

# **AFL Care Grantee Orientation Manual**

## **2010**



**Office of Adolescent Pregnancy Programs  
Office of Population Affairs  
Office of the Assistant Secretary for Health  
Department of Health and Human Services**



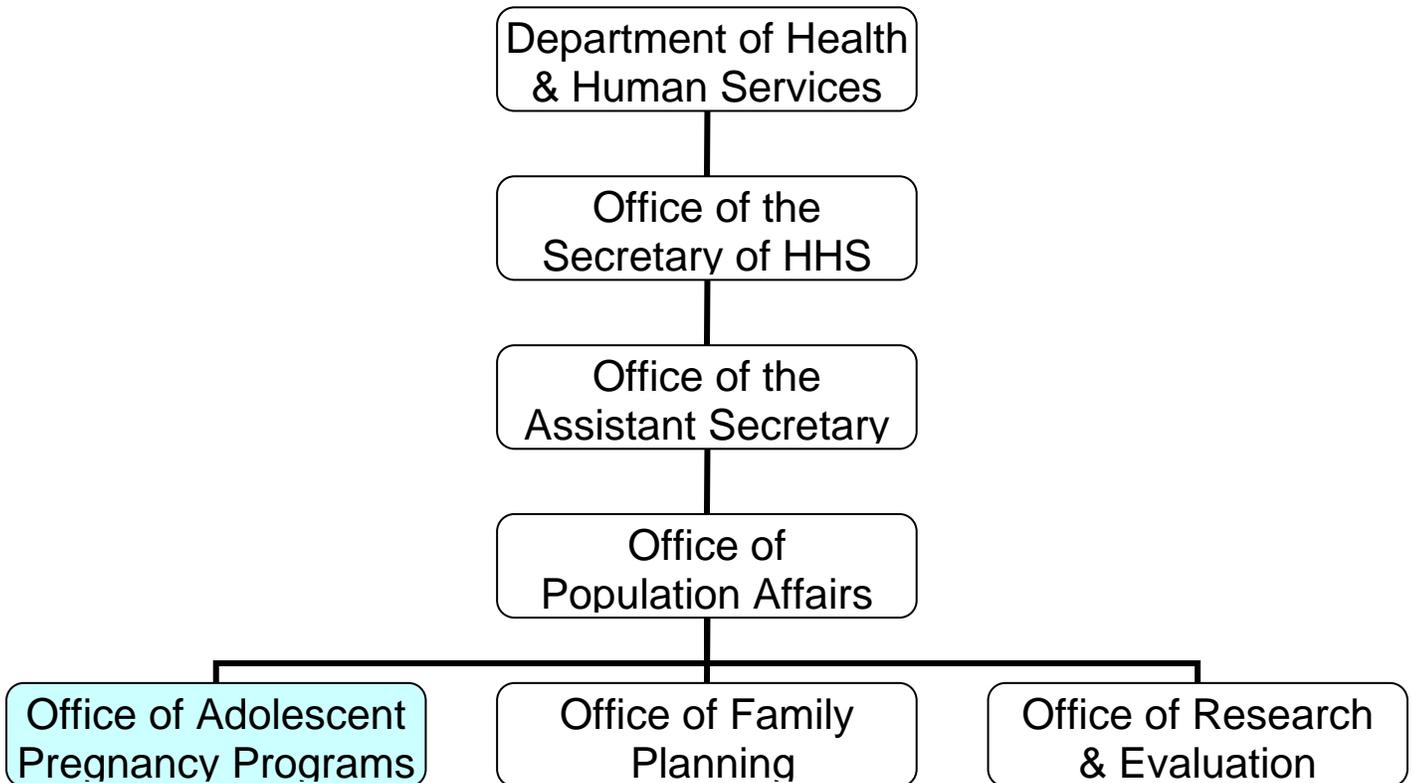


# 2010 AFL Care Grantee Orientation Manual

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## AFL Organizational Chart

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## OAPP Staff Contact List

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## I. OAPP Basics

### ◆ Grants Management

The role of the Grants Management Specialists, within the Office of Grants Management (OGM), is to assist you with all budgetary and financial issues. They are also the best people to help you figure out how to fill out the Financial Status Report (FSR) and how to navigate GrantSolutions and the other web-based finance applications the government requires you to use.



You should copy your OAPP Project Officer on all communications you have with your Grants Management Specialist so that she will be kept informed about your needs and can help advocate for you when necessary.

### Notice of Grant Award

The Notice of Grant Award (NGA) is the official contract between your agency and DHHS. You can access your NGA through your agency's profile on [www.GrantSolutions.gov](http://www.GrantSolutions.gov). The final page of the NGA provides you with the names and contact information for both your OAPP Project Officer and grants management specialist. Please make sure that your finance staff has this important information. The NGA also contains special conditions for each grantee. Please review the conditions and discuss them with your Project Officer as soon as possible.

