordance with regulations promulgated by the Secretary;

(5) "core services" means those services which shall be provided by a grantee, as determined by the Secretary by regulation;

(6) "supplemental services" means those services which may be provided by a grantee, as determined by the Secretary by regulation;

(7) "care services" means necessary services for the provision of care to pregnant adolescents and adolescent parents and includes all core services with respect to the provision of such care prescribed by the Secretary by regulation;

(8) "prevention services" means necessary services to prevent adolescent sexual relations, including the services described in subparagraphs (A), (D), (E), (G), (H), (M), (N), (O), and (Q) of paragraph (4);

(9) "adolescent" means an individual under the age of nineteen; and

(10) "unemancipated minor" means a minor who is subject to the control, authority, and supervision of his or her parents or guardians, as determined under State law.

(b) Until such time as the Secretary promulgates regulations pursuant to the second sentence of this subsection, the Secretary shall use the regulations promulgated under title VI of the Health Services and Centers Amendments of 1978 (42 U.S.C. 300a-21 et seq.) which were in effect on August 13, 1981, to determine which necessary services are core services for purposes of this subchapter. The Secretary may promulgate regulations to determine which necessary services are core services for purposes of this subchapter based upon an evaluation of and information concerning which necessary services are essential to carry out the purposes of this subchapter and taking into account (1) factors such as whether services are to be provided in urban or rural areas, the ethnic groups to be served, and the nature of the populations to be served, and (2) the results of the evaluations required under section 300z-5(b) of this title. The Secretary may from time to time revise such regulations.

§2003. [300z-2] Demonstration projects; grant authorization, etc.

(a) The Secretary may make grants to further the purposes of this subchapter to eligible grant recipients which have submitted an application which the Secretary finds meets the requirements of section 300z-5 of this title for demonstration projects which the Secretary determines will help communities provide appropriate care and prevention services in easily accessible locations. Demonstration projects shall, as appropriate, provide, supplement, or improve the quality of such services. Demonstration projects shall use such methods as will strengthen the capacity of families to deal with the sexual behavior, pregnancy, or parenthood of adolescents and to make use of support systems such as other family members, friends, religious and charitable organizations, and voluntary associations.

(b) Grants under this subchapter for demonstration projects may be for the provision of -]

(1) care services;

(2) prevention services; or

(3) a combination of care services and prevention services.

§2004. [300z-3] Uses of grants for demonstration projects for services

(a) Covered projects

Except as provided in subsection (b) of this section, funds provided for demonstration projects for services under this subchapter may be used by grantees only to -

(1) provide to eligible persons -

(A) care services;

(B) prevention services; or

(C) care and prevention services (in the case of a grantee who is providing a combination of care and prevention services);

(2) coordinate, integrate, and provide linkages among providers of care, prevention, and other services for eligible persons in furtherance of the purposes of this subchapter;

(3) provide supplemental services where such services are not adequate or not available to eligible persons in the community and which are essential to the care of pregnant adolescents and to the prevention of adolescent premarital sexual relations and adolescent pregnancy;

(4) plan for the administration and coordination of pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents which will further the objectives of this subchapter; and

(5) fulfill assurances required for grant approval by section 300z-5 of this title.

(b) Family planning services; availability in community

(1) No funds provided for a demonstration project for services under this subchapter may be used for the provision of family planning services (other than counseling and referral services) to adolescents unless appropriate family planning services are not otherwise available in the community.

(2) Any grantee who receives funds for a demonstration project for services under this subchapter and who, after determining under paragraph (1) that appropriate family planning services are not otherwise available in the community, provides family planning services (other than counseling and referral services) to adolescents may only use funds provided under this subchapter for such family planning services if all funds received by such grantee from all other sources to support such family planning services are insufficient to support such family planning services.

(c) Fees for services: criteria

Grantees who receive funds for a demonstration project for services under this subchapter shall charge fees for services pursuant to a fee schedule approved by the Secretary as a part of the application described in section 300z-5 of this title which bases fees charged by the grantee on the income of the eligible person or the parents or legal guardians of the eligible person and takes into account the difficulty adolescents face in obtaining resources to pay for services. A grantee who receives funds for a demonstration project for services under this subchapter may not, in any case, discriminate with regard to the provision of services to any individual because of that individual's inability to provide payment for such services, except that in determining the ability of an unemancipated minor to provide payment for services, the income of the family of an unemancipated minor shall be considered in determining the ability of such minor to make such payments unless the parents or guardians of the unemancipated minor refuse to make such payments.

§2005. [300z-4] Grants for demonstration projects for services

(a) Priorities - In approving applications for grants for demonstration projects for services under this subchapter, the Secretary shall give priority to applicants who -

(1) serve an area where there is a high incidence of adolescent pregnancy;

(2) serve an area with a high proportion of low-income families and where the availability of programs of care for pregnant adolescents and adolescent parents is low;

(3) show evidence -

(A) in the case of an applicant who will provide care services, of having the ability to bring together a wide range of needed core services and, as appropriate, supplemental services in comprehensive single-site projects, or to establish a well-integrated network of such services (appropriate for the target population and geographic area to be served including the special needs of rural areas) for pregnant adolescents or adolescent parents; or

(B) in the case of an applicant who will provide prevention services, of having the ability to provide prevention services for adolescents and their families which are appropriate for the target population and the geographic area to be served, including the special needs of rural areas;

(4) will utilize to the maximum extent feasible existing available programs and facilities such as neighborhood and primary health care centers, maternity homes which provide or can be equipped to provide services to pregnant adolescents, agencies serving families, youth, and children with established programs of service to pregnant adolescents and vulnerable families, licensed adoption agencies, children and youth centers, maternal and infant health centers, regional rural health facilities, school and other educational programs, mental health programs, nutrition programs, recreation programs, and other ongoing pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents;

(5) make use, to the maximum extent feasible, of other Federal, State, and local funds, programs, contributions, and other third-party reimbursements;

(6) can demonstrate a community commitment to the program by making available to the demonstration project non-Federal funds, personnel, and facilities;

(7) have involved the community to be served, including public and private agencies, adolescents, and families, in the planning and implementation of the demonstration project; and

(8) will demonstrate innovative and effective approaches in addressing the problems of adolescent premarital sexual relations, pregnancy, or parenthood, including approaches to provide pregnant adolescents with adequate information about adoption.

(b) Factors to be considered in making grants; special needs of rural areas

(1) The amount of a grant for a demonstration project for services under this subchapter shall be determined by the Secretary, based on factors such as the incidence of adolescent pregnancy in the geographic area to be served, and the adequacy of pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents in such area.

(2) In making grants for demonstration projects for services under this subchapter, the Secretary shall consider the special needs of rural areas and, to the maximum extent practicable, shall distribute funds taking into consideration the relative number of adolescents in such areas in need of such services.

(c) Duration; Federal share

(1) A grantee may not receive funds for a demonstration project for services under this subchapter for a period in excess of 5 years.

(2) (A) Subject to paragraph (3), a grant for a demonstration project for services under this subchapter may not exceed -

(i) 70 per centum of the costs of the project for the first and second years of the project;

(ii) 60 per centum of such costs for the third year of the project;

(iii) 50 per centum of such costs for the fourth year of the project; and

(iv) 40 per centum of such costs for the fifth year of the project.

(B) Non-Federal contributions required by subparagraph (A) may be in cash or in kind, fairly evaluated, including plant, equipment, or services.

(3) The Secretary may waive the limitation specified in paragraph (2)(A) for any year in accordance with criteria established by regulation.

§2006. [300z-5] Requirements for applications

(a) Form, content, and assurances

An application for a grant for a demonstration project for services under this subchapter shall be in such form and contain such information as the Secretary may require, and shall include -

(1) an identification of the incidence of adolescent pregnancy and related problems;

(2) a description of the economic conditions and income levels in the geographic area to be served;

(3) a description of existing pregnancy prevention services and programs of care for pregnant adolescents and adolescent parents (including adoption services), and including where, how, by whom, and to which population groups such services are provided, and the extent to which they are coordinated in the geographic area to be served;

(4) a description of the major unmet needs for services for adolescents at risk of initial or recurrent pregnancies and an estimate of the number of adolescents not being served in the area;

(5) (A) in the case of an applicant who will provide care services, a description of how all core services will be provided in the demonstration project using funds under this subchapter or will otherwise be provided by the grantee in the area to be served, the population to which such services will be provided, how such services will be coordinated, integrated, and linked with other related programs and services and the source or sources of funding of such core services in the public and private sectors; or

(B) in the case of an applicant who will provide prevention services, a description of the necessary services to be provided and how the applicant will provide such services;

(6) a description of the manner in which adolescents needing services other than the services provided directly by the applicant will be identified and how access and appropriate referral to such other services (such as Medicaid; licensed adoption agencies; maternity home services; public assistance; employment services; child care services for adolescent parents; and other city, county, and State programs related to adolescent pregnancy) will be provided, including a description of a plan to coordinate such other services with the services supported under this subchapter;

(7) a description of the applicant's capacity to continue services as Federal funds decrease and in the absence of Federal assistance;

(8) a description of the results expected from the provision of services, and the procedures to be used for evaluating those results;

(9) a summary of the views of public agencies, providers of services, and the general public in the geographic area to be served, concerning the proposed use of funds provided for a

demonstration project for services under this subchapter and a description of procedures used to obtain those views, and, in the case of applicants who propose to coordinate services administered by a State, the written comments of the appropriate State officials responsible for such services;

(10) assurances that the applicant will have an ongoing quality assurance program;

(11) assurances that, where appropriate, the applicant shall have a system for maintaining the confidentiality of patient records in accordance with regulations promulgated by the Secretary;

(12) assurances that the applicant will demonstrate its financial responsibility by the use of such accounting procedures and other requirements as may be prescribed by the Secretary;

(13) assurances that the applicant (A) has or will have a contractual or other arrangement with the agency of the State (in which the applicant provides services) that administers or supervises the administration of a State plan approved under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) for the payment of all or a part of the applicant's costs in providing health services to persons who are eligible for medical assistance under such a State plan, or (B) has made or will make every reasonable effort to enter into such an arrangement;

(14) assurances that the applicant has made or will make and will continue to make every reasonable effort to collect appropriate reimbursement for its costs in providing health services to persons who are entitled to benefits under title V of the Social Security Act (42 U.S.C. 701 et seq.), to medical assistance under a State plan approved under title XIX of such Act (42 U.S.C. 1396 et seq.), or to assistance for medical expenses under any other public assistance program or private health insurance program;

(15) assurances that the applicant has or will make and will continue to make every reasonable effort to collect appropriate reimbursement for its costs in providing services to persons entitled to services under parts B and E of title IV (42 U.S.C. 620 et seq., 670 et seq.) and title XX of the Social Security Act (42 U.S.C. 1397 et seq.);

(16) (A) a description of -

(i) the schedule of fees to be used in the provision of services, which shall comply with section 300z-3(c) of this title and which shall be designed to cover all reasonable direct and indirect costs incurred by the applicant in providing services; and

(ii) a corresponding schedule of discounts to be applied to the payment of such fees, which shall comply with section 300z-3(c) of this title and which shall be adjusted on the basis of the ability of the eligible person to pay;

(B) assurances that the applicant has made and will continue to make every reasonable effort -

(i) to secure from eligible persons payment for services in accordance with such schedules;

(ii) to collect reimbursement for health or other services provided to persons who are entitled to have payment made on their behalf for such services under any Federal or other government program or private insurance program; and

(iii) to seek such reimbursement on the basis of the full amount of fees for services without application of any discount; and

