DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

FUNDING OPPORTUNITY TITLE: Announcement of Availability of Funds for Support for Expectant and Parenting Teens, Women, Fathers and Their Families

ACTION: Notice

ANNOUNCEMENT TYPE: Competitive Grant

FUNDING OPPORTUNITY ANNOUNCEMENT NUMBER: OASH/OAH-PAF-2013

CFDA NUMBER: 93.500

CFDA PROGRAM: Pregnancy Assistance Fund Program: Support for Pregnant and Parenting Teens and Women

DATES: Non-binding Letters of Intent are due March 15, 2013 by 5 p.m. ET.

Applications are due **April 10, 2013 by 5 p.m. ET**. To receive consideration, applications must be received by the HHS Office of the Assistant Secretary for Health (HHS/OASH), Office of Grants Management (OGM) no later than the applicable due date listed in this announcement (Section IV. 3, Submission Dates and Times) and within the time frames specified in the announcement. All applications for this funding opportunity must be submitted electronically through Grants.gov, and must be received by 5:00 PM Eastern Time on the applicable due date.

All applicants must submit in this manner unless they obtain a written exemption from this requirement 48 hours in advance of the deadline by the Director, HHS/OASH Office of Grants Management. Applicants must request an exemption in writing via email from the HHS/OASH Office of Grants

Management, and provide details as to why they are technologically unable to submit electronically through Grants.gov portal. If requesting a waiver, include the following in the e-mail request: the HHS/OASH announcement number; the organization's DUNS number; the name, address and telephone number of the organization; the name and telephone number of the Project Director; the Grants.gov Tracking Number (GRANTXXXX) assigned to the submissions; and a copy of the "Rejected with Errors" notification from Grant.gov. Send the request to ogm.oash@hhs.gov.

The HHS/OASH Office of Grants Management will only accept paper applications from applicants that received prior written approval. However, the application must still be submitted by the deadline. No other submission mechanisms will be accepted. The application due date requirements, specified in this announcement, supersede the instructions in the instructions in the application kit. Applications which do not meet the specified deadlines will be returned to the applicant unread. See the heading "**APPLICATION and SUBMISSION INFORMATION**" for information on application submission mechanisms.

To ensure adequate time to successfully submit the application, HHS/OASH recommends that applicants register immediately in Grants.gov since the registration process can take up to one month. For information on registering for Grants.gov, refer to http://www.grants.gov or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

Applicants are strongly encouraged to register multiple authorized organization representatives.

EXECUTIVE SUMMARY: The Office of Adolescent Health (OAH) announces the availability of Fiscal Year (FY) 2013 funds for competitive grants under the authority of Sections 10211- 10214 of the Patient Protection and Affordable Care Act (Public Law 111-148; Affordable Care Act). This notice solicits applications from States, which include the District of Columbia, any commonwealth, possession,

or other territory of the United States and any Federally-recognized Indian tribe or reservation, (hereafter referred to as "States or tribes"), for the development and implementation of programs for expectant and parenting teens, women, fathers and their families. OAH anticipates that up to $24 million will be available to fund up to 32 grants in the amount of $500,000 to $1,500,000 per year for a four-year project period.

The authorized representative from the State or tribe must apply for grant funds available through this announcement to assist expectant and parenting teens, women, fathers and their families. A signed letter from the authorized representative must accompany the application and should include documentation establishing the authorized representative's authority to apply for and administer the grant funds on behalf of the State or tribe. OAH will accept only one application per State or tribe. All qualified applications will be given equal considerations. Previous grantees will not be given priority for funding based on their award history.

Funding Available	Letter of Intent Due	Applications Due	Grants Awarded
$24 million	**March 15, 2013** 5:00PM Eastern Time	**April 10, 2013** 5:00PM Eastern Time www.grants.gov	**July 1, 2013**

I. FUNDING OPPORTUNITY DESCRIPTION:

Purpose

The Pregnancy Assistance Fund (PAF) grant program provides support for States and tribes to develop and implement programs to improve the educational, health, and social outcomes for expectant and parenting teens, women, fathers and their families. The PAF aims to strengthen access to and completion of education (secondary and postsecondary); improve child and maternal health outcomes; improve

pregnancy planning and spacing and reduce the likelihood of repeat teen pregnancies; increase parenting skills for mothers, fathers, and families; strengthen co-parenting relationships and marriage where appropriate, increase positive paternal involvement; decrease intimate partner violence; and raise awareness of available resources.

For purposes of this funding announcement, the term "expectant" includes both women and men who are expecting a child. The term teens refers to both young men and women of high-school age and students refers to women and men enrolled in institutions of higher education. Families include, but are not limited to spouses, partners, and children. OAH encourages applications that serve both pregnant teens and women and expectant and parenting fathers.

Applicants may apply for funding in one or more of the following categories:

- **Category 1 – Providing support for expectant and parenting students in Institutions of Higher Education (IHE)**. The target population for category 1 is expectant and parenting students of any age who are enrolled in an eligible IHE, and their families.
- **Category 2 – Providing support for expectant and parenting teens, women, fathers and their families in high schools and community service centers**. The target population for category 2 is expectant and parenting teens, women, fathers and their families. Although all expectant and parenting women and men are eligible for services in this category, given the available resources OAH requests applications that target activities to serve expectant and parenting teens , expectant and parenting young women and men, and their families. This is a group with particularly high rates of unplanned pregnancy for whom program services can assist with helping them complete high school or postsecondary degrees.
- **Category 3 - Improving services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking**. The target population for category 3 is a female of any age who is pregnant on the date on which she becomes a victim of domestic violence,

sexual violence, sexual assault, or stalking, or who was pregnant during the one-year period before such date.

- **Category 4 – Increasing public awareness and education of services available for expectant and parenting teens, women, fathers and their families.** While public awareness campaigns are an allowable activity under this funding announcement, HHS encourages applications that are not solely focused on such activities. HHS desires applications in category 4 that aim to increase public awareness and education of services provided in categories 1, 2, or 3.

Applicants may apply for funds to address one or more of the funding categories. Applicants who apply for funding to address multiple categories should ensure that the programs and services from any one category are well connected and integrated to ensure a seamless network of support for the participants.

Applicants should use the PAF legislation, and information included in this announcement and in the application kit, to guide them in developing their applications. Applicants should also review the definition of terms contained in Appendix A. A copy of the PAF statute can be downloaded from the OAH website at http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf.

Background

In 2011, the birth rate for women aged15-19 years dropped to a record low of 31.3 per 1,000. Rates declined among teens of all ages and among all racial and ethnic groups. Compared to 2010, the birth rate for teens ages 15-17 dropped 11 percent to 15.4 per 1,000 and the rate for teens ages 18-19 dropped 7 percent to 54.1 per 1,000. Birth rates for African American teens declined 8 percent and rates for Hispanic teens declined 11%. Birth rates for young women aged 20-24 years also declined 5 percent from 2010 to 85.3 births per 1,000 women. [1]

[1] Hamilton BE, Martin JA, Ventura SJ. Births: Preliminary data for 2011. *National Vital Statistics Reports*. 2012;61(5).

Despite the progress that has been made in reducing teen and unintended pregnancy, it's estimated that more than 750,000 teen girls become pregnant each year[2], a total of 329,797 babies were born to teen mothers in 2011[1], an estimated 50% of births to young women ages 20-24 were unintended[3], and great disparities continue to exist between racial and ethnic groups. The teen birth rate for Hispanic (49.4 per 1,000) and black (47.4 per 1,000) teen girls was more than double the rate for white teen girls (21.8 per 1,000).[1] Furthermore, teen birth rates in the U.S. are higher than most other developed countries, including Canada and the U.K.[4]

Teen pregnancy and childbearing have significant health, social, and economic impacts on teen parents and their children. Teen parents face multiple risks for poor life outcomes. Compared with their peers who delay childbearing, teen girls who have babies are less likely to finish high school, more likely to rely on public assistance, and more likely to be poor as adults.[5] Teen fathers are also less likely to graduate high school,[6] and they are also more likely to face fewer employment opportunities than their nonparent peers.[7] Thirty percent of teen girls who drop out of high school stated that pregnancy or parenthood was a key reason for their dropping out. Only 40 percent of teen mothers finish high school

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[2] Guttmacher Institute. (2010). *U.S. teenage pregnancies, births and abortions: National and state trends and trends by race and ethnicity*. Washington, DC: Guttmacher Institute. Retrieved January 7, 2011, from http://www.guttmacher.org/pubs/USTPtrends.pdf

[3] Mosher WD, Jones J, Abma JC. (2012). Intended and unintended births in the United States: 1982–2010. National health statistics reports; no 55. Hyattsville, MD: National Center for Health Statistics.

[4] Centers for Disease Control and Prevention. (2011). *Preventing teen pregnancy in the US*. Retrieved November 27, 2012, from http://www.cdc.gov/VitalSigns/TeenPregnancy/index.html

[5] Hoffman, S. D., & Maynard, R. A. (Eds.). (2008). *Kids having kids: Economic costs and social consequences of teen pregnancy* (2nd ed.). Washington, DC: Urban Institute Press.

[6] Mollborn, S. (2010). Exploring Variation in Teenage Mothers' and Fathers' Educational Attainment. Journal of Persepctives on Sexual and Reproductive Health 42(3): 152-159.

[7] Bunting, L., and McAuley, C. (2004) Research Review: Teenage pregnancy and parenthood: the role of fathers. Journal of Child & Family Social Work 9(3):295-303.

and less than two percent finish college by the age of 30.[8] In addition, as many as 60 percent of teen fathers do not complete high school.[9]

The children of teen mothers are more likely to have lower school achievement, have more health problems, become incarcerated during adolescence, and face unemployment as a young adult.[10] Girls born to teen parents are almost 33% more likely to become teen parents themselves, continuing the cycle of teen pregnancy.[11] In addition, teen childbearing costs U.S. taxpayers approximately $11 billion annually due to lost tax revenue, increased public assistance payments, and greater expenditures for public health care, foster care, and criminal justice services.[12]

Pregnant teens and women are also often victims of violence. Studies have found that adolescent girls in physically abusive relationships were three times more likely to become pregnant than non-abused girls; that 55% of a sample of teen moms experienced intimate partner violence in the past year, and that adolescent mothers who experienced physical abuse within three months after delivery were twice as likely to have a repeat pregnancy within 24 months. Another study found that approximately 20 percent of pregnant teens reported physical or sexual abuse during pregnancy.[13]

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[8] The National Campaign to Prevent Teen and Unplanned Pregnancy. (2012). Teen Pregnancy & High School Dropout: What Communities Can Do to Address These Issues. Retrieved on November 27, 2012 from http://www.thenationalcampaign.org/resources/pdf/teen-preg-hs-dropout.pdf.