### HHS Grants Policy Statement

The HHS Grants Policy Statement lists all of the terms and conditions you are bound to as a Federal grant recipient. It can be found here:

<http://dhhs.gov/asfr/ogapa/grantinformation/hhsqps107.pdf>



### Required Notification and Prior Approval

As an AFL Care Grantee, you are required to notify OAPP, OGM and your Grants Management Specialist of the following events:

- **Change in Project Director or Evaluator**

The recipient is required to notify the Project Officer and Grants Management Specialist in writing if the Project Director or Evaluator will withdraw from the project entirely, be absent from the project during any continuous period of 3 months or more, or reduce time devoted to the project by 25 percent or more from the level that was approved at the time of award (for example, a proposed change from 40 percent effort to 30 percent or less effort). OAPP must approve any alternate arrangement proposed by the recipient, including any replacement of the Project Director or Evaluator. A written request must be provided to your Project Officer 30 days before any change takes place providing justification for the change along with the proposed staff's CV or resumé.

- **Transfer of Funds**

Transfer of funds between line items that are equal to or greater than 25% of the entire grant award requires prior approval from your OAPP Project Officer and Grants Management Specialist.

## ◆ Site Visits and Reporting

### Site Visits



Site visits are an ideal opportunity for AFL grantees to showcase the implementation of their full program to their Project Officer. Six to nine months after the grant has been awarded, your Project Officer will conduct a one- to two-day site visit to assess your project's development. Site visits can also be conducted at later points over the life of the grant at OAPP's discretion. Within two weeks after the site visit, your Project Officer will compile an internal report and send you a letter containing any recommended improvements. OAPP is eager for your program to be a success. As such, please respond to all of the recommendations made by your Project Officer in writing.

### Reports

Currently, OAPP and OGM require reports from grantees twice per year:



#### 1. Non-Competing Continuation Application

**90 days BEFORE the budget period ends**, grantees will complete a **Continuation Application** for continued funding. While you have been awarded a five year grant, it is contingent upon the continued availability of funds. If a grantee is unable to satisfactorily fulfill the regular and special terms and conditions outlined in the Notice of Grant Award, OAPP has the discretion to discontinue funding for the upcoming year.

Along with the continuation application, grantees are required to submit an interim **progress report** to their Project Officer. The progress report must report on the following:

- progress on current objectives
- measurable (SMART) objectives for the next project year
- the estimated number of participants who will be served in the next project year
- a description of any unresolved problems
- a full description of any significant changes proposed for the next project year (if any)
- a full description of supplementary budget increase requests (if any)

The Continuation Application requirements can be found on our website at:

[http://www.hhs.gov/opa/familylife/eoy\\_reports/index.html](http://www.hhs.gov/opa/familylife/eoy_reports/index.html)

#### 2. End of Year Report

**90 days AFTER the budget period ends**, grantees are asked to submit a **Financial Status Report** and an **End of Year Report**. The End of Year Report is a thorough description of both the program and evaluation activities that occurred during the previous year of funding. This report is reviewed by your Project Officer and an evaluation consultant who will give you feedback on areas of the report that require clarification and provide tips on how to improve the report for the following year.

The End of Year Report template, enclosures, and instructions can be found on our website at:

[http://www.hhs.gov/opa/familylife/eoy\\_reports/index.html](http://www.hhs.gov/opa/familylife/eoy_reports/index.html)

#### **Note: Final Report**

At the end of project Year 5, use the same End of Year Report template to prepare your **Final Report** in which you will report the program's progress and evaluation findings covering both year 5 and the cumulative 5 years of the grant.

## ◆ OAPP Website and ListServ

### Website

Our website is a resource for you! OAPP's web address is:  
<http://www.hhs.gov/opa/familylife/>

You'll find important and useful information on the website, such as:

Helpful lessons learned by previous grantees  
<http://www.hhs.gov/opa/familylife/grantees/grantees.html>

Reporting Templates  
[http://www.hhs.gov/opa/familylife/eoy\\_reports/index.html](http://www.hhs.gov/opa/familylife/eoy_reports/index.html)

Core Evaluation Instruments  
[http://www.hhs.gov/opa/familylife/core\\_instruments/index.html](http://www.hhs.gov/opa/familylife/core_instruments/index.html)

Trainings and Technical Assistance Resources  
[http://www.hhs.gov/opa/familylife/tech\\_assistance/tech\\_assistance.html](http://www.hhs.gov/opa/familylife/tech_assistance/tech_assistance.html)  
 and Self-Directed E-Learning Modules  
[http://www.hhs.gov/opa/familylife/tech\\_assistance/etraining/](http://www.hhs.gov/opa/familylife/tech_assistance/etraining/)

Conference Announcements  
<http://www.hhs.gov/opa/familylife/annualconferences/index.html>



### AFL ListServ

OAPP has a ListServ for Care Grantees (afl-titlexx-care) and a separate ListServ for all project evaluators (afl-titlexx-eval). OAPP uses these ListServes to distribute important information to all grantees at once. Individual grantees can also use the ListServ to pose questions to the group, particularly if someone is experiencing difficulties.

It is imperative that both you, your evaluation team, and any other pertinent staff subscribe to the appropriate ListServ as soon as possible so that you don't miss any important announcements.

