

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**AGENCY:** Office of the Assistant Secretary for Health, Office of Population Affairs

**FUNDING OPPORTUNITY TITLE:** Announcement of Availability of  
Funds for a Training and Technical Assistance Project to Support the Title X Family Planning  
Program

**ACTION:** Notice

**ANNOUNCEMENT TYPE:** Initial Competitive Cooperative Agreement

**FUNDING OPPORTUNITY NUMBER:** PA-FPT-16-001

**CFDA NUMBER:** 93.260

**CFDA PROGRAM:** Family Planning Personnel Training

**DATES:** Non-binding letters of intent are due February 29, 2016.

Your application is due Monday, April 11, 2016 by 5 p.m. Eastern Time. To receive consideration, your application must be received electronically via Grants.gov by the HHS Office of the Assistant Secretary for Health (HHS/OASH), Office of Grants Management (OGM) no later than this due date and time. If your application does not meet the specified deadline it will be returned to you unread. You must submit electronically via Grants.gov unless you obtain a written exemption from this requirement 2 business days in advance of the deadline from the Director, HHS/OASH Office of Grants Management. To obtain an exemption, you must request one via email from the HHS/OASH Office of Grants Management, and provide details as to why you are technologically unable to submit electronically through Grants.gov portal. Your request should be submitted at least 4 business days prior to the application

deadline to ensure your request can be considered prior to 2 business days in advance of the deadline. If you request an exemption, include the following in your e-mail request: the HHS/OASH announcement number; your organization's DUNS number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (GRANTXXXX) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to [ogm.oash@hhs.gov](mailto:ogm.oash@hhs.gov). Note: failure to have an active System for Account Management (SAM) registration will not be grounds for receiving an exemption to the electronic submission requirement.

**The HHS/OASH Office of Grants Management will only accept applications via alternate methods (hardcopy paper via US mail or other provider or PDF via email) from applicants obtaining prior written approval.** The application must still be submitted by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via US mail or other service or PDF via email) with an approved written exemption will be accepted. *See* Section D.7. ("Other Submission Requirements") for information on application submission mechanisms.

**To ensure adequate time to successfully submit your application, HHS/OASH recommends that you register as early as possible 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](mailto:support@grants.gov).

**Your organization is strongly encouraged to register multiple authorized organization representatives in Grants.gov to ensure someone is available to submit your application.**

**Technical Assistance:** There will be a technical assistance webinar to briefly review the application process as well as the content of the funding opportunity announcement.

Representatives from the Office of Population Affairs (OPA) will be presenting information relevant to the FOA during the webinar. The webinar is scheduled for January 26, 2016 from 1-1pm EST. To join the webinar, use the following information:

URL: <https://www.mymeetings.com/nc/join/>

Conference number: PW6607153

Audience passcode: 5631260

Phone: 800-369-2014      Passcode: 5631260

The webinar will be held only once and will be posted on the OPA website following the event (<http://www.hhs.gov/opa/>).

## **EXECUTIVE SUMMARY**

The Office of Population Affairs (OPA) within the Office of the Assistant Secretary for Health (OASH) announces the availability of funds for Fiscal Year (FY) 2016 for one cooperative agreement award under the authority of section 1003 of the Public Health Service Act. This notice solicits applications for projects from public and private nonprofit entities to develop and provide training to Title X service grantees. OPA's intent is to fund one Family Planning National Training Center for Service Delivery Improvement (FPNTC-SDI) as a cooperative agreement, for a period of up to four years.

The primary purpose of the funded training center is to ensure that personnel working in Title X family planning service projects have the knowledge, skills, and attitudes necessary to effectively deliver high quality family planning services.

**A. PROGRAM DESCRIPTION**

The goal of this announcement is to fund a Family Planning National Training Center for Service Delivery Improvement (FPNTC-SDI) through a cooperative agreement. The overarching goal of OPA is to improve reproductive health outcomes for men, women and adolescents by reducing teen and unplanned pregnancies, supporting optimal birth spacing, lowering the rates of sexually transmitted diseases (STD), and improving birth outcomes. The FPNTC-SDI will contribute to these goals by supporting the sustained delivery of quality family planning services. Quality family planning services were defined in U.S. Centers for Disease Control (CDC) and OPA clinical recommendations entitled “Providing Quality Family Planning Services” (QFP), which were published in CDC’s MMWR in April 2014.[1] QFP defines ‘family planning’ services as those that help individuals and/or couples achieve their desired number and spacing of healthy children, which include: contraceptive services, pregnancy testing and counseling, services to help clients achieve pregnancy, basic infertility services, STD and other preconception health services.

The primary purpose of the funded FPNTC-SDI is to ensure that personnel working in Title X family planning service projects have the knowledge, skills, and attitudes necessary to effectively deliver high quality family planning services. However, this FOA recognizes that training,

including more intensive forms of training provided as technical assistance, should be aligned with efforts to strengthen the health care system so that it supports OPA's mission of delivering high quality family planning services, and so that the system is sustainable and capable of adapting to a changing health care environment.

The primary target population for the FPNTC-SDI will be the approximately 90 Title X service grantees, who support a network of more than 4,100 services sites nationwide serving approximately 4.1 million clients each year. Several service grantee networks rely on sub-recipient agencies that directly oversee a number of service sites, so the Training Center may also provide training and technical assistance at the sub-recipient and service site level as a way to support service grantee efforts. (For more information about the Title X program, see [www.opa.gov](http://www.opa.gov).) While the training and technical assistance materials developed in this project are for the purpose of training Title X service grantees, these materials also may be of use to providers of family planning services that are not funded by the Title X program but whose work supports the overarching goals of OPA with respect to reproductive health, such as those working in primary care settings..

