TPP Tier 2B FOA TA Webinar
Moderator: Amy Margolis
January 29, 2015
2:00 pm CT

Coordinator: Welcome and thank you for standing by. At this time all participants are in a listen-only mode. This conference is being recorded. If you have any objections you may disconnect.

Now I would like to turn the meeting over to Ms. Tara Rice.

Tara Rice: Hello and welcome to our Technical Assistance Webinar for the Rigorous Evaluation of New or Innovative Approaches to Prevent Teen Pregnancy, or TPP Tier 2B Funding Announcement.

My name is Tara Rice. I'm a public health advisor with the Office of Adolescent Health or OAH for short.

The purpose of today's call is to review the rigorous evaluation of new or innovative approaches to prevent teen pregnancy, Tier 2B Funding Opportunity Announcement, including the purpose, the eligibility requirements and how to apply for funds.

Please note that we will not be answering questions specific to individual applications on today's Webinar.

On today's call Evelyn Kappeler, the Director of the Office of Adolescent Health will provide us with an overview of the Office of Adolescent Health.

Amy Margolis, Division Director at OAH will provide an overview of the Teen Pregnancy Prevention Program.

I will cover an overview of the TPP Tier 2B Funding Announcement. I will be joined by my colleague JoAnne Jenson who will - and we'll cover grantee expectations. Joanne Jenson will then cover application content.

Roscoe Brunson from the Office of Grants Management will cover application submission instructions. Then I will cover the review and selection criteria, application tips, and resources. And we will end with a question and answer period.

Before we get started, please note some important logistical information on this slide. All participants should be able to hear the video - the audio and view the slides.

If you are unable to log into the Net Conference to view the slides, please be assured that we will be posting the slides and a recording of the Webinar on the OAH Web site within about three business days.

All participants are in listen-only mode. You will be able to print the slides from today's call if you're on the Web portion right now, by clicking on the printer icon at the bottom right of your screen.

This call is being recorded. And as I mentioned before, we will be posting the recording, the transcript and the slides in about three business days.

We will be taking questions at the end of the presentation using the Q&A function on the top of the screen. You can type your questions in at any time during the presentation. If we run out of time today and are unable to answer all of the questions that are brought up during today's call, we will post the answers to the questions on the OAH Web site in a few days by updating our FAQ document.

And now I will turn the call over to Evelyn Kappeler, Director of the Office of Adolescent Health. Evelyn.

Evelyn Kappeler: Thank you, Tara. I'd like to welcome all of you to today's Webinar, and thank you for your interest in the Office of Adolescent Health and specifically in the Teen Pregnancy Prevention Program.

As many of you may know, the vision of the Office of Adolescent Health is to advance best practices, to improve the health and well-being of America's adolescents.

We're responsible for coordinating adolescent health initiatives across the U.S. Department of Health and Human Services, and we're also the convener of adolescent health, think, act, grow or what we call TAG, new national partner engagement strategy that is focused on adolescent health and which we released in late 2014.

In addition, we administer and support several grant programs including the Teen Pregnancy Prevention Program, the Pregnancy Assistance Fund, and the National Resource Center for HIV/Aids Prevention among Adolescents.

We're also leading efforts to conduct several large national valuations focused on teen pregnancy prevention and providing support for expectant parenting teens.

As this chart shows you, where the Office of Adolescent Health is located. We're located within the Office of the Assistant Secretary for Health in the Office of the Secretary at the United States Department of Health and Human Services.

OASH oversees 12 core public health offices including the Office of Adolescent Health, the Office of the Surgeon General, and the United States Public Health Service Corps, as well as ten regional health offices across the nation and ten presidential and secretarial advisory committees.

Today we're grateful to be joined by Roscoe Brunson from the OASH Office of Grants Management. The Office of Grants Management or OGM as we commonly refer to them, is the official signatory for obligating federal grant funds and the official signatory for all grant business within OASH.

OGM monitors all business and financial transactions on grants for compliance with federal regulations. And you'll hear more from Roscoe later in the presentation.

At this point, I'd now like to turn the presentation over to Amy Margolis, Division Director here in the Office of Adolescent Health who will talk more about the Teen Pregnancy Prevention Program.

Amy Margolis: Thank you Evelyn. Welcome everyone. The OAH Teen pregnancy Prevention Program is a two-tiered program. The majority of our funding, approximately

$70 million in fiscal year 2015 is for replication of evidence-based teen pregnancy prevention programs. What we commonly refer to as Tier 1.

Tier 2 is a smaller pot of money, approximately $24 million in fiscal year 2015, and is for demonstration programs to develop and test additional models and innovative strategies to prevent teen pregnancy.

The remainder of the teen pregnancy prevention funding is used for program support which includes everything from staff and overhead to training and technical assistance, medical accuracy, and performance measures.

On this next slide you'll see an overview of the five different Funding Opportunity Announcements for the OAH Teen Pregnancy Prevention Program.

The chart provides a quick overview of each, including capacity building to support replication of evidence-based TPC programs or what we're calling Tier 1A. Replication - replicating evidence-based TPP programs to scale in communities with the greatest need; Tier 1B.

Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy, what we're calling Tier 2A. Rigorous evaluation of newer innovative approaches to prevent teen pregnancy, Tier 2B, and the focus of today's technical assistance Webinar.

And the last is effectiveness of TPP programs designed specifically for young males which is a partnership between OAH and the Centers for Disease Control and Prevention, and what we are referring to as Tier 2C.

You can see in this slide, for Tier 2B we anticipate total annual funding of approximately $18 million. We're estimating 20 awards will be made from this funding announcement. And an estimated annual award amount of $400,000 to $1 million per grantee. And the due date for applications is April 10.

If you're interested in other of the Funding Opportunity Announcements listed on this chart, please visit the OAH Web site under the Open Grants tab. More information about each, including the link to the Funding Opportunity Announcement and past TA Webinars for each are included on the Web site.

On this next slide you'll see a diagram of how these five Funding Opportunity Announcements fit together. At the top of the diagram is support for developing and testing early innovations that are not yet ready to be tested through a rigorous evaluation. This is our Tier 2A FOA.

OAH anticipates that some of the early innovations fostered through Tier 2A will show great promise and be able to be rigorously evaluated in the future.

As you move down the diagram you'll see our efforts to rigorously evaluate new and innovative approaches to prevent teen pregnancy. This represents our Tier 2B and Tier 2C FOAs.

We expect the new and innovative approaches tested under Tier 2B and Tier 2C that show evidence of effectiveness and meet the HHS TPP evidence review standards would then be added the evidence review, packaged by the grantee so that they are then able to be replicated by others in the future.

And at the very bottom of the diagram is our work to both support the replication of evidence-based programs and implement evidence-based programs which encompasses both Tier 1A and Tier 1B.

The purpose of Tier 1A is to provide capacity building assistance to organizations interested in replicating evidence-based programs, but who are not yet ready to take those programs to scale.

And the purpose of Tier 1B is to replicate evidence-based programs to scale in communities with the greatest need.

OAH anticipates that organizations that receive capacity building assistance through Tier 1A would then be able to replicate evidence-based programs to scale in the future.

And with that background on how everything fits together I will turn it back over to Tara Rice to talk more about the specifics of the Tier 2B FOA.

Tara Rice: Thank you Amy. This next section will just provide an introduction to the funding announcement.

First, before anything else, applicants should carefully review the entire Funding Opportunity Announcement. The FOA will provide you with guidance to formulate and submit your application for this funding opportunity.

Please read the Funding Opportunity Announcement in its entirety and refer to the frequently asked questions document provided on the OAH Web site. Many times the answers to your questions will be found within the FOA or the FAQs.

The goal of this announcement is to increase the number of evidence-based TPP interventions available by rigorously evaluating new or innovative approaches for preventing teen pregnancy and related risk behaviors.

This funding announcement is for research and demonstration grants to refine and test additional models and strategies. Please note that these are not service delivery grants. Although services may be provided to participants, that is not the primary purpose of the funds.

The target population for interventions funded under this announcement are individuals 19 years of age or under. It could be families of individuals aged 19 or under, or professionals who work closely with those individuals.

Youth who are not yet teenagers are eligible if the intent of the proposed intervention is to prevent teen pregnancy. Furthermore, young men older than 19 years who are at high risk for fathering a teen pregnancy are also eligible.