#### Steps for subscribing to the AFL ListServes

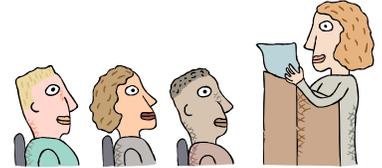
Project Directors	Evaluators
<ol style="list-style-type: none"> <li>1. Compose an email to <a href="mailto:listserv@list.nih.gov">listserv@list.nih.gov</a>. Leave the subject line blank.</li> <li>2. In the body of the email, type: <b>subscribe afl-titlexx-care your name (organization name, state)</b> <i>Example: subscribe afl-titlexx-care John Smith (Care First, MD)</i></li> <li>3. Send the email.</li> <li>4. NIH will then send you a message to confirm your address.</li> <li>5. Open the message and reply to it. This will confirm your address is correct.</li> </ol>	<ol style="list-style-type: none"> <li>1. Compose an email to <a href="mailto:listserv@list.nih.gov">listserv@list.nih.gov</a>. Leave the subject line blank.</li> <li>2. In the body of the email, type: <b>subscribe afl-titlexx-eval your name (organization name, state)</b> <i>Example: subscribe afl-titlexx-eval Jane Smith (First University, VA)</i></li> <li>3. Send the email.</li> <li>4. NIH will then send you a message to confirm your address.</li> <li>5. Open the message and reply to it. This will confirm your address is correct.</li> </ol>

## ◆ Trainings and Technical Assistance

OAPP is sensitive to the diverse needs of AFL Care project staff and the varying communities you serve. We are committed to providing the necessary training to fully equip staff with the information and skills needed to effectively serve the target youth and families.

### Annual Conference

All project directors and project evaluators are required to attend the OAPP Annual Conference and are expected to have set aside funds in their budget for travel costs. The purpose of the annual conference is: (1) to formally introduce grantees to Office of the Assistant Secretary for Health's initiatives and OAPP's policies; (2) to equip and enhance AFL grantees' knowledge, skills, and abilities in areas relevant to the needs of their target populations, program management and evaluation methodology, analysis and outcomes; and (3) to provide an opportunity for grantees to share their program and evaluation findings with others.



### Trainings



Information on all trainings can be found on the OAPP Technical Assistance website:

[http://www.hhs.gov/opa/familylife/tech\\_assistance/tech\\_assistance.html](http://www.hhs.gov/opa/familylife/tech_assistance/tech_assistance.html)

Throughout the year, OAPP is pleased to offer various face to face trainings, net conferences, and webinars to Care grantees and their staff. These opportunities keep grantees up-to-date with current adolescent health and research topics as well as with AFL program requirements.

#### ▪ **Net Conferences**

OAPP anticipates hosting a few net conference workshops and conference calls over the next budget year. The topics covered in these sessions will vary.

#### ▪ **E-Learning Modules**

OAPP offers self-directed trainings on a variety of topics to provide important training for AFL grantees. It is important that all AFL project staff receive training in important topics such as the Title XX policy and evaluation basics.

The e-modules can be found here: [http://www.hhs.gov/opa/familylife/tech\\_assistance/etraining/](http://www.hhs.gov/opa/familylife/tech_assistance/etraining/)

#### ▪ **Face-to-face trainings**

Because training and technical assistance is crucial to our mission, OAPP is pleased to offer 2 face-to-face workshops for AFL grantees over the next budget year. A draft calendar is being prepared outlining training topics. Please note that we consistently work towards improving the trainings we offer and as a result the calendar may change slightly. We will provide AFL grantees with as much lead time as possible in planning for the attendance at appropriate trainings.

Grantee agencies can send 2-3 staff per face-to-face workshop. AFL Project Directors will receive a notice from OAPP with information pertaining to the training topic(s), a preliminary outline (if available), the number of staff invited to attend, and registration information. It is imperative that you register for the training by the deadline listed on the flyer. If not, your staff may not be allowed to attend. Flyers are often sent out via the OAPP listserv; it is important that AFL directors, coordinators, and evaluators are registered on the AFL respective listserv.

### **Cost Sharing**

As was stated in the Funding Opportunity Announcement, grantees were expected to have set aside funds in their budgets to pay for travel and lodging costs for their staff to attend OAPP-sponsored workshops and trainings.

### **Training Attendance Policy**

OAPP encourages full participation of AFL project staff in the OAPP sponsored training workshops. It is important to note that when people leave early, the congruency and effectiveness of the training workshop is disrupted in many ways. OAPP encourages agencies to send appropriate staff to each training that is offered. If you have a question about whether or not you should send staff to a workshop, please contact your Project Officer directly.

OAPP expects that all AFL project staff who attend these workshops stay for the entire duration. We request that Project Directors convey this expectation to program staff prior to their attending the face-to-face training. Once on site at the training, any project staff person who is unable to attend for the full 1½ - 2 day workshop is asked to notify their Project Director and the designated OAPP technical assistance representative stating the reason for the early departure. Because complete staff attendance is so important to meeting OAPP's training objective, we want to avoid staff members leaving arbitrarily from a workshop. Project staff should not attempt to secure an earlier flight home without prior approval from the Project Director and OAPP. When participants schedule early flights home, it is disruptive and unfair to the rest of the group. Any person unable to comply with this policy should not attend an OAPP training.