OPA expects the funded Training Center will focus on the following strategic areas for family planning services delivery improvement, which are derived from the World Health Organization's health systems framework, which proposes that a "well-functioning health system working in harmony is built on having trained and motivated health workers, a well-maintained infrastructure, and a reliable supply of medicines and technologies, backed by adequate funding, strong health plans and evidence-based policies".[2]

(1) ***Leadership and management***: This involves efforts to help the service grantee leadership manage change in response to internal and external influences. A strategy focused on change management involves consciously and pro-actively acknowledging the need for leadership to set a vision for family planning service delivery and meeting the reproductive health needs of all those in need of services (including those who are in need and not currently receiving care), considering contextual influences that affect that vision, and managing the change needed to achieve that vision. Activities may include efforts to help service grantees develop leadership at the sub-recipient and/or service site levels.

(2) ***Standards and quality***: This involves efforts to set the standard of care that should be provided and supporting implementation of that standard. The publication of Federal recommendations entitled, *Providing Quality Family Planning Services, 2014* (QFP), defined the standard of care for the Title X program and other providers of family planning services. However, more work needs to be done to strengthen widespread implementation of the QFP recommendations at all levels of the Title X system. For example, expanded guidance on how to operationalize QFP is needed (i.e., what agencies need to know/do in order to implement QFP such as staffing patterns, skill sets, current protocols, clinic flow, etc), so that related quality improvement (QI) processes could become better institutionalized and robust, and referrals to/from other health care providers could be strengthened so that client care is optimized.

(3) **Financial sustainability:** This involves efforts to assure financial sustainability so providers can continue serving low-income populations. This strategy includes efforts to help service grantees: (a) understand their organization's financial health and creating a plan to sustain it; (b) diversifying their revenue sources by, for example, contracts with private health plans or working on reimbursement with state Medicaid programs; (c) develop sound administrative and financial practices, such as ensuring timely billing and collections, regular review of financial metrics, or enrolling clients in health insurance programs; and (d) strengthen income generation efforts, such as through partnerships with primary care, offering value-added services, and outreach to new Title X client populations.

(4) **Health workforce:** This involves efforts to support the development of the Title X workforce so that, given available resources and circumstances, there are sufficient numbers and mix of staff; they are fairly distributed; they are competent, responsive, productive and efficient; there are systems to identify training needs and opportunities to build skills and knowledge; and staff perceive that they work in an organizational context that supports and recognizes their efforts to provide quality care.

(5) **Knowledge management:** This involves efforts to develop systems and processes so that the right information is provided to the right person at the right time, so that Title X staff can learn from each other about ways to improve their performance.[3] Knowledge management systems are comprised of information and communication technologies such as electronic repositories, *plus* processes that encourage knowledge development and sharing across the entire Title X network, such as learning collaboratives or Communities of Practice.[4] An

effective knowledge management system contains both explicit knowledge (such as clinical guidelines or research articles on family planning service delivery) and tacit knowledge (e.g., a service site's knowledge about how to overcome a barrier to implementation).[3]

(6) ***Health IT infrastructure***: This involves efforts to align with national initiatives, such as the goals set forth in the Federal Health IT Strategic Plan<sup>1</sup> 2015-2020, by strengthening health information technology (health IT) systems, processes, and outputs in order to achieve greater interoperability, availability, and usefulness of health information. Primary foci of this strategy are to strengthen the capture of structured data elements within EHR systems, the extraction and analysis of clinically-relevant data elements, and the creation of robust billing and financial reimbursement systems to support long-term sustainability. The data captured and extracted from health IT systems within the Title X network are to be used for reporting on clinical, financial, and other public health performance measures as well as for internal quality improvement efforts.

(7) ***Contraceptive and other medical products***: This involves efforts to ensure Title X clients have timely, uninterrupted access to a broad range of contraceptive methods (optimally on a same-day basis) and the supplies and equipment needed to provide other family planning services (e.g., pregnancy tests, STD tests, Pap tests). It may include, for example, strengthening supply chain processes, monitoring stock and stock-outs, and developing systems to ensure same-day access to needed supplies and equipment.

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<sup>1</sup> Source: [https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal\\_0.pdf](https://www.healthit.gov/sites/default/files/9-5-federalhealthitstratplanfinal_0.pdf)

In their proposal, applicants should focus on building the capacity of Title X service grantees within the seven strategic areas defined above, and developing products that can be used by service grantees to strengthen the health services delivery system of the sub-recipients and service sites within each service grantee network. OPA expects that a strengthened health delivery system will enable direct service providers to offer higher quality services, which will contribute to improved health outcomes, client experience and cost savings.[5, 6] A proposed logic model for the project, which shows these relationships, is shown in the Appendix.