[9] Marsiglio, W. (1987) Adolescent fathers in the United States: their initial living arrangements, marital experience, and educational outcomes. *Journal of Family Planning Perspectives* 19(6):240-251.

[10] Hoffman SD. *Kids Having Kids: Economic Costs and Social Consequences of Teen Pregnancy.* Washington, DC: The Urban Institute Press; 2008.

[11] Centers for Disease Control and Prevention. (2011). *Preventing teen pregnancy in the US*. Retrieved November 27, 2012, from http://www.cdc.gov/VitalSigns/TeenPregnancy/index.html

[12] Hoffman, S. D., & Maynard, R. A. (Eds.). (2008). *Kids having kids: Economic costs and social consequences of teen pregnancy* (2nd ed.). Washington, DC: Urban Institute Press.

[13] Futures Without Violence. (2010). The Facts on Adolescent Pregnancy, Reproductive Risk and Exposure to Dating and Family Violence. Retrieved November 27, 2012 at

Programs for expectant and parenting teens and women should recognize the relationship between violence and pregnancy and adopt a trauma-informed approach. Trauma-informed care is a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors and that creates opportunities for survivors to rebuild a sense of control and empowerment.[14] Furthermore, programs that involve mothers and fathers should include violence safeguards and domestic violence prevention as a component of services provided directly or through partnership with other service providers.

In FY2010, the Office of Adolescent Health (OAH) funded 17 States and Tribes for a three year project period (FY2010 – 2012) through the Pregnancy Assistance Fund grant program. OAH anticipates funding up to 32 awards in FY2013 for a four-year project period to provide broad coverage of services across the U.S.

For more information about the PAF, a copy of the authorizing legislation is available in the application kit and on the OAH website at http://www.hhs.gov/ash/oah/oah-initiatives/paf/home.html. Additional information about the PAF, including highlights from current PAF grantees, is available in the PAF Resource Center at http://www.hhs.gov/ash/oah/oah-initiatives/paf.

Additional Resources

In developing a proposal, applicants may want to review existing public resources such as, but not limited to, the following:

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http://www.futureswithoutviolence.org/userfiles/file/HealthCare/Adolescent%20Pregnancy%20Reproductive%20Risk%20FINAL%202-10.pdf.

[14] Administration for Children and Families. (2012) What is Trauma. Accessed November 27, 2012 from http://www.acf.hhs.gov/sites/default/files/fysb/trauma20120829.pdf.

- Administration for Children, Youth, and Families. (2012). Working with Pregnant and Parenting Teens Tip Sheet. Available at http://www.acf.hhs.gov/sites/default/files/assets/pregnant-parenting-teens-tips.pdf.
- Healthy Teen Network. (2008). A BDI Logic Model for Working with Young Families. Available at http://www.healthyteennetwork.org/vertical/sites/%7BB4D0CC76-CF78-4784-BA7C-5D0436F6040C%7D/uploads/%7B04E4E173-F070-4D2E-BC99-FC55C1BCFA16%7D.PDF.
- National Responsible Fatherhood Clearinghouse. A national resource for fathers, practitioners, programs/Federal grantees, states, and the public at-large who are serving or interested in supporting strong fathers and families. Available at http://www.fatherhood.gov. National Women's Law Center. (2012). A Pregnancy Test for Schools: The Impact of Education Laws on Pregnant and Parenting Teens. Available at http://www.nwlc.org/reports-overview/pregnancy-test-schools-impact-education-laws-pregnant-and-parenting-students.
- Office of Adolescent Health Pregnancy Assistance Fund Resource Center. Includes access to a wide range of resources on education, economic stability, health, housing, healthy relationships, intimate partner violence, youth development, and parenting. Available at http://www.hhs.gov/ash/oah/oah-initiatives/paf.
- The National Campaign to Prevent Teen and Unplanned Pregnancy and America's Promise Alliance. (2012). Teen Pregnancy and High School Dropout: What Communities are Doing to Address these Issues. Available at http://www.thenationalcampaign.org/resources/pdf/teen-preg-hs-dropout.pdf.

This listing does not constitute an endorsement of any particular organization or resource, but is intended to highlight the types of information available related to issues faced by expectant and parenting teens and women.

Approach

This announcement seeks proposals from States or tribes to develop and implement activities to improve the education, health, and social outcomes for expectant and parenting teens, women, fathers and their families. Applicants may propose using grant funds to carry out any or all of the following activities. Activities should be developed as a comprehensive program for the target area and population.

All services provided to expectant and parenting teens, women, fathers and their families in categories 1, 2, and 3 should be evidence-based or evidence-informed, and culturally and linguistically appropriate. Evidence-based programs are those that have demonstrated impacts on key outcomes throughout rigorous research and evaluation, and been identified through a systematic independent review that considers both study design and the quality of the research study conducted. Examples include evidence-based programs identified by HHS to prevent teenage pregnancy (http://www.hhs.gov/ash/oah/oah-initiatives/tpp/tpp-database.html), evidence-based home visiting programs that target families with pregnant women and children from birth to age 5 (http://homvee.acf.hhs.gov/Default.aspx), and SAMHSA's National Registry of Evidence-based Programs and Practices (http://www.nrepp.samhsa.gov/Index.aspx). Evidence-informed programs include new or emerging programs that are theory-based and have been implemented previously, even on a limited scale or in a limited setting, and yielded promising results. For all proposed evidence-informed programs, applicants should include a description of the theory and the evidence supporting the program. Given the limited availability of evidence-based programs involving expectant or parenting men, OAH encourages the use of evidence-informed programs to identify and test promising strategies to include fathers. Culturally and linguistically appropriate services are respectful or and responsive to the cultural and linguistic needs of the individuals served.

Category-Specific Expectations

Category 1 - Providing support for expectant and parenting students in Institutions of Higher Education (IHEs)

An applicant may make funds available to eligible IHEs to establish, maintain, or operate services for expectant and parenting students and their families. OAH is particularly interested in partnerships with IHEs that demonstrate the greatest need for services, defined in terms of numbers of expectant and parenting students. Such funding shall be used to supplement, not supplant, existing funding for such services. While grant funds may be used for direct service provision, applicants are encouraged to collaborate and link with existing service providers, especially in instances in which the ongoing costs of support may be beyond the scope of funding available.

In providing services to expectant and parenting students, the eligible IHE may use funds to:

(A) Conduct a needs and resource assessment of the services, policies, and systems available on campus or within the local community to meet the needs of expectant and parenting students and their families; and set goals for improving such services and improving access to such resources. Areas of focus should include, but are not limited to:

- The inclusion of maternity coverage and the availability of riders for additional family members in student health care.
- Family housing.
- Child care.
- Flexible or alternative academic scheduling, such as telecommuting programs, to enable expectant or parenting students to continue their education or stay in school.
- Education to improve parenting skills, including teaching mothers and fathers about the developmental needs of infants and young children, and how to relate to each other and strengthen relationships or marriages where appropriate.

- Maternity and baby clothing, baby food (including formula), access to appropriate information about and space for breastfeeding, baby furniture, and similar items to assist parents and expectant parents in meeting the material needs of their children.
- Post-partum counseling including counseling on nutrition, exercise, mental health, and planning for subsequent pregnancies.

In addition, OAH encourages IHEs to assess other related needs of expectant and parenting students, such as:

- The dissemination of information about the availability of and eligibility for health coverage under federal and state programs, such as Medicaid, the Children's Health Insurance Program (CHIP), and the health insurance marketplaces, also known as Affordable Insurance Exchanges, established by the Affordable Care Act, the health care law of 2010; and the provision of application assistance and enrollment for expectant and parenting students and their children. For more information on the marketplaces, visit www.healthcare.gov.
- Health literacy - nearly 9 out of 10 adults have difficulty using the everyday health information that is routinely available in health care facilities, retail outlets, media, and communities. Limited health literacy is associated with poorer health outcomes and higher health care costs. Grantees are encouraged to work with program participants to improve their ability to search for and use health information and adopt healthy behaviors.
- Education completion and attainment.
- Healthy relationships.
- Trauma and/or violence.
- Job training.
- Financial literacy.

(B) Identify public and private service providers, located on campus or within the local community, that are qualified to meet the needs of enrolled expectant and parenting students as described in paragraph (A), and establish programs with qualified providers to meet such needs.

(C) Assist expectant and parenting students and their families in locating and obtaining services that meet the needs as described in paragraph (A).

(D) Establish formal and informal partnerships to which the IHE can provide referrals for the expectant and parenting students and their families to receive direct services for prenatal care and delivery, infant care, foster care, or adoption. In addition, OAH encourages partnerships to provide referrals for postnatal care; access to available services including, but not limited to Medicaid, CHIP, and TANF; health care and mental health care services; and early childhood programs such as early Head Start. Referrals should be made only to service providers that serve the following types of individuals: parents, prospective parents awaiting adoption, women who are pregnant and plan on parenting or placing the child for adoption, and parenting or prospective parenting couples.

(E) Conduct an annual assessment of the performance of the eligible IHEs in meeting the needs of enrolled expectant and parenting students as described in paragraph (A).

The State or tribe must solicit applications from eligible IHEs that desire to receive funding under this category. The State or tribe should determine the timeframe and content required in the application from the eligible IHE. **In addition, an eligible IHE that receives funding under Category 1 is required to provide a match from non-Federal funds in the amount of 25 percent of the amount of funding provided. The non-Federal share may be in cash or in-kind (at fair market value), including services, facilities, supplies, or equipment.**

Category 2 – Providing support for expectant and parenting teens, women, and fathers and their families in high schools and community service centers

A State or tribe may use funds received under this grant to make funding available to eligible high schools and community service centers that serve expectant and parenting teens, women, fathers and their families. The State or tribe should establish, maintain or operate expectant and parenting services in the same general manner and in accordance with all conditions and requirements described above for Category 1, except that the 25 percent matching requirement does not apply. All education programs and activities funded under Category 1 and Category 2 are required to comply with the requirements of Title IX of the Education Amendments of 1972 (Title IX), 20 U.S.C. §§1681 et seq., as well as with HHS regulations at 45 CFR part 86, which prohibit discrimination on the basis of gender in education programs and activities receiving Federal financial assistance.