### **Continuing Education Credits**

OAPP will offer continuing education units for the face-to-face workshops and e-learning modules this year. At this time, we are able to offer CEUs to Licensed Social Workers and Licensed Professional Counselors. Qualified participants wishing to receive a continuing education certificate must attend the entire training or complete the full module for credit.

## **Technical Assistance**

OAPP has two technical assistance contracts with John Snow, Inc. (JSI) and RTI International (RTI).



JSI provides general technical assistance to AFL grantees and is charged with coordinating the annual AFL conference and other OAPP trainings.

RTI is comprised of a team of evaluators who will provide evaluation technical assistance to grantees. RTI evaluators reviewed your original funding application and will work with you and your Project Officer to ensure that your evaluation design is as strong as possible. The ultimate goal is for all grantees to have sound findings that are publishable. In order to meet that goal, many of the special conditions in the NGAs pertain to improving evaluation issues as soon as possible. If you feel you require technical assistance, please send a request to your Project Officer and she will arrange for a consultation.



## II. AFL Research Policies

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### Human Subjects Research

All AFL demonstration projects are classified as non-exempt human subjects research under the HHS regulations for the protection of human subjects. Grantees should already hold a Federalwide Assurance (FWA) and have identified an Institutional Review Board (IRB) from whom they will seek approval for all demonstration project activities funded by this AFL grant award. Data collection, supported through AFL demonstration funding, cannot be conducted without FWA and IRB approval requirements being satisfied. The Office of Human Research Protection's (OHRP) frequently asked questions on the assurance process and IRB registration process can be found at <http://www.hhs.gov/ohrp/faq.html>.

### Federalwide Assurance of Compliance

An institution engaged in HHS-conducted or -supported human subjects research that is not exempt, must commit itself in writing to the protection of research participants. This written commitment is called an Assurance of Compliance. OHRP must approve the institution's assurance before non-exempt human subjects research can begin. The Federalwide Assurance (FWA) is the only type of assurance currently approved by OHRP.

HHS regulations found in 45 CFR.103(a) require that each institution engaged in non-exempt human subjects research (i.e., nearly all AFL demonstration projects) provide OHRP with a satisfactory assurance to comply with the regulations. In general, an institution becomes "engaged" in a particular non-exempt human subjects research project when its employees or agents for the purposes of the research project obtain: (1) data about the participants in the research through intervention or interaction with them; or (2) individually identifiable private information about the participants in the research.

Obtaining an approved FWA from OHRP is a two step process. First, the grantee must either have an IRB or establish a collaborative agreement with an IRB and then complete the Assurance application. Before an IRB may be designated on an institution's FWA, the IRB must be registered with OHRP. Step-by-step instructions for filing an FWA can be found on the OHRP Web site at: <http://www.hhs.gov/ohrp/humansubjects/assurance/filasuri.htm>. Many institutions already have an FWA. To see if your organization has an assurance, visit <http://ohrp.cit.nih.gov/search/asearch.asp#ASUR>. When an FWA-holding institution designates on its FWA and IRB that is external to that FWA institution, an IRB authorization agreement must be executed between the FWA institution and the institution or organization operating the external IRB. OHRP provides an example of an IRB Authorization Agreement at: <http://www.hhs.gov/ohrp/humansubjects/assurance/iprotsup.rtf>. OHRP on-line training modules for the Assurance process can be found at: <http://ohrp-ed.od.nih.gov/CBTs/Assurance/login.asp>.

### Institutional Review Board Approval

The Institutional Review Board (IRB) is a committee established to protect the rights and welfare of research participants involved in research activities. The responsibility for the protection of human subjects does not rest solely with the IRB. It is a shared responsibility between the Institutional Official, the IRB and the investigator. IRB approval should be obtained for all of the non-exempt human subjects research activities under the AFL grant award, including, as appropriate, the prevention program activities and the evaluation activities to be implemented under the award.

AFL grantees must receive IRB review and approval of the AFL project **prior** to implementing both their program and evaluation activities. **A copy of the initial IRB research approval as well as a copy of the annual renewal must be submitted to your Project Officer.**

## Research Misconduct Assurance

The Office of Research Integrity's (ORI) Assurance and Compliance Program is responsible for monitoring institutional compliance with the Public Health Service (PHS) Policies on Research Misconduct ([42 C.F.R. 93](#)).

An institution is eligible for PHS funding when it has an assurance on file with ORI stating that it has developed and will comply with an administrative process for responding to allegations of research misconduct in PHS-supported research that complies with the PHS regulation cited above. An institution establishes an assurance when an official signs the face-page (SF 424 (R&R) or PHS 398) of the grant application form or when the institution files a separate assurance form. Once established, institutions maintain their assurance by **filing the Annual Report on Possible Research Misconduct (between January 1 and March 1 each year)**, submitting their policy for responding to allegations of research misconduct for review when requested by ORI, revising their policy when requested by ORI to bring the policy into compliance with the PHS regulation, and complying with the PHS regulation.

The Compliance Review Program ensures that institutions comply with their policy and the PHS regulation in responding to allegations of research misconduct, monitors the implementation of PHS administrative actions by institutions and PHS agencies, and responds to retaliation complaints from whistleblowers.