For the purposes of this FOA, OAH has defined innovation broadly as new or promising approaches, interventions, curricula, or strategies informed by scientific theory or empirical evidence that may lead to or have the potential to result in a substantial reduction in teen pregnancy rates, sexually transmitted infection rates, and associated sexual risk behaviors.

A broad range of approaches, strategies, interventions, or curricula could be eligible for this Funding Opportunity Announcement.

Early innovation is defined as an innovative approach that is in the initial stages of development and is not yet ready to be rigorously evaluated. Such

early stage approaches are more appropriate for the TPP Tier 2A funding announcement.

Next we'll talk about rigorous evaluation. And for the purposes of this funding announcement, rigorous evaluation is defined as a study that meets the standards of the Department of Health and Human Services -- HHS -- Teen Pregnancy Prevention or TPP, Evidence Review for a high or moderate study quality.

This includes an evaluation design that is either a randomized control trial or RCT, a quasi-experimental design - QED, with external comparison group or a regression discontinuity design, RDD.

We will provide more detail about the specific evaluation expectations later in this Webinar. And more information may also be found within Appendix D of the Funding Announcement, or at the link provided in this slide. And this link also shows up several places in the Funding Opportunity Announcement.

Next we'll talk about interventions of interest. The goal of this funding announcement is to expand the evidence base for the field of teen pregnancy prevention by funding rigorous evaluations of innovative interventions designed to address gaps in the existing evidence.

This includes but is not limited to the following. Interventions targeting youth populations at disproportionate risk of teen pregnancy as described within the Funding Opportunity Announcement on Pages 10 through 12.

You can see some of those groups such as older teens, males, LGBTQU, real youth, Latino youth, Native American youth, expectant and parenting teens, foster care youth are listed on the slide.

It also includes but is not limited to interventions that use non-traditional delivery methods such as technology based intervention. It could also be interventions that focus on families, schools, neighborhoods, and environments.

It could also include interventions that address relevant topics such as cultural norms, gender equity, and health relationships, to name a few.

Projects that are designed to address or reduce adolescent sexual and reproductive health disparities are eligible for consideration. The Funding Announcement on Pages 8 through 9 briefly present some of the existing documented disparities seen with teen pregnancy and birth rates.

Finally, interventions that are designed to serve high needs populations of youth are also encouraged.

This next slide shows interventions that are not acceptable for this Funding Opportunity Announcement. And they include one; those programs that have already been identified as an evidence-based teen pregnancy prevention program by the HHS TPP Evidence Review.

Two, significant adaptations or small adaptations of evidence-based teen pregnancy prevention programs identified by the HHS TPP Evidence Review, or three; programs currently being rigorously evaluated under the current TPP Prep Tier 2 Funding Opportunity Announcement initially funded in fiscal year 2010.

There is a complete list of programs that are not eligible for study under this funding announcement in Appendix D of the Funding Opportunity list.

And please note -- and we'll talk about this a little bit more -- that this list has been updated as a part of the amendment of the Funding Opportunity Announcement.

Now, who's eligible to apply? The eligible organizations are found on Page 35 of the announcement and include a wide variety of organizations such as non-profits, for-profit organizations, colleges and universities, hospitals, state tribal and local governments.

As I said, the complete slide is here and also listed on Page 35 of the announcement.

Finally I'd like to bring your attention to some of the amendment to the funding opportunity announcement that have been made since the initial release of the FOA.

The amendments made were on January 21, two amendments were made to Page 34 of the Funding Announcement. We corrected the anticipated start date to July 1, 2015.

On Appendix C we corrected some broken links for services for Healthy Teen Network. And on 1-28-2015 we updated the list of curricula that were implemented during the 2010 TPP/prep funding announcement which is on Appendix D, Page 99.

And at this time I will turn the presentation over to my colleague JoAnne Jensen who will review grantee expectations. JoAnne

Joanne Jensen: Thank you. This section will describe OAH's expectations of grantees throughout the five year project period.

The next slide is going to look at the overview of the grantee expectations. The focus is on expectations of OAH grantees. And as I said before, throughout the five year period of the project.

Failure to meet major milestones as defined by OAH may result in the discontinuation of grant funding at any time during the project period. We'll be talking about these a little bit more, but we'll look at them briefly.

Engage the target population in development of the intervention. Engage in a 6 to 12 month planning period and piloting period. Implement and rigorously evaluate an innovative, promising intervention.

Ensure materials are medically accurate, age appropriate, culturally and linguistically appropriate, and inclusive of all youth.

Collect and report performance measures. Document and package the intervention to be implementation ready, and disseminate evaluation results and the intervention information.

Let's talk a little bit about the proposed intervention. The applicant should include a clear and thorough description of the proposed intervention that demonstrates why the intervention is promising, innovative, feasible, and likely to have a significant impact on reducing teen pregnancy and existing disparities.

The applicant should clearly describe the content of the intervention and how the intervention will be implemented. The review should be able to understand

what participants will receive. The applicant should also describe what components of the intervention are already developed and which would need to be developed during the planning year.

Components being for example, the curriculum, training materials, identification of core components, and fidelity monitoring tools.

The applicant should describe how the intervention content or implementation is innovative and demonstrates that the intervention is feasible to implement in the target setting.

The applicant should ascribe the target population for the proposed intervention. The applicant should also describe the needs of the target population related to teen pregnancy, prevalence of STIs including HIV, risk behaviors, and existing disparities.

The applicant should demonstrate that the proposed intervention will address the needs of the target population, fill existing gaps in the HHS TPP Evidence Review, and is a good fit for the target population.

The applicant should also provide evidence that the proposed intervention is relevant, accessible, and likely to resonate with the target population.

The applicant needs to explain the theoretical framework supporting the intervention. The concepts and key variables that make up the theoretical framework should be defined and used to guide the hypothesis and chosen research methods.

You should describe the proposed intervention through a detailed logic model that clearly depicts the inputs, activities of the project, and the intended outputs and outcomes, both short and long-term.

The logic model must clearly show how the logic model links elements to intended intervention outcomes. The emphasis should be on teen pregnancy related outcomes, although OAH strongly encourages applicants to consider additional related outcomes, for example educational attainment, job readiness, and mental health.

The applicant should summarize all formative research that led to the development of the intervention. The formative research should provide justification for why the intervention is likely to result in the proposed outcomes.

The applicant should be expected to present scientific evidence to support the proposed intervention, and demonstrate its likelihood for success. This should include results of all previous evaluations of the intervention, either published or unpublished, and other supporting evidence from the literature.

If previous evaluations did not lead to anticipated outcomes, describe why and what would be done differently in the proposed implementation and evaluation of the intervention.

This should include documentation, any evaluations of the intervention that have been reviewed for in the HHS TPP Evidence Review with a description of why the intervention did not receive or moderate rating, and what would be done differently with the newly proposed evaluation.

Interventions that have undergone multiple evaluations and have not been found to be effective are not good candidates for this FOA. The applicant bears the burden to describe the potential of an intervention to be effective.

Let's talk about memorandum of understanding with the copyright holder. Applicants who choose to use any copyrighted materials in their proposed project must include a signed MOU with the developer or purveyor of the materials that demonstrates that the applicant has permission to use the materials as planned.

This should include but is not limited to, permission to use the materials as proposed in the application, alter them as needed for compliance with OAH medical accuracy review, and document and disseminate evaluation results.

Without an MOU with the developer or purveyor, the project will not be funded for implementation.

The next slide; the applicant should describe strategies for engaging members of the target population in the development and implementation of the proposed intervention. The target population should provide significant input into the development and implementation of the intervention to ensure that it addresses needs, fills existing gaps, and does not duplicate other programs or services already available. And very importantly, is a good fit.

Members of the target population should also provide feedback to ensure that the intervention is relevant to, and likely to resonate. As a side note, the target population is - I did a Control F or a Search function on my computer and it is 83 times in the FOA.

So I think this should give you an idea of the importance of the target population, hopefully.

The other thing I would say here is make Control F or your Search function your friend as you go through this funding announcement. It will be very helpful I think.

The next slide is about planning and piloting periods. This is also an important area. All grantees will be expected to engage in a planning, piloting and a readiness period during the first six to 12 months of the grant.

This period should be devoted to hiring and training staff, finalizing partnerships, refining and finalizing intervention materials, pilot testing intervention materials and evaluation instruments. Finalizing the evaluation plan and obtaining approval for the IRB, ensuring readiness of the intervention sites. In other words we're saying you need to hit the ground running.