If an applicant chooses to apply for funds in both category 1 and category 2, the needs assessment and program approach for expectant and parenting teens, women, fathers and their families served in category 2 should be distinct and different from the needs assessment and program approach for expectant and parenting students served in category 1. For example, teens may need a different kind of academic support and case management that involves the students' parents and other supports in ways that differ from the supports many students in an IHE may need.

Programs funded in high school or community service center environments are encouraged to establish linkages and partnerships with IHEs to further promote education for the teens served. These partnerships should focus on the promotion of postsecondary education and the assurance of a successful transition to the postsecondary environment.

Category 3 - Improving services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking.

A State or tribe may provide funding to its State Attorney General or functional equivalent for tribes to assist Statewide offices in providing the following services for an eligible pregnant woman, defined as a female of any age, who is pregnant on the date on which she becomes a victim of domestic violence, sexual violence, sexual assault, or stalking or who was pregnant during the one-year period before such date:

- Intervention services, including a 24-hour hotline for police protection and referrals to shelters;
- Accompaniment services, which include assisting, representing, and accompanying a woman in seeking judicial relief for child support, child custody, restraining orders, and restitution for harm to persons and property, and in filing criminal charges, and may include payment of court costs and reasonable associated attorney and witness fees;
- Supportive social services including transitional and permanent housing, vocational counseling, mental health services, and individual and group counseling aimed at preventing domestic violence, sexual violence, sexual assault, or stalking;
- Technical assistance and training related to violence against eligible pregnant women for Federal, State, tribal, territorial, and local governments, law enforcement agencies and courts; professionals working in legal, social service and health care settings; nonprofit organizations; and faith-based organizations on one or more of the following topics:
    - The identification of eligible pregnant women experiencing domestic violence, sexual violence, sexual assault, or stalking;
    - The assessment of the immediate and short-term safety of such a pregnant woman, the evaluation of the impact of the violence or stalking on the pregnant woman's

health, and the assistance of the pregnant woman in developing a plan aimed at preventing further domestic violence, sexual violence, sexual assault, or stalking;

- The maintenance of complete medical or forensic records that include the documentation of any examination, treatment given, and referrals made, recording the location and nature of the pregnant woman's injuries, and the establishment of mechanisms to ensure the privacy and confidentiality of those medical records; and
- The identification and referral of the pregnant woman to appropriate public and private nonprofit entities that provide intervention services, accompaniment, and supportive social services.

In order to receive funds from the State under this category, a State Attorney General must submit an application to the designated State agency. The State Attorney General may partner with appropriate entities for program development and implementation purposes. Applicants requesting funding for category 3 must include a Memorandum of Understanding (MOUs) or Letter of Commitment from the State Attorney General or functional equivalent for tribes in their application.

Category 4 – Increasing public awareness and education of services available for expectant and parenting teens, women, fathers and their families.

A State or tribe may use grant funds to make funding available to increase public awareness and education concerning any services or resources available to expectant and parenting teens, women, fathers and their families, which support the intent and purposes of this funding announcement. Public awareness and education activities should assist expectant and parenting teens, women, fathers and their families in learning about available benefits and supportive services in the community and assist them with accessing such services. Applicants are encouraged to leverage existing public awareness and educational activities, such as Text4baby, a free text messaging service that is designed to promote maternal and child health. Activities related to public awareness and education may also include the

development of user friendly websites and new media tools to increase awareness and access to appropriate services.

The applicant shall be responsible for setting guidelines or limits as to how much of this funding may be utilized for public awareness and education in any funding award. In the application, the applicant should clearly describe the guidelines or limits that will be used to establish a reasonable level of support for these activities. While public awareness campaigns are an allowable activity under this funding announcement, OAH encourages applications that are not solely focused on such activities, but rather support a broader set of activities for the target population. For example, while it is helpful to provide public information materials regarding Medicaid, CHIP, and the health insurance marketplaces or Affordable Insurance Exchanges, efforts to ensure that enrollment assistance is available to expectant and parenting teens and women and their families is encouraged. OAH desires applications in category 4 that aim to increase public awareness and education of services provided in categories 1, 2, and/or 3.

Expectations across All Categories

Phased In Implementation

During the first 6 months of the first grant year, funded recipients are expected to engage in a planning, piloting and readiness period. This period is devoted to securing partnerships, strategic planning, hiring, training, conducting needs assessments, reviewing materials for medical accuracy, and otherwise ensuring readiness for full implementation. The duration of the length of the planning period is contingent upon each grantee's demonstrated readiness, but will not exceed 6 months. The planning period is designed to assist funded projects to do the following activities:

- Continue to Assess Needs and Resources: Applicants are expected to use data to justify the need for the proposed program in their application. The planning period provides additional

time for grantees to continue assessing needs of the target population and resources available in the target community(ies) to ensure that the proposed program is a good fit prior to implementation. Results of the needs and resource assessment should be used to identify additional partners and to inform program goals and objectives. Conducting a needs and resource assessment is not a one-time activity, but should be repeated periodically to ensure the program continues to meet the needs of the population(s) served.

- Finalize Goals, Objectives, and Logic Model: Applicants are expected to propose goals, objectives, and a logic model in their application, describing the behaviors and determinants (risk factors) they plan to impact with programming. The planning period will enable grantees, with the assistance of OAH, to refine and finalize their goals, objectives, and the logic model.
- Build Organizational Capacity: Applicants are expected to describe their organizational capacity to implement the proposed program(s) and strategies and to identify additional capacity needs or other resources needed to successfully implement their program. During the planning period, grantees will have an opportunity to enhance their organizational capacity, including provide training for staff to enhance skills to deliver the proposed program.
- Secure, enhance, and expand partnerships: Applicants are expected to identify partners to assist with program implementation and to submit signed Memoranda of Understanding (MOUs) with their application. The planning period provides time to work with partners on the details of implementation.
- Engage in strategic planning: During the planning period, grantees are expected to engage in strategic planning with their key implementation partners to ensure a shared vision and action plan for accomplishing program goals and objectives.

By the end of the planning period, all implementation partners should be in place and should be ready to begin implementing the program. Grantees must submit to OAH evidence that they have secured all partnerships and are ready to begin program implementation, including a completed implementation plan. Written approval from OAH is necessary before a grantee may proceed with full implementation.

Collaboration

Funded recipients are expected to establish strong collaborations and partnerships across State, local, and tribal entities to ensure the availability and success of wrap-around services for expectant and parenting teens, women, fathers and their families. Under this funding opportunity, OAH expects that strong partnerships will be developed for program implementation purposes and to ensure that programs are most effectively responding to the needs of the target population. Examples of strategic partnerships include, but are not limited to other Departments and agencies in the State, early childhood education programs (e.g., Head Start), Medicaid, Statewide and local coalitions, Community Health Centers, community-based organizations, and faith-based organizations. OAH is particularly interested in programs that work either formally or informally with institutions of higher education.

Medical Accuracy

Funded recipients are expected to ensure that materials used in any activities funded under this announcement are medically accurate and complete. The term "medically accurate and complete" means all medical information is verified or supported by the weight of research conducted in compliance with accepted scientific methods; and published in peer-reviewed journals, where applicable, or comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete. Applicants should describe the process to be used to ensure medical accuracy in the grant funded project, including how the review will be conducted and who will be responsible for reviewing materials.

Performance Measures

All funded recipients will be expected to collect and report on a common set of performance measures to assess program implementation and whether the program is achieving intended outcomes. Generally, there are four broad categories of performance measures that OAH anticipates all grantees will be required to track: (1) participant demographics (e.g., age, gender, race, ethnicity) (2) output measures (e.g., number of participants served, services and referrals provided); (3) implementation and capacity building (e.g., trainings, community partnerships, public awareness strategies); and (4) outcome measures (e.g., educational attainment, birth spacing, repeat teen pregnancy). Applicants will be required to collect performance measure data from individual participants, as well as of their staff and partners and should describe their capacity to report on such performance measures. OAH is developing a standard set of performance measures that will be uniformly collected across grantees. Data collection and reporting on these measures requires the Department to obtain approval from the Office of Management and Budget (OMB) under the Paperwork Reduction Act. Final performance measures will be shared with grantees once approved by OMB. Grantees will be required to collect data on these measures from all funded implementation partners, and report data to OAH once per year. OAH will provide training on collecting and reporting required performance measure data. A preliminary list of measures is included in Appendix B of this FOA.

In addition to the uniform set of performance measures required by OAH, grantees may identify and require implementation partners to collect and report data on other performance measures specific to the intended outcomes of the program being implemented. No later than 180 days before the Report to the State or tribe (see below) is due, the grantee shall identify and inform implementation partners about any additional performance measures, criteria or standards that they will be required to report on. The grantee shall also establish and inform implementation partners about the format of the report.

Report to the State or Tribe

For each year that the grantee provides an eligible institution or organization with funds from the PAF, the grantee must receive a report from the funded institution or organization that includes the following information:

1. An itemization of the organization's expenditures on services for expectant and parenting teens, women, fathers and their families;

2. A review and evaluation of the performance of the organization in fulfilling the program requirements as specified in this funding opportunity, including a report on the required performance measures; and

3. A description of the achievement of the organization in meeting the needs of expectant and parenting teens, women, fathers and their families, and the frequency of use of the program by expectant and parenting teens, women, fathers and their families.

The funded State or tribe must determine the format of the report and the date by which the report is due from funded institutions or organizations. The funded State or tribe should submit a copy of reports received from funded institutions or organizations to OAH.

Grantee Evaluation

Grantees may propose to evaluate their program and disseminate the evaluation results to enhance the evidence-base of what works in serving expectant and parenting teens, women, fathers and their families. Grantees may spend no more than 10% of awarded funds on evaluation activities. The 10% budget limit does not include funds to collect and report the required performance measure data. OAH anticipates that grantees use the evaluation funds to conduct an in-depth implementation study; to assess participant knowledge, attitudes, and beliefs; and/or to assess participant satisfaction. Applicants interested in

participating in a rigorous impact evaluation should demonstrate why they should be candidates in the Federal evaluation described below.

Grantees conducting an evaluation are expected to consult with OAH on the evaluation design and implementation; and OAH approval of the final evaluation plan will be required prior to full implementation. Applicants should use the 6-month planning period to finalize an evaluation plan.