(C) assurances that the applicant has submitted or will submit to the Secretary such reports as the Secretary may require to determine compliance with this paragraph;

(17) assurances that the applicant will make maximum use of funds available under subchapter VIII of this chapter;

(18) assurances that the acceptance by any individual of family planning services or family

planning information (including educational materials) provided through financial assistance under this subchapter shall be voluntary and shall not be a prerequisite to eligibility for or receipt of any other service furnished by the applicant;

(19) assurances that fees collected by the applicant for services rendered in accordance with this subchapter shall be used by the applicant to further the purposes of this subchapter;

(20) assurances that the applicant, if providing both prevention and care services will not exclude or discriminate against any adolescent who receives prevention services and subsequently requires care services as a pregnant adolescent;

(21) a description of how the applicant will, as appropriate in the provision of services -

(A) involve families of adolescents in a manner which will maximize the role of the family in the solution of problems relating to the parenthood or pregnancy of the adolescent;

(B) involve religious and charitable organizations, voluntary associations, and other groups in the private sector as well as services provided by publicly sponsored initiatives;

(22) (A) assurances that -

(i) except as provided in subparagraph (B) and subject to clause (ii), the applicant will notify the parents or guardians of any unemancipated minor requesting services from the applicant and, except as provided in subparagraph (C), will obtain the permission of such parents or guardians with respect to the provision of such services; and

(ii) in the case of a pregnant unemancipated minor requesting services from the applicant, the applicant will notify the parents or guardians of such minor under clause (i) within a reasonable period of time;

(B) assurances that the applicant will not notify or request the permission of the parents or guardian of any unemancipated minor without the consent of the minor -

(i) who solely is requesting from the applicant pregnancy testing or testing or treatment for venereal disease;

(ii) who is the victim of incest involving a parent; or

(iii) if an adult sibling of the minor or an adult aunt, uncle, or grandparent who is related to the minor by blood certifies to the grantee that notification of the parents or guardians of such minor would result in physical injury to such minor; and

(C) assurances that the applicant will not require, with respect to the provision of services, the permission of the parents or guardians of any pregnant unemancipated minor if such parents or guardians are attempting to compel such minor to have an abortion;

(23) assurances that primary emphasis for services supported under this subchapter shall be given to adolescents seventeen and under who are not able to obtain needed assistance through other means;

(24) assurances that funds received under this subchapter shall supplement and not supplant funds received from any other Federal, State, or local program or any private sources of funds; and

(25) a plan for the conduct of, and assurances that the applicant will conduct, evaluations of the effectiveness of the services supported under this subchapter in accordance with subsection (b) of this section.

(b) Evaluations: amount, conduct, and technical assistance

(1) Each grantee which receives funds for a demonstration project for services under this subchapter shall expend at least 1 per centum but not in excess of 5 per centum of the amounts received under this subchapter for the conduct of evaluations of the services supported under this

subchapter. The Secretary may, for a particular grantee upon good cause shown, waive the provisions of the preceding sentence with respect to the amounts to be expended on evaluations, but may not waive the requirement that such evaluations be conducted.

(2) Evaluations required by paragraph (1) shall be conducted by an organization or entity which is independent of the grantee providing services supported under this subchapter. To assist in conducting the evaluations required by paragraph (1), each grantee shall develop a working relationship with a college or university located in the grantee's State which will provide or assist in providing monitoring and evaluation of services supported under this subchapter unless no college or university in the grantee's State is willing or has the capacity to provide or assist in providing such monitoring and assistance.

(3) The Secretary may provide technical assistance with respect to the conduct of evaluations required under this subsection to any grantee which is unable to develop a working relationship with a college or university in the applicant's State for the reasons described in paragraph (2).

(c) Reports

Each grantee which receives funds for a demonstration project for services under this subchapter shall make such reports concerning its use of Federal funds as the Secretary may require. Reports shall include, at such times as are considered appropriate by the Secretary, the results of the evaluations of the services supported under this subchapter.

(d) Notification of parents; "adult" defined

(1) A grantee shall periodically notify the Secretary of the exact number of instances in which a grantee does not notify the parents or guardians of a pregnant unemancipated minor under subsection (a)(22)(B)(iii) of this section.

(2) For purposes of subsection (a)(22)(B)(iii) of this section, the term "adult" means an adult as defined by State law.

(e) Submission of applications to Governor; comments by Governor

Each applicant shall provide the Governor of the State in which the applicant is located a copy of each application submitted to the Secretary for a grant for a demonstration project for services under this subchapter. The Governor shall submit to the applicant comments on any such application within the period of sixty days beginning on the day when the Governor receives such copy. The applicant shall include the comments of the Governor with such application.

(f) Availability of core services

No application submitted for a grant for a demonstration project for care services under this subchapter may be approved unless the Secretary is satisfied that core services shall be available through the applicant within a reasonable time after such grant is received.

§2007. [300z-6] Coordination of programs

(a) The Secretary shall coordinate Federal policies and programs providing services relating to the prevention of adolescent sexual relations and initial and recurrent adolescent pregnancies and providing care services for pregnant adolescents. In achieving such coordination, the Secretary shall

(1) require grantees who receive funds for demonstration projects for services under this subchapter to report periodically to the Secretary concerning Federal, State, and local policies and programs that interfere with the delivery of and coordination of pregnancy prevention services and other programs of care for pregnant adolescents and adolescent parents;

(2) provide technical assistance to facilitate coordination by State and local recipients of Federal assistance;

(3) review all programs administered by the Department of Health and Human Services which provide prevention services or care services to determine if the policies of such programs are consistent with the policies of this subchapter, consult with other departments and agencies of the Federal Government who administer programs that provide such services, and encourage such other departments and agencies to make recommendations, as appropriate, for legislation to modify such programs in order to facilitate the use of all Government programs which provide such services as a basis for delivery of more comprehensive prevention services and more comprehensive programs of care for pregnant adolescents and adolescent parents;

(4) give priority in the provision of funds, where appropriate, to applicants using single or coordinated grant applications for multiple programs; and

(5) give priority, where appropriate, to the provision of funds under Federal programs administered by the Secretary (other than the program established by this subchapter) to projects providing comprehensive prevention services and comprehensive programs of care for pregnant adolescents and adolescent parents.

(b) Any recipient of a grant for a demonstration project for services under this subchapter shall coordinate its activities with any other recipient of such a grant which is located in the same locality.

§2008. [300z-7] Research

(a) Grants and contracts; duration; renewal; amount

(1) The Secretary may make grants and enter into contracts with public agencies or private organizations or institutions of higher education to support the research and dissemination activities described in paragraphs (4), (5), and (6) of section 300z(b) of this title.

(2) The Secretary may make grants or enter into contracts under this section for a period of one year. A grant or contract under this section for a project may be renewed for four additional one-year periods, which need not be consecutive.

(3) A grant or contract for any one-year period under this section may not exceed $100,000 for the direct costs of conducting research or dissemination (FOOTNOTE 1) activities under this section and may include such additional amounts for the indirect costs of conducting such activities as the Secretary determines appropriate. The Secretary may waive the preceding sentence with respect to a specific project if he determines that -

(FOOTNOTE 1) So in original. Probably should be "dissemination".

(A) exceptional circumstances warrant such waiver and that the project will have national impact; or

(B) additional amounts are necessary for the direct costs of conducting limited demonstration projects for the provision of necessary services in order to provide data for research carried out under this subchapter.

(4) The amount of any grant or contract made under this section may remain available for

obligation or expenditure after the close of the one-year period for which such grant or contract is made in order to assist the recipient in preparing the report required by subsection (f)(1) of this section.

(b) Scope of permissible activities

(1) Funds provided for research under this section may be used for descriptive or explanatory surveys, longitudinal studies, or limited demonstration projects for services that are for the purpose of increasing knowledge and understanding of the matters described in paragraphs (4) and (5) of section 300z(b) of this title.

(2) Funds provided under this section may not be used for the purchase or improvement of land, or the purchase, construction, or permanent improvement (other than minor remodeling) of any building or facility.

(c) Applications

The Secretary may not make any grant or enter into any contract to support research or dissemination activities under this section unless -

(1) the Secretary has received an application for such grant or contract which is in such form and which contains such information as the Secretary may by regulation require;

(2) the applicant has demonstrated that the applicant is capable of conducting one or more of the types of research or dissemination activities described in paragraph (4), (5), or (6) of section 300z(b) of this title; and

(3) in the case of an application for a research project, the panel established by subsection (e)(2) of this section has determined that the project is of scientific merit.

(d) Coordination with National Institutes of Health

The Secretary shall, where appropriate, coordinate research and dissemination activities carried out under this section with research and dissemination activities carried out by the National Institutes of Health.

(e) Review of applications for grants and contracts; establishment of review panel

(1) The Secretary shall establish a system for the review of applications for grants and contracts under this section. Such system shall be substantially similar to the system for scientific peer review of the National Institutes of Health and shall meet the requirements of paragraphs (2) and (3).

(2) In establishing the system required by paragraph (1), the Secretary shall establish a panel to review applications under this section. Not more than 25 per centum of the members of the panel shall be physicians. The panel shall meet as often as may be necessary to facilitate the expeditious review of applications under this section, but not less than once each year. The panel shall review each project for which an application is made under this section, evaluate the scientific merit of the project, determine whether the project is of scientific merit, and make recommendations to the Secretary concerning whether the application for the project should be approved.

(3) The Secretary shall make grants under this section from among the projects which the panel established by paragraph (2) has determined to be of scientific merit and may only approve an application for a project if the panel has made such determination with respect to such a project. The Secretary shall make a determination with respect to an application within one month after receiving

the determinations and recommendations of such panel with respect to the application.

(f) Reports

(1) (A) The recipient of a grant or contract for a research project under this section shall prepare and transmit to the Secretary a report describing the results and conclusions of such research. Except as provided in subparagraph (B), such report shall be transmitted to the Secretary not later than eighteen months after the end of the year for which funds are provided under this section. The recipient may utilize reprints of articles published or accepted for publication in professional journals to supplement or replace such report if the research contained in such articles was supported under this section during the year for which the report is required.

(B) In the case of any research project for which assistance is provided under this section for two or more consecutive one-year periods, the recipient of such assistance shall prepare and transmit the report required by subparagraph (A) to the Secretary not later than twelve months after the end of each one-year period for which such funding is provided.

(2) Recipients of grants and contracts for dissemination under this section shall submit to the Secretary such reports as the Secretary determines appropriate.

§2009. [300z-8] Evaluation and administration

(a) Of the funds appropriated under this subchapter, the Secretary shall reserve not less than 1 per centum and not more than 3 per centum for the evaluation of activities carried out under this subchapter. The Secretary shall submit to the appropriate committees of the Congress a summary of each evaluation conducted under this section.

(b) The officer or employee of the Department of Health and Human Services designated by the Secretary to carry out the provisions of this subchapter shall report directly to the Assistant Secretary for Health with respect to the activities of such officer or employee in carrying out such provisions.

§ 2010. [300z-9] Authorization of appropriations

(a) For the purpose of carrying out this subchapter, there are authorized to be appropriated $30,000,000 for the fiscal year ending September 30, 1982, $30,000,000 for the fiscal year ending September 30, 1983, $30,000,000 for the fiscal year ending September 30, 1984, and $30,000,000 for the fiscal year ending September 30, 1985.

(b) At least two-thirds of the amounts appropriated to carry out this subchapter shall be used to make grants for demonstration projects for services.

(c) Not more than one-third of the amounts specified under subsection (b) of this section for use for grants for demonstration projects for services shall be used for grants for demonstration projects for prevention services.