Otherwise, ensuring readiness for your full implementation. The duration or the length of the planning period is contingent upon each grantee's demonstrated readiness, but will not exceed 12 months. This specific milestone that grantees will be expected to successfully complete by the end of the planning period are included in Appendix G.

Continued funding for all implementation is contingent on the recipient's satisfactory progress in meeting planning period milestones, and the continued availability of funds.

The next slide, the applicant should describe how and by whom the intervention will be implemented. Include signed MOUs with all

implementation partners that clearly outlines the roles and responsibilities of the applicant and each partner.

So the picture here is they may look different and you wanted to have a meeting of the minds of what you as an applicant intend to do, and what the partner plans to do.

Again, the purpose of this FOA is to rigorously evaluate new and innovative approaches to prevent teen pregnancy. The purpose is not service delivery. It may be a byproduct, but it is not the purpose.

As a result, it is expected that applicants not implement the intervention with participants outside of the rigorous evaluation.

The applicant should describe the core components of the intervention and how the proposed team will ensure the intervention is implemented with fidelity and quality.

The core components are the parts of the intervention determined by the developer to be the key ingredients related to achieving the outcomes associated with intervention.

Funded grantees will be required to monitor the extent to which the intervention is implemented with fidelity and quality. Grantees will establish and implement a fidelity monitoring plan that includes at a minimum, collecting data on fidelity and quality of implementation, including data from observations of at least 10% of all intervention sessions.

Reviewing and analyzing data on a regular basis. Using the data provides feedback to facilitators and staff. And using the data to make continuous quality improvements to the implementation of the intervention.

Applicants should describe strategies planned to ensure that participants are actively engaged in the intervention and retained to receive the majority of the intervention.

Support plan should also include any additional activities planned to support implementation of the intervention. For example, parent information sessions, providing snacks or transportation for intervention participants, or use of social media to stay connected with the participants.

Applicants are expected to implement interventions in environments that are positive, safe, supportive and healthy for all youth and their families. This includes but is not limited to ensuring inclusivity of all youth including LGMTQ youth applying positive youth development practices when interacting with youth, and using a trauma informed approach.

OAH suspects that all successful award recipients will ensure that services are widely accessible by not discriminating on the basis of sexual orientation or gender identity.

Grantees are also encouraged to establish and maintain linkages and referrals to a network of organizations and healthcare professionals who can provide high quality, youth friendly, healthcare services for participants. Tara.

Tara Rice: Next slide we'll go over grantee expectations for rigorous evaluation. All grantees are expected to conduct a rigorous, impact evaluation of their proposed intervention against a counterfactual or controlled condition.

The evaluation is expected to meet the standards for either a high or moderate rating on the HHS TPP Evidence Review. More details can be found with Appendix D of the Funding Opportunity Announcement.

Applicants must include a detailed evaluation design plan in their application. Please review Pages 49 through 60 of the Funding Opportunity Announcement for more information on what to include.

All grantees will be expected to participate on OAH Evaluation Technical Assistance including regular communication with an OAH Evaluation Technical Assistance liaison, and insurance that evaluation plans are implemented in a manner consistent with evidence review standards.

Grantees will be expected to implement the recommendations of OAH regarding their evaluations. In addition, there are reporting milestones which I will review in the next slide.

During the planning and piloting year which is expected to last up to one year, grantees are expected to work with OAH to refine, improve, pilot, and make any necessary changes to the evaluation design or method.

In addition, during the planning and pilot year, grantees will be expected to obtain any and all necessary institutional review board or IRB approvals for their evaluations.

By the end of year one grantees are expected to have their evaluation plans approved by OAH to be able to begin the evaluation. Failure of a grantee to receive OAH approval for their evaluation plan by the end of year one may result in the loss of continued grant funding.

Next we'll talk about evaluation design. Evaluation design consistent with the standards of the HHS TPP Evidence Review may either be RCTs, QEDs with comparison group, or regression discontinuity designs or RDDs.

All randomized evaluations are expected to use the intent to treat or ITT framework for analyses. Specifically, primary research question analyses.

And this means that evaluators who compare the outcomes of participants or groups of participants between those who were assigned to receive the intervention and those who were not assigned to receive the intervention.

The use of treatment on treated or TOT frameworks is allowable for supplemental analyses only.

Applicants are expected to have focused research questions and hypotheses that are relevant to their proposed target intervention and align with the logic model.

Applicants should commit to tracking at least one confirmatory outcome related to a measure of sexual risk behavior or its consequences as described within the standards of the HHS TPP Evidence Review. Examples include initiation of sexual activity, frequency of sexual activity, number of sexual partners, contraceptive use, sexually transmitted infections, pregnancies, and births.

Applicants are also highly encouraged to include plans to define, operationalize, and validate the core components of their intervention.

OAH anticipates that grantees would collect survey data for about three points in time. Baseline data, one short-term follow-up, and one long-term follow-up. Any additional data points proposed beyond those three points would need to be justified and discussed for feasibility and necessity with OAH.

If surveys are not feasible, the applicant should clearly describe why survey data would not be collected, and describe what secondary sources would be used to track the teen pregnancy related outcome in both the intervention and counterfactual or controlled group.

In addition, applicants are permitted and encouraged to collect additional outcomes such as but not limited to, educational attainments, job readiness or mental health that are relevant to the proposed intervention and included within the logic model.

Applicants will be expected to track and evaluate the cost of implementation of the intervention.

This next slides discusses some of the key evaluation reporting expectations and milestones and the timing of those. This table is also found on Page 28 of the funding Opportunity Announcement.

All grantees funded under the TPP Tier 2B announcement would be expected to report on these evaluation milestones as indicated in the table. Additionally, grantees will be expected to participate in regular ongoing evaluation technical assistance meetings with their liaison. Now, JoAnne.

Joanne Jensen: Thank you Tara. Okay, let’s talk about program materials. Grantees will ensure that all program materials such as curricula, facilitator and participant manuals, videos, poster, scripts, pamphlets, handouts are medically accurate,

complete, age appropriate, should ensure also that the materials are culturally and linguistically appropriate and inclusive of LGBTQ youth.

To ensure that the most current science is reflect in the program materials, successful applicants will be required to submit all program materials prior to use in the project to OAH for a medical accuracy review.

Program materials should not be submitted with your application. I'll repeat that. Program materials should not be submitted with your application.

Grantees are expected to conduct an initial review of materials for medical accuracy before submitting to the OAH for review. We also expect that you will conduct a review of materials for age, cultural and linguistic appropriateness, and inclusivity using guidance and templates provided by our office.

There will be a Webinar for funded grantees on the medical accuracy review after awards are made.

All grantees funded under this announcement will be expected to document their intervention with sufficient detail so it is implementation ready and can be replicated by others. Grantees will be expected to provide OAH a complete electronic package of the intervention by the end of the grant.

To be implementation ready an intervention must have clearly defined program materials and components, necessary staff support, and training and specified guidelines and tools for monitoring fidelity.

Implementation ready interventions must include all of the necessary components that will allow the intervention to be effectively implemented by someone other that the original developer.

OAH implementation readiness guidance is available on line at the link provided on Page 21 of the Funding Announcement.

The next slide talks about disseminating findings. Grantees will be expected to disseminate their evaluation findings and lessons learned through publications and peer review journals and presentations at professional conferences.

In addition to the traditional methods of dissemination, grantees should also communicate information back to the intervention stakeholders through less formal methods to maximize understanding of the project.

Applicants should develop a plan for widely disseminating the results of the evaluation, including implementation, evaluation results, outcome evaluation results, lessons learned, successes, challenges with key stakeholders, including members of the target population and internal and external partners at the local, state and national levels.

An important reason to fund grantees is to inform the field of adolescent health, and dissemination activities help to accomplish this goal. Tara?

Tara Rice: All right, thank you Joanne. Next we'll be talking about performance measures. All grantees funded under this announcement are expected to collect and report on a common set of performance measures to accept the implementation of the intervention.

Grantees will be expected to report to OAH their performance measure data twice per year. The broad category of measures to be reported to OAH include reach, dosage, fidelity and quality, partnerships, training, and dissemination. In addition, grantees will be expected to collect and report as performance measures outcome questions on their survey instruments from all study participants, that is from both intervention and control participants.

The current list of performance measures is included within Appendix H of the Funding Opportunity Announcement. OAH is currently seeking renewal of this package from the Office of Management and Budget in 2015, at which time OAH anticipates that additional measures related to cost, program sustainability, and linkages to health care may be added.