For more information on the assurance program see <http://ori.hhs.gov/assurance/>. A sample provision for institutional policies and procedures on research misconduct that meet the minimum requirements of 42 CFR Part 93 can be found at <http://ori.hhs.gov/policies/Requirements-Reg-6-05.shtml>.

Assurance program inquiries should be sent to [Robin.Parker@hhs.gov](mailto:Robin.Parker@hhs.gov). Phone: 240-453-8400.

## Confidentiality Protections

OAPP strongly encourages grantees to obtain, as appropriate, another important document called a Certificate of Confidentiality. This is also issued by the U.S. Department of Health and Human Services (HHS) under Section 301 (d) of the Public Health Service Act (42 USC 241(d)). Certificates can be used for biomedical, behavioral, clinical or other types of research that is sensitive and where disclosure of identifying information could have adverse consequences for participants or damage their financial standing, employability, insurability, or reputation. Examples of sensitive research include:

- Collecting information on psychological well-being of participants;
- Collecting information on participants' sexual attitudes, preferences or practices;
- Collecting data on substance abuse or other illegal risk behaviors;

These certificates are intended to protect researchers from compelled disclosure of the identities of research participants. Certificates help minimize risks to participants by adding an additional level of protection for maintaining confidentiality of private information.

Certificates of Confidentiality are issued by the National Institutes of Health (NIH) and other HHS agencies. Any research project that collects personally identifiable, sensitive information and has been approved by an IRB is eligible for a Certificate. Researchers may not represent the Certificate as an endorsement of the research project by HHS or use it in a coercive manner when recruiting participants. The NIH Certificate of Confidentiality Kiosk is a good source of useful information. The Kiosk Web site is <http://grants.nih.gov/grants/policy/coc/>. Additional background information about Certificates of Confidentiality can be found at: <http://grants.nih.gov/grants/policy/coc/background.htm>. You can obtain a certificate here: <http://www.nichd.nih.gov/health/clinicalresearch/cccert/default.aspx>

## Parental Permission for Teen’s Participation (Parental Consent)

The Title XX statute requires that AFL projects obtain parental permission for unemancipated minors to participate in the program. An “unemancipated minor” is a “minor who is subject to the control, authority, and supervision of his or her parents or guardians, as determined under State law” (PHS Act § 2002(a) (10))<sup>1,2</sup> Some State laws emancipate minors (treat them as legal adults) for certain purposes (e.g., consenting to specific health care services).<sup>2</sup> Parental permission is necessary because the AFL project provides a wide range of services other than only medical services.

OAPP views “partial emancipation” statutes – that is, State statutes which emancipate minors only for certain purposes – as insufficient for purposes of Title XX’s emancipation language since Title XX projects provide a range of services that go far beyond the above described examples. For example, Title XX care projects provide adoption counseling and referral, referral to residential care or maternity homes, child care and consumer education. Minors would not be considered “emancipated” for the purpose of consenting to these services under applicable State “partial emancipation” statutes. OAPP policy is to consistently require AFL projects to obtain parental permission for minors who are only “partially emancipated” under State law. Examples of State “partial emancipation” statutes include statutes which authorize a pregnant or parenting minor to consent to mental health treatment, or which authorize a minor to consent to medical services relating to the diagnosis or treatment of infectious, contagious or communicable diseases, rape, sexual assault, or a drug or alcohol related problem. Note that all of the examples of State statutes emancipate minors only to consent to specific health care or mental health services.

As all programs are required to use the AFL Care or Prevention Core instrument, parental permission must be obtained for the instrument. The Office of Management and Budget (OMB) requires that Title XX projects using the AFL Care Core Instrument (OMB No. 0990-0291) obtain and document parental permission when using these specific forms with unemancipated minors. All AFL staff should be aware of and compliant with this policy.

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## Summary

We appreciate your hard work and effort to deliver quality services and conduct rigorous evaluations. Implementing these requirements will ensure that high quality evaluation procedures are followed and that all participants participating in the AFL projects are protected.

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<sup>1</sup> Although the term “parental” permission is used in this memo, Title XX provides that permission may be obtained from an unemancipated minor’s parent or guardian.

<sup>2</sup> Minors who are deemed emancipated under State Law (e.g., based upon marriage, entry into the military service, or pursuant to a court declaration) who are no longer subject to the control of their parents or guardians, need not obtain parental permission for the Title XX services.

### III. OAPP Policies

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#### Curricula Review Policy

A condition in the Notice of Grant Award requires AFL grantees to submit curricula and educational materials, or any printed material proposed for development or use within the AFL project, to OAPP for review and approval **prior** to use in the project. Grantees are encouraged to submit their materials immediately upon funding as it can take up to 6 weeks for materials to be reviewed.

AFL grantees should carefully review and familiarize themselves with all curricula prior to considering them for use within your project. The OAPP review process ensures educational materials used in the AFL project are medically and scientifically accurate, consistent with Title XX policies on religion, and in compliance with the statutory prohibition against advocating, promoting, encouraging or providing abortions. Please be aware that AFL grantees are prohibited from using AFL funds for inherently religious activities, such as worship, religious instruction, and proselytization in an AFL project.