§2011. [300z-10] Restrictions

(a) Grants or payments may be made only to programs or projects which do not provide abortions

or abortion counseling or referral, or which do not subcontract with or make any payment to any person who provides abortions or abortion counseling or referral, except that any such program or project may provide referral for abortion counseling to a pregnant adolescent if such adolescent and the parents or guardians of such adolescent request such referral; and grants may be made only to projects or programs which do not advocate, promote, or encourage abortion.

(b) The Secretary shall ascertain whether programs or projects comply with subsection (a) of this section and take appropriate action if programs or projects do not comply with such subsection, including withholding of funds.

Enclosure # 2
Frequently Asked Questions and Answers
Adolescent Family Life Demonstration Program

General Questions

1. **Question: Who administers the Adolescent Family Life (AFL) Demonstration Projects Grant Program?**

   Answer: The Office of Adolescent Pregnancy Programs (OAPP), Office of Population Affairs, Office of Public Health and Science, U.S. Department of Health and Human Services, administers the program.

2. **Question: What is an Adolescent Family Life Demonstration Project?**

   Answer: An Adolescent Family Life Demonstration Project is a project of limited duration designed to test the feasibility and effectiveness of a theory or approach consistent with the purposes of the legislation. Such demonstrations must be designed in such a way that they can be assessed or evaluated using standard field research methods and replicated in similar situations. The 2010 program announcement requests applications for projects to develop, implement and evaluate innovative interventions for pregnant adolescents ages 15-18 and their families, as well as fathers of their children and/or male partners. Please see the program announcement for more information.

3. **Question: Who is eligible to receive an OAPP demonstration grant?**

   Answer: Eligible grant recipients are limited to public or private nonprofit organizations or agencies which demonstrate to the satisfaction of the Secretary the capability to provide the appropriate services. Faith-based and community-based organizations are eligible to apply for these demonstration grants.

4. **Question: May an individual submit a grant application?**

   Answer: Grants are awarded to organizations rather than individuals. A grant application may be submitted by an individual authorized to act/sign for an organization and to assume the obligations imposed by the legislation and any additional conditions of the grant. However, the grant will not go directly to that individual but to the organization which the individual represents. The organization must establish its non-profit status prior to the issuance of a grant award and accept the responsibility for the use of Federal funds.

5. **Question: What is the targeted population for service provision under this grant announcement?**

   Answer: Projects should provide and evaluate program activities and services targeting

pregnant adolescents ages 15-18 and their families, as well as fathers of their children and/or male partners. For the purposes of this announcement, only pregnant adolescents are eligible to receive program services at the time of program entry. However, services will continue to be provided to the parenting adolescent and her child after the baby is born until the child turns one year old.

6. **Question: How should applications be submitted?**

Answer: The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications, as described in the following sections.

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 encouraged.

Electronic grant application submissions must be submitted no later than **11:00 p.m. Eastern Time for electronic applications and 5:00 p.m. Eastern Time for mailed-in applications** on the deadline date specified in the DATES section of the announcement using one of the electronic submission mechanisms specified below. All required hardcopy original signatures and mail-in items must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209, no later than 5:00 p.m. Eastern Time on the next business day after the deadline date specified in the DATES section of the announcement. Applications will not be considered valid until all electronic application components, hardcopy original signatures, and mail-in items are received by the OPHS Office of Grants Management according to the deadlines specified above.

Paper grant application submissions must be submitted no later than 5:00 p.m. Eastern Time on the deadline date specified in the DATES section of the announcement. The address to be used for paper application submissions is Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209.

Please refer to the Submission Mechanisms section of the RFA for full details.

7. **Question: Should the application narrative be submitted in a specific format?**

Answer: Yes. A suggested outline is provided in the Program Narrative: General Guidance section of this application kit (Enclosure #5). The typed, double-spaced, 50 page limitation (plus appendices) should be strictly adhered to. **All pages in the application should be numbered**. Applications should be submitted using the

appropriate federal forms using the guidance noted in the RFA and Application Kit materials. Only the appendices that are listed in the Request For Applications should be included.

8. **Question: What is the latest date the grant awards can be issued?**

Answer: Grant awards under this program announcement must be issued no later than September 30, 2010.

9. **Question: What documents need to be signed?**

Answer: An authorized representative of the applicant should sign the face page of the appropriate federal application forms. Signing this form indicates the applicant's agreement to all of the Certifications and Assurances within the application. The applicant is required to sign the Title XX Assurances (included in Application Kit materials). The applicant must also sign the Disclosure of Lobbying Activities form found in the OPHS-1 Application.

10. **Question: Are AFL Demonstration projects subject to Intergovernmental Review under Executive Order 12372?**

Answer: Yes. Applicants should contact the State Single Point of Contact (SPOC) if the state in which services will be provided participates in this review process. The most current list of SPOCs can be found on the INTERNET, as well as a list of those states not participating, at http://www.whitehouse.gov/omb/grants/spoc. An applicant may comply with this requirement by submitting a copy of the application to the state SPOC in which the applicant is located at the same time the application is submitted to OAPP.

11. **Question: Are there any other non-Federal reviews required for the demonstration grant applications?**

Answer: Yes. The Governor of the State in which services will be provided must be given 60 days to comment on the application. In order to comply with this requirement, an applicant can mail a copy of their application to the Governor of their State **at the same time the application is mailed to OAPP**. To inform the Governor's office of the reason for the submission, a copy of this notice should be attached to the application.

12. **Question: What is the Catalog of Federal Domestic Assistance number?**

Answer: All Federal domestic assistance programs are assigned an identifying number by the Office of Management and Budget. OAPP's number for AFL demonstration projects is 93.995. These numbers are used as a reference to available programs and are published in a complete catalog for easy access by any interested organizations or members of the public.

13. Question: Will OAPP extend the deadline for submission of applications?

Answer: No.

14. Question: Who will make the funding decision?

Answer: Final grant award decisions will be made by the Acting Director for the Office of Population Affairs, who will take into consideration a review by a multidisciplinary panel of independent reviewers as well as a review by Federal Staff, in accordance with objective review criteria as stated in the program announcement.

Questions Regarding Program Implementation

15. Question: Does OAPP provide any technical assistance to grantees who have been awarded an AFL grant?

Answer: Yes. After an award is made, Project Directors and Program Evaluators are required to attend an annual meeting which provides assistance in program development, evaluation, AFL policy and many other areas of interest. Travel and logistics for annual and initial orientation meetings must be estimated and included in the applicant's budget. OAPP also provides other technical assistance activities for grantee staff during the course of the grant. For instance, each grantee will have a Project Officer assigned to the project. The OAPP Project Officer provides one-on-one technical assistance via phone, site visit, and mail.

16. Question: Does OAPP provide any technical assistance to prospective applicants for this funding opportunity?

Answer: Yes. OAPP has scheduled one net conference to help prospective applicants. At this net-conference the public will be able to learn more about the purposes and requirements of the Title XX program, how to apply for funds under this program announcement, program eligibility requirements, the application selection process, and considerations that might help to improve the quality of grant applications. The net-conference allows potential applicants to participate in a workshop at their computer without the need for travel. The net-conference workshop will be recorded in its entirety and will subsequently be available on the internet for prospective applicants to view until the closing date of this announcement. Please see the OPA website (http://www.hhs.gov/opa/) for more information regarding the technical assistance net-conference workshop and for access to the Net Replay feature. Applicants must pre-register for the technical assistance net-conference. This application kit also contains registration information for participating in the technical assistance net-conference.

The OAPP Project Officers are also available to answer specific questions via phone or email. Please contact the OAPP office at (240) 453-2828 or oapp@hhs.gov for assistance.

17. **Question: If a program receives technical assistance from OAPP during the application process, does this assistance give the applicant priority for funding?**

Answer: No. An applicant who receives technical assistance from OAPP during the application process will not receive any special consideration for funding.

18. **Question: Must Adolescent Family Life Demonstration projects charge fees for services?**

Answer: Yes. Section 2004©) of the Title XX statute states that AFL demonstration project grantees "... shall charge fees for services pursuant to a fee schedule approved by the Secretary..."

19. **Question: How are fees for services to be determined?**

Answer: Fees for services are to be based on all reasonable direct and indirect costs incurred in the provision of the service.

20. **Question: Must full fees for services be charged to all clients?**

Answer: No. The amount of a fee to be charged shall be adjusted on the basis of the ability of the eligible person to pay.

21. **Question: Must a fee schedule be submitted with a grant application?**

Answer: Yes. A description of the schedule of fees and the corresponding schedule of discounts must be provided in the application. An example Fee Schedule is included in the application kit.

22. **Question: May an AFL demonstration project deny services because of a client's inability to pay?**
Answer: No. A grantee under this program may not, in any case, discriminate with regard to the provision of services to any individual because of the individual's inability to provide payment for such service. However, in determining the ability of an unemancipated minor to provide payment for services, the income of the family of the unemancipated minor shall be considered unless the parents or guardian of the unemancipated minor refuse to make such payments.

23. **Question: What happens to monies collected by projects as fees?**

Answer: They are put back into the program, as mandated in the legislation.

24. **Question: Are AFL grantees prohibited from engaging in any activities or services with Title XX grant funds?**

Answer: Yes, both the Title XX legislation and OAPP policy prohibit AFL grantees from engaging in a variety of activities, including, but not limited to, the following:

A. Section 2004(b) prohibits the use of AFL grant funds for the provision of family planning services (other than counseling and referral services) unless appropriate family planning services are not otherwise available in the community.

B. Section 2011(a) prohibits AFL projects from providing abortions or abortion counseling or referral, either directly or through subcontract, and from advocating, promoting or encouraging abortion.

C. Title XX funds may not be used for inherently religious activities, such as worship, religious instruction, and proselytization. If an organization engages in such activities, they must be offered separately in time or location from the AFL program and participation must be voluntary for program beneficiaries. A Title XX program, in providing services and outreach related to program services, cannot discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice.

D. For a description of the allowability of specific costs, see 45 Code of Federal Regulations (CFR) section 74.27 which can be found at http://www.access.gpo.gov/nara/cfr/waisidx_04/45cfr74_04.html.

25. Question: How are the terms "network," "partnership," and "linkage" defined?

Answer: A network, partnership, or linkage exists when one agency, acting as an anchor or broker, contacts other agencies which provide for the delivery of services necessary to implement the proposed program and takes responsibility for assuring that all program activities are in place and delivered. A statewide network also may be created to link a diverse group of agencies at State and local levels.

26. Question: May referrals be counted as services? For example, if a program does not provide a particular service essential to the program, may it refer a program participant to another agency for this service?

Answer: Yes. However, it is not enough simply to make the referral or to call another agency and ask if it will provide the service. An acceptable referral process must include a mechanism for making referrals, a procedure for follow-up of referrals, and a method to evaluate the success of the process in terms of impact on program outcomes. A Memorandum of Understanding (MOU) with each referral agency should be written, signed by the agency, and attached to the original application. If subsequent linkages are

made after the Notice of Grant Award, a copy of the MOU should be sent to the grantee's OAPP Project Officer for the official OAPP file. An MOU should include a specific description of the service(s) the referral agency has agreed to provide upon funding, and should describe the responsibilities of the agency, in addition to the anticipated time commitment and schedule.

27. **Question: An AFL project is invited to present a program to adolescents attending a church-affiliated summer camp or school. Does this present a problem?**

Answer: No. Projects should handle requests for AFL presentations in an evenhanded fashion which neither discriminates against, nor favors, religion, a particular religious doctrine or affiliation, or non-religion (secular). AFL project services should be offered in a religiously neutral fashion, and decisions about where to offer presentations or provide services should be made on program relevant criteria such as efficiency, need, public requests, or geographic balance rather than on any religion-related criteria.