All data collected for performance measures should be linked to individual program participants using non-identifying numbers, identification numbers. Grantees should plan to use the existing performance measures to the extent possible, however, please note that the existing performance measures were developed primarily for curriculum-based programs. Applicants who proposed to implement and evaluate a non-curriculum-based intervention may need to propose proxy measures to OAH to collect some of the data.

It is expected that grantees would work closely with OAH during the planning period to finalize any proposed proxy measures. Please refer to Pages 23 and 24 of the funding announcement for more information about the performance measures requirement, as well as Appendix H for the specific measures that are currently being collected.

Next we'll be talking about experience and capacity. The grantee and all of its partners are expected to collectively demonstrate relevant experience, such as experience developing similar interventions, experience implementing teen

pregnancy prevention programs, experience implementing interventions with the target population and within the target settings proposed, experience with oversight and implementation of a rigorous evaluation, experience with recruiting a sample of the target population large enough to meet sample size estimates, experience successfully recruiting, engaging and retaining the target population within an evaluation, experience disseminating evaluation findings, and experience collecting and using performance measures data.

In addition, the grantee organization itself should demonstrate it has the capacity, organizational capacity that is, to successfully manage all aspects of the proposed project. Please see Pages 29 through 30 of the funding announcement for more detail.

Next we'll talk about project management and partnerships. Grantees are expected to have an experienced team to manage, implement and evaluate the proposed intervention. Grantees should have clearly defined roles and responsibilities for all proposed staff, including key staff on the grant, which would include the principal investigator or project director, which we refer to as the PI/PD, throughout the funding announcement, the lead evaluator; and the project coordinator/manager, if applicable.

The project team should have collective experience and training relevant to all aspects of the proposed project. As an applicant, it will be important to include resumes or key staff in your application appendices to support this.

Grantees may use partnerships to fulfill the capacity needs for successfully completing the project. All partnerships and collaborations to support intervention implementation and evaluation should be established in writing prior to application submission and preferably it is far preferred that you have previous successful collaborations together.

The application is to include signed MOUS or Memorandum of Understanding with all partners that will assist with the intervention, implementation and evaluation, and those MOUs should clearly outline the applicant and partner roles, responsibilities, and expectations. If the applicant is not able to execute formal MOUs at the time of application, the application should include signed letters of commitment that describe the role and responsibilities of partners on the project.

Next I will turn the presentation over to Joanne, who will talk about application responses and screening criteria.

Joanne Jensen: Okay. Let's look at this section. Applicants will be reviewed to, applications, sorry, will be reviewed to determine whether they meet the following responsiveness criteria. Those that do not will be administratively eliminated and will not be reviewed. The applicant must demonstrate that it has included an evaluation design plan in the project narrative, as described on Pages 49 through 60 of the FOA.

On Page 36 of the FOA, you will find the screening criteria for the application. All applications appropriately submitted will be screened to assure a level playing field for all applicants. Applications that fail to meet the screening criteria will not be reviewed and will not, receive no further consideration.

So let's look at these. The applications must be submitted electronically to Grants.gov by April 10. The project narrative must be double spaced on an 8.5-by-11 or equivalent paper, size paper, rather, and one-inch margins. And the font is not supposed to be more 12 points, or not less than, sorry, not less than 12 points.

The project narrative must not exceed 50 pages. The total application including appendices must not exceed 100 pages. So the narrative, 50 goes into that, the narrative plus the appendices. Proposed budget does not exceed maximum indicated in the range of awards. In other words, this is, what, $400 to a million, I think, so you don't want to ask for more than a million, or you won't be looked at.

Application meets the application responsiveness criteria. If you look on Page 36 of the FOA, you will have that defined a little bit more clearly. It's also talked about on Page 37, basically saying that you have your evaluation design in there.

Okay, let's go on to the application contents, in other words, what are you going to be sending us. We've been talking a lot about what our expectations are, and so as you might imagine, they match up pretty well. This slide provides an overview of the required content that should be in your application, which includes the project abstract form, the project narrative, appendices, budget narrative, and required forms. The contents of these items will be described in the next slides.

So the application content, you will look on Page 43 to see where that begins. If you look at the bottom of the slide, it tells you the required forms, and on this particular slide, it isn't identified what they are, but we will be giving that to you later on another slide, but also you will find it on Page 86 of the FOA.

If you look on the appendices you will find those on Page 68, all of these items will be discussed in more detail. So, let's go to the next slide, where we will have, talk about the project narrative, as we said before, limited to no

more than 50 pages. The total application limited to no more than 100 pages, and includes the project narrative and the appendices.

Not included in the 100-page limit is the project abstract summary form, the budget narrative, and those required forms, those one, two, three, four forms that we're talking about formatting, it needs to be double-spaced, 8.5-by-11, we talked about this before. This information was provided earlier, and the expectations, so use this as a reminder that the formatting is important.

Let's talk about the project abstract. Applicants must complete the one-page project abstract summary form provided in the application package. The abstract should include the project title, applicant contact information, type of organization, goals, intervention, description, geographic area and target population.

The abstract will be used to provide reviewers with an overview of the application, and will form the basis for the application summary and grants management and program summary documents. Abstract may be published by the Department of Health and Human Services and should not include sensitive or proprietary information.

The project narrative will be used as a primary basis to determine whether or not your project meets the minimum requirements for a grant under this announcement. The project narrative should provide a clear and concise description of your project, and it should include proposed intervention, intervention implementation and work plan, selection and use of performance measures, evaluation design plans, capacity and experience, and project management and partnerships.

You can locate specifics of each of these sections on Pages 43 through 65 of the FOA. Under the responsiveness criteria, we discussed that the evaluation design has to be included in the project narrative. If not, the application is administratively eliminated from the review. I am quoting now from Page 36 of the FOA. This slide lists the parts that are required in the evaluation design plan. Please go to Pages 49 through 60 for specific details about each part. Lots of good information, but it is limited to 10 pages. So you need to be concise in responding to this section.

Appendices count for the overall 100-page limit for applications. The appendices are for supportive information only and should be clearly labeled. Appendices created specifically for the application should use the same formatting required for the project narrative, including double-line spacing. However appendix documents that were not created directly in response to this funding announcement, especially those imported from other sources and documents, may use other formatting but must still be easily readable. For example, the organizational chart is a good example of that.

Included in the appendices are the work plan, the logic model, signed MOUs are preferred or if you don't have those, letter of commitment from partners, the resume or curriculum vitae for proposed staff and job descriptions for positions to be hired. And of course, the organizational chart. And on Page 68, you can, the FOA gives you some more detail for each of these.

Okay, the work plan. This application should include a detailed work plan for the five-year project period that includes the goals, smart objectives, activities and a timeline for the project. I think most of you know the SMART acronym stands for Specific, Measurable, Achievable, Realistic and Time-Framed. Grantees can use up to 12 months of the first grant year to engage in planning and readiness periods. An example work plan template is included in

Appendix E, or this can be provided in a different format. The example work plan template is also available in a Word format on the OAH Web site under the Open Grants tab.

Okay, the logic model, the applicant should include a detailed logic model to describe the overall project including inputs, activities, and the intended outputs and outcomes. An example logic model template is included in Appendix F or this can be provided in a different format. The example logic model template is also available in a Word document on the OAH Web site under the open tab, Open Grants tab. Oh, I said that before, I'll go back a minute. When we talked about the work plan, it's the Open Grants tab. I may have said it wrong there, too. Open Grants tab is where you'll find the appendices E and F.

The application should include signed MOUs in the appendix, with all partners that will assist with the intervention, implementation and evaluation. If the applicant is unable to secure MOUs at the time of the application, signed letters of commitment should be included.

The budget narrative. The application should also include a budget narrative. Budget tables may be single-spaced and should be laid out in an easily readable format, and within the printable margins of the page. You are required to submit a combined, multi-year budget narrative as well as a detailed budget narrative for each year the potential grant.

Unless specified, you should develop your multi-year budgets based on level funding for each budget period. A level funded budget is equal to the exact dollar figure of the year-one budget. The budget narrative should clearly show how the total amount requested for all categories was determined, the categories being personnel, fringe, travel and contractuals. The budget

narrative should be detailed, reasonable, adequate, cost-efficient and aligned with the proposed work plan. Sufficient detail should be provided so that the reviewer is able to determine the adequacy and appropriateness of budget items related to the proposed activities.