Towards this end, OPA expects the activities of the funded training center will include the following:

1. Define specific competencies needed by staff at grantee, sub-recipient and service site levels to successfully operationalize each of the strategic areas described above, and develop specific learning objectives for those competencies.
2. Develop a plan to provide training and technical assistance to support Title X service grantees' efforts to build the needed competencies among staff in the Title X network. The plan should describe a method of assessing when training and technical assistance is needed; how the training and technical assistance will be provided using evidence-based delivery modalities and systems change strategies that draw on research and best practice in training, implementation science, and improvement science (e.g., [7-9]); and how the training and technical assistance will be monitored over time. The plan could include the identification of standardized measures that may be used by service grantees (on a voluntary basis) to monitor

successful implementation of each of the 7 strategies within their own networks, and to help prioritize the provision of training and technical assistance, or service grantees may use other means to monitor implementation. (If a service grantee does elect to use standardized measures to monitor their own performance. OPA will not be collecting this information.

3. Implement the plan for training and technical assistance for each strategy among the Title X service grantees, and support the service grantees' efforts to provide needed training and technical assistance at the sub-recipient and service site levels of each service grantee's network. The implementation plan should also include a description of the development and ongoing maintenance of a national, electronic, web-based repository for the knowledge management strategic area, which will serve as the basis for key knowledge management processes that cut across all the other strategies and can be utilized by all levels (service grantee, sub-recipient, service site) of the entire Title X network.
4. Develop and implement a process by which the training center's own training and technical assistance plan will be reviewed and revised on an ongoing basis (e.g., annually). This should include reviewing program-wide data from the standardized measures monitoring implementation of each of the 7 strategies (described above in point 2), and obtaining input from service grantees and OPA staff on training and technical assistance priorities.

The administrative and funding instrument used for this program will be a cooperative agreement, in which substantial OPA involvement should be expected to be above and beyond the normal stewardship role in awards. Under the cooperative agreement, OPA's intention is to

support the awardee's activities by working jointly in a partnership role; it is not to assume prime responsibility or a dominant role in the activities. Consistent with this concept, the primary responsibilities are defined below:

The Director of the training center will have the primary responsibility for:

- Identifying the frameworks and learning theories used to develop the training and technical assistance plan, and for ensuring that they are applied consistently throughout all aspects of the program.
- Monitoring the scientific evidence base for proposed training and technical assistance modalities, and for implementation efforts, and ensuring that these findings are integrated into the training and technical assistance plan.
- Developing a proposed plan for providing training and technical assistance for the Title X program, in accordance with the description above.
- Implementing the delivery of training and technical assistance to Title X service grantees, and supporting the service grantees' efforts to provide training and technical assistance to the sub-recipients and service grantees within their networks.
- Supporting efforts to collect, compile and review data on implementation of the seven strategies using the standardized measures that are agreed upon, for the service grantees who choose to use them. OPA will not be collecting this information.
- Developing and maintaining a knowledge management repository at the national level, and supporting its use across the entire Title X network.

- Facilitating a process by which the training center's plan for training and technical assistance is reviewed on an ongoing basis, with input from service grantee representatives and OPA staff.

OPA staff will have the primary responsibility for:

- Reviewing and providing input on the proposed plan for training and technical assistance, and for monitoring service grantees' implementation of that plan, to confirm that it is based on the best available scientific evidence and consistent with the Title X program requirements and the QFP recommendations.
- Reviewing and providing input on products and materials (e.g., webinars, job aids, e-learning courses, learning collaboratives) developed for the purpose of providing training and technical assistance, to confirm that they are based on the best available scientific evidence and consistent with the Title X program requirements and the QFP recommendations.
- Reviewing and providing input on the standardized measures developed to monitor implementation of the seven strategies. OPA will not be collecting this information.
- Facilitating communication with Title X service grantees.
- Keeping the Center abreast of important Federal initiatives that could potentially influence the direction or implementation of a given strategy.

Areas of joint responsibility will include:

- Participating in a process by which the training center’s plan for training and technical assistance is reviewed based on semi-annual performance reviews and may inform the training center’s annual work plan.

**AUTHORITY:** Section 1003 of the Public Health Service Act; Title X family planning training regulations at 42 CFR Part 59, subpart C.

*Statute:* Title X of the PHS Act, 42 U.S.C. 300 et seq., authorizes grants for projects to provide family planning services to persons from low-income families and others. Section 1001 of the Act, as amended, authorizes grants “to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents).” Section 1003 of the Act, as amended, authorizes the Secretary of Health and Human Services to award grants to entities to provide training for personnel to carry out family planning service programs as authorized under Section 1001 of the Act. Section 1008 of the Act, as amended, stipulates that “none of the funds appropriated under this title shall be used in programs where abortion is a method of family planning.”

*Regulations:* The regulations set out at 42 CFR part 59, subpart C, govern grants to provide training for family planning service providers. Training must be consistent with the requirements regarding the provision of family planning services under Title X, which can be found in the Title X statute and the implementing regulations for family planning services (42 CFR part 59, subpart A). In addition, any training regarding sterilization of clients as part of the Title X

program must be consistent with 42 CFR part 50, subpart B (“Sterilization of Persons in Federally Assisted Family Planning Projects”).

**B. FEDERAL AWARD INFORMATION**

The Office of Population Affairs intends to make available approximately \$4 million for a competing cooperative agreement.

We will fund grants in annual increments (budget periods) and generally for a project period of up to 4 years, although we may approve shorter project periods. Funding for all approved budget periods beyond the first year of the grant is generally level with the initial award amount and 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: \$4 million

Anticipated Number of Awards: 1

Range of Awards: \$4 million per budget period

Anticipated Start Date: 07/01/2016

Period of Performance: Not to exceed 4 years

Budget Period Length: 12 months

Type of Award: Cooperative Agreement. Agency substantial involvement is outlined in the Program Description in Section A.