#### Curricula Review Process

- 1) Email a **list** of the materials you intend to use to your Project Officer and copy the Medical Education Specialist, Dr. Jo Anne Jensen (joanne.jensen@hhs.gov). Be sure to **include each material's title, edition, and copyright date**. The list will be checked to see if any of the proposed materials have been previously reviewed and approved.
- 2) If the material has not received previous approval (i.e., been reviewed and approved by OAPP before), you will be asked to send the material(s) to your Project Officer.
- 3) You will receive correspondence from your AFL Project Officer indicating whether the reviewed materials are approved as is, modifications are needed, or disapproved for use in your AFL project.

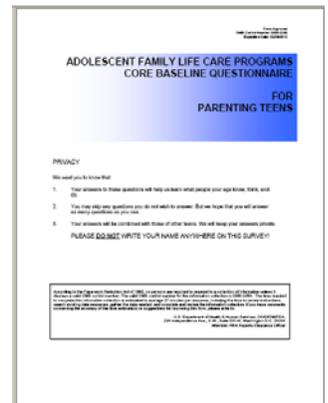
#### Use of the AFL Core Instruments

AFL Care Grantees are required to use the AFL Care Core Evaluation Instruments in their data collection efforts. The approved English and Spanish versions of the baseline and follow-up instruments can be found on the OAPP website at:

[http://www.hhs.gov/opa/familylife/core\\_instruments/index.html](http://www.hhs.gov/opa/familylife/core_instruments/index.html).

The AFL Care Core Evaluation Instruments were developed for use by AFL demonstration projects and are designed to reflect Title XX legislative requirements. Most questions have been drawn from large surveys, giving evaluators the ability to compare their data to national data.

The instruments are intended to serve as core only and should not be the sole data collection tool used in the project. Grantees should use additional instruments in their evaluation designs to measure any unique aspects of their demonstration projects that are not covered by the core instruments. The instruments have been revised and approved for use through the Office of Management and Budget (OMB).



## IV. OAPP's Expectations

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### Keep in touch!

#### Communicating with Your Project Officer

OAPP believes in fostering active collaboration to solve problems, make decisions, and achieve common goals amongst staff and grantees. We are committed to being proactive in communication with our grantees, the field, and the public. Accessibility and capacity building are at the heart of what we do.



To this end, we strongly encourage all grantees to schedule monthly conference calls with their Project Officer so that the lines of communication are sustained and OAPP can respond to your needs in a timely manner.

#### Quarterly Calls

OAPP also hosts mandatory conference calls once per quarter for all grantees as another way to maintain open lines of communication. The dates of this year's quarterly calls are:



**Monday, September 27, 2010 2:00pm ET**  
**Monday, January 31, 2011 2:00pm ET**  
**Tuesday, May 3, 2011 2:00pm ET**

### Dissemination

OAPP is committed to contributing to the field of adolescent health by supporting the dissemination of relevant and innovative findings from its grantees' 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. Dissemination is a major goal of the AFL program.



As is noted in the special conditions listed in the Notice of Grant Award, dissemination should begin taking place in the first year. **Four to five papers should be submitted for publication throughout the life of the grant.** Project findings should also be disseminated through conference presentations and other publishing mechanisms. Please keep your project officer apprised of all of your dissemination activities.

OAPP must be acknowledged as a funding source in all disseminated materials from these demonstration projects. Please use the sample acknowledgement language below:

*This publication was made possible by Grant Number APH PA 00111-01 from the U.S. Department of Health and Human Services. The statements and opinions expressed are solely the responsibility of the authors and do not necessarily represent the official views of the Department.*

Another way this could read: *The project described was supported by Grant Number APH PA 00111-01 from the U.S. Department of Health and Human Services. The statements and opinions expressed are solely the responsibility of NAME OF YOUR PROGRAM and do not necessarily represent the official views of the Department.*

## **V. AFL Demonstration Project Timeline**

Please use the following Project Timeline as a guide to direct the progress of your program and its evaluation over the life of the grant. Your Project Officer will also refer to the milestones on this timeline as she monitors your progress.

### **Project Year One**

#### **Months 1 - 3**

- Review Notice of Grant Award and address any special conditions that have due dates within 60 days of the NGA;
- Sign up for the AFL listserv;
- Put the AFL annual conference on the schedule for the project director and evaluator;
- Develop a relationship with a registered Institutional Review Board and obtain an IRB Authorization Agreement stating that they will be the designated IRB for your organization.
- Develop your organization's written policies regarding organizational misconduct. More information on this can be found here: [http://ori.hhs.gov/policies/ori\\_policies.shtml](http://ori.hhs.gov/policies/ori_policies.shtml).
- Submit IRB review and approval notification to your Project Officer
- Review End of Year reporting webinar so you understand what the reporting requirements are for AFL projects;
- Hire project staff;
- Train project staff on curricula, AFL policies including abortion, religion and medical accuracy, human subjects protections, research integrity, abuse and neglect issues, including sexual exploitation, ten core services;
- Submit all educational materials to the OAPP Medical Education Specialist for review and approval\*; Allow a minimum of 6 weeks turn around time for educational materials; Obtain and retain letters of approval (at grantee site) for curricula and educational materials; Make any modifications necessary for curricula and educational materials and submit changes to the OAPP Medical Education Specialist. A note will be put in the grantee's official file stating the modifications were made and the materials are approved with the modifications;
- If creating an educational curriculum, submit the draft curriculum and ongoing changes to the OAPP Medical Education Specialist;
- Develop and finalize parental consent forms and protocols;
- Develop and finalize protocol manuals for project implementation and evaluation;
- Re-confirm MOAs with project partners and collaborators;
- Establish and test evaluation data collection method for collecting client service hour data, and train staff. This information will be sent to the OAPP for efficiency measure;
- Secure/solidify comparison group including obtaining a memorandum of agreement (MOAs) with the agency;