From the detailed budget and the budget narrative justification, the reviewer should be able to assess how the budget relates directly to the goals and objectives in the proposed work plan. The following level of detail should be provided.

For personnel and fringe benefits, identify each staff position by name, annual salary, and number of months and the percentage of time allotted to the project. Travel, identify the purpose of the travel to include locations, names of conference and training, if available.

Equipment, list only individual equipment items here with a market value above $5,000 per item. Supplies, categorize supplies according to type such as office supplies, training materials. Contracts, list all sub-recipients, agencies and/or contract providers, and the amount of OAH funds and non-OAH resources allocated for each.

Under Other, itemize all costs in this category and explain each in sufficient detail to enable determinations for each item, for each cost as allowable, for whether each cost is allowable. The budget narrative does not count towards the page limit.

Funding restrictions. Funds may not be used for building alterations or renovations, construction, fund-raising activities, political education or lobbying. To supplant or replace any non-federal or other federal funds that would otherwise be made available for the activity proposed in the

application. To supplant ongoing or usual activities of any organization involved in the project. To purchase or improve land, or to purchase, construct or make permanent improvements to any building. To reimburse pre-award costs.

There's a salary limitation which has recently changed, and this is the individual base salary may not exceed the executive level two, which is now changed from the $181.5 that you see to $183,300. I believe in the FOA it still says the $181.5, so I'm not clear if that will have an amendment on that or not. We will add that to the FAQs in the coming days.

You are advised to review the relevant OMB, Office of Management and Budget circulars referenced within the application on Pages 70 to 71 for more specific guidance on funding restrictions. Grantees should also be sure to budget for required OAH grantee meetings and in-person technical assistance.

This is found on Page 67 of the FOA that will give you more information about this slide. And I will briefly look at this, because this is important for us, particularly because we talked about the different trainings that we will have throughout the course of the grant period for the five years. So the meetings are extremely important and we think beneficial for all of us, OAH as well as all grantees.

Cost-sharing and matching. Cost-sharing or matching funds are not required for this program, although no statutory matching requirements for this FOA exist, leveraging other resources and related ongoing efforts to promote sustainability is strongly encouraged. The applicant should describe any cost-sharing funds available and show how they will be used to support the program. This information can be found on Page 67 of the FOA.

The following are also required forms for the application Remember I told you that you could also find these on Page 86 of the FOA. You have to fill out each of these forms, the SF-424 application for federal assistance, budget information for non-construction programs as the SF-424A, and the SF-424B assurances for non-construction programs, and the disclosure of lobbying activities, SF-LLL. So all those have to be included. These forms are available in the Grants.gov application kit. They do not count toward the 100-page limit as previously mentioned.

Okay, let's move on and review the application submission instructions. (Roscoe Brunson) from the Office of Grants Management will walk us through this part.

Roscoe Brunson: Thank you Joanne and good afternoon, everyone. Accessing application package. You may access the application through the Grants.gov Web site and search by using the Find Opportunities function. You may search here using the Funding Opportunity number to see if DA number 93.297 or Funding Opportunity Announcement title. To complete your application, use the Apply for Grants function. It is important to review and follow program announcement carefully, because it contains information needed to complete the application.

Information and announcement has priority over any conflicting information that may be found in other grant-related documents. If you have problems, contact Grants.gov at the phone number or e-mail address that's shown on Page 2 of the Funding Opportunities announcement.

Application submission dates and times. Non-binding letters of intent are due February 1, 2015. You must submit your application via Grants.gov by 5 pm Eastern time on April 10, 2015, unless a waiver has been granted. Please note,

the application submitted after the deadline will not be accepted. Applications not conforming to the requirements will not be reviewed. Applicants are encouraged to initiate electronic applications early in the development process to address any problems with submission or after the deadline.

Look at Exceptions for Electronic Submission. Authorization for paper submission must be approved two business days in advance of the due date. A request for an exception must be submitted four days in advance, and must be submitted by e-mail to the Office of Grants Management and provide details as to why you're technologically unable to submit using the information of what to include in an e-mail request, as this is on Page 2 of the Funding Opportunity Announcement. I'll now turn the presentation back over to Tara.

Tara Rice: Thank you (Roscoe). Now we're going to briefly review the review and selection criteria information. As this slide shows you, the scoring that will be used for when the applications are reviewed. During the review, eligible applications will be assessed using the review categories for scoring shown here. The applications are reviewed according to the detailed criteria listed within the funding announcement Pages 72 to 79. You can see here in this slide that evaluation design counts the most in terms of like, how your application would be scored.

Next slide talks about the review and selection process. The initial review as discussed before will be to ensure that the applications meet the application screening criteria and the responsiveness criteria. The next step would be an independent review panel evaluation. Independent review panel will be comprised of peer experts. These are experts in their field and are drawn from academic institutions, non-profit organizations, state and local government and federal government agencies. These reviewers will comment and score based on the application review criteria in the funding announcement.

The next step would be a federal staff review, which would involve staff from OAH and from OGM, which would include reviews for programmatic, budgetary and grants management compliance. Final award decisions will be made by the director of the Office of Adolescent Health.

The notice of funding. The official document notifying an applicant that a project application has been approved for funding is the Notice of Award or NOA, approved by a grants management officer of the HHS OAH Office of Grants Management. Grantees will receive this document via system notification from our grants management system, called Grant Solutions, as well as by e-mail.

This document, the NOA, notifies the successful recipient of the amount of money awarded, the purposes of the grant, the anticipated length of the project period, the terms and conditions of the grant award, and the amount of funding to be contributed by the grantee to project cost if applicable. We anticipate a start date of July 1, 2015, for the TPP Tier 2B grant.

Now I'll go over a few application tips. It's important to read the entire Funding Opportunity Announcement and application kit before you begin writing your application. The FOA is the primary guide for programmatic expectations. Recommended you write the project abstract after the entire narrative is complete. Please read the review criteria carefully, read the application instructions, do not exceed the 50-page limit for the project narrative, or the total page limit of 100 pages for the full application, that is, the project narrative plus appendices.

Turn in the application no later than 5:00 pm Eastern time on April 10, 2015. Please be sure to allow for any unforeseen difficulties with the online application process.

Next I will highlight some available resources that may help you as you develop your applications. All of these resources can be found in the funding opportunity announcement. For the most part, okay, first want to draw your attention to the OAH Web site, which provides several resources of interest to applicants. From this site, you can link to the Funding Opportunity Announcement on Grants.gov, you can also find a set of frequently asked questions that are cross-cutting and relevant to all of the OAH TPP funding opportunity announcements.

You can also find a set of frequently asked questions that are specific to each Funding Opportunity Announcement YOU can find a Word document copy of a work plan, and the logic model templates included in the FOA. In the next two, three days, the TA Webinar slides, recording and transcripts will also be posted at this point.

For more information about the HHS TPP evidence review protocol and criteria for the evidence review, please go to the link listed here, which is for the assistant secretary for planning and evaluation or ASPE within HHS, and this link shows up several places in the Funding Opportunity Announcement.

Additionally, Appendix C of the Funding Opportunity Announcement includes several useful resources and links, and they are organized by category. There are evaluation-related links, there are links related to evidence-based teen pregnancy prevention programs, links to logic models, performance measures, just to name a few. So please check out Appendix C of the FOA, which is on Pages 93 through 96.

And now, we'll take some questions. Again, please type your question in the Q&A box at this time if you have not already done so. I'd like to start off with a question that we've been getting in one form or another frequently through the TPP Tier 2B mailbox, and that question is "Who should be the lead applicant? Should it be the evaluator, or should it be the service provider?"

So a lot of people are asking this question. If you read through the funding announcement, we don't really put any requirement on who the lead agency is. If you look at Pages 35 through 36, that tells you what organizations are eligible, and there's a broad, different types of organization All right, that's your first step, are you an eligible organization. The second step is to keep in mind that the project investigator or project director should be employed by the lead organization. So if you decide who the PIPD is, that person should be with the lead agency.

Okay, we've also said in the FOA in different places that the PIPD could also be your lead evaluator. We have said, however, in other places that we strongly recommend and encourage independence of your evaluation. So if you're PIPD and lead evaluator, the same person, please make sure to provide information as we discussed in the application content section to demonstrate that you're going to keep your evaluation independent from implementation, all right, and so there's several place where we talk about that in more detail in the funding announcement.