Type of Application Accepted: Electronic via Grants.gov **ONLY unless an exemption is granted**

## **C. ELIGIBILITY INFORMATION**

### *1. Eligible Applicants.*

Any public or private nonprofit entity located in any one of the 50 United States, the District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands is eligible to apply for a grant under this announcement. Faith-based organizations and American Indian/Alaskan Native/Native American (AI/AN/NA) organizations are eligible to apply for these Title X family planning general training and technical assistance cooperative agreements. Private nonprofit entities must provide proof of nonprofit status.

### *2. Cost Sharing or Matching*

Cost sharing or matching funds are not required for this program.

### *3. Other Eligibility Information*

#### **Application Screening Criteria**

If your application is appropriately submitted, it will be screened to assure a level playing field for all applicants. If duplicate applications from the same organization for the same project are successfully submitted, only the last application received by the deadline will be reviewed. If your application fails to meet the screening criteria described below it will **not** be reviewed and will receive **no** further consideration.

1. Your application must be submitted electronically via [www.grants.gov](http://www.grants.gov) (unless an exemption was granted 2 business days prior to the deadline) by 5 p.m. on Monday, April 11, 2016.

2. Your 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.
3. Your Project Narrative must **not** exceed 40 pages. NOTE: The following items do not count toward the page limit: all required forms, including SF-424, SF-424A, SF-424B, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables).
4. Your total application, including the Project Narrative plus Appendices, must **not** exceed 100 pages. NOTE: items noted in #3 above do not count toward total page limit.
5. Your application meets the **Application Responsiveness Criteria** outlined above.

#### **D. APPLICATION AND SUBMISSION INFORMATION**

##### 1. Address to Request Application Package

You may obtain an application package electronically by accessing Grants.gov at <http://www.grants.gov/>. You can find it by searching on the CFDA number shown on page 1 of this funding opportunity announcement. If you have problems accessing the application or difficulty downloading, contact:

Office of Grants Management

Phone: 240-453-8822

Email: [ogm.oash@hhs.gov](mailto:ogm.oash@hhs.gov)

##### 2. Content and Form of Application Submission

i. **Letter of Intent**

If you plan to apply for this funding opportunity, you should submit a letter of intent as early as possible, but no later than the **deadline indicated in DATES on page 1 of this announcement**]. The information contained within the letter of intent allows HHS/OASH to estimate the potential review workload and plan the review. A letter of intent is not binding, and does not enter into the review of a subsequent application. Your letter of intent should include a descriptive title of your proposed project, the name, address and telephone number for the designated authorized representative of your organization, and the FOA number and title of this announcement. Your letter of intent should be sent to the address listed under the AGENCY CONTACTS section G.

ii. Application Format

Your application must be prepared using the forms and information provided in the online grant application package.

**The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Screening Criteria listed in Section C.**

**You must double-space the Project Narrative pages.**

You should use an easily readable typeface, such as Times New Roman or Arial. You *must* use 12-point font. You may single-space tables or use alternate fonts but you must ensure the tables are easily readable. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in Application Screening Criteria. Please do not number pages or include a table of contents. Our grants management system will generate page numbers once your application is complete.

If your application exceeds the specified page limits for the Project Narrative or Project Narrative plus Appendices when printed on 8.5” X 11” paper by HHS/OASH/OGM, it will not be considered. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easily readable.

### Appendices

Your Appendices should include any specific documents outlined in Section D.2.iii., under the heading “Appendices” in the Application Content section of this funding opportunity announcement. You should not include brochures and bound materials. If you create Appendices specifically for this application, you should use the same formatting required for the Project Narrative, including double-line spacing. However, if you include appendix documents that were not created directly in response to this funding announcement, especially those imported from other sources and documents (e.g., organizational structure), you may retain the original formatting, but the pages must be easily readable.

### Project Abstract

You must complete the Project Abstract Summary form provided in the application package. 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 and program summary documents. HHS/OASH may publish your abstract if your project is funded; therefore, it should not include sensitive or proprietary information.

### Budget Narrative

The Budget Narrative text should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily-readable format and within the printable margins of the page.

iii. Application Content

Successful applications will contain the following information:

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

Executive Summary

Understanding of the project's context and objectives

Technical approach

Evaluation plan

Project management and organizational capacity

**Executive Summary.** This section should include a brief description of the proposed project, including: goal(s), objectives, outcomes, and products to be developed.

**Understanding of the project's context and objectives.** This section should demonstrate a thorough understanding of the purpose, scope and activities of the project. In particular, the application should demonstrate knowledge and understanding in the following areas:

- The mission and organization of the Title X program;
- The role of training and technical assistance in the Title X program at a national level, and OPA's interest in and objectives for this project;
- How the project plan will adequately provide for the following requirements set out in the Title X training regulations at 42 CFR § 59.205(a)(1-3):
  - An assurance that no portion of the Federal funds will be used to train personnel for programs where abortion is a method of family planning.
  - An assurance that no portion of the Federal funds will be used to provide professional training to any student as part of his education in pursuit of an academic degree.
  - An assurance that no project personnel or trainees shall on the grounds of sex, religion or creed be excluded from participation in, be denied the benefits of, or be subjected to discrimination under the project.