28. **Question: A religiously affiliated grantee operates a care or prevention project which provides a variety of services for program participants. Every day at a certain time, a message is announced over the loudspeaker that a worship service is being held in the chapel of the organization for anyone who cares to attend. Attendance is voluntary, both for AFL program participants and others at the organization. Neither the cost of the room nor the salary of the leader of the service is paid for with AFL funds. Does this present a problem?**

Answer: No, it does not since attendance is voluntary and neither the cost of the room nor the salary of the service leader is paid for with AFL funds.

29. **Question: A project runs a care or prevention program within an organization that provides a variety of services for teens. The organization which sponsors the project makes religious counselors available for AFL participants and participants in other non-AFL programs. The counselors are not paid for with AFL funds. They do not see AFL program participants unless a participant specifically requests spiritual counseling. Does this present any problem?**

Answer: No, as long as the counseling is requested voluntarily by the program participant, the counseling is not paid for with AFL funds, and the counseling is performed at some time or place other than at the same time or location as the AFL funded services.

30. **Question: A program location houses a library with many types of books, including some of a specific religious nature, such as Bibles and prayer books. These books were not purchased with AFL funds. Does this present any problem?**

Answer: No. It would be a problem only if the facility urges that the person receiving AFL funded services also read the material.

31. **Question: May an AFL project refer program participants to religiously affiliated service providers?**

Answer: Yes. Although all referrals for AFL services must be provided in a religiously neutral manner, if a religiously affiliated provider is the best referral for the program participant, then the fact that the provider happens to be religiously affiliated should be no bar to the referral. Thus, an AFL project should not steer an AFL program participant toward or away from religiously affiliated referral agencies in referrals for services authorized under the Act. When making any type of referral, the AFL project should consider only the professional qualifications, availability, accessibility, and the conduct of the referral agency. In addition, the terms and conditions of the grant award apply to all aspects of the AFL project, whether provided on site or by referral and whether provided by the grantee, a subgrantee or anyone else who provides project services.

32. **Question: A grantee is located in a geographic region in which the population is predominately one particular religious denomination. Project services are available to anyone, regardless of religious denomination. However, due to the nature of the area, most of the program participants are of a single denomination. Does the fact that most program participants are of one denomination present a problem?**

Answer: AFL grantees may be affiliated with a particular religious denomination. AFL projects must be accessible to the public generally, regardless of the program participant's religious denomination. Grantees must assure that information about their AFL projects is broadly disseminated throughout the community, including through public media, such as radio or television, and advertisements in public facilities or areas. Additionally, an AFL project is prohibited from selecting a target group of participants based on their religious affiliation. No problem is presented, however, where most of the youth in a target area are of a single denomination due to the fact that the grantee is located in a geographic region in which the population is predominantly that denomination or for reasons unrelated to the grantee's selection of participants based on their religious affiliation (e.g., coincidences, accessibility of the project to a particular population group, comfort level of particular population group with the project).

33. **Question: In counseling a program participant, in what context, if any, may an AFL grant staff member help the participant explore the connection between her religious views, if any, and the issue at hand (relationship issues, concern about sexual activity, etc.)?**

Answer: During one-on-one discussions with a program participant, an adolescent's religious beliefs may arise in two contexts:

A. when the program participant raises the issue of her/his religious beliefs, or

B. when the AFL grant staff member believes that it is important for the program participant to consider a variety of factors (including parental and peer values and moral beliefs) in order to make his/her own decisions responsibly.

In both of these contexts, the key principle is that all AFL funded program activities and services must be neutral as to religion. That is, program activities and services, including counseling and/or one-on-one discussions with program participants, may not disparage or discourage religion in any way, nor may any program activity or service engage in any inherently religious activities, such as worship, religious instruction, and proselytization. Thus, in the first situation, the AFL grant staff member should acknowledge the importance of the role religious beliefs play in an individual's decision, but must refer the program participant to other sources of counsel outside the project (parents, religious leaders, etc.) to explore the substance of the relevant religious beliefs. If the program participant wishes specific guidance relating to his or her religious beliefs, he or she should be told to discuss the matter with parents or the religious counselor of his or her choice outside of the project.

In the second situation, it is important for the AFL grant staff member to encourage a program participant to make decisions with reference to the participant's own views on appropriate and moral conduct, whether those spring from religious or non-religious beliefs. If, as a result of that discussion, an AFL program participant requests guidance on religious issues, he or she should be told to discuss the matter with his or her parents or the religious leader of his or her choice outside of the project. Under no circumstances may an AFL grantee staff member express a judgment with regard to a program participant's religious or non-religious beliefs, seek to change the religious or non-religious beliefs of a project participant, or in any way favor religious over non-religious beliefs or vice versa in the context of helping a participant explore his or her own moral views. The AFL grant staff member may wish to explain that the project is a government sponsored project and, therefore, religious counseling or teaching, while very important to many people, is beyond the scope of the program.

In group sessions, an instructor may note that religious beliefs regarding sexual behavior may play an important role in affecting an individual's views, and may permit discussion on this point as long as the instructor does not convey a position. The instructor should suggest that participants consult with their parents or religious leader for a follow-up discussion on this matter.

34. Question: Project staff are discussing with program participants reasons for postponing premarital sexual activity. An adolescent comments that the Bible (or the church) teaches that premarital sexual activity is wrong and cites references.

Class participants want to discuss this and ask about other religions' teachings on this topic.

A. How should this situation be handled?

B. How should the situation be handled if this was a class involving parents and teens together or parents alone, as opposed to adolescents alone?

Answer: A. The teacher may acknowledge that many faiths teach that premarital sexual activity is wrong, and that an individual's faith may play an important role in making a decision on this matter. It would be inappropriate for the teacher to say or imply that religion is irrelevant to the topic, since this would violate the principles of neutrality with respect to religion. Depending on the time permitted and the level of interest expressed by the adolescents, it is acceptable to explore a variety of religious and nonreligious teachings on the subject of premarital sexual activity, although the teacher may not convey any view as to which one is the better view. The teacher should suggest that adolescents should consult with their parents and/or religious leaders for further discussion or questions.

B. If parents express interest on this subject, the teacher may explore a variety of religious and nonreligious teachings on the subject of premarital sexual activity. The teacher may not convey any view as to which one is the better view. Staff should explain that it is a government sponsored project and, therefore, religious counseling or teaching, while important to many people, is beyond the scope of the program.

35. **Question: May AFL projects provide any form of abortion counseling?**

Answer: AFL projects must comply with the statutory prohibition against providing abortions or abortion counseling or referral, either directly or through subcontract, and from advocating, promoting or encouraging abortion.

36. **Question: May AFL projects promote adoption among program participants?**
Answer:

Yes. The promotion of adoption is permitted and is encouraged as part of the legislation under which AFL operates.

<u>Questions Regarding Evaluation</u>

37. **Question: Does Title XX law require the project to involve a university or college in the performance of the independent evaluation?**

Answer: Yes. Title XX requires the evaluation be conducted by an organization or entity independent of the AFL project. An evaluator associated with a college or university

located in the grantee's state must provide or assist in providing monitoring and evaluation of the project. The entity chosen to conduct the evaluation must be identified, roles clearly described, capability documented, and their intent to participate specified in a written and signed Memorandum of Understanding (MOU) included in the application. The OAPP strongly encourages applicants to involve their evaluator early in the development of the project, before the application is submitted. This is of particular importance given the multi-site evaluation described in this year's program announcement.

For tips on how to select an evaluator as well as other important evaluation information to consider, please refer to the application kit materials.

38. **Question: May an applicant/grantee contract with an evaluator affiliated with a research organization rather than with a local college or university?**

Answer: Yes. However, pursuant to the AFL Legislation, the applicant/grantee must still have a working relationship with an evaluator from a college or university in the applicant's state who will be an active member of the evaluation team.

39. **Question: Is it possible to spend more for evaluation of the OAPP sponsored grant than the five percent limit cited in sec. 2006 (b)(1) of the law?**

Answer: Yes. The grant amount for each project is in the range of $400,000-$600,000 per year. OAPP places strong emphasis on the evaluation of the demonstration projects it supports. To that end, OAPP strongly recommends that applicants budget 20-25% of the Federal portion of the proposed grant project for evaluation activities, and will waive the 5% limit on grant funds for those projects.

40. **Question: Are AFL projects required to use any specific instruments in the evaluation of their projects?**

Answer: Yes. The OAPP has developed Core Evaluation Instruments to gather baseline and follow-up information on all AFL grantee participants. These instruments have been approved by the Office of Management and Budget (OMB) for use in Title XX AFL demonstration project evaluations. All grantees are required to use these AFL Core Evaluation Instruments in their evaluations. Evaluation plans should use other survey instruments in addition to the Core Evaluation Instruments developed by OAPP.

41. **Question: Must AFL projects obtain parental consent for clients to receive program services and to participate in the evaluation?**

Answer: The Title XX statute requires that all unemancipated minors obtain consent from a parent or guardian for AFL program services. In order to fulfill this requirement,

AFL projects have traditionally obtained either active or passive parental (or guardian) consent. However, the OAPP Core Evaluation Instruments approved by OMB require that the project obtain active consent from the AFL client to participate in the evaluation, and clients under the age of 18 must have the active consent of a parent or legal guardian to participate in the evaluation. Under this announcement, it is expected that all clients will receive the baseline and follow-up AFL Core Evaluation Instruments as a part of the grantee's evaluation plan.

Questions Regarding the Curricula and Education Materials Review Process

42. Question: If an applicant is awarded grant funds based on its application, does that mean that the curricula and educational materials that were proposed for use in the application are also approved?

Answer: No. Although curricula and educational materials should be identified in the application, successful approval and funding of the application does not indicate approval of proposed curricula and educational materials for use in the AFL project. The review and approval of curricula and other educational materials are conducted after an application is approved for funding. Once funding is awarded, grantees should discuss the details of their projects and their proposed materials with their Project Officers.

43. Question: Should AFL demonstration projects use curriculum or educational materials in their programs?

Answer: AFL demonstration projects should incorporate curricula and educational materials into their AFL projects. A grantee may choose to use existing materials or may propose to develop new materials to implement its demonstration project as long as the materials meet certain requirements and the grantee receives approval from OAPP prior to use in the project. The materials must be medically accurate; must not include inherently religious activities, such as worship, religious instruction, and proselytization; must be in compliance with the statutory prohibitions against advocating, promoting, encouraging, or providing abortions.

44. Question: How much time does it take for materials to be approved?

Answer: AFL grantees should plan for an average of six weeks from the time OAPP receives the materials to the time the grantee is notified of the material's status ("approved," "approved with modifications," or "disapproved"). If materials are "approved with modifications," grantees should plan for extra time (approximately three weeks) to make the required changes. It is the grantee's responsibility to submit all materials and any subsequent required modifications to the OAPP.

45. Question: Can AFL grantees include the cost of curricula and educational materials in their grants?

Answer: Yes, grantees may include the cost of the materials as well as other costs

associated with using a particular curriculum or educational material.

46. Question: Can AFL grantees include the cost of staff training by the curriculum developers in their grants?

Answer: Yes, grantees may include the cost of the training in their budgets. Many of the developers of the curricula have training available to assist programs in implementing their curriculum materials.

47. Question: Must AFL grantees use only one curriculum?

Answer: No, grantees may use one or more curricula in their projects. Grantees may also use parts of several different curricula. However, all of the curricula materials must be reviewed and approved by the OAPP prior to use in the funded project.