Additionally, you know you want to make sure that you review the FOA carefully with your partners and make sure that you're writing the best possible FOA and the best possible team, because if you look at the application content section, specifically within the capacity of the lead organization section, we talk about things that you can do collectively as a

team, but we also talk about, you know, specific capacity that the applicant organization should have.

So pay attention to that. Also, pay attention under project management and partnership sections of application content, where we specify, you know, what types of experience the PIPD should have. And in the evaluation design section we talk about what experience the lead evaluator should have. So you want to make sure that whatever team you put together, that you're making sure that you're putting together the best possible team to do the project and to handle and manage all aspects of the project.

Joanne Jensen: Okay, so we've got a few questions already, (Roscoe), you want to start with the first one?

(Roscoe): Sure, first question I have here is on Page 69 to 70 of the instruction packet. "Describe the need for an FNIR to claim indirect costs. Would you consider a certified indirect rate to be equivalent?" I'm not clear on what a certified indirect rate is, but you may scan and e-mail me a copy of that for review. My contact information's on Page 86 of the FOA.

What we look to receive as far of your budget submission through claim reimbursement for indirect rate should be an approved indirect rate agreement or approved cost allocation plan. And that approved agreement should be an agreement that has been approved by the Department of Health and Human Services, one of the regional offices that's listed on the Funding Opportunity Announcement on Page 70, or it could be with any other federal agency. That's an approved indirect rate agreement and that's what we would expect to receive.

But you're welcome to submit a copy of that certified indirect rate and I can review it and I can respond to whether or not that can be acceptable after consulting with one of the regional offices. Thank you.

Joanne Jensen: Okay, another question is "Are you saying that no evidence-based program listed in the HHS TTP review can be the core of a grant proposal, no matter how profoundly it has changed?" Evidence-based programs and adaptations of the EBPs are not eligible for funding under this FOA. Please see Appendix X, I'm sorry Appendix D and the FOA for more details. Have you got one?

Tara Rice: Okay, so another question is, "Is it allowable to test an intervention in a community that may receive Tier 1A or B funds if these funds are not used for any intervention, and the Tier 1A or B plan does not include the intervention?" Okay, another question that was very similar was asked, which said that "The FOA stated only one grant award will be given to a single service area or target community. Is that for all FOAs, or could there potentially be one grantee for Tier One A serving the same geographic area as a grantee from Tier 1B or Tier 2B?"

So the answer to this, to both of these questions is going to be very similar, which is that all five FOAs are going to be reviewed and scored independently. It is important that applicants carefully consider the implications to their planned evaluation under the Tier 2B FOA if the same community is participating in other TTP funding opportunity announcements.

So for example, if you already know that there's other existing TTP services, you know, within the application content, we do ask that you talk about what services are already being available in your community.

The next question "If MOUs or letters of commitment have a single signature page for all partners, if the letters are the same verbiage," I think it supposed to be said, "to show support." It is up to the applicant to determine how to submit and present your MOUs and/or letters of commitment, so we don't have any specific rules there.

Next question. "Can others in the community, such as non-applicants, implement the innovative program strategy, et cetera, as long as they are not part of the rigorous evaluation?

And, the answer there is OAH would not have any requirements for others in the community who are not receiving grant funds. Applicants should carefully consider the implications to their evaluation if others in the community are implementing the same program, but are not participating in the evaluation.

Next question. Did you say, appendices are or are not included in the page counts? Appendices are accounting in the overall 100-page limit for the complete application.

Joanne Jensen: Okay, what is the expected percentage cap allowed for the external evaluator? The other funding streams have a 10% cap. There is no cap for evaluation and this 2B FOA.

Another question. Are programs sites considered partners, requiring a signed MOU, or can they be finalized during the 6 to 12-month preparation period? The application must include signed MOUs with all implementation partners that clearly outline the roles and responsibilities of the applicant and each partner. You'll find this on Page 47 of the FOA.

Amy Margolis: You can however, if you can't execute a formal MOU by the time of application, you can include a letter of commitment signed by your partners. Letters of commitment that detail the roles and responsibly. And, then during the planning period you would execute the formal MOUs. But, it is preferred that if you can have an MOU, that you include that in the application.

Joanne Jensen: Another question is, can evidence-based curriculum be used as one component of multi-level program? Same answer again, please review the information in Appendix D for more details about the programs that are ineligible. You won't be able to use that.

Should the letter of intent be sent electronically or would you prefer a hard copy? We would actually prefer electronic if that's okay. We have gotten a couple of paper, but I think it's probably easier and faster to get to us electronically.

And, I would encourage you to send those, because that's how we're going to hopefully get an idea of, you know, the number of reviewers we need to have. So, if you are, it doesn't lock you in. You don't have to do anything special, just say you are intending to, you know, do this.

If all components need to be implementation ready, this mean most staff must already be on board? The program must be implementation ready by the end of the grant. Let's see here. And, give us a few -- go ahead.

Tara Rice: So, you can hire staff during your planning and piloting year. Please refer more to the funding opportunity announcements in the section that deal with the planning and piloting expectations. We do talk about that very clearly there in that section of the announcement.

Joanne Jensen: If the review criteria asks you to demonstration walls and capability, should we only submit job descriptions for the vacant position? Or do you suggest we include job descriptions for fill and vacant positions? This is totally up to the applicant to determine. Because, I think what you're wanting to do, is you're trying to paint a picture of your program and it may be that you have some of the people already on board, but you may not. So, you really need to determine that individually.

If we have 20 staff that will contribute to the project, that at minimum will be 20 resume. Do we provide resumes for all positions? With 20 resumes I'm not sure that we can get all the required attachments to the limit of 50. Again, this is going to be up to the applicants. And, you may want to, you know, really give that some thought and be a little innovative in how you do that.

Key personal you do want to do. For example, your key personal are going to be, depending on what your project looks like. Whereas you may have to hire a lot of facilitators, and you may not even have it onboard. But, you're key personal that's who want to be sure and fill in the resumes and tell about those positions.

Does the budget limit include indirect or is all right plus? Yes, the total budget includes direct and indirect costs. You stated that the application is a maximum of 100 pages. Then it was stated that the budget does not count in that count. Is that correct? Yes, look on Page 37 of the FOA for more information on page limits. The 100-page limit includes the project narrative and all the appendices. It does not include the abstract, the budget narrative, and those required grant forms.

Amy Margolis: Joanne we have another question over here about, the evaluation independent of implementation but can the evaluator be someone we already work with? If

you look in the FOA, we encourage you to partner and work with an independent evaluator. We have not required who you select as your evaluator. Selection of your evaluator is up to, we just encourage you to look through the FOA to see what's required and that you really describe their field and experience.

There's another question about, level of funding is difficult given the changing cost across the evaluation. Is this required? Yes, you should budget for level funding over the five years. What your budget looks like, you know, from year one, to year two, to a year, to year three, to year four, to year five. You know, different categories may change. But, the overall amount of funding you request each year has to be the same.

Joanne Jensen: Here's a question says, will the Webinar be available to listening at a later date? Because they can't be on the call today. So, all of you will know that it is going to be up on our Web site, and we will have the slides there, the transcript, and the recording. Give us about three business days to get that up and going. And, you know, you may just want to listen to it again. We're so fascinating here.

Man: Couple of questions here. Is the high set on negotiating indirectly considered less competitive? No, a high-end indirect cost rate does not impact the competitiveness of our application. Long as it's an approved indirect rate, which is important. Is the maximal indirect rate amount allowed? No, there's no cap on the indirect rate. Long as again, it is an approved indirect rate agreement.

Another question. Can an organization submit more than one application for a single FOA? Application will be from different PIs of scientific destination programs serving different populations. Yes, more than one application may

be submitted. It's important that the project title included on the each application for the same FOA is different, and the information is clearly spelled out in their project narratives.

Joanne Jensen: Okay, have another question here. Can one submit the same grant to two different FOAs? I'm going to interrupt this as meaning, the same grant application. So, you can-- each FOA is distinct, there's no restriction on, you know, an organization can apply to more than one of these funding opportunity announcements.

But, please it's your responsibility -- as an application -- to make sure that you are writing and application that adheres to the criteria of the different FOAs that you're considering applying to. Each of these FOAs is unique and distinctive and so an application for one FOA might not necessarily meet the standard and criteria of one our other FOAs. Also, please consider capacity of your organization, and whether you could administer and implement more than one program from different FOAs in making your decision.