**Technical Approach.** This section should describe how the applicant would approach the development and implementation of the training and technical assistance to Title X service grantees, and will be used to assess the applicant's overall level of expertise in the development and delivery of training and technical assistance. The application should describe the overall approach to addressing all 7 strategic areas for family planning service delivery improvement (i.e., leadership & management, standards & quality, financial sustainability, health workforce, knowledge management, health IT infrastructure, contraceptive & other medical products) then

illustrate a more detailed approach it would use by address the following points for the strategic areas of: (1) standards & quality, and (2) knowledge management. [NOTE: OPA is asking applicants to illustrate the detailed approach for 2 strategic areas so that they can demonstrate the approach they would use. Once funded, the awardee will finalize these steps with OPA for the 2 selected strategies, and repeat the process for the remaining strategies.]

- (1) Clearly identify the human performance improvement and/or instructional design frameworks and learning theories that will be used to guide the overall development of the training and technical assistance (e.g., [10]). It should also make explicit how the framework(s) and learning theories are applied at various points in the process of providing training and technical assistance.
- (2) Propose the competencies (e.g., knowledge, skills) needed by staff at the service grantee, sub-recipient and service site level to successfully implement the 2 selected strategies. In this context, “competencies” refer to the knowledge and skills an individual needs to perform specific job tasks.
- (3) Propose learning objectives to help the Title X service grantees successfully build the needed competencies (as defined in point 2 above) in their service site networks. The learning objectives should describe specifically what the learner should be able to do after the instruction, and be specific, measurable, achievable, relevant, and time-oriented (SMART).

(4) Describe potential delivery modalities that can be used to provide training and technical assistance to Title X service grantees so relevant staff have the needed competencies. The successful applicant should be able to describe how a tiered level of training and technical assistance would be used in this project:

- a. A universal level of training, e.g., prepackaged e-learning courses or webinars that are applicable to all service grantees and the entire Title X network, and can be accessed by service grantees (or sub-recipients and/or service sites) and used with only minor modifications.
- b. A selected level of training and/or technical assistance for a sub-set of service grantees (or sub-recipients and/or service sites) that have a particular interest or need for assistance, e.g., creation of learning collaboratives comprised of several grantees with shared learning objectives
- c. A targeted level of technical assistance for individual service grantees (or sub-recipients and/or service sites) that require one-on-one coaching to address specific challenges/barriers to optimal performance.

The description of the training and technical assistance modalities should note the extent to which there is scientific evidence that the selected modalities change any of the following outcomes: trainee knowledge, skills and attitudes; trainee practice/behavior; and/or client outcomes. Delivery modalities that do not rely exclusively upon in-person meetings are encouraged, such as e-learning or other forms of distance education.[11, 12] The project narrative should also include citations from relevant research, such as from the fields of

training, implementation and improvement science that document that the proposed modalities are evidence-based (e.g., [7-9, 12]).

(5) Propose a plan for implementing training and technical assistance plans for the two strategic areas of “standards & quality”, and “knowledge management” across the service grantee network. The project narrative should address this by including a description of what training and technical assistance will be provided by training center staff directly versus indirectly (e.g., via training-of-trainers), describe the magnitude of assistance provided to service grantees (e.g., number of each type of activity and the extent to which activities can be reached by the entire Title X network both directly and indirectly), and propose any systems changes that will be needed to optimize and sustain the training and technical assistance (e.g., the strengthening of quality improvement process and infrastructure, or recommending that some amount of service grantee staff time is allocated to training and/or implementation tasks). The plan should describe the role played at each level of the Title X system (service grantee, sub-recipient, service site) in providing, receiving, and monitoring the training and technical assistance. The implementation plan must reflect best and evidence-based practice as identified in the implementation science and improvement science fields (e.g.,[7, 9] ).

(6) Propose a plan for developing and maintaining an electronic repository for the knowledge management strategy, and for supporting the processes that will lead to successful use of the knowledge management repository by the entire Title X network (service grantees, sub- recipients, service sites) across all the strategies.[3]

(7) Propose standardized measures that service grantees can use to assess successful implementation of the 2 selected strategies by the sub-recipients and service sites within their networks; and a plan by which service grantees may use this data to monitor improvement over time and to identify when and for whom training and technical assistance is most needed.

Propose a process by which training and technical assistance plans will be developed and/or revised on a regular basis. This should include periodically (e.g., annually) reviewing data from service grantees about implementation of the 7 strategies, and obtaining input from service grantee and OPA representatives on annual priorities for training and technical assistance.

**Evaluation plan.** This section of the project narrative should clearly identify the measurable outcome(s) that will result from the training center's activities. A "measurable outcome" is an observable end-result that describes how a particular intervention benefits program participants. It demonstrates the "impact" of the intervention. For example, the outcome may be at the level of reaction (How well did the learners like the learning process?), learning (the extent to which the learners gain knowledge and skills), behavior (What changes in job performance resulted from the learning process?) or results (What are the tangible results of the learning process in terms of reduced cost, improved quality, increased production, efficiency, etc.?) [13, 14]

This section should also describe the methods that will be used to evaluate whether or not the proposed intervention achieves its measurable outcome(s) and assess and evaluate the impact of the training center's activities. The project narrative should describe the quantitative and qualitative tools and techniques that will be employed to measure the outcome(s), and how the "lessons learned" will be identified and documented.

The budget narrative should reflect sufficient resources and time dedicated to the evaluation effort.