Federal Evaluation of PAF Programs

OAH may conduct a Federal evaluation of the Pregnancy Assistance Fund programs. It is anticipated that OAH will partner with an independent research firm to conduct this evaluation. As part of this evaluation project, OAH will select 2-3 PAF-funded programs to undergo a rigorous implementation and impact evaluation in order to determine the effectiveness of the selected programs. All PAF grantees will be considered for inclusion in this evaluation and are required to participate if selected. Participation in the Federal evaluation will provide the selected grantees with a national spotlight, giving them the opportunity to tell their story to a broad group of stakeholders. Grantees selected for participation in the Federal evaluation will continue to implement any planned grantee evaluation activities (see "Grantee Evaluation" section above), and will be required to collaborate with the Federal evaluator to support evaluation activities related to the Federal level evaluation.

The following are key aspects of the Federal evaluation:

- **Random assignment of study sites or participants to "program" or "control" groups**. The primary purpose of the impact evaluation will be to determine whether the selected programs are effective at reducing unintended pregnancy and improving educational attainment. In order to address this question, study participants will be randomly assigned to either (1) a program group,

in which they receive the PAF-funded services or (2) a control group, in which they do not receive PAF-funded services, but rather, receive "services as usual" in their school or local community. The Federal evaluation team will work collaboratively with grantees to develop a plan for random assignment. The plan may entail randomly assigning individuals to receive the program or to a control group, or - alternatively - randomly assigning program sites (for example, schools or community-based organizations) to deliver the program or to be control sites. Under either scenario, it may or may not be possible for youth in the control group to participate in the program after data collection for the evaluation is complete.

If random assignment is not feasible, OAH will consider use of a strong quasi-experimental design. This design would mean that groups of individuals or sites are chosen to receive the PAF-funded program and matched-comparison groups of individuals or sites are chosen to not receive the PAF-funded program. This design would require multiple sites or groups of youth similar enough to each other to be used as comparisons.

- **Collection and analysis of data**. For the purposes of an implementation evaluation, the evaluation team may make site visits to selected sites, conduct interviews with stakeholders and program staff, hold focus groups with program participants, review program documents and conduct observations of program implementation to document the quality of delivery. For outcome evaluation purposes, the evaluation team may administer surveys to program youth shortly before the programs begin, and then again at short-term and long-term intervals after programs end. Using the outcome data surveys, the evaluation team will compare outcomes for youth randomly assigned to the programs and those who were not, and differences detected between these two groups can be attributed to the selected PAF-funded programs. The proposed evaluation design and planned analyses will provide sound, scientific credible evidence about program effectiveness.

Sustainability Planning

OAH expects grantees to develop a sustainability plan within the first 12-18 months of receiving funding, and to implement strategies focused on sustaining the program each year. Grantees are encouraged to develop a sustainability plan with their partners and key stakeholders.

Annual funding is contingent both on availability of funds and readiness to implement. OAH will undertake a review of the program on an annual basis. If the grantee is consistently not meeting performance markers, OAH may determine to discontinue funding based on lack of satisfactory performance.

II. AUTHORITY

Sections 10211-10214 of the Patient Protection and Affordable Care Act (Public Law 111-148).

III. AWARD INFORMATION

The Affordable Care Act authorizes and appropriates $25 million for fiscal years 2010-2019 for the Support for Expectant and Parenting Teens, Women, Fathers and Their Families program. Of this amount, OAH intends to make available up to $24 million for competing grants. Grants will be funded in annual increments (budget periods) for a project period of 4 years. Funding for all approved budget periods beyond the first year of the grant is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

Award Information

Estimated Funds Available for Competition: up to $24,000,000

Anticipated Number of Awards: up to 32

Range of Awards: $500,000 - $1,500,000 annually

Anticipated Start Date: 07/01/2013

Period of Performance: Not to exceed 4 years

Budget Period Length: 12 months

Type of Award: Grant

Type of Application Accepted: Electronic via Grants.gov **ONLY unless a waiver is granted**

IV. ELIGIBILITY INFORMATION

1. Eligible Applicants

Any State, which includes the District of Columbia, any commonwealth possession, or other territory of the United States, and any Indian tribe or reservation is eligible to apply for a grant under this announcement. The authorized representative from the State or tribe shall apply for and administer the grant awarded under this announcement. A signed letter from the authorized representative must accompany the application; it should include documentation establishing the authorized representative's authority to apply for and administer the grant funds on behalf of the State or tribe. Appropriate agencies that might apply on behalf of the State or tribe could include, but are not limited to the following types of entities: State education, human services, or health agencies. Interested State agencies are encouraged to partner with other interested State agencies early in the application process to ensure that the needs of the target population in that State will be met through this grant. Each State or tribe is allowed only one eligible application for submission.

Funded programs should build on, and not duplicate current Federal programs as well as State, local or community programs, and should coordinate with existing programs and resources as appropriate. Applicants should partner directly with local entities to ensure that the intended programmatic outcomes can be reached. Federal funds may not be used to supplant the non-Federal or other Federal funds that would otherwise be made available for an activity.

2. Cost Sharing or Matching

An Institution of Higher Education that receives funding from a grantee to provide services under category 1 is required to provide a match from non-Federal funds in the amount of 25 percent of the

amount of funding provided. The match may be in cash or in-kind. High schools, community service centers and State Attorneys General receiving funds from a State or tribe to provide services under categories 2, 3, or 4 are not required to provide matching or cost sharing.

While there is no cost sharing requirement for categories 2, 3, or 4 in this funding opportunity, applicants and any collaborating partners are welcome to devote resources to this effort. Any indication of institutional support from the applicant and its collaborators indicates a greater potential of success and sustainability of the project. Examples of institutional support could include: donated equipment and space, institutional funded staff time and efforts, or other investments. Applicants that plan to provide support should indicate institutional support by outlining specific contributions to the project and providing assurances that their organization and any collaborators are committed to providing these funds and/or resources to the project. Successful applicants should build on, but not duplicate existing Federal programs as well as State, local, tribal, or community programs and coordinate with existing resources in the community.

3. Responsiveness and Screening Criteria

Application Responsiveness Criteria

Applications will be reviewed to determine whether they meet the following responsiveness criteria. Those that do not will be administratively eliminated from the competition and will not be reviewed.

1. All eligible applicants as described in Section IV above must include a letter from the Authorized Representative stating the applicant is authorized to apply on behalf of the specified State or tribe. Only one application per State or tribe is allowed. If more than one application is submitted from an individual State or tribe, all applications from that entity will be deemed unresponsive and will not be reviewed for funding competition.
2. All applicants for category 3 funding must include a partnership with the State Attorney General or functional equivalent for tribes to assist in providing services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking. Applicants requesting

funding for category 3 must include a Memorandum of Understanding (MOUs) or Letter of Commitment from the State Attorney General or functional equivalent for tribes in their application.

Application Screening Criteria

All applications will be screened and any applications that fail to meet the screening criteria described below will **not** be reviewed and will receive **no** further consideration.

1. Applications must be submitted electronically via www.grants.gov (unless a waiver has been granted) by **5:00pm Eastern Time on April 10, 2013.**
2. The Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½ " x 11" inch page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points. All pages should be clearly numbered.
3. The Project Narrative must not exceed 35 double-spaced pages. NOTE: The following items do not count toward the page limit: required forms, including SF 424 and SF 424A, budget justification and/or budget narrative, summary/abstract; supportive appendices including memoranda of understanding/letters of commitment, letter from the authorized representative, and vitae of key personnel.
4. Appendices must not exceed 65 pages. Appendices include all information not included in the Project Narrative, except for the summary/abstract; the required forms, including the SF 424 and SF 424A; and the budget justification.
5. The application has met the **Application Responsiveness Criteria** outlined above.

V. APPLICATION AND SUBMISSION INFORMATION

1. Information to Request Application Package

Application kits may be obtained electronically by accessing Grants.gov at http://www.grants.gov/. If you have problems accessing the application or difficulty downloading, contact:

Grant Operations Center, Office of Grants Management Operations Center, telephone 1-888-203-6161, or email ASH@LCGnet.com.

Other Submission Information

Letter of Intent

Prospective applicants are asked to submit a letter of intent as early as possible, but no later than **5:00 p.m. Eastern Time on March 15, 2013**. Although a letter of intent is not required, is not binding, and does not enter into the review of a subsequent application, the information that it contains allows OAH staff to estimate the potential review workload and plan the review. The letter of intent should be sent to the Office of Adolescent Health at the address listed under the AGENCY CONTACTS section below. The letter of intent should include a descriptive title of the proposed project, the name, address and telephone number for the designated authorized representative of the applicant organization, and the FOA number and title of this announcement, "Support for Expectant and Parenting Teens, Women, Fathers and their Families".

2. Content and Form of Application Submission

Applications must be prepared using forms and information provided in the application kit.

The application project narrative must be limited to no more than 35 double-spaced pages, and the total application, including appendices, may not exceed the equivalent of 100, 8 ½" x 11" pages when printed by OASH/OGM. The overall 100-page limit does not include the budget, budget

justification/narrative, and required forms, assurances, and certifications. Budget justification should not exceed 15 pages.

The applicant should use an easily readable serif or sans serif typeface, such as Times New Roman or Arial, 12-point font. The page limit does not include budget, budget justification, required forms, assurances, and certifications. All pages, charts, figures, and tables should be numbered, and a table of contents provided. Applications that exceed the specified limits of 35 pages for the project narrative and 100 pages for the total application not including the budget, budget justification, and required forms, assurances, and certifications when printed by OASH/OGM will be deemed non-responsive and will not be considered. It is recommended that applicants print out their applications before submitting electronically to ensure that they are within the page limit.

Appendices should include the Letter from the Authorized Representative from the State or tribe; curriculum vitae; Memoranda of Understanding or Letters of Commitment; organizational structure; examples of organizational capabilities; or other supplemental information which supports the application. Brochures and bound materials should not be submitted. Appendices are for supportive information only and should be clearly labeled. All information that is critical to the proposed project should be included in the body of the application.

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

1. A reference to the Applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in the IRS code;
2. A copy of a currently valid IRS tax exemption certificate;

3. A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals; or
4. A certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status.

For local, nonprofit affiliates or State or national organizations, a statement signed by the parent organization indicating that the applicant organization is a local nonprofit affiliate must be provided in addition to any one of the above acceptable proof of nonprofit status.

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

The HHS Office of the Assistant Secretary for Health (HHS/OASH) requires that all applications be submitted electronically via the Grants.gov portal unless a waiver has been granted. Any applications submitted via any other means of electronic communication, including facsimile or electronic mail, will not be accepted for review.