Next question. So, when asked, if an implement organization wants to apply as a lead grantee, is it okay if they do not have direct experience conducting rigorous evaluations? So long as their external evaluation partner has such experience, or do both program and evaluation staff need to have prior experience with rigorous evaluation. Okay, so in terms of direct experience with implementing rigorous evaluation, that is a specific requirement for your evaluator as described in the evaluation section of the content, application content Pages 49 through 60.

So, first you want to make sure that your evaluator meets those expectations as outlined. So, we talk about within the FOA that you can implement project as part of a team. And, that there are certain things that the team needs to have

capacity for, and certain things that the individual lead organization needs to have capacity for.

So, you know, we don't necessarily require the lead agency to have direct experience implementing evaluations. But, we do talk about familiarity with evaluation. We talk about having experience implementing previous teen pregnancy prevention programs, etcetera.

So, please go back and look at the application content section. The specifically the applicant capacity organization for more details. And, then look at the scoring criteria related to applicate organization capacity, to make sure that you're lining up with that as well. And, those criteria are on Pages 71 to 79.

All right so in the next question, is that in the original FOA for 2B, it is stated that the anticipated number of awards would 30. In the PowerPoint this is listed as 20. Has the anticipated number of awards been reduced? The answer is no. We have 18 million for this particular award, which I believe was on one of the introductory slides. The number of awards will be dependent on how much money the top scoring people ask for. And, the range is $400,000 to a million.

So, if everyone asked for a million, we'll be funding on the low end about 18 grants, if everybody asks for the maximum amount, one million dollars. But, on the other hand if people ask for-- everybody asks for the lowest amount we could fund more up to about 30. So -- the reality is -- we're probably going to be funding somewhere in the 20's, and we're not going to know exactly how many people we fund until we know who scores the highest.

All right, next question. Does the proposed program need to have been previously evaluated to be eligible for funding? All right, the proposed

program does not need to have been previously, rigorously evaluated to be eligible for funding.

All right that being said, we do ask that your proposed intervention have some scientific background, some promising evidence that is associated with it. And, we talked about this in several places in the funding announcement where proposed intervention is discussed. Including Pages 43 through 46, Pages 13 through 16, and Pages 71 through 72, which are the associated scoring criteria.

So, I recommend that you review those sections of the funding announcement, and see what kind of promising evidence you have to support your intervention. And, make sure that you're including that in your application and descriptions.

Tara Rice: I have a question here it says, could you clarify the statement in the FOA that grantees will provide OAH a complete electronic package of the final implementation ready innovation prior to the end of grant? If you look on Pages 21 and 22 of the FOA, it talks about the document and package, the intervention to the implementation ready.

It says, by the end of the five year grant all applications funded under this announcement will document their intervention with sufficient detail so it is implementation ready, and can be replicated by others. Grantees will provide to OAH a complete electronic package of the final implementation ready intervention prior to the end of the grant.

To be implementation ready an innovation must have clearly defined program materials and components, necessary staff support, and training and specified guidelines and tools monitoring Fidelity. Implementation ready interventions

must include all the necessary comments that will allow the intervention to be effectively implanted by someone other than the original developer. This implementation ready guidance's can be found, and the link you'll find on page -- I think it's going to be on Page 22 -- I'm not sure if it will be on 21, or 22 of the FOA and you can go to that.

Following up on that, we'll talk a little bit about the copyright issue. About who would own the product, and will it require legal fees on behalf of the grantee to figure this out. We assume the inquiry refers to copyright ownership of works produced by grantees under the TPP Research and Demonstration Grant Award.

Grantees should consult legal counsel on the copyright ownership of their work. To the extent that legal consultation on this issue results in additional expense. The cost of legal services are generally considered to be allowable cost under a grant. There are some limitation and we'll give you this language I mean, the reference we'll put on the Web site. And, the HHS grant policy statement.

Neither Federal Grant Funding nor the terms of the TPB Research and Demonstrating Grant effect copyright ownership. In other words, copyright ownership of the program materials is for the grantee to determine, and is not effected by either the receipt of Federal Funding or the specific terms of the TPD cooperative agreement.

We'll give you some information on US copyright office, and we'll put this on our FAQ so you can have this. Because we have a guidance document on this that is actually not in the FOA. So, this will be put up on FAQ's here within the next week, so you'll have a little more explanation of copyright questions that may come up. Because there are issues of ownership, and copyrights and

we do want to be clear on that. OAH does not own copyright to your materials. So, do not worry about that part.

Amy Margolis: Joanne we're getting the same, different versions of basically the same question, about which programs are not eligible for funding. And, I think at this point all that we can say, is the programs that are not eligible for funding are listed in Appendix D of the FOA.

They include currently identified evidence, base programs on the HHS teen pregnancy prevention evidence review. Adaptations of the evidence-based programs on HHS teen pregnancy prevention evidence review. And, programs that are being currently rigorously evaluated under the current tier two OAH/PREIS FOA. And again, those programs are listed in Appendix D of the FOA.

You know, there's gray area in there, and it's not an exact science. It's up to each applicant to describe what their intervention is, why you're proposing it, and the contribution that it makes. And, we have laid out what we're looking for you to describe for each intervention you're proposing starting on Page 13 of the FOA.

So, you know, we're not going to be able to say, yes or no whether the intervention is allowed or not allowed unless it is very clear cut, you know, if the program is listed in Appendix D. But, again there's a lot of gray area there and it's going to be up to each applicant to make the case, and include the information we've requested starting on Page 13 of the FOA.

Tara Rice: Yes, and I'd just like to add on to what Amy said, that it's up to the applicant to make the case, and really to making the case to the Independent Review Panel who's going to be scoring. So, please very carefully look at what we

talk about, for proposed intervention and the application content section. As well, as in the scoring criteria, so you can see what reviewers are going to be looking for. And, you know, gage your intervention and see is this interventions going to meet these standards.

Amy Margolis: We're also getting a lot of question on, there's confusing around the budget floor evaluation activities. And, I know it's confusing we have several different FOAs out on the street at the same time, and they have different funding restrictions in each one. For the Tier 2B FOA -- the focus of today's call -- there is no limitation or cap around evaluations. So, it is up to each applicant to determine how much funding you need to request for your evaluation activities. So, we have not set a cap around evaluations.

Man: Another question here. What if we don't have an approve indirect rate with a Federal Agency. How do we get this? On Page 70 of the FOA it lists the beginning of cost allocation regional authors. And, there's a list of division cost allocation offices included in this funding opportunity announcement. You can reach out office to work to acquire an improvement indirect rate agreement.

If you submit a budget, request an indirect rate to reimbursement we would review that application if it's eligible. But, if it's approved the cost may be restricted until you have an approved indirect rate.

S&A is allowed, some time to determine S&A is the same as indirect rate is this allowed? Yes it's allowed. Is the S&A considered part of the budget the $400,000 to one million amount? Yes, when you submit your budget you should include any proposed indirect reimbursement cost within that budget. No additional funding, above and beyond would be approved to pay indirect cost outside the direct cost will be authorized. So, include within that budget

the combined direct and indirect cost of your proposed project together. Not to exceed the authorized amount of one million.

Tara Rice: All right, another question. Does HHS or OAH have any requirement for level of effort or percent time allocations for key personal? There's not any specific requirement laid out here. However, it will be important to make sure that you're developing a plan for staffing that is going to be sufficient to complete the project in all aspects of the project that you're proposing to do.

The next question. If a subset of our population, peer educators will not including in the RCT trial and unique health goal, can we still include them in our intervention and budget? And, so the response is, that the only people-- and it's a little unclear to me this is boarder on an individual question application question.

But, what I say is that, anything you're budgeting for and including in our budget needs to be related to your proposed project, and your proposed intervention. And, so if someone's not in your proposed evaluation, and they're not working on proposed evaluation, it's not really justified to budget grant funds towards something that they do.

The next question. Are indirects included in the one million maximum budget request? Are applications required to utilize the level funding approach? What are the national year cost are significantly higher than years two through five. So, we've kind of already addressed a lot of these things before. The one million would include indirect and direct or any funding amount that you request would include those indirect cost and direct cost. And, we have said that, you know, level funding is how you should set up your budgets. So, you know, that's why it's going to be very important to come up with a five year budget and a five year work plan.

The next question is, how is service delivery defined with participant clinical services provided by the implantation partner be an allowable reimbursement? So, the answer here is that, any services that are provided, either as part of your intervention or, you know, servers that are provided as part of your control group are directly through your proposed intervention would be an allowable for grant funds. Use of grant funds.