**Project management and organizational capacity.** This section should document how the organization has previously achieved successful and concrete outcomes in developing, delivering and evaluating training and technical assistance in family planning and reproductive health care. The organizational capability statement should also describe how the applicant agency is organized, the nature and scope of its work, and the capabilities it possesses. An organizational chart showing the relationship of the project to the current organization should be provided.

The application should also include a description of project personnel, including the extent to which staff have high levels of expertise at the national level in the: (1) development and delivery of training and technical assistance in areas relevant to family planning and/or reproductive health services in a large programmatic context; and (2) health systems strengthening, implementation and improvement science, and the scientific evidence underpinning these fields. Key project personnel include the Director of Training and Director of -Implementation/Improvement Science. Curriculum vitae or biographical sketches for key project personnel should be included.

The application should include a clear delineation of the roles and responsibilities of project staff and sub-recipients and any participating partner organizations, and how they will contribute to achieving the project's objectives and outcomes. It should specify who would have

day-to-day responsibility for key tasks such as: leadership of project; monitoring the project's on-going progress; oversight and management of any sub-contractor or partner organizations; preparation of reports; and communications with OPA.

The application should describe the approach that will be used to monitor and track progress on the project's tasks and objectives. HHS/OASH expects that, throughout the grant period, the Project Director will have involvement in, and substantial knowledge about, all aspects of the project.

### **Budget Narrative**

You are required to submit a combined multi-year Budget Narrative, as well as a detailed Budget Narrative for each year of the potential grant. Unless specified, you should develop your multi-year budgets based on level funding for each budget period. A level-funded budget is equal to the exact dollar figure of the year one budget. Your Budget Narrative should detail all costs. Please be sure to carefully review Section D.6 Funding Restrictions for specific information on allowable, unallowable, and restricted costs. Staff should be listed by position with salary and percentage of full-time equivalent to be devoted to this project, and the percentage of salary to be charged to the project. Any participant incentives proposed to be provided should be fully justified and include a description of internal controls in place to verify proper use. ***Please Note:*** Because your proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the Budget Narrative should describe the ***cost estimated per proposed project, activity, service delivered, and/or product.*** The Budget Narrative should define the amount of work that is planned and expected to be performed and

what it will cost with an explanation of how you expect this to be cost effective. The Budget Narrative does not count toward your total application page limit.

## **Appendices**

**All items described in this section will count toward the total page limit of your application.**

**Organizational charts.** The application should include two organizational charts: (1) an organizational chart of the larger organization within which the project is hosted, which specifies where the project resides; and (2) an organizational chart for the project itself.

**Biographic sketches for key staff.** Curriculum vitae (CV) for key project personnel that describe their specific qualifications (i.e., training, experience, evidence of previous related accomplishments) for this project should be included. CVs are especially important for the Project Director, the Director of Training and the Director of Implementation/Improvement Science.

**Work Plan.** The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget, and must cover all years of the project period. However, each year's activities should be fully implemented in one budget year. Multi-year activities may be proposed, as well as activities that build upon each other, but each phase of the project must be discreet and attainable within a single budget year. A detailed workplan for the first year of the project should be included in the application, which describes key tasks/activities of the FPNTC-SDI, key outputs of each task/activity, and a timeline for completion of each task/activity. The

way that FPNTC-SDI activities serve to support the Title X service grantees' and service sites' ability to perform their own activities should be clearly delineated; as should links between these activities and short- and long-term project outcomes (as illustrated in the draft program logic model found in the Appendix). For each major task of each year, action step, or product, the work plan should identify the timeframes involved (including start- and end-dates), and the lead person responsible for completing the task.

### **Letters of Commitment from Subrecipient Organizations and Agencies**

Letters of Commitment are required for all organizations and entities that have been specifically named as a subrecipient to carry out any aspect of the project. The signed 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. 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 not be considered during the review.

### **3. Unique Entity Identifier and System for Award Management (SAM)**

- You are required to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal grants or cooperative agreements through

Grants.gov. 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.

- You will find instructions on the Grants.Gov web site as part of the organization registration process at <http://www.grants.gov/web/grants/applicants/organization-registration.html>.

- Your organization must register online in the System for Account Management (SAM).

**Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations.**

- A quick start guide for grant registrants is available at [https://www.sam.gov/sam/transcript/Quick\\_Guide\\_for\\_Grants\\_Registrations.pdf](https://www.sam.gov/sam/transcript/Quick_Guide_for_Grants_Registrations.pdf). You should allow a *minimum* of five days to complete an initial SAM registration. Allow up to 10 business days *after you submit* your registration for it to be active in SAM.
- If your organization is already registered in SAM, you must renew your SAM registration *each* year. Organizations registered to apply for Federal grants through <http://www.grants.gov> will need to *renew* their registration in SAM.
- It may take 24 hours or more for SAM updates to take effect in Grants.gov, so if you plan to apply for this funding opportunity or think you might apply, you should *check for active registration in SAM well before the application deadline*.
  - If you are successful and receive a grant award, you must maintain an active SAM registration with current information at all times during which your organization has an active award or an application or plan under consideration by an HHS agency.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 CFR § 25.205, at the time an award is ready to be made, if you have not complied with these requirements, HHS/OASH:

- May determine that you are not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Should you successfully compete and receive an award, all first-tier sub-award recipients must have a DUNS number at the time you, the recipient, make a sub-award.