You may access the Grants.gov website portal at http://www.grants.gov. All HHS/OASH funding opportunities and application kits are made available on Grants.gov.

Applications will not be considered valid until all electronic application components are received by the HHS/OASH Office of Grants Management according to the deadlines specified above. Application submissions that do not adhere to the due date requirements will be considered late and will be deemed ineligible.

Applicants are encouraged to initiate electronic applications early in the application development process. This will aid in addressing any problems with submissions prior to the application deadline. Any files uploaded or attached to the Grants.gov application must be of the following file formats – Microsoft Word, Excel or PowerPoint, Adobe PDF, or image formats (JPG, GIF, TIFF, or BMP only). Even though Grants.gov allows applicants to attach any file format as part of their application, HHS/OASH restricts this practice and only accepts the file formats identified above. Any file submitted as part of the Grants.gov application that is not in a file format identified above will not be accepted for processing and will be excluded from the application during the review process. The application must be submitted in a file format that can easily be copied and read by reviewers. It is recommended that scanned copies not be submitted through Grants.gov unless the applicant confirms the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. All documents that do not conform to the above will be excluded from the application during the review process.

A. **Important Grants.gov Information**

Electronic submission via Grants.gov is a two-step process. Upon completion of a successful electronic application submission via the Grants.gov Website Portal, the applicant will be provided with a confirmation page from Grants.gov indicating the date and time (Eastern Time) of the electronic application submission, as well as the Grants.gov Receipt Number. It is critical that the applicant print and retain this confirmation for their records, as well as a copy of the entire application package.

All applications submitted via the Grants.gov Website Portal then will be validated by Grants.gov. Any applications deemed "Invalid" by the Grants.gov Website Portal will not be transferred to HHS/OASH, and HHS/OASH has no responsibility for any application that is not validated and transferred to HHS/OASH from the Grants.gov Website Portal. Grants.gov will notify the applicant regarding the application validation status.

You will initially receive a notice that your application has been received by Grants.gov and is being validated. Validation may take up to 2 business days. You will receive a notice via email when your application has been validated by Grants.gov and is ready for the HHS/OASH to retrieve and review. If your application fails validation it will **not** be accepted for review. Therefore, **you should submit your electronic application with sufficient time to ensure that it is validated in case something needs to be corrected.**

Applicants should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through the Grants.gov Website Portal.

- You may access the electronic application for this program on http://www.grants.gov. You must search the downloadable application page by the Funding Opportunity Number or CFDA number.
- At the http://www.grants.gov website, you will find information about submitting an application electronically through the site, including the hours of operation. HHS/OASH strongly recommends that you do not wait until the application due date to begin the application process through http://www.grants.gov because of the time involved to complete the registration process.
- Since October 1, 2003, the Office of Management and Budget has required applicants to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements. It is entered on the SF 424. It is a unique, **nine-digit identification number**, which provides unique identifiers of single business entities. The DUNS number is free and easy to obtain.
- Organizations can receive a DUNS number at no cost by calling the dedicated toll-free DUNS Number request line at 1-866-705-5711 or by using this link to access a guide:

https://www.whitehouse.gov/omb/grants/duns_num_guide.pdf. Instructions are also available on the Grants.Gov web site as part of the registration process.

- All applicants must register in the System for Account Management (SAM) (formerly the Central Contractor Registery (CCR)). You should allow a minimum of five days to complete the SAM registration. Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations. You can register with the SAM online and it will take about 30 minutes (http://sam.gov).

Each year organizations registered to apply for Federal grants through http://www.grants.gov will need to renew their registration with the SAM. According to the SAM Website http://sam.gov it can take 24 hours or more for updates to take effect, so potential applicants should **check for active registration well before the application deadline.**

- Effective October 1, 2010, HHS requires all entities that plan to apply for and ultimately receive Federal grant funds from any HHS Operating/Staff Division (OPDIV/STAFFDIV) or receive sub-awards directly from the recipients of those grant funds to:
  1. Be registered in the SAM prior to submitting an application or plan;
  2. Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an OPDIV; and
  3. Provide its DUNS number in each application or plan it submits to the OPDIV.

An award cannot be made until the applicant has complied with these requirements. At the time an award is ready to be made, if the intended recipient has not complied with these requirements, the OPDIV/STAFFDIV:

- May determine that the applicant is not qualified to receive an award; and

- May use that determination as a basis for making an award to another applicant.

Additionally, all first-tier sub-award recipients must have a DUNS number at the time the sub-award is made.

- You must submit all documents electronically, including all information included on the SF-424 and all necessary assurances and certifications.
- Prior to application submission, Microsoft Vista and Office 2007 users should review the http://www.grants.gov compatibility information and submission instructions provided at http://www.grants.gov (click on "**Vista and Microsoft Office 2007 Compatibility Information**").
- Your application must comply with any page limitation requirements described in this Program Announcement.
- **Attachment Filename Characters are now Validated and Enforced:**
  - Beginning August 15, 2012, applicants are now limited to using the following characters in all attachment file names.
  - Valid file names may only include the following **UTF-8 characters:**
    - **A-Z, a-z, 0-9, underscore (_), hyphen (-), space, period.**
    - **If applicants use any other characters when naming their attachment files their applications will be rejected.**

B. Application Content

Successful applications will contain the following information:

Summary/Abstract

Applications should include a brief- no more than 500 word- abstract that provides a description of the proposed project, including: activities, goal(s), objectives, and outcomes. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management documents. The abstract may also be distributed to provide information

to the public and Congress and represents a high-level summary of the project. As a result, applicants should prepare a clear, accurate, concise abstract that can be understood without reference to other parts of the application.

The following information should be included at the top of the Project Abstract (this information is not included in the 500 word maximum):

Name of State or Indian Tribe
Project Title
Applicant Agency/Authorized Representative
Address
Contact Name
Contact Phone Numbers (Voice, Fax)
E-Mail Address and Web Site Address, if applicable

Project Narrative

The Project Narrative is the most important part of the application, since it will be used as the 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.

The Summary/Abstract, Supportive Appendices including Memoranda of Understanding/Letters of Commitment and Vitae of Key Personnel, Budget and Budget Justification/Narrative, and required forms, assurances, and certifications are not counted as part of the Project Narrative for purposes of the 35-page limit, but all of the other sections noted below are included in the limit.

HHS/OASH recommends that your project narrative include the following components:

Need Statement

Organizational Capability

Project Management

Goal(s), Objectives, and Logic Model

Proposed Intervention

Work Plan

Stakeholder Organizations and Partners

Performance Measurement

Evaluation

Capacity to Participate in the Federal Evaluation

Need Statement

Clearly and succinctly describe, in both quantitative and qualitative terms, the nature and scope of the specific issues facing expectant and parenting teens, women, fathers and their families in the areas and/or institutions being targeted. Describe the needs of expectant and parenting teens, women, fathers and their families in the target institution/community and how the program will benefit the target population; and/or the need to increase public awareness and education concerning any services available to expectant and parenting teens, women, fathers and their families.. Describe the analyses or needs assessments that were completed to identify the specific target populations and/or geographic areas and their needs. Include brief descriptions of existing programs that address the issues and gaps. Demonstrate that the applicant has assessed how best to use the available grant funds and where funds will be of most assistance by serving those with the greatest need that are underserved.

Organizational Capability

Describe the organizational structure of the responsible Department or work unit that will oversee the grant project and the capabilities it possesses. Include information about personnel, time and facilities, and describe the organization's capacity to provide the rapid and effective use of resources needed to conduct the project and collect necessary data. Describe the organization's experience, expertise, and previous accomplishments in working with expectant and parenting teens, women, fathers and their

families. Describe the available resources and organizational capability to manage and implement the project, as well as coordinate with other agencies and organizations. Describe the key staff and their roles. Curriculum vitae for key personnel should be included in the Appendices, which has 65-page limit, rather than as a part of the project narrative.

Project Management

Describe the project management and partner monitoring plan for the grant, including a clear delineation of the roles and responsibilities of project staff and sub-awardees and partners and how they will contribute to achieving the project's objectives and outcomes. Sub-awardees do not need to be identified at the time of the application, but the applicant should describe how the sub-awardees will be identified. Describe how it will ensure program integrity, including a description of the steps that will be taken to ensure that the grant funds are used effectively and efficiently. Address how the State or tribe will ensure the grant funds are used consistent with the authorizing statute and in accordance with the provisions set forth in this funding announcement. Describe the criteria it will establish in making any sub-awards, how it will monitor sub-awardees, and how it will coordinate efforts to assist expectant and parenting teens, women, fathers and their families. Describe the approach that will be used to monitor and track progress on the project's tasks and objectives. OAH expects that, throughout the grant period, the grantee Project Director will have involvement in, and substantial knowledge about, all aspects of the project.

Goals, Objectives, and Logic Model

Describe the project's goal(s) and major objectives. Describe the proposed project through a detailed logic model that clearly depicts the inputs and activities of the project and the intended outputs and outcomes (short- and long-term). Goal statements should be directly supported by related outcome objectives that are Specific, Measurable, Achievable, Realistic, and Time-framed (S.M.A.R.T.). These

should be designed to identify and monitor progress in the development and implementation of the project, as well as to measure program outcomes. Describe how services, supports and linkages to existing services will improve the outcomes for expectant and parenting teens, women, fathers and their families. Measures of program outcomes should be tied to the performance measures and may include, but are not limited to, graduation rates, school retention and reduction in drop-out rates, parenting skills, maintained co-parenting relationships, subsequent pregnancy rates, and other maternal and child health outcomes. Indicate plans for future programmatic strategic planning to further engage key partners and ensure a seamless network of services.

Proposed Intervention

Provide a clear and concise description of the program(s), activities, and services being proposed and describe how the approach is based upon the applicant's experience and the needs of the target population. Describe how grant funds will be used, including which of the allowable categories it will direct funds toward (postsecondary student support, high school and community service center support, reducing violence against eligible pregnant women, and/or public education/awareness).

Describe the activities to be undertaken, how they address system gaps and identified issues and challenges, and how they will assist in achieving the overall project goals and objectives. Explain the rationale for using a particular intervention and present a clear connection between identified system gaps and needs and the proposed activities. Present detailed information for how all category-specific and cross-category specific expectations will be addressed (pp. 10-22). Clarify why the specific activities were selected (i.e. has this approach been successful in other settings? Is there evidence to support this direction?) and note any major barriers anticipated and how the project will be able to overcome those barriers. If applicable, demonstrate how the various activities from different categories will be integrated with one another to provide comprehensive, wraparound service.