Joanne Jensen: Here's a question. How far along in development does the intervention need to be qualify for Tier 2B? And, how much program development can be done during the planning year? This is, I think what you'll find in the FOA it tells you that whatever your intervention is, that you need to make the case for why you think it's going to be a good intervention. You need formative research, you need to find out from the ligation house part of it been used before, another parts been used some other way. And, you're actually putting together.

But, if you're just putting your intervention together at the beginning -- it seems like -- I think if you look at what the milestones are in the first year -- that planning year -- between 6 months and 12. But, if you have to do a lot of work on your intervention, that is going to be a problem. And, for people who are ready to go I think they're going to be able to score a lot higher.

Amy Margolis: Joanne is the question, is the ten pages for the evaluation design plan an estimate or a limit?

Amy Margolis: It's an estimate.

Amy Margolis: Sorry about that. The limit is that the evaluating design plan must fit within the 50-page project narrative limit, page limit. But, we've given the ten pages

of an estimate so you can have some sense of sort of the level of detail we're looking for, instead of how much the project narrative we anticipate your evaluating design frame will take up.

Woman: I've got one says, that the million dollar budget cap is annual and not for the whole five year period. Is that correct? And, yes it is. Its a million dollars that are the cap. A million dollars each year. So, the total thing would be five million dollars. Thanks.

Joanne Jensen: So, another question that we're getting a couple of time in a couple of places. Are should references be part of the 50-page limit or should they be in the appendices. So, if you're providing references to support information that you're providing in our project narrative -- generally speaking we say that the rule of thumb is -- is that anything you're going to be writing should be in the project narrative, as a narrative. And, things that are supporting materials should go in the appendices. So, you list of references should go in the appendices. So, that means that they would count towards that 100-page limit.

Tara Rice: There was a question about will we share the number of letters for the intent that we've received? Unfortunate we will not. We use that information for our own planning purpose to help plan the objective review process. So, we ask that you please do submit to us a letter of intent of you are planning to apply. But, we will not share the numbers of letters in intent that we have received.

There was another question about, are we allowed to include multiple copies of an MOU on one page. Like two MOUs per page. And, we've been looking and this was in the FOA somewhere. On Page 40 to 41 it does say, that pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceed the paper invitations.

So, you are not allowed to combine multiple pages onto one page. But, you can, you know, it is up to you how you submit your MOUs and letters of intent and other pieces of the appendices. But, do not sort of condense them down so they're smaller so you can send multiple pages, on a single page.

JoAnne Jensen: Okay. Another question. Has the settle executive pay scale cap increased to $183,300 for $181.500 as mentioned in the funding announcement. The answer is yes, that change went into effect, January of 2015 which was right before the Epelay come out. So, that has been-- so that information the pay scale is now $183,300 is the cap.

Tara Rice: So, I have question. Can curriculum base intervention programs be eligible for this grant? And, the answer is, yes. If so, what types of curriculum intentions are encouraged? You know, that's why we're opening this to you guys to find out what are going to be the new, we're looking to add to the evidence base. So, we need new and innovative.

So, what makes them new is the next part and innovative? Well, that's why we're looking to you guys to inform us. What types of approaches are eligible? We're open, we're looking for everything that makes a difference. Be creative, is it technology based, is technology plus something else. Are you working with teachers, are you working with parents. Are you, you know, what is new, because we need something that's going to have a positive effect for our adolescents.

It says, another question is the ten-- no I already answered that, sorry. Can we work with youth we are up to age 24 of they have one, entered their program before age 19? Or, a male who is over the age of 19 at risk at causing a teen pregnancy?

So, yes the male over 19, can and it has to be, the target population is, in professionals who work closely with individuals who are 19 of age or under, at program entry. So, they come in under, if they're younger than 19 then they can stay in the program. Youth who are not yet teenagers are also eligible if the intent of the proposed intervention is to prevent teen pregnancy.

The other things is you can also be for individuals, families of individual also of-- and these have to be related to 19 of the year of age and under at entry. Under that time which you're allowed so I hope that answered it for. That's on Page 14 of the FOA, so you can review that a little more careful.

Joanne Jensen: Okay, the next question. Will a proposal of a lower budget be considered more competitive than a maximum budget? There's no score in criteria that assess you by how much you're asking for, so no. You're going to be scored by how well, how complete your application is, and how it adheres to the scoring criteria on Pages 71 through 79, so answer no.

Next question. Would you be able to provide an example of the budget narrative on your Web site? No, unfortunately that's no sample templates available, please refer to the budget narrative guidance within the funding announcement for more details about formatting and also about content for your budget narrative.

Man: It was in the slides, as well.

Joanne Jensen: Yes, it's also in the slide information about what to put in your budget narrative and formatting for it. The next question. Is preliminary data required, if so is there certain type required? So, the answer is and I'm assuming this is preliminary data on your proposed intervention.

So, you want to look at what we ask for, for proposed intervention within the application content section of the funding opportunity announcement. And, also look at the scoring criteria related to the proposed intervention within the funding announcement. Because we talk about how you need to have-- so you need to be talking about you intervention is promising, why it's feasible. Why it's potential likely to have an effect in terms of reducing teen pregnancy or associated risk factors.

So, please review the application content section, referring to specifically the parts that relate to the proposed intervention, for more guidance about that. And, then you have the latitude to show what information you have and how that fits with our-- with what we're asking for. And, what the scoring criteria are.

Amy Margolis: We might have already answered these but there's a question that if you've been a prior Tier 2B, is it okay to use the same team to work on a new intervention. Again, this is a new completely separate funding opportunity announcement that's going to be reviewed independently, it's up to you to propose the team that you need to implement and evaluate this project. If it's the same as the team you've worked with before that's up to. But, we don't have any restrictions or any guidance around, you know, whether to use the same people or not. It's completely up to you.

And, then there's another question, is it okay to be a primary applicant on one FOA, IE in Tier 2B and a consultant on another like tier 1A? Again, you know, an organization can submit an application in the more than one of the funding opportunity announcements. You can technically submit more than one application to a single funding opportunity announcement provided that you have the capacity to do that at your origination.

So yes, you can be the primary application and one and a consultant on another. You can be a primary applicant on two. It's completely up to each of these are independent funding announcements.

Tara Rice: Okay, another question has come up. Please clarify what type geographic boundaries are acceptable to use in order to define and applicant quote targeted community? For example, does OH require target communities to be defined by zip codes, counties, cities, and neighborhoods, which of these units geography would be acceptable when defining the boundaries and the applicant's targeted community?

All right, so the answer to this funding announcement, TPP Tier 2B, there is not a specific definition of community. We're looking to application to tell us what community or communities they're' going to be serving, where there target population is located. All right, so that's very specific to TPP Tier 2B.

All right, next question can we use NIH style buyer sketches instead of SVs or resumes? So, that's not really any specific formatting of how you're providing information about the roles and responsibilities and experience. It's up to you as the applicant, you know, you just want to make sure that you clearly identify where that information is so that the reviewers can find it when looking at your applications.

Amy Margolis: There's another question about, can the budget narrative be a single space or does the narrative have to be double spaced. Again, please check the application formatting -- that we talked about on the slides and -- in the FOA. The budget narrative does not count toward the 50-page limits are designated as or the 100-page of the overall application. So, we do ask that you do use the same application formatting as possible. So, double spacing would be preferred.

Tara Rice: So, another question are there non-TPP evidence-based interventions that have been adapted eligible for this grant? And again, this goes to, you know, our overall question, our overall things about, you know, broadly you want to make sure whatever you're proposing to do, that it's not something that's listed in Appendix D. That it's innovative, that it's promising, that it's feasible, that it's likely to provide an impact in either teen pregnancy or an associated risk factor.

All right so we have still have a few question that we haven't answered. A lot of them really overlap though with some of the question that we've already answered and we're running over our time limit now. So, I would like to close and just say that if your question did not get answer today we will be updating the FAQ document in the next few days, to pick up some of these questions that we didn't have time to answer today.

You are also more than welcome to submit your questions to us. Our contact information is on this slide and it's also in the FOA. If there's budget question we ask that you direct them to (Roscoe) in the Office of Grants Management. And, if they're program - programmatical question we ask that you direct them to OAH, as TPP Tier 2B email or at the telephone number listed above.

So, thank you so much for the interest. And, have a great day.

Coordinator: Thank you, and this does conclude today's conference. You may disconnect at this time.

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