#### 4. Submission Dates and Times

You must submit your application for this funding opportunity by **5:00 p.m. Eastern Time on the date indicated in the DATES section on page 1 of this announcement**. Your submission time will be determined by the date and time stamp provided by Grants.gov when you **complete** your submission.

**If you fail to submit your application by the due date and time, we will not review it, and it 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. You are better off having a less-than-perfect application successfully submitted than no application at all.

If your submission fails due to problems with Grants.gov, we may consider your application if you provide verification from Grants.gov indicating system problems existed at the time of your submission **and that time was before the submission deadline.**

5. 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.

6. Funding Restrictions

The allowability, allocability, reasonableness, and necessity of direct and indirect costs that may be charged to HHS/OASH grants must be in accordance with Department regulations and policy effective at the time of the award. Current requirements are outlined at 45 CFR part 75 "Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards."

Indirect costs may be included per 45 CFR § 75.414. Applicants should indicate which method and/or rate is used for this application. To obtain a negotiated indirect cost rate with the Federal Government you may contact the U.S. Department of Health and Human Services Cost Allocation Services (CAS) regional office that is applicable to your State. A list of CAS regional offices is included in the grant application package for this announcement.

*Pre-Award Costs:*

Pre-award costs are not allowed.

*Salary Limitation:*

The Consolidated Appropriations Act, 2016 (P.L. 114- 113), limits the salary amount that may be awarded and charge to HHS/OASH grants and cooperative agreements. Award funds should not be budgeted to pay the salary of an individual at a rate in excess of Executive Level

II. As of January 10, 2016, the Executive Level II salary of the Federal Executive Pay scale is \$185,100. 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 \$185,100, their direct salary would be \$92,550 (50% FTE), fringe benefits of 25% would be \$23,137.50, and a total of \$115,687.50 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 <i>actual</i> 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
 <b>Amount that may be claimed on the application budget due to the legislative salary limitation:</b>	
Individual's base full time salary <i>adjusted</i> to Executive Level II: \$185,100	
50% of time will be devoted to the project	
Direct salary	<b>\$92,550</b>
Fringe (25% of salary)	<b>\$23,137.50</b>
Total amount	<b>\$115,687.50</b>

**Appropriate salary limits will apply as required by law.**

6. Other Submission Requirements

Electronic Submission

**HHS/OASH requires that all applications be submitted electronically via the Grants.gov portal unless an exemption has been granted.** If you submit an application via any other means of electronic communication, including facsimile or electronic mail, it *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 grant application packages are made available on Grants.gov.

Your application will not be considered valid until all application components are received via Grants.gov by the HHS/OASH Office of Grants Management according to the deadlines specified in the DATES section on page 1 of this announcement. If your application does not adhere to the due date and time requirements, it will be deemed ineligible and receive no further consideration.

If you choose to apply, you are encouraged to initiate electronic applications early in the application development process. Applying in advance of the deadline will allow you to address 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. If you submit any file

part of the Grants.gov application that is not in a file format identified above, it will not be accepted for processing and will be excluded from your application during the review process. You must submit your application in a format that can easily be copied and read by reviewers. We do not recommend that you submit scanned copies through Grants.gov unless you confirm the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. If you submit documents that do not conform to the above, we will exclude them from your application during the review process.

### **Important Grants.gov Information**

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, both of which can be found on page 1 of this funding opportunity announcement.

To ensure successful submission of your application, you should carefully follow the step-by-step instructions provided at <http://www.grants.gov/web/grants/applicants/apply-for-grants.html> . These instructions are kept up-to-date and also provide links to Frequently Asked Questions and other troubleshooting information.

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Section D.3 for requirements related to DUNS numbers and SAM registrations.

## **E. APPLICATION REVIEW INFORMATION**

1. **Criteria:** Eligible applications will be assessed according to the following criteria. The table below summarizes the review criteria and the suggested section of the narrative where criteria should be addressed:

<b>Review Criteria and Points</b>	<b>Suggested Section of the Narrative</b>
<p>Organizational context and objectives [10 points]</p> <ul style="list-style-type: none"> <li>• The extent to which the proposed training and technical assistance program will increase the delivery of services to people at the national level, particularly low-income groups, with a high percentage of unmet need for family planning services.</li> <li>• The extent to which the application includes assurances that no portion of the federal funds will be used to train personnel for programs where abortion is a method of family planning, no portion will be used to provide professional training to any student as part of his education in pursuit of an academic degree, and no project personnel or trainees shall on the grounds of sex, religion or creed be excluded from participation in, or be denied the benefits of, or be subjected to discrimination under the project.</li> </ul>	<p>Understanding of the project's context and objectives</p>
<p>Technical approach [35 points]</p> <ul style="list-style-type: none"> <li>• The extent to which the training program will meet the family planning service delivery needs of the area to be served, with emphasis on building service grantee capacity in the identified strategic areas of health systems improvement, including the extent to which the projects draw on evidence-based and best practices in training and technical assistance, and health systems strengthening, so that the maximum level of impact can be expected from the project.</li> </ul>	<p>Technical approach</p>