#### **The Project Director should work directly with the Evaluator to:**

- Review MOA with the project evaluator, detailing responsibilities with due dates;
- Provide project staff evaluation training on project evaluation design and strategies specific to the project;
- Review and solidify three to five SMART Objectives relevant to program and evaluation design.
- If creating new data collection instruments, begin pilot testing for validity and reliability;
- Finalize data collection instruments; and
- Submit demonstration project to the local internal review board (IRB).

#### **Months 3 - 6**

- Arrange scheduling of project implementation with collaborator(s);
- Plan for recruiting participants for intervention and comparison groups;
- Obtain parental consent;
- Implement program (piloting);

- Finalize all data collection and management procedures and instruments

### **Year 1 / Months 6 - 12**

- Begin to recruit participants for intervention and comparison groups;
- Obtain parental consent;
- Administer data collection instruments to participants and comparison group;
- Implement program (piloting);
- Project evaluator conducts observation of program implementation
- If creating an educational curriculum, pilot curriculum assessing for age appropriateness, cultural responsiveness, understandability;
- If an educational curriculum was created submit final product for review and approval to the OAPP Medical Education Specialist;
- Assess recruitment and retention strategies used for participants in the intervention and comparison sites and strengthen as needed;
- Discuss with Project Officer current and future Technical Assistance needs for staff and send staff to TA workshops;
- Coordinate a site visit with your Project Officer;
- Submit continuation application for Year Two (typically due in the Spring);
- Document the implementation process for the evaluation; and

**The Project Director should work directly with the Evaluator to ensure that the following occur:**

- Evaluator observes implementation of the project.
- Evaluator provides feedback of the project evaluation to project director and staff – discuss possible corrections for the upcoming year.
- A manuscript is developed describing the program’s design and behavioral theory and/or the results of piloting.

## **Project Year Two**

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### **Months 1 - 6**

- Review approved educational materials. Submit any new or additional educational materials to the OAPP Medical Education Specialist for review and approval; obtain letter of approval and retain at the grantee site;
- Renew MOA with intervention and comparison sites;
- Submit IRB review and approval notification to your Project Officer;
- Provide any needed training to project staff;
- Update project implementation or evaluation protocol manuals as needed;
- Recruit participants for intervention and comparison groups;
- Obtain parental consent;
- Administer data collection instruments to participants and comparison group;
- Fully implement program;
- Begin collecting client service hours data for OAPP Efficiency Measure;
- Assess recruitment and retention strategies used for participants in the intervention and comparison sites and strengthen as necessary;
- Review and begin evaluation data collection method for collecting client service hour data, and train staff, as needed. This information will be sent to OAPP for efficiency measure. See End of Year Report Enclosures B and C.
- Prepare and submit your End of the Year Report and the Financial Status Report (3 months after the end of the budget period);

**The Project Director should work directly with the Evaluator to:**

- Renew MOA with evaluator;
- Renew demonstration project with the local IRB;
- Review new and existing evaluation protocols with project staff;

- Revisit logic model and program and evaluation designs (especially if new curricula materials or other changes are proposed);
- Revisit SMART Objectives to ensure they are still valid and accurate;
- Begin plan for future financial sustainability of project; and
- Prepare process evaluation and data analysis of Year One, if applicable (due 3 months after the end of the project's budget period). For the first year, the evaluation portion of the End of the Year Report should include a sound process evaluation.
- Begin submitting conference abstracts and drafting potential publications

#### **Year 2 / Months 6 - 12**

- Continue to: Recruit participants; Obtain parental consent; Administer pre and post data collection instruments to participants and comparison group; Implement program; Assess and strengthen recruitment and retention strategies; and Train new staff as needed on program practices and AFL policies;
- Discuss with Project Officer current and future Technical Assistance needs for staff and sending staff to TA workshops;
- Begin planning for future financial sustainability of project;
- Submit SNAP continuation application for Year Three (typically due in the Spring);

**The Project Director should work directly with the Evaluator to ensure that the following occur:**

- Evaluator provides feedback of the project evaluation to project director and staff – discuss any corrections for the upcoming year;
- Evaluator documents changes in implementation process for the evaluation report; and
- Continue manuscript development and presentation and publication efforts.