48. Question: What curriculum and/or educational materials should applicants submit with their applications?

Answer: No curricula or other educational materials should be submitted with the application. However, applicants for AFL funding should identify the curriculum/curricula proposed for use (title, author, publisher, publisher's address, copyright date, and edition). Once funded, grantees will be required to provide the OAPP Medical Education Specialist with a list of all proposed curricula and materials to be used in the project. Once this list is received, the Medical Education Specialist will inform grantees what materials will need to be submitted to OAPP for review.

<u>Questions Regarding Grants Management/Budgetary Issues</u>

49. Question: How many years of funding can a grantee receive?

Answer: Grants may be approved for project periods of up to five years. Grants are funded in annual increments (budget periods). Funding for all approved budget periods beyond the first year of the grant is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

50. Question: What is a project period and a budget period?

Answer: The project period is the total time for which support of a project has been programmatically approved by OAPP. For budgetary and reporting purposes, funding is provided in annual increments called budget periods.

51. Question: Is there a limit to the amount of Federal participation in a project?

Answer: Under the terms of Title XX, Federal participation in an AFL demonstration project may not exceed 70 percent of the total cost of the project for the first and second years, 60 percent for the third year, 50 percent for the fourth year and 40 percent for the fifth and final year. For example, if you are requesting $600,000 of federal funds for the first year of your program, then the formula would be used as follows:

$600,000/.70 x .30 = $257,143 (non Federal funds or match needed)

52. Question: May the limits of Federal participation be waived?

Answer: Yes. Section 2005(c) of Title XX states that the limits of Federal participation may be waived. However, if needed, technical assistance may be provided to assist grantees with their cost sharing efforts.

53. Question: What are the usual sources of matching or other non-Federal funds?

Answer: Matching funds may be obtained from State and local governments, donations, foundations and the documented valuation of in-kind contributions.

54. Question: What are in-kind contributions, and may they be used to meet the matching requirements?

Answer: In-kind contributions represent the value of non-cash contributions provided by the grantees or third parties and may be used to meet matching requirements. In-kind contributions may consist of charges for real property and nonexpendable personal property, and the value of goods and services directly benefitting and specifically identifiable to the grant-supported activity. All in-kind contributions must be fairly valued, fully documented and auditable. Applicants must include a thorough description of in-kind and cash contributions as part of their application kit.

55. Question: May other Federal funds be used as matching funds?

Answer: Generally, other Federal funds may not be used as matching funds. The HHS Grants Policy Statement provides that: "Recipient contributions may be derived from any non-Federal source; from Federal sources if received as fees, payments, or reimbursements for the provision of a specific service, such as patient care reimbursements received under Medicare or Medicaid; or from other program income, if authorized by [HHS]. Otherwise, unless there is specific statutory authority, Federal funds may not be used to match HHS grant funds."

56. Question: What are indirect costs (IDC)?

Answer: Indirect costs are costs incurred by an organization that are not readily

identifiable with a particular project or program but are nevertheless necessary to the operation of the organization and the performance of its programs. The costs of operating and maintaining facilities (utilities) and administrative salaries are examples of the types of costs that are usually treated as indirect costs.

57. Question: Are indirect costs allowable under this program?

Answer: Yes, provided that the applicant has a negotiated indirect cost (IDC) rate agreement with HHS or any other Federal agency, or, if not, the applicant submits a proposal to establish an indirect cost rate agreement no later than three months after the beginning date of the grant budget period. IDC proposals are submitted to the Division of Cost Allocation in the appropriate HHS Regional Office. Applicants which have a negotiated IDC rate should submit a copy of the agreement with the application.

58. Question: How detailed should the proposed budget be?

Answer: In filling out Form 424A (budget information), grantees should be sure to complete Section B, Column 2 to include matching funds for each budget line item and to indicate totals in Column 5. In addition, applicants should include, on a separate sheet, each personnel position, annual salary, percent of time of project, and total Federal funds requested. Grantees should also include a budget narrative which justifies each of the budget categories, including matching funds.

Enclosure # 3
Evaluation Guidance
(Revised 4/22/10)

Evaluation is a critical aspect of OAPP/AFL demonstration projects. The purpose of the demonstration projects is to develop and evaluate innovative approaches to care for pregnant and parenting teens, demonstrate these approaches and disseminate them to the field so they can benefit others.

Beginning in 2004, OAPP began to request applications for projects that had a stronger focus on evaluation. Applicants are being asked to include stronger evaluation designs. Enclosed are 3 tools to assist in the planning and implementation of your evaluation plan. They are::

Appendix A - Evaluation Plan Criteria
Appendix B - Guidance on Writing S.M.A.R.T. Objectives
Appendix C - Identifying an Appropriate Evaluator

Appendix A

Evaluation Plan Criteria

Evaluation plans should address the following criteria and will be scored accordingly during the grant review process:

(1) Timeline

(a) The first 6 months may be used for development which may include planning, instrument development, and piloting the intervention. During this period, evaluation plans will be reviewed and approved by the OAPP.

(b) Projects in their first year should focus on piloting the intervention, assuring adequate and appropriate staffing, and assuring that the intervention is reaching its intended population. Months 7 through 12 of the first year through to the 4th year of the grant will be an active recruitment period. Multiple sites are encouraged in order to obtain a sufficient sample size. Grantees are encouraged to provide intervention services for up to 12- months post partum. Additional follow up data collection shall occur after the termination of services. It is noted that some participants enrolling during year 4 of the grant may not be available for all follow up. (See data collection information (#10 below) for specific timing of data collection.) The follow-up assessment should be in the same format as the pre- and post-testing instrumentation.

(c) By the middle of the 4th grant year through to the 5th year of the grant, the majority of evaluation activities will be data collection, data preparation, and data analysis leading to the development of manuscripts and materials for dissemination to a professional peer audience. During this time, the grantee shall continue providing services to participants in the intervention and control/comparison groups per the approved intervention implementation plan.

(2) The description of the evaluation should include a logic model (see Enclosure #9 for a sample logic model) that visually ties the intervention objectives and activities to the expected results. The logic model should include: activities, outputs, outcomes (short-term, intermediate, and long-term), goals, moderating effects, and assumptions. The logic model should illustrate direct linkages between the intervention and outcomes to illustrate the theory of change on which the intervention is based. The description of the evaluation should include clearly stated evaluation hypotheses and objectives. The objectives identify goals the intervention intends to achieve and should be in S.M.A.R.T. terms. The objectives and hypotheses should be clearly aligned with the intervention activities, should be related to the proposed underlying theory, and should be aligned with the overall purpose of this announcement. The measurable change anticipated should be based on the literature or existing data where available.

(3) Applications should include a clear description of a process evaluation plan. This entails a clear description of process objectives (aims of the process evaluation) including a list

of activities to be assessed to evaluate implementation and fidelity of key program inputs and activities. Measurement of dosage must be included. Detailed records identifying and quantifying pre-natal and post-partum services must be part of the process evaluation. A quality process evaluation should be reported every year to assess changes in the program.

(4) Applications will include a clear description of the outcome evaluation plan. This description should include how the program will assess the impacts, benefits, and changes to both the intervention and comparison groups (as a result of the program(s) efforts) during and after their participation in the programs. Outcome evaluations must examine these changes in the short-term, intermediate-term and long-term (at least one year after the intervention services have ended).

(5) Evaluation plans will include all AFL care performance measures required by OAPP and additional outcome measures as appropriate. Applicants should propose using instruments in addition to the required AFL evaluation core instrument for care services that are relevant to the theory of change on which the intervention is based and the additional outcomes the applicant seeks to assess or evaluate. Information on the validity and reliability of the additional instruments must be provided, if available. If existing performance measures are not available and the applicant will be developing new measures, the applicant should outline the development process that will be used. If psychometric properties are not available at the time of the grant, these will be provided by the end of the grantees' third year. The proposed evaluation plan must include measures of program effects post-intervention and including two follow up periods that occur 12-months and 24-months after intervention which coincide with the index child's 1st birthday.

(6) Evaluation plans will have a randomized design that does not allow self-selection into the intervention or comparison groups of the project.

(a) Preference will be given to applications that randomize at the unit of assignment.

(b) If randomization is not possible, then a justification for a strong quasi-experimental design must be made. It is incumbent upon the grantee to monitor the intervention and comparison groups to ensure similar and comparability of the groups. It is anticipated that the grantee will also monitor participation rates and take steps as needed to ensure adequate sample size is achieved per the specifications of the power analysis.

(7) Evaluation plans should have an adequate sampling strategy and sample size estimation procedures. Adequate sampling strategy ensures that the sample selected is a reasonable approximation of the population. Sample size estimation involves a power analysis to determine an adequate sample size to detect statistically significant differences in outcomes between the intervention and comparison groups. The applicant's power analysis should reflect the most important characteristics of the evaluation design, the proposed hypotheses, and proposed statistical tests. A detailed sampling plan should

describe steps taken to increase the likelihood that participants in both the intervention and comparison groups are similar.

(8) Detailed plans for recruitment and retention will be required to ensure high levels of participation in all implementation and comparison groups' sites. The recruitment plan should also address site recruitment, informed consent and assent, retention strategies, steps to be taken to maintain adequate sample size and the use of incentives. Months 7 through 12 of the first year through to the 4th year of the grant will be an active recruitment period. Participants not consenting to participate in the evaluation will not be eligible for participation in the intervention, although they may still be eligible for services as usually provided by the applicant organization. Enrollment into the intervention should be completed by the middle of year 4 or the 42nd month to allow sufficient time for program participation and data collection. The data collection plan should also include a description of how active parental consent and participant assent will be obtained to participate in the evaluation. Evaluation plans will include evaluation training activities for program staff and procedures for the research assistant and other staff, if applicable.

(9) Evaluation plans will include a detailed data collection plan. A data collection schedule should correspond with program activities. It is expected that at least one research assistant will be budgeted as part of the program staff to handle data collection procedures. NOTE: Project staff members involved in delivering the intervention are not permitted to administer the data collection instruments. Proposed data collection procedures and methods for the intervention and comparison group participants must be identical. Post-intervention data collection will occur at 12 months following the birth of the index child. Follow up data collection will occur at twenty-four months following the birth of the index child. Participant data must be kept confidential, secure and detailed plans for maintaining confidentiality must be provided. The plans should describe the data management protocol, data security measures, thorough training of data collectors, and procedures proposed for minimal bias or non-response.

(10) Evaluation plans will include a detailed quantitative and qualitative data analysis plan, including a description of the proposed statistical approaches. It is recommended that applicants consult with a statistician. The data collection strategies and statistical approaches should be appropriate for the evaluation design. The analysis should describe methods for handling attrition, and missing data. Additional analyses may be proposed (e.g., subgroups, mediation, moderation) as appropriate to the evaluation design. Grantees will consult with a statistical expert throughout the life of the grant.

(11) Evaluation plans will address how threats to validity of the design (i.e., factors that permit alternative explanations of program outcomes) will be assessed and controlled (Shadish, Cook and Campbell, 2002).

(12) Evaluation plans will include a description of procedures for protecting human participants including the process for obtaining institutional review board (IRB) review and approval of the proposed program and evaluation plans. **A Federal-wide**

Assurance (FWA) must be included in the Appendices of the application. While it is advantageous to seek IRB approval prior to the time of award, it is not mandatory.

(13) The independent evaluator will demonstrate his/her ability to conduct the proposed evaluation (see Appendix B of this enclosure).

(14) Applications will include a plan to disseminate and publish findings. Preparation for publishing and dissemination should occur throughout the life of the grant, especially during the 4th and 5th years. OAPP must be acknowledged as a funding source in all disseminated materials from this AFL demonstration project, with copies of published papers forwarded to OAPP.