<ul style="list-style-type: none"> <li>• The extent to which the application provides: (i) a methodology to assess the particular training that prospective trainees in the area to be served need to improve their delivery of family planning services; (ii) a methodology to define the objectives of the training program in light of the particular needs of trainees, (iii) a methodology for development of the training curriculum and any attendant training materials and resources, (iv) a method for implementation of the needed training, and (v) provision of a method and criteria by which trainees will be selected.</li> </ul>	
<p>Evaluation plan [20 points]</p> <ul style="list-style-type: none"> <li>• The extent to which the application provides an evaluation methodology, including the manner in which such methodology will be employed, to measure the achievement of the objectives of the training program.</li> </ul>	<p>Evaluation plan</p>
<p>Project management and organizational capacity [35 points]</p> <ul style="list-style-type: none"> <li>• The administrative and management capability and competence of the applicant to provide training and technical assistance at the national level, including the extent to which the applicant demonstrates an understanding of the Title X network and the knowledge and skills needed by Title X providers.</li> <li>• Demonstrated expertise of the project staff in relation to the services to be provided.</li> <li>• The capacity of the applicant to make rapid and effective use of the grant assistance, including evidence of flexibility in the</li> </ul>	<p>Project management and organizational capacity</p>

utilization of resources and training plan design.	
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Cost sharing will not be considered in the evaluation.

## 2. Review and Selection Process

Each HHS/OASH Program's office is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth in 42 CFR §59.206.

An independent review panel will evaluate applications that pass the screening and meet the responsiveness criteria if applicable. 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 E.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 Deputy Assistant Secretary for Population Affairs, or his/her designee. In making these decisions, the following additional criteria will be taken into consideration:

- a. The extent to which funds requested for a project maximize access for the population in need, at a national level.
- b. The extent to which projects best promote the purposes of section 1001 and 1003 of the Public Health Service Act, within the limits of funds available for such projects.

**All award decisions, including level of funding if an award is made, are final and not appealable to any office or official in HHS/OASH.**

### **3. Review of Risk Posed by Applicant**

The HHS/OASH will evaluate each application in the fundable range for risks posed by an applicant before issuing an award in accordance with 45 CFR § 75.205. This evaluation may incorporate results of the evaluation of the applicant's eligibility or the quality of its application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed by the applicant will be applied to the Federal award. OASH will use a risk-based approach and may consider any items such as the following:

- (1) Applicant's financial stability;
- (2) Quality of management systems and ability to meet the management standards prescribed in 45 CFR part 75;
- (3) History of performance. The applicant's record in managing Federal awards, if it is a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;
- (4) Reports and findings from audits performed; and
- (5) The applicant's ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

Prior to making a Federal award with a total Federal share greater than the simplified acquisition threshold (currently \$150,000), we are required to review and consider any

information about you that is in the designated integrity and performance system accessible through the System for Award Management (SAM) (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). You may, at your option, review information in SAM and comment on any information about yourself that a Federal awarding agency previously entered and is currently available through SAM. We will consider any comments by you, in addition to the other information in the designated system, in making a judgment about your integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants.

#### 4. Anticipated Announcement and Federal Award Dates

HHS/OASH seeks to award funds as much in advance of the anticipated project start date shown in Section B “Federal Award Information,” as practicable, with a goal of 10-15 days.

### **F. FEDERAL AWARD ADMINISTRATION INFORMATION**

#### 1. Federal Award Notices

The HHS Office of the Assistant Secretary for Health does not release information about individual applications during the review process. If you would like to track your application, please see instructions at <http://www.grants.gov/web/grants/applicants/track-my-application.html>. The official document notifying you that a project application has been approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer of the HHS/OASH Office of Grants Management. If you are successful, you will receive this document via system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of 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 applicable. 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.

If you are unsuccessful, you will be notified by the program office by email and/or letter and will receive summary comments pertaining to the application resulting from the review process. On occasion, some applicants may receive a letter indicating that an application was approved but unfunded. These applications are kept active for one year and may be considered for award without re-competing should funds become available during the hold period.

## 2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the grant award, you stipulate that the award and any activities thereunder are subject to all provisions of 45 CFR part 75, currently in effect or implemented during the period of the grant or other Department regulations and policies effective at the time of the award.

In addition, your organization must comply with all terms and conditions outlined in the Notice of Award, the U.S. Department of Health and Human Services (HHS) Grants Policy Statement (GPS), 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. The current HHS GPS is available at <http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf>. Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 CFR parts 74 and 92 have been superseded by 45 CFR part 75.

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. Please consult the HHS GPS Section II and 45 CFR §75.308 for aspects of your grant award that will require prior approval for any changes from the Grants Management Officer. Modifications to your approved project that will require prior approval, include but are not limited to, a change in the scope or the objective of the project or program (even if there is no associated budget revision); budget revisions, including changes in the approved cost-sharing or matching; a change in a key person specified in your application; reduction in time devoted to the project by the approved project director or principal investigator, either as percentage of full-time equivalent of 25% or more or absence for 3 months or more; or the subawarding, transferring or contracting out of any work that was not described in the approved proposal.

### Lobbying Prohibitions

Pursuant to the Consolidated Appropriations Act, 2016 (P.L. 114-113), you shall not use any funds from an award made under this announcement for other than normal and recognized executive legislative relationships. You shall not use funds for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by

the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

You shall not use any funds from an award made under this announcement to pay the salary or expenses of any employee or subrecipient, or agent acting for you, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

The above prohibitions include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

#### Non-Discrimination Requirements

Pursuant to Federal civil rights laws, if you receive an award under this announcement you must not discriminate on the basis of race, color, national origin, disability, age, and in some cases sex and religion. The HHS Office for Civil Rights provides guidance to grantees in complying