Describe how the proposed programs or practices are evidence-based or evidence-informed, and culturally and linguistically appropriate. Provide data or specific references to support the effectiveness of the proposed programs and/or activities and, if applicable, demonstrate how proposed evidence-informed programs or strategies are theory-based. Describe how the applicant will ensure that all program materials are medically accurate and complete.

Describe how the applicant will link to existing resources and health, education, and social services, and provide specific examples of partnerships, linkages, or networks that already exist or will be developed with the grant in order to provide expectant and parenting teens, women, fathers and their families access to necessary services. If applicable, provide clear and reasonable guidelines or limits on the use of funds for public awareness and education activities.

Work Plan

Include a statement of the project's overall goal, anticipated outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). For each major task of each year, action step, or product, the work plan should identify the timeframes involved (including start- and end-dates), the lead person responsible for completing the task, and should cover all four years of the proposed project. The first six months of the project can be used for a phased-in implementation period to allow the project to finalize partnerships and secure support for strong implementation. The work plan should include activities focused on developing a sustainability plan during the first 12-18 months of funding and implementing strategies aimed at sustaining the project each year thereafter.

Include the need for training to support program staff with implementation of program models and activities and for professional development purposes.

The first cohort of PAF grantees experienced several challenges with initial program implementation. Applicants are encouraged to consider some of these challenges and ensure that their work plans take into consideration these types of barriers and any others relevant to the applicant and plan appropriately.

Examples of challenges/barriers:

- **Delay receiving approval from State legislatures to accept funding**
- **Staffing challenges** (hiring and turnover)
- **Training needs**
- **Change in State-level administrations**
- **Longer-than-expected time frames for activities**
- **Difficulty recruiting participants**
- **Barriers to participant use of services** (timing; legal issues)
- **Barriers to stakeholder buy-in**

Stakeholder Organizations and Partners

Describe how the applicant will involve service recipients, existing health, education, and social service providers, institutions of higher education, high schools, community services centers and/or its State Attorneys General, as appropriate, in the design and implementation of the proposed project. Include clear roles and responsibilities for each partner in this section to provide a thorough description of the project's intended management structure. Include signed Memoranda of Understanding or Letters of Commitment for all organizations and entities that are named as a sub-awardee or primary partner to carry out any aspect of the project that detail the specific role and resources that will be provided, or activities that will

be undertaken, in support of the applicant. Key partners should be included in the development of the application.

Performance Measurement and Evaluation

Clearly identify the measurable outcome(s) that the project is designed to impact. Describe how the applicant plans to establish benchmarks for each measurable outcome. Describe its capability to collect and report on the set of OAH-required process and outcome performance measures (see Appendix B).

Describe its capability to implement monitoring and reporting systems to aid in internal data collection around metrics for successful achievement of performance measures. Describe how it will identify any additional performance measures, criteria or standards that implementation partners will be required to collect and report on.

Describe the methods to be used to evaluate the program and disseminate the evaluation results to enhance the evidence-base of what works in serving expectant and parenting teens, women, fathers and their families. Describe the focus of the evaluation (ie. in-depth implementation study; assessment of participant satisfaction, knowledge, attitudes, or beliefs) and the key evaluation questions that will be addressed. Describe the quantitative and qualitative tools and techniques that will be employed and how they will identify, document, and share evaluation findings. Describe the methods that will be used to disseminate the project's results and findings in a timely manner and in easily understandable formats to the target audience, the general public, and other stakeholders who might be interested in using the results of the project. No more than 10% of the Federal grant funds may be used to support grantee-led evaluation efforts (see pages 20-21).

Capacity to Participate in the Federal Evaluation

The applicant should describe its capacity to participate in the Federal evaluation. This information is required but will not be scored during the application review process. Rather, the information will be used by OAH to choose grantees for the evaluation. Applicants should describe their:

1. Ability to randomly assign individuals (or sites) to either receive PAF-funded services or receive "services-as-usual" over at least a two-year period. Applicants should discuss whether a random assignment design is feasible, or could be feasible, given their programming plans. A random assignment design would require that no individual or site (i.e. school, community), depending on the level of randomization, be chosen to receive the PAF program or not; chances of receiving the program would be equal for everyone eligible, 50/50. If it is not feasible to randomly assign individuals or sites to receive the PAF program (or not to receive the programming), the applicant should discuss whether a quasi-experimental design is feasible. This design would mean that groups of individuals or sites are chosen to receive the PAF-funded programming and matched-comparison groups of individuals or sites are chosen not to receive PAF-funded programming. This design would require multiple sites or groups of youth similar enough to each other to be used as comparisons.

2. Ability to ensure a strong contrast between the services to be received by program participants and "services-as-usual." Assuming an effective program model and strong implementation of the program, random assignment impact evaluation and quasi-experimental evaluation designs will only demonstrate positive program impacts if there is a strong contrast between the services to be received by program participants and the "services-as-usual" received by control or comparison group members. Applicants should clearly describe what services, if any, are received by the program participants who would be randomly assigned to the control group.

3. Capacity to ensure a necessary study sample size of 1,000 study participants or at least 16 study sites (including both program and control group members) over two years of program activity. In order to achieve the necessary statistical power to detect program impacts, the evaluation may require that each selected program have a study sample of at least 1,000 study participants – approximately 500 program group members (who receive PAF-funded services) and 500 control group members (who do not receive PAF-funded services). If the design will be random assignment of sites, then 16 sites, 8 program sites and 8 control/comparison sites, may be necessary. The study sample of 1,000 participants or 16 sites may be reached by up to two years of program activity; in other words, it would be possible to have a Year 1 cohort of 500 study participants or 8 study sites and a Year 2 cohort of 500 study participants or 8 study sites.

Additional Application Content (not part of Project Narrative)

Appendices

Appendices should include the Letter from the Authorized Representative authorizing the agency to apply on behalf of the State or tribe and Memoranda of Understanding or Letters of Commitment from partners. The appendices may also include curriculum vitae for key personnel, organizational structure, examples of organizational capabilities, or other supplemental information which supports the application. Brochures and bound materials should not be submitted. Appendices are for supportive information only and should be clearly labeled. All information that is critical to the proposed project should be included in the body of the application.

Memoranda of Understanding or Letters of Commitment

Memoranda of Understanding (MOUs) or Letters of Commitment are required for all organizations and entities that have been specifically named as a sub-awardee or primary partner to carry out any aspect of the project. The signed MOUs or letters of commitment **must detail** the specific role and resources that

will be provided, or activities that will be undertaken, in support of the applicant. These documents must also demonstrate current commitment from the partners to this specific project being proposed in the application. The organization's expertise, experience, and access to the targeted population(s) should also be described in the letter of commitment.

Letters of commitment are not the same as letters of support. Letters of support are letters that are general in nature that speak to the writer's belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity. Applicants should NOT provide letters of "support," and letters of support such as this will be removed from the application package and not considered during the review.

Budget Narrative/Justification

A combined multi-year Budget Narrative/Justification covering the full project period requested as well as a detailed Budget Narrative/Justification **for the first year of grant funding** is required. The budget narrative should justify the line items of the budget request and be organized so that each category of interest is clearly identified (i.e., there should be a sub-budget for each category included in the application). The narrative should thoroughly describe how the proposed categorical costs are derived. The necessity, reasonableness, and allocability of the proposed costs should be discussed. The budget narrative should include detail on the budgets for any sub-awardees or primary partners proposed on the application.

Matching funds and/or specific contributions proposed to meet the cost sharing requirement from institutions of higher education funded under Category 1 must be fully identified and described. For in-kind contributions, the source of the contribution and how the valuation of that contribution was determined must also be described. Provide a general description of how the proposed budget, matching

funds, and sub-awardees' budgets support the administrative and programmatic activities necessary to manage the program and to accomplish the proposed activities. In all cases, applicants should thoroughly describe the scope of the proposed project and justify the size of their budget request for each category of allowable services for which they are applying.

Grant applicants should include in their budget and work plan the attendance of at least three key staff persons, including the Project Director, to a 2-day grantee conference in Washington DC in August 2013 and 2015; and the attendance of the Project Director to a 1-2 day meeting in Washington DC in 2014 and 2016. The grantee Project Director and two additional staff are expected to attend and/or participate in the conference in 2013 and 2015. Grantees should include funds to attend the conference in their budget, including transportation and lodging at the conference site. All grantee Project Directors will be required to attend the Project Directors meeting in 2014 and 2016 and should include funds to attend the meeting in their budget.

3. Submission Dates and Times

The deadline for the submission of applications under this Program Announcement is **5:00 p.m. Eastern Time on April 10, 2013.** Applications must be submitted by that date and time.

Applications that fail to meet the application due date will not be reviewed and will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with http://www.grants.gov. Grants.gov can take up to 48 hours to notify you of a successful submission.

Unsuccessful submissions will require authenticated verification from http://www.grants.gov indicating system problems existed at the time of your submission. For example, you will be required to provide an http://www.grants.gov submission error notification and/or tracking number in order to substantiate missing the cut off date.

Grants.gov (http://www.grants.gov) will automatically send applicants a tracking number and date of receipt verification electronically once the application has been successfully received and validated in http://www.grants.gov.

4. Intergovernmental Review

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

5. Funding Restrictions

The allowability, allocability, reasonableness and necessity of direct and indirect costs that may be charged to HHS/OASH grants are outlined in the following documents: 2 CFR § 220 (OMB Circular A-21, for Institutions of Higher Education); 2 CFR § 225 (OMB Circular A–87, for State, Local, and Indian Tribal Governments); 2 CFR § 230 (OMB Circular A–122, for Nonprofit Organizations); and 45 CFR part 74, Appendix E (Hospitals). Copies of the Office of Management and Budget (OMB) Circulars are available on the Internet at http://www.whitehouse.gov/omb/circulars/html.

In order to claim indirect costs as part of a budget request, an applicant must have an indirect cost rate, which has been negotiated with the Federal Government. The Health and Human Services Division of Cost Allocation (DCA) Regional Office that is applicable to your State can provide information on how to receive such a rate. A list of DCA Regional Offices is included in the application kit for this announcement.

Salary Limitation:

The Consolidated Appropriations Act, 2012 (P.L. 112-74), enacted December 23, 2011, limits the salary amount that may be awarded and charged to HHS/OASH grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is $179,700. This amount reflects an individual's base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under an HHS/OASH grant or cooperative agreement.