Appendix B

Identifying an Appropriate Evaluator

The Title XX Legislation requires that evaluations of AFL demonstration projects be conducted by an organization or entity independent of the grantee led by an independent evaluator who is affiliated with a college or university located in the applicant's State. The following are suggestions to consider when identifying a potential evaluator.

1. **Look for a doctoral level evaluator (Ph.D., Sc.D., Dr.PH., or equivalent).** Doctoral level evaluators usually receive extensive training in the design and conduct of comprehensive program evaluation. Three years of evaluation experience after completion of the doctoral level study is desirable.

2. **The evaluator should have experience successfully recruiting comparison groups and conducting randomized assignment studies for program evaluation.** If the evaluator has never conducted this type of evaluation, they may not be an appropriate choice to evaluate the AFL program. Recruiting and retaining a comparison group as part of the evaluation is a current requirement of AFL demonstration grant funding announcement.

3. **Ask the evaluator to provide a list of peer-reviewed publications they have authored.** A primary objective for AFL is dissemination of evaluation findings. The evaluator should have experience with interpretation of results and preparing manuscripts for publication.

4. **Seek out evaluators from experienced sources.** There are many resources for identifying strong, experienced evaluators. Here are a few suggestions:

   - ✓ Contact researchers who have published findings from evaluations about adolescent reproductive health programs in high quality professional journals, such as *American Journal of Public Health, Perspectives on Sexual and Reproductive Health* (formerly *Family Planning Perspectives), Journal of Adolescent Health, Prevention Science*, or *Journal of Research on Adolescence.*

   - ✓ Contact professional associations to advertise on their listservs for an evaluator. Suggested professional associations include: Society for Prevention Research, American Psychological Association, American Evaluation Association, Society for Research in Child Development, Society of Adolescent Medicine, or Association of Reproductive Health Professionals.

   - ✓ Use the National Institutes of Health (NIH) Web site to search for researchers who have been funded for prior grants to conduct program evaluation (by state, by year, by keyword search): http://crisp.cit.nih.gov/

   - ✓ Use the Substance Abuse and Mental Health Services Administration (SAMHSA) National Registry of Effective Prevention Programs (NREPP) Web site to search for researchers who have evaluated programs using rigorous evaluation designs:

http://www.modelprograms.samhsa.gov/template.cfm?page=nreppover

- ✓ For each program, references are listed that give citations about published evaluation data. Authors of these articles are experienced researchers who have used rigorous evaluation designs to evaluation programs similar to AFL demonstration projects.

- ✓ Review the HSRProj database of health services research in progress: http://wwwcf.nlm.nih.gov/hsr_project/home_proj.cfm

5. **Assess the extent to which a potential evaluator is willing to address the key evaluation topics identified in the RFA.** Make certain that the evaluator will be willing to make your questions and research design needs their priority for the evaluation.

6. **Discuss with the evaluator the anticipated time requirements, schedule and format for producing evaluation results**. Ensure that the evaluator you have identified personally will devote the time required rather than delegating substantive work to a research assistant or colleague. It will also be important to confirm the evaluator's willingness to accompany the program staff for designated trainings and to participate in regular program meetings.

7. **Ask the evaluator for references from program staff with whom they have collaborated.** Call the references to find out how the evaluation went, whether they enjoyed working with the evaluator, how much time and energy the evaluator devoted to the evaluation, whether evaluation activities occurred on time and were completed as planned, and whether the evaluation was similar in nature to the evaluation requirements of your AFL grant funding (process evaluation plus outcome evaluation involving a comparison group).

NOTE: Given the intensive nature of the expected evaluation, it is appropriate and advisable to include research assistants, a statistician and a technical writer on the evaluation team.

Appendix C

GUIDANCE ON Writing S.M.A.R.T OBJECTIVES

The Office of Adolescent Pregnancy Programs (OAPP) has three performance measures for AFL Care demonstration programs:

(1) Reduce the incidence of repeat pregnancies among AFL clients
(2) Increase AFL care demonstration client conformance with recommended infant immunization schedules
(3) Increase the educational attainment of AFL care demonstration project clients

All grantees will be responsible for reporting on the three program-wide performance measures by using the required AFL prevention core instrument. The applicant should include three S.M.A.R.T. program outcome objectives addressing these three performance measures. Please note, up to three additional programmatic outcome objectives can be proposed using additional data collection instruments. Applications that include measures of program effects at a 1-year follow-up (after the intervention) on sexual activity are preferred. All programmatic outcome objectives should be encompassed by an overarching program goal.

OAPP encourages applicants to develop and formulate a few, good outcome objectives or what the Public Management Institute terms S.M.A.R.T. objectives. The following is guidance on writing S.M.A.R.T. objectives contained in the application kit.

Good applications should contain a few outcome objectives that are specific, measurable, achievable, realistic and time-framed (S.M.A.R.T.).

Specific: An objective should specify one major result directly related to the program goal, state who is going to be doing what, to whom, by how much, and in what time-frame. It should specify what will be accomplished and how the accomplishment will be measured.

Measurable: An objective should describe in realistic terms the expected results and specify how they will be measured.

Achievable: The accomplishment specified in the objective should be achievable within the proposed time line and as a direct result of program activities.

Realistic: The objective should be realistic in nature. The specified outcomes, expected results, should be described in realistic terms.

Time-framed: An outcome objective should specify a target date or time for its accomplishments. It should state who is going to be doing what, by when, etc.[1]

Outcome Objectives

An outcome objective is a statement which defines a measurable result the project expects to accomplish.

[1] How to Get Grants. San Francisco, CA: The Public Management Institute, 1981.

In the health field, outcome objectives are important because they can facilitate monitoring of changes in behavior (e.g. improving parenting skills) in a given population over time. Therefore, outcome objectives should be described in terms that measure what results in behavior your project will bring about.

The following example specifies one major result per objective to be accomplished. State who is going to be doing what, when and how much it will be accomplished, and how you will measure it[2].

Example of outcome objectives from previous AFL applications:

1. By the end of Year 1, 75% of program participant's infants will be in compliance with infant immunization schedules.

Process Objectives

A good application should also include process objectives that correspond to the few outcome objectives listed. They may be described in list or narrative form in the time table, work plan, program narrative, or with the related outcome objective. Process objectives describe the activities and/or methods that must be implemented for your program to have the desired effect on clientele.

Outcome objectives relate to benefits, changes, and results. Process objectives will state the types of materials, programs or services to be provided in order to achieve desired outcomes[3].

Example of process objectives related to outcome objectives:

Process Objectives:

1) By the end of year 1, program staff will make a minimum of 200 home visits to program participants.

2) Program staff will make at least 100 referrals for program clients to receive additional services.

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[2]Proposal Writing Skills, HIV/AIDS Technical Assistance Paper, 1992. Published by: The United States Conference of Mayors, with support from the U.S. Department of Health and Human Services.

[3]Proposal Writing Skills, HIV/AIDS Technical Assistance Paper, 1992. Published by: The United States Conference of Mayors, with support from the U.S. Department of Health and Human Services.

Enclosure #4

CARE SERVICES MATRIX

Core and Supplemental Services
(10 Core + 6 Supplemental)

Applicants for care projects are required to provide, either directly or by referral, the following 10 Core Services:

(1) Pregnancy testing and maternity counseling;
(2) Adoption counseling and referral services which present adoption as an option for pregnant adolescents, including referral to licensed adoption agencies in the community if the eligible grant recipient is not a licensed adoption agency;
(3) Primary and preventive health services, including prenatal and postnatal care;
(4) Nutrition information and counseling;
(5) Referral for screening and treatment of STDs including HIV/AIDS;
(6) Referral to appropriate pediatric care;
(7) Educational services relating to family life and problems associated with adolescent premarital sexual relations including:
    (a) Information about adoption;
    (b) Education on the responsibilities of sexuality and parenting;
    (c) The development of material to support the role of parents as the providers of sex education; and
    (d) Assistance to parents, schools, youth agencies and health providers to educate adolescents and preadolescents concerning self-discipline and responsibility in human sexuality;
(8) Appropriate educational and vocational services;
(9) Mental health services and referral to mental health services and to other appropriate physical health services; and
(10) Counseling and referral for family planning services.

Applicants for care projects may provide any of the following Supplemental Services:

(1) Referral to licensed residential care or maternity home services;
(2) Child care sufficient to enable the adolescent parent to continue education or to enter into employment;
(3) Consumer education;
(4) Counseling for the immediate and extended family members of the eligible person;
(5) Transportation; and
(6) Outreach services to families of adolescents to discourage sexual relations among unemancipated minors.

Core Services Matrix

(Enclosure #4 - Continued)

USING THIS CHART: In order to demonstrate compliance, applicants are encouraged to use this suggested chart format to illustrate how all 10 required Core services and 6 Supplemental will be provided, and by whom if not applicant agency.

Required Core Service	Will this service be provided by a partner agency or by the applicant agency?	Name of the partner/referral agency
1. Pregnancy testing and maternity counseling		
2. Adoption counseling and referral services		
3. Primary and preventive health services		
4. Nutrition information and counseling		
5. Referral for screening and treatment of STDs		
6. Referral to appropriate pediatric care		
7. Educational services relating to family life		
8. Appropriate educational and vocational services		
9. Mental health services		
10. Counseling & referral for family planning services		
Supplemental Service	**Will this service be provided by a partner agency or by the applicant agency?**	**Name of the partner/referral agency**
1. Referral to licensed residential care or maternity home services		
2. Child care		
3. Consumer education		
4. Counseling for the immediate and extended family members of the eligible person		
5. Transportation		
6. Outreach services to families of adolescents to discourage sexual relations among unemancipated minors		

Enclosure #5

PROGRAM NARRATIVE

General Guidance for

Adolescent Family Life (AFL) Care Demonstration Applications

In addition to completing the required federal application forms, the Office of Adolescent Pregnancy Programs (OAPP) requests that applicants present the narrative portion of the application in the order listed below adhering to the suggested number of pages per each section as noted. The program narrative must be printed on 8 ½ by 11 inch white paper, with one inch margins, double-spaced, in an easily readable 12-point font. The program narrative should not be longer than 50 double-spaced pages (using one side of the page only), not including appendices and required forms. All pages must be numbered sequentially, including appendices, figures, and required forms. Do not staple or bind the application package. Use rubber bands or binder clips.

I One-page summary of the proposed demonstration project should include:

- A. A brief description of the multi-site model proposed including the integration of one of three OAPP specified enhanced models proposed for the intervention.
- B. An indication of whether it is a local or statewide project.
- C. What type of organization applying (school district, state agency, etc.)
- D. What geographic area is to be served (urban, rural, suburban).
- E. A brief description of target population to be served.
- F. A brief description of the program intervention.
- G. A brief description of the overall aims and project plan.

II Description of Applicant Organization (2-3 pages):

- A. Describe the decision-making authority and structure (e.g. relationship to the Board of Directors and organizational chart), its resources, experience, existing program units and/or those to be established if funding is obtained.
- B. Describe personnel, time and facilities for all proposed sites and outside resources or partners and describe detailed evidence of the organization's capacity to provide the timely and effective use of resources needed to implement the project, collect necessary data and conduct a through evaluation design, and evaluate it.
- C. Describe how the various sites and outside resources/partners chosen will be managed logistically and programmatically. It is recommended that the appendices include an organizational chart; a chart that details what partner agency is responsible for which activities; and a visual aid that describes the various implementation sites for both control and intervention groups selected.