### **Project Year Three**

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- Submit IRB review and approval notification to your Project Officer;
- Submit any new or additional educational materials to the OAPP Medical Education Specialist for review and approval; obtain letter of approval and retain at the grantee site; Changes or additions to educational materials at this point will need rationale;
- Renew MOA with intervention and comparison sites;
- Update project implementation or evaluation protocol manuals, as needed;
- Continue to: Recruit participants; Obtain parental consent; Administer pre and post data collection instruments to participants and comparison group; Implement program; Assess and strengthen recruitment and retention strategies; and Train new staff as needed on program practices and AFL policies;
- Review and begin evaluation data collection method for collecting client service hour data, and train staff, as needed. This information will be sent to OAPP for efficiency measure. See End of Year Report Enclosures B and C.
- Prepare and submit the Year 1 End of the Year Report and the Financial Status Report (due 3 months after the budget ends);
- Discuss with Project Officer current and future Technical Assistance needs for staff and sending staff to TA workshops;
- Plan for future financial sustainability of project- outline local and national opportunities;
- Submit SNAP continuation application for Year Four (typically due in the Spring);

**The Project Director should work directly with the Evaluator to ensure that the following occur:**

- Renew MOA with evaluator;
- Renew demonstration project with the local IRB;
- Evaluator observes full project implementation.
- Evaluator provides feedback of the project evaluation to project director and staff – discuss any corrections for the upcoming year;

- Prepare Year 2 End of Year Report by analyzing available data (due 3 months after the end of the project's budget period). For the second year, the evaluation section of the End of the Year Report should include the process evaluation and a description of implementation and fidelity;
- Revisit logic model and evaluation design;
- Review new and existing evaluation protocols with project staff; and
- Discuss with evaluator results to date. Review abstracts and manuscript drafts to see if changes need to be made based on process data.

## **Project Year Four**

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- Submit IRB review and approval notification to your Project Officer
- Submit any new or additional educational materials to the OAPP Medical Education Specialist for review and approval; Obtain letter of approval and retain at the grantee site; Changes or additions to educational materials at this point will need rationale;
- Renew MOA with intervention and comparison sites.
- Update project implementation or evaluation protocol manuals, as needed;
- Participant recruitment should be wrapping up; no new baselines should be entered into the evaluation
- Continue to: Administer post data collection instruments to participants and comparison group; Implement program; Assess recruitment and retention strategies; and Train new staff as needed on program practices and AFL policies;
- Review and begin evaluation data collection method for collecting client service hour data, and train staff, as needed. This information will be sent to OAPP for efficiency measure.
- Prepare and submit Year 3 End of the Year Report and the Financial Status Report (due 3 months after the end of the budget period);
- Discuss with Project Officer future Technical Assistance needs for staff and plan for sending staff to TA workshops;
- Plan for future financial sustainability of project- pursue local and national opportunities;
- Submit SNAP continuation application for Year Five (typically due in the Spring);

### **The Project Director should work directly with the Evaluator to ensure that the following occur:**

- Renew MOA with evaluator;
- Renew demonstration project with the local IRB;
- Evaluator observes full project implementation.
- Evaluator provides feedback of the project evaluation to project director and staff – discuss any corrections for the upcoming year;
- Evaluator documents changes in implementation process for the evaluation report;
- Prepare process and outcome evaluation of Year 3 data using more advanced data analysis tests (due 3 months after the end of the project's budget period). For the third year, the evaluation End of the Year Report is comprised of the process evaluation, implementation and data analysis for initial outcomes;
- Review new and existing evaluation protocols with project staff;
- Discuss with evaluator results to date and avenues for dissemination of findings; and
- Develop manuscript for publication and execute other avenues for disseminating program implementation and evaluation findings.

## Project Year Five

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- Submit IRB review and approval notification to your Project Officer;
- Do not submit any new educational materials to the OAPP Medical Education Specialist for review and approval;
- Renew MOA with intervention and comparison sites;
- Review new and existing evaluation protocols with pertinent staff;
- Update project implementation or evaluation protocol manuals, as needed;
- Wrap up data collection activities; perform all necessary follow-ups
- Review evaluation data collection method for collecting client service hour data, and train staff, as needed. This information will be sent to OAPP for efficiency measure.
- Prepare and submit the Year 4 End of the Year Report and the Financial Status Report (3 months after the grant budget ends);
- Secure future financial sustainability of project;

**The Project Director should work directly with the Evaluator to ensure that the following occur:**

- Renew MOA with evaluator;
- Evaluator provides feedback of the project evaluation to project director and staff – results to date and disseminate project components and evaluation findings;
- Prepare process and outcome evaluation of Year Four data using advanced data analysis techniques (due 3 months after the end of the project's budget period). For the fourth year, the evaluation End of the Year Report is comprised of the process evaluation, implementation and outcome evaluation; and
- Renew demonstration project with the local IRB.
- Revisit dissemination plan
- Final data set should be analyzed and manuscripts and presentations prepared.

**Final Months of the Project**

- Submit the project's Final Report (due 3 months after the end of the budget period.) The fifth year/final evaluation End of the Year Report should report on Year 5 progress as well as the entire life of the grant. The evaluation section should contain the process evaluation, describe implementation and fidelity and report all outcome evaluation results using advanced analytical techniques; and
- Submit manuscript(s) for publication and dissemination.
- Notify OAPP of all dissemination activities.