As an example of the application of this limitation: If an individual's base salary is $350,000 per year plus fringe benefits of 25% ($87,500) and that individual is devoting 50% of their time to this award, their base salary should be adjusted to $179,700 plus fringe of 25% ($44,925) and a total of $112,312.50 may be included in the project budget and charged to the award in salary/fringe benefits for that individual. See the breakdown below:

Individual's actual base full time salary: $350,000 50% of time will be devoted to project	
Direct salary	$175,000
Fringe (25% of salary)	$43,750
Total	$218,750
Amount that may be claimed on the application budget due to the legislative salary limitation: Individual's base full time salary adjusted to Executive Level II: $179,700 50% of time will be devoted to the project	
Direct salary	**$89,850**
Fringe (25% of salary)	**$22,462.50**
Total amount	**$112,312.50**

Appropriate salary limits will apply as required by law.

The salary limitations in the FY 2012 appropriation act may change from year to year, and the current year's limit will apply.

6. Other Submission Requirements

A transmittal letter signed by the Authorized Representative must include the Catalog of Federal Domestic Assistance (CFDA) Number 93.500 and "Support for Expectant and Parenting Teens, Women, Fathers and their Families" as the funding announcement to which the application is responding. The letter should also include a citation of the authority of the authorized representative to apply for and administer funds on behalf of the State or tribe.

VI. APPLICATION REVIEW INFORMATION

1. Criteria:

Eligible applications will be assessed according to the following criteria:

Description of Problem/Need: (15 points)

- The extent to which the applicant clearly identifies the needs, using quantitative and qualitative data, for support for the proposed geographic area or focal population of expectant and parenting teens, women, fathers and their families,
    - attending institutions of higher education or high schools or to be served by community service centers; and/or
    - for improving services for eligible pregnant women who are victims of domestic violence, sexual violence, sexual assault and stalking; and/or

- the need to increase public awareness and education concerning any services available to expectant and parenting teens and women.

- The extent to which the applicant establishes a clear assessment of the needs related to expectant and parenting teens, women, fathers and their families. The applicant should include a description of existing programs and services and gaps.
- The extent to which the applicant identifies those with the greatest need, whether population groups or geographic areas, and describes how the funds will best be used to most effectively address the needs.
- The extent to which the applicant includes a clear statement of the needs for each of the service categories proposed.

Organizational Capability and Project Management: (15 points)

- The capacity of the applicant to expedite disbursement of Federal funds and make effective use of the Federal assistance.
- The extent to which the applicant includes a description of its organizational structure and financial controls.
- The extent to which the applicant demonstrates its current capability to organize and operate the proposed project effectively and efficiently and the identification of appropriate personnel.
- The extent to which the applicant clearly describes the organization's experience, expertise and previous accomplishments in working in this area, and includes specific information about previous partnerships and strategies relevant to this application.
- The extent to which the applicant provides clear delineation of the roles and responsibilities of project staff and sub-awardees and partners and how it will contribute to achieving the project's objectives and outcomes.

- The extent to which the applicant addresses how it will ensure program integrity, including a description of the steps that will be taken to ensure that the grant funds are used effectively and efficiently.
- The extent to which the applicant describes the criteria it will establish in making any sub-awards. The applicant should describe how it will monitor sub-awardees, and how it will coordinate efforts to assist expectant and parenting teens, women, fathers and their families. It should also describe the approach that will be used to monitor and track progress on the project's tasks and objectives.

Goals, Objectives, Logic Model, and Work Plan: (15 points)

- The extent to which applicants for Category 2 funding plan to serve expectant and parenting teens, expectant and parenting young women and men, and their families , as described on page 4 of this funding announcement.
- The extent to which the applicant includes a clear description of the proposed project, including goal statements and related outcome objectives that are S.M.A.R.T. designed to identify and monitor the program.
- The extent to which the application includes a logic model for the proposed project that clearly identifies the inputs, outputs, and outcomes for the proposed project.
- The extent to which the applicant describes how services, supports and linkages to existing services will improve the outcomes for expectant and parenting teens, women, fathers and their families.
- The extent to which the application includes measures of program outcomes that are tied to the performance measures and may include, but are not limited to, graduation rates, school retention

and reduction in drop-out rates, parenting skills, maintenance of co-parenting relationships, subsequent pregnancy rates, and other maternal and child health outcomes.

- The extent to which the applicant plans for future programmatic strategic planning to further engage key partners and ensure a seamless network of services is created.

The extent to which the applicant provides a detailed Work Plan that includes the project's overall goal, anticipated outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). The Work Plan should cover all four years of the proposed project. The first six months of the project can be used for a phased-in implementation period to allow the project to finalize partnerships and secure support for strong implementation. The work plan should include development of a sustainability plan during the first 12-18 months of funding and implementation of activities aimed at sustainability each year thereafter.

Proposed Intervention: (20 points)

- The extent to which the applicant provides a clear and concise description of the program(s), activities, and services being proposed to address the needs of the target population.
- The extent to which the applicant provides clear direction demonstrating the actual activities proposed, the allowable implementation category the activities fit into, and plans to integrate all proposed activities into a comprehensive program.
- The extent to which the application addresses how the proposed activities will address the needs of the target populations and target community(ies).
- The extent to which the application addresses all category-specific and cross-category-specific expectations.

- The extent to which evidence-based or evidence-informed programs or practices will be utilized and the rationale for their use. Data or specific references should be included to support the effectiveness of the proposed programs and activities. Evidence-informed strategies should be linked to a theory of change.
- The extent to which the applicant describes how it will ensure project-supported activities are culturally and linguistically appropriate and medically accurate and complete.
- The extent to which the proposed intervention and activities address system gaps and identified issues and challenges, such as barriers to implementation, processes, procedures, monitoring, and coordination; and will assist in achieving overall program goals and objectives.
- The extent to which the applicant demonstrates that it is leveraging existing resources and linkages to existing services.
- The extent to which the plan includes clear and reasonable guidelines or limits on the use of funds for public awareness and education activities, as applicable.

Stakeholder Organizations and Partners: (15 points)

- The extent to which the applicant has and will involve service recipients, existing health, education, and social service providers, institutions of higher education, high schools, community service centers and/or the State Attorneys General in the design and/or implementation of the proposed project.
- The extent to which clear roles and responsibilities for each partner are identified.
- The extent to which a current Memoranda of Understanding or Letter of Commitment is provided for all organizations and entities that are specifically named as a sub-awardee or primary partner to carry out any aspect of the project that describes the specific role and resources that will be

provided, or activities that will be undertaken, in support of the applicant, and the organization's expertise, experience, and access to the targeted population(s).

Outcomes and Evaluation: (10 points)

- The extent to which the applicant clearly identifies the measurable outcome(s) that the project is designed to impact.
- The extent to which the applicant demonstrates capacity to collect and report on OAH-required performance measures to monitor progress.
- The extent to which the applicant describes its capability to implement monitoring and reporting systems to aid in internal data collection around metrics for successful achievement of performance measures.
- The extent to which the applicant describes how it will identify any additional performance criteria or standards that will be used by implementation partners in submitting annual reports.
- The extent to which the applicant describes how performance measure data, criteria, or standards will be used to establish benchmarks for project success and to track internal processes.
- If proposing an evaluation beyond collection of performance measure data, the extent to which the applicant describes how it will evaluate the program and disseminate the evaluation results to enhance the evidence-base of what works in serving expectant and parenting teens, women, fathers and their families, including consulting with OAH on the evaluation design and implementation. (see pages 20-21 and 40-41 for more details)
- Describe willingness to participate in a rigorous evaluation if selected by OAH.

Budget: (10 points)

- The extent to which the applicant provides a detailed first-year budget and line item justification for all operating expenses that is consistent with the proposed program objectives.

- The extent to which the applicant provides a combined multi-year budget for the four-year project period that is consistent with the proposed program objectives.
- The extent to which the applicant justifies the size of its budget request for each category of allowable services for which it is applying.
- The extent to which the applicant includes a budget for at least three staff to participate in the grantee conference in 2013 and 2015; and for the Project Director to participate in the Project Directors meeting in 2014 and 2016.
- The applicant allocates no more than 10% of the budget for evaluation activities. Funds to collect and report performance measure data are not included in the 10% limit.
- The extent to which the applicant includes a match from non-Federal funds in the amount of 25 percent of the amount of funding provided from all Institutions of Higher Education that will receive funding from the applicant to provide services under Category 1, if applicable. If the specific IHEs that will receive funding are unknown at the time of the application, the applicant should describe how it plans to obtain the required match from the IHEs that are selected to receive funding in the future.

2. Review and Selection Process

OAH is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth above.

An independent review panel will evaluate applications that pass the screening and meet the responsiveness criteria. These reviewers are experts in their fields, and are drawn from academic institutions, non-profit organizations, State and local government, and Federal government agencies. Based on the Application Review Criteria as outlined under Section VI.1, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria. In

addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance.

Final award decisions will be made by the Director of the Office of Adolescent Health in consultation with the Assistant Secretary for Health. In making these decisions, the following additional criteria will be taken into consideration:

1. Extent to which all four possible categories of funding are represented by PAF awards.

VII. AWARD ADMINISTRATION INFORMATION

1. Award Notices

The HHS Office of Assistant Secretary for Health does not release information about individual applications during the review process. When final funding decisions have been made, each applicant will be notified by letter of the outcome. The official document notifying an applicant that a project application has been approved for funding is the Notice of Award (NOA), approved by the Director of the HHS/OASH Office of Grants Management. This document specifies to the grantee the amount of money awarded, the purposes of the grant, the anticipated length of the project period, terms and conditions of the grant award, and the amount of funding to be contributed by the grantee to project costs if needed. Grantees should pay specific attention to the terms and conditions of the award as indicated on the NOA, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the grant.

2. Administrative and National Policy Requirements

In accepting the grant award, the grantee stipulates that the award and any activities thereunder are subject to all provisions of 45 CFR parts 74 and 92, currently in effect or implemented during the period of the grant.

In addition, recipients must comply with all terms and conditions outlined in their grant awards, the Department of Health and Human Services (HHS) Grants Policy Statement, requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any applicable appropriations acts.

Grant funds may only be used to support activities outlined in the approved project plan. The successful applicant will be responsible for the overall management of activities within the scope of the approved project plan. The HHS/OASH strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the HHS/OASH mission to protect and advance the physical and mental health of the American people.