III Need Statement (5-7 pages):

A. Describe the need for Care services in the proposed target area by describing the geographic area to be served.

B. Describe specifically how the enriched program model chosen to test in the intervention group will benefit the target population.

C. Provide estimates of the overall number of program participants and the numbers participating in each of the treatment and comparison groups of the proposed demonstration project.

D. Describe how many participants are expected to participate during the first and second year and break out the types of participants into categories (e.g. adolescents and parents, mentorings, family members), including the race and ethnicity of participants to be served.

E. Document the incidence of adolescent pregnancy, sexually transmitted diseases, the socio-economic conditions including income levels, existing gaps in services for pregnant adolescents, disparities, existing services and unmet needs in the proposed service area. If the proposed population has unique challenges and barriers, these should be addressed as well.

Estimates should be broken into two tables: one for the comparison group and one for the intervention group of the project. Please specify what year of the program the estimates are referring to.

IV Rationale (3-4 pages):

A. Describe the rationale for choosing the theoretically based, multi-site model plus the intervention component proposed and how this approach is based upon previous practice and review of the literature and /or evaluation findings.

B. Describe why this project needs to exist and be evaluated.

C. Describe previous multi-site and youth services experiences and how lessons learned from these experiences helped develop the rationale for the proposed demonstration model.

V Program Outcome Objectives (4 pages):

Describe a goal and 4-6 cascading outcome objectives that clearly state expected results or benefits of the demonstration project. Three of the outcome objectives must address the required AFL Care performance objectives. Objectives should be specific, measurable, achievable, realistic, and time-framed and be contained in the program logic model.

VI. Care Demonstration Model (10-15 pages):

Thoroughly describe proposed program intervention activities and services as they fit within the randomized multi-site model. This section should clearly relate to program objectives and should address intensity of services (dosage) and should directly tie to the program logic model. This section should:

A. Describe how each of the required ten core services and any supplemental services will be provided.

B. Describe the enriched model chosen as stipulated in the Request for Applications (RFA).

C. Describe a clear plan for recruitment and retention, outside resources, partner, and program participants.

D. Describe a clear plan for intervention group assignment procedures, coordination with other service providers, case management, and follow-up procedures.

E. Describe how issues of sexual exploitation and coercion will be addressed.

VII. Workplan and Timetable (1 page):

Provide a detailed work plan and timetable for the first year of the project. Within this plan include each program activity associated with the core services and enhanced care services intervention and comparison groups of the project and the proposed time frame for the start and completion of each activity. Please note, the first six months of the grant cycle may be used for planning and further development of the program model. A work plan for the first two years should be included in the appendices.

VIII. Documentation of Community Support and Commitment (2-3 pages):

Describe the support from other community agencies. **Please note:** Two or three letters of support should be included in the Appendices. Memorandums of Understanding from each participating site, partner, and outside resources (if applicable) should be included in the Appendices. The Memorandums should detail the exact level of involvement, responsibility and time/resource commitment.

IX. Continuation Funding (1 page):

Describe the plan regarding continuation of services at the termination of this federal funding opportunity. The OAPP cannot guarantee that funding will be available annually or at the end of the five-year grant cycle. Financial sustainability plans should be included in the appendices.

X. Evaluation Plan (20-30 pages):

Provide a clear and fully developed evaluation plan using the guidance provided in Enclosure #3 "Evaluation Guidance." This section should:

A. Describe the research objectives and hypotheses.

B. Describe the process evaluation.

C. Describe the outcome evaluation and evaluation design. Describe how the evaluation will assess the impacts/benefits/changes to both the intervention and comparison groups as a result of the program efforts. Outcome objectives should be described. If randomization is not possible, then a tightly woven justification for a strong quasi-experimental design must be made.

D. Address threats to validity of the design and how these will be assessed and controlled for.

E. Describe a detailed recruitment and retention plan.

F. Describe a detailed data collection plan. This should include specific data collection procedures for a research assistant and other staff.

G. Describe a detailed quantitative and qualitative data analysis plan that includes a description of the multi variate statistics proposed to assess program effects.

H. Describe evaluation training activities for program staff.

I. Describe the follow-up assessment at least one year after the intervention being tested.

J. Describe a plan to disseminate and publish findings.

K. Describe the process proposed for obtaining institutional review board (IRB) review and approval of the proposed program and evaluation.

APPENDICES TO NARRATIVE

A. Resumes for Project Director and detailed position descriptions (include key staff and positions for sites);

B. A program logic model that ties project objectives and intervention activities and services to expected results (samples provided in the application Kit, Enclosure #9);

C. Memorandums of Understanding from all participating sites

D. Two or three letters of support from other community agencies;

E. A Memorandum of Understanding with the independent evaluator affiliated with a college or university located in the applicant's State that includes willingness to participate and detailed agreed upon responsibilities and time allotted for those responsibilities;

F. A Curriculum Vitae of the independent evaluator;

G. Memorandums of Understanding from all outside resources and/or partners;

H. An organizational chart, program organization chart and map describing the multiple sites in each group of the project;

I. A copy of the applicant's Federalwide Assurance (FWA);

J. A protocol(s) for how unpaid staff (mentors/volunteers) will screened if applicable;

K. A detailed workplan for year 2 of the proposed project; and

L. Proof of non-profit status.

SPECIAL NOTE: Application packages should **not** include extraneous materials such as agency promotional brochures, slides, tapes, film clips, computer diskettes, etc. Only the items listed above should be included in the Appendices.

Enclosure #6

ADDITIONAL REQUIREMENTS

In addition to the requirements for the contents of an application, applicants for grants under the Title XX Adolescent Family Life demonstration grant program must meet the following requirements:

1. Requirements for Review of an Application by the Governor

   Section 2006(e) of Title XX of the Public Health Service Act requires that each applicant shall provide the Governor of the State in which services will be provided a copy of each application submitted to the Secretary for a grant for a demonstration project for services under this Title. The Governor has 60 days from the closing date in which to provide comments to the applicant.

   An applicant may comply with this requirement by submitting a copy of the application to the Governor of the State in which the applicant will provide services at the same time the application is submitted to OAPP. To inform the Governor's office of the reason for the submission, a copy of this notice should be attached to the application.

   The applicant must provide a copy of the comments or verification that there were no comments to:

   Office of Grants Management/Office of Public Health and Science (OPHS)
   Department of Health and Human Services (DHHS)
   c/o Grant Application Center
   1515 Wilson Blvd., Suite 100
   Arlington, VA 22209

2. Review Under Executive Order 12372

   Applications under this announcement are subject to the review requirements of Executive Order 12372 (Intergovernmental Review of Federal Programs) as implemented by 45 CFR Part 100 (Intergovernmental Review of DHHS Programs and Activities) which established a process for consulting with State and local elected officials on proposed Federal financial assistance. To obtain information regarding the State review process, applicants should contact the State Single Point of Contact (SPOC) for the state in which services will be provided. The application kit contains the most current listing of the State SPOCs.

   An applicant may comply with this requirement by submitting a copy of the application to the State SPOC in which the applicant will provide services at the same time the application is submitted to OAPP. To inform the State SPOC of the reason for the submission, a copy of this notice should be attached to the application.

The applicant is required to provide a copy of the comments or verification that there were no comments to:

Office of Grants Management/Office of Public Health and Science (OPHS)
Department of Health and Human Services (DHHS)
c/o Grant Application Center
1515 Wilson Blvd., Suite 100
Arlington, VA 22209

3. Additional Material

Private nonprofit agencies applying for a grant should include in the appendices a copy of their Articles of Incorporation (By-Laws) and Mission Statement.

4. OAPP Annual Grantee's Meeting

Applicants must include a line item amount for the project director and evaluator to attend an annual two-day workshop which is sponsored by the Office of Adolescent Pregnancy Programs (OAPP).

Enclosure # 7

TITLE XX PROGRAM ASSURANCES

If funded under Title XX, I provide assurance that:

1. the program will have an ongoing quality assurance program;

2. the program will, where appropriate, have a system for maintaining the confidentiality of patient records in accordance with regulations promulgated by the Secretary;

3. the program will demonstrate its financial responsibility by use of such accounting procedures and other requirements as may be prescribed by the Secretary;

4. the program will have a contractual or other arrangement with the agency of the State (in which the applicant provides services) that administers or supervises the administration of a State Plan approved under Title XIX of the Social Security Act for the payment of all or part of the applicant's costs in providing health services to persons who are eligible for medical assistance under such a State Plan, or will make every reasonable effort to enter into such an arrangement;

5. the program will make, and will continue to make, every reasonable effort to collect appropriate reimbursement for its costs in providing health services to persons who are entitled to benefits under Title V of the Social Security Act, to medical assistance under a State Plan approved under Title XIX of such Act, or to assistance for medical expenses under any other public assistance program or private health insurance program;

6. the program will make, and continue to make, every reasonable effort to collect appropriate reimbursement for its costs in providing services to persons entitled to services under Parts B and E of Title IV and Title XX of the Social Security Act;

7. the program will make, and will continue to make, every reasonable effort to secure from eligible persons payment for services in accordance with a schedule of fees established for the program;

8. the program will make, and continue to make, every reasonable effort to collect reimbursement for health or other services provided to persons who are entitled to have payment made on their behalf for such services under any Federal or other government program or private insurance program;

9. the program will make, and will continue to make, every reasonable effort to seek reimbursement on the basis of the full amount of fees for services without application of any discount;

10. the program will submit to the Secretary such reports as the Secretary may require to determine compliance with assurances 7-9;

11. the program will make maximum use of funds available under Title X of the Public Health Service Act;

12. the acceptance by any individual of family planning services or family planning information (including educational materials) provided through financial assistance under Title XX shall be voluntary and shall not be a prerequisite to eligibility for or receipt of any other services furnished by the program;

13. fees collected by the program for services rendered in accordance with Title XX shall be used by the program to further the purposes of Title XX;

14. the program, if providing both prevention and care services, will not exclude or discriminate against any adolescent who receives prevention services and subsequently requires care services as a pregnant adolescent;

15. subject to the exceptions set out below, the program will notify the parents or guardians of any unemancipated minor requesting services from the program and will obtain the permission of such parents or guardians with respect to the provision of such services; in the case of a pregnant unemancipated minor requesting services from the program, the program will notify the parents or guardians of such minor within a reasonable period of time;

Exceptions:

The program will not notify or request the permission of the parents or guardians of any unemancipated minor without the consent of the minor: (1) when the minor is solely requesting pregnancy testing or treatment for a sexually transmitted infection; (2) when the minor is the victim of incest involving a parent; (3) if an adult sibling of the minor or an adult aunt, uncle, or grandparent who is related to the minor by blood certifies to the grantee that notification of the parents or guardians of such minor would result in physical injury to such minor; and (4) with respect to the provision of services, the program will not require the permission of the parents or guardians of any pregnant unemancipated minor if such parents or guardians are attempting to compel such minor to have an abortion;

16. primary emphasis for services supported under Title XX shall be given to adolescents 17 years of age and under who are not able to obtain needed assistance through other means;

17. funds received under Title XX shall supplement and not supplant funds received from any other Federal, State or local program or any private sources of funds;

18. the program will conduct evaluations of the effectiveness of services supported under Title

XX in accordance with Section 2006(b) of Title XX of the Public Health Service Act;

19. the program will include the Adolescent Family Life (AFL) core evaluation instruments in its evaluation design. The instruments will be used in their entirety and in the manner approved by the Office of Management and Budget, including the requirement that the program obtain active consent from the AFL client to participate in the data collection, and clients under the age of 18 must have the active consent of a parent or legal guardian to participate in the data collection;

20. the program will comply with the statutory prohibitions on advocating, promoting, encouraging or providing abortions, or counseling or referral for abortions, or risk loss of funding, as stated in Section 2011 (a) of Title XX of the PHS Act; and

21. the program will not use funds received under Title XX for inherently religious activities, such as worship, religious instruction, and proselytization. If an organization engages in such activities, they must be offered separately in time or location from the program funded under Title XX of the Public Health Service Act and participation must be voluntary for program beneficiaries. A Title XX program, in providing services and outreach related to program services, cannot discriminate against current or prospective program beneficiaries on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to actively participate in a religious practice.

Acceptance is hereby indicated by the applicant of all assurances above.

_____ _____

Signature Date

_____

Title

Enclosure # 8

SAMPLE
Sliding Fee Scale

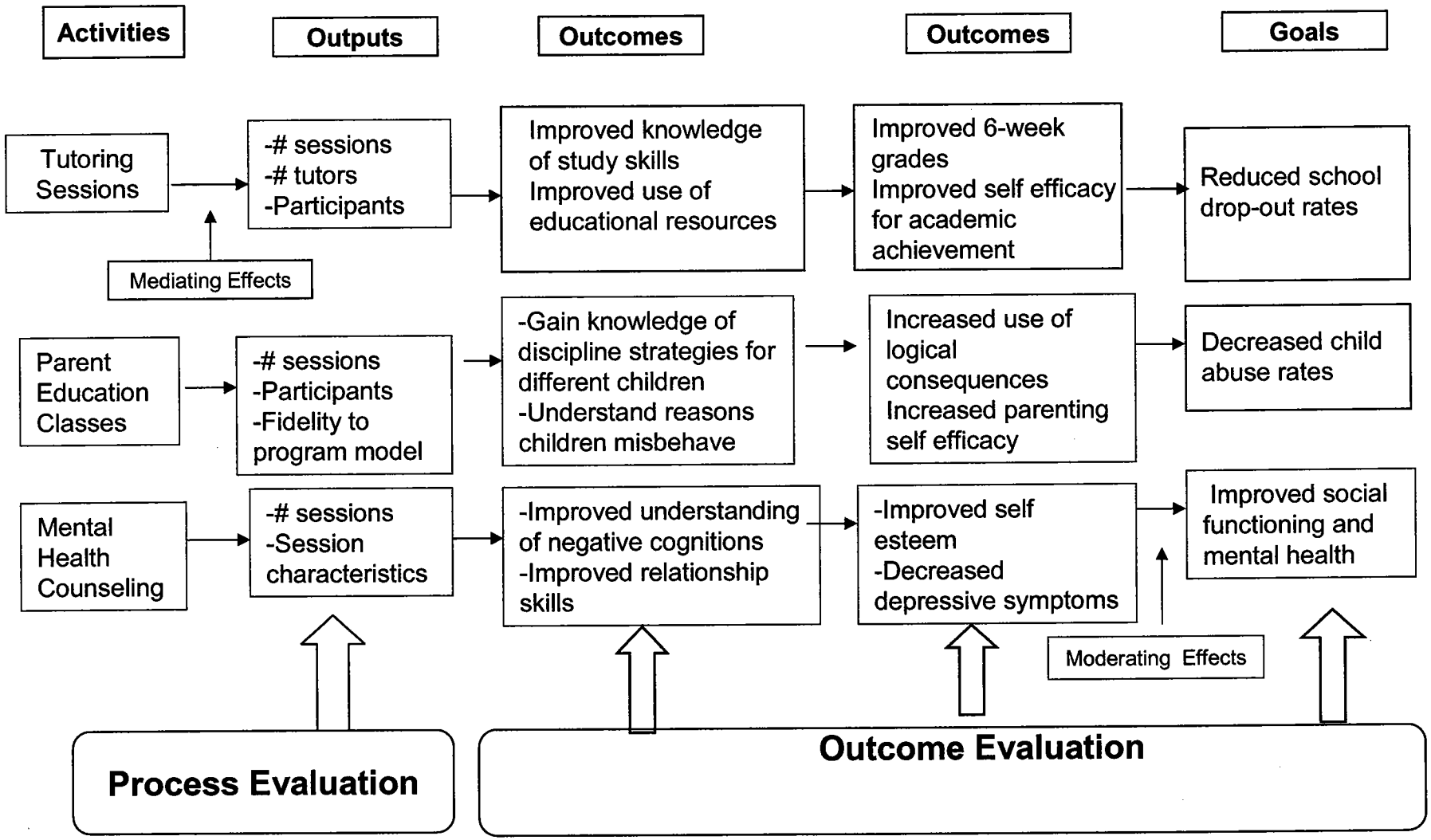
Number of Family Members

Gross Annual Income	2	3	4	5	6	7
under $15,000						
$15,000	$1					
$16,000	$5					
$17,000	$10	$1				
$18,000	$15	$5				
$19,000	$20	$10				
$20,000	$25	$15				
$21,000	$30	$20	$1			
$22,000	$35	$25	$5			
$23,000	$40	$30	$10			
$24,000	$45	$35	$15	$1		
$25,000	$50	$40	$20	$5		
$26,000	$55	$45	$25	$10		
$27,000	$60	$50	$30	$15	$1	
$28,000	$65	$55	$35	$20	$5	
$29,000	$70	$60	$40	$25	$10	
$30,000	$75	$65	$45	$30	$15	$1
over $30,000	$80	$70	$50	$35	$20	$5

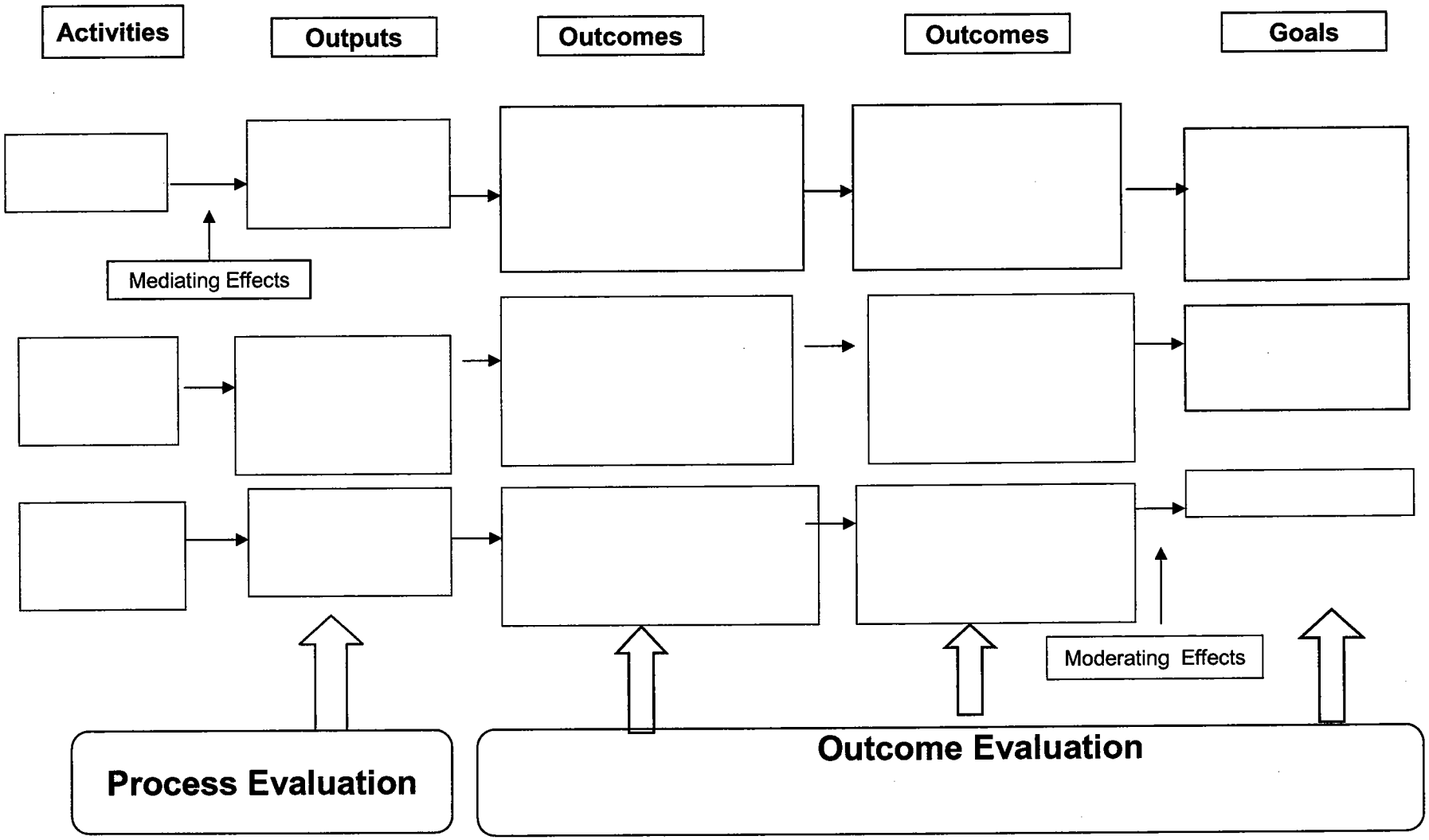
No one will be denied service due to the inability to pay.

Enclosure #9

Logic Model Example



Logic Model Example



Enclosure #10

APPLICATION CHECKLIST

The following items must be included in the Adolescent Family Life Demonstration grant application submitted to the Office of Adolescent Pregnancy Programs and may be packaged in the order suggested below. Please remember that the full original application must be signed by an agency official with the authority to commit the applicant organization to the terms and conditions of a grant, if a grant is awarded). **If submitting a hard copy application, include two (2) additional complete copies.**

ITEM	YES
Table of contents with identifying sections and numbered pages	
Material assembled in the following recommended order:	
Application forms	
Budget justification	
Explanation of the sources of required matching contributions	
Description of fee schedule and schedule of discounts (refer to Application Kit Enclosure #8)	
Title XX Assurances signed by the official who signs the application	
Disclosure of Lobbying Activities, if applicable	
Proof of eligibility to receive a grant (evidence of nonprofit status)	
Evidence of submission to the SPOC and to the Governor	
Narrative written in order suggested in Enclosure #5 (Program Narrative - General Guidance)	
Appendices	
Resumes for Project Director and detailed position descriptions (include key staff and positions for sites)	
A program logic model that ties project objectives and intervention activities and services to expected results (refer to Enclosure # 9)	
Memorandums of Understanding from all participating sites (both intervention and comparison sites)	

Two or three letters of support from other community agencies	
A Memorandum of Understanding with the independent evaluator affiliated with a college or university located in the applicant's State that includes willingness to participate and detailed agreed upon responsibilities and time allotted for those responsibilities	
A Curriculum Vitae of the independent evaluator	
Memorandums of Understanding from all outside resources and/or partners	
An organizational chart, program organization chart and map describing the multiple sites in each group of the project	
The Core & Supplemental Services Matrix completed (refer to Enclosure # 4)	
A copy of the applicant's Federalwide Assurance (FWA)	
A protocol(s) for how unpaid staff (mentors/volunteers) will screened if applicable	
A detailed workplan for year 2 of the proposed project	
Proof of non-profit status	

SPECIAL NOTE: Hard-copy application packages should **not** include extraneous materials such as agency promotional brochures, slides, tapes, film clips, computer diskettes, etc. It is not feasible to use such items in the review process, and they will be discarded if included. DO NOT staple or bind the application or use notebooks for packaging. Binder clips and rubber bands are acceptable.