Federal grant support must be acknowledged in any publication developed using funds awarded under this program. All publications developed or purchased with funds awarded under this program must be consistent with the requirements of the program. Pursuant to 45 CFR § 74.36(a), HHS may reproduce, publish, or otherwise use materials developed under this grant for Federal purposes, and may authorize others to do so.

Trafficking in Persons

Awards issued under this funding opportunity announcement are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to http://www.hhs.gov/opa/grants/trafficking_in_persons_award_condition.html. If you are unable to access this link, please contact the Grants Management Specialist identified in this funding opportunity announcement to obtain a copy of the term.

Efficient Spending

This award may also be subject to the HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and Publications available at http://dhhs.gov/asfr/ogapa/acquisition/effspendpol_memo.html.

Reporting

Programmatic Reporting

Applicants funded under this grant announcement will be required to submit programmatic and performance measure reports.

1. Programmatic reporting includes the following:
   a) A non-competing continuation applications shall be submitted to OAH electronically no later than 90 days before the grant budget period ends each year. The non-competing continuation application shall include a proposed work plan and budget for the upcoming budget period, and a progress report detailing information on the progress of the project's work plan and activities for the first six-months of the budget period.
   b) An annual progress report shall be submitted to OAH no later than 90-days after end of the reporting period each year. The progress report will include detailed information on the progress of the project's work plan and activities for the twelve-month budget period and a success story that demonstrates the progress the project has made during the budget period.
2. Performance Measure Data shall be submitted to OAH no later than 90-days after end of the twelve-month budget period.

Financial Reporting

Grantees are required to submit quarterly and annual Federal Financial Reports (FFR). Reporting schedules will be issued as a condition of grant award.

Grantees that receive $500,000 or greater of Federal funds must also undergo an independent audit in accordance with OMB Circular A-133.

Each year of the approved project period, grantees are required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year.

FFATA and FSRS Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (http://www.FSRS.gov) for all sub-awards and sub-contracts issued for $25,000 or more as well as addressing executive compensation for both grantee and sub-award organizations.

VIII. AGENCY CONTACTS

For information related to administrative and budgetary requirements, contact the HHS/OASH Office of Grants Management grants specialist listed below.

Roscoe Brunson

1101 Wootton Parkway, Suite 550

Rockville, MD 20852

Phone: 240-453-8822

Email: Roscoe.Brunson@hhs.gov

For information on program requirements, contact the program office, Office of Adolescent Health.

Victor Medrano

1101 Wootton Parkway, Suite 700

Rockville, MD 20852

Phone: 240-453-2835

Email: Victor.Medrano@hhs.gov

VIII. OTHER INFORMATION

1. Application Elements

a. SF 424 – Application for Federal Assistance

b. SF 424A – Budget Information

c. Separate Budget Narrative/Justification

d. SF 424B – Assurances. Lobbying Certification

e. Proof of non-profit status, if applicable.

f. Copy of the applicant's most recent indirect cost agreement, if requesting indirect costs. If any sub-contractors or sub-grantees are requesting indirect costs, copies of their indirect cost agreements must also be included with the application.

g. Summary/Abstract

h. Project Narrative including Need Statement; Organizational Capacity; Project Management; Goal(s), Objectives, and Logic Model; Proposed Intervention; Work plan; Stakeholder Organizations and Partners; Outcomes; and Evaluation.

i. Appendices including the Letter from the Authorized Representative; Memoranda of Understanding or Letters of Commitment from all key partners; curriculum vitae for key personnel, and any other supplemental information to support the application.

Applicant Technical Assistance

A technical assistance conference call will be held on Monday, March 4, 2013 at 2pm EST. Participants can join the audio portion of the call by calling (888) 889-6569, passcode: PAF; and the online portion at https://www.mymeetings.com/nc/join.php?i=PW4897907&p=PAF&t=c.

For more information regarding the technical assistance conference call, please consult the OAH Web site at www.hhs.gov/ash/oah.

Appendices

Appendix A – Glossary of Terms

Appendix B – Preliminary OAH-Required Performance Measures

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Evelyn M. Kappeler
Director, Office of Adolescent Health

Appendix A – Glossary of Terms

ACCOMPANIMENT- The term ”accompaniment” means assisting, representing, and accompanying a woman in seeking judicial relief for child support, child custody, restraining orders, and restitution for harm to persons and property, and in filing criminal charges, and may include the payment of court costs and reasonable associated attorney and witness fees.

COMMUNITY SERVICE CENTER - The term “community service center” means a non-profit organization that provides social services to residents of a specific geographical area via direct service or by contract with a local governmental agency.

CULTURAL AND LINGUISTIC COMPETENCE – A set of congruent behaviors, attitudes, and policies that come together in a system, agency, or among professionals that enables effective work in cross-cultural situations. Culture refers to integrated patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, or social groups. Competence implies having the capacity to function effectively as an individual and an organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and their communities. (Source: http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=11)

CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES – Health care services that are respectful of and responsive to cultural and linguistic needs (National Standards for Culturally and Linguistically Appropriate Services in Health Care Final Report, OMH, 2001). The National Standards on Culturally and Linguistically Appropriate Services are available at http://minorityhealth.hhs.gov/templates/browse.aspx?lvl=2&lvlID=15.

ELIGIBLE INSTITUTION OF HIGHER EDUCATION - The term "eligible institution of higher education” means an institution of higher education (as such term is defined in section 101 of the Higher Education Act of 1965 (20 U.S.C. 1001)) that has established and operates, or agrees to establish and operate upon the receipt of a grant under this part, a pregnant and parenting student services office.

ELIGIBLE PREGNANT WOMAN – The term “eligible pregnant woman” means any female of any age who is pregnant on the date on which she becomes a victim of domestic violence, sexual violence, sexual assault, or stalking or who was pregnant during the one-year period before such date.

EVIDENCE-BASED PROGRAM: A program that has (i) demonstrated impacts on key outcomes through-rigorous research and evaluation, and (ii) been identified through a systematic independent review that considers both study design (RCT or QED) and the quality of the research study conducted.

EVIDENCE-INFORMED PROGRAM – Includes new or emerging programs that are theory-based and have been implemented previously, even on a limited scale or in a limited setting, and yielded promising results.

HEALTH LITERACY- The capacity to obtain, process, and understand basic health information and services to make appropriate health decisions. http://www.cdc.gov/healthliteracy/ http://www.health.gov/communication/literacy/

HIGH SCHOOL - The term "high school" means any public or private school that operates grades 10 through 12, inclusive, grades 9 through 12, inclusive or grades 7 through 12, inclusive.

INTERVENTION SERVICES - The term "intervention services" means, with respect to domestic violence, sexual violence, sexual assault, or stalking, 24-hour telephone hotline services for police protection and referral to shelters.

MEDICALLY ACCURATE AND COMPLETE – The term "medically accurate and complete" means all medical information is verified or supported by the weight of research conducted in compliance with accepted scientific methods; and published in peer-reviewed journals, where applicable, or comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete.

SECRETARY- The term "Secretary" means the Secretary of Health and Human Services.

STATE - The term "State" includes the District of Columbia, any commonwealth, possession, or other territory of the United States.

SUPPORTIVE SOCIAL SERVICES - The term "supportive social services" means transitional and permanent housing, vocational counseling, and individual and group counseling aimed at preventing domestic violence, sexual violence, sexual assault, or stalking.

VIOLENCE – The term "violence" means actual violence and the risk or threat of violence.

Appendix B – Draft* OAH-Required Performance Measures

Note: The term "participants" references target populations among expectant and parenting teens, women, fathers and their families.

All Grantees

- Number of participants served, by funding category (1, 2, 3, or 4)
- Age of the expectant and parenting participants served
- Gender of the expectant and parenting participants served
- Ethnicity of the expectant and parenting participants served
- Race of the expectant and parenting participants served
- Number of expectant and parenting participants for whom a language other than English is spoken at home
- Number of expectant and parenting participants served, by living arrangement, relationship status, and co-parenting status
- Number of expectant and parenting couples served, that included both the mother and father
- Number of expectant and parenting women who received financial support from the father of the child
- Number of expectant and parenting women who received social and emotional support from the father of the child
- Number of expectant and parenting participants by type of services received directly through the program
- Number of expectant and parenting participants by type of service referrals from the program
- Number of parenting teens reporting a subsequent pregnancy before reaching the age of 20
- Number of parenting participants reporting a new pregnancy conceived within 18 months of a previous birth
- Number of staff trainings conducted by the grantee
- Number of follow-up staff trainings conducted by the grantee
- Number of formal implementation partners
- Number of informal program partners
- Number of formal partners who remained engaged for the entire program year

Category 1 Grantee Programs: (Grantees Working with Institutions of Higher Education)

- Number of expectant and parenting students participating in the program who are currently enrolled in an Institution of Higher Education
- Number of expectant and parenting students participating in the program that graduated from an Institution of Higher Education

Category 2 Grantee Programs (Grantees Working with High Schools or Community Service Centers)

- Number of expectant and parenting participants in the program currently enrolled in high school

- Number of expectant and parenting participants in the program that successfully completed academic requirements for the school year
- Number of expectant and parenting participants in the program that must repeat the school year
- Number of expectant and parenting participants in the program currently enrolled in a General Education Diploma (GED) program
- Number of expectant and parenting participants in the program that graduated from high school during the program year
- Number of expectant and parenting participants in the program that completed a General Education Diploma (GED) during the program year
- Number of expectant and parenting participants in the program that dropped out of high school during the program year
- Number of expectant and parenting participants in the program who were accepted into an Institution of Higher Education during the program year

Category 3 Grantee Programs (Grantees who are Working with Women who have Experienced Stalking, Sexual Assault, or Intimate Partner Violence)

- Number of trainings given to government agencies, nonprofits, and other organizations related to violence against expectant and parenting teens and women
- Number of expectant and parenting teens and women who received any intervention services (such as 24-hour hotlines or shelters) through the program
- Number of expectant and parenting teens and women who received accompaniment services (such as assisting, representing, and accompanying women during court proceedings) through the program
- Number of expectant and parenting teens and women who received individual or group counseling aimed at preventing or recovering from domestic violence, sexual violence, sexual assault, or stalking through the program

Category 4 Grantee Programs (Grantees who are Increasing Public Awareness and Education)

- Number and type of public awareness campaigns instituted
- Relevant metrics associated with awareness campaigns such as increases in the number of:
    - Phone calls received
    - Website hits
    - Appointments made

*Performance measures will be finalized following review and approval by the Office of Management and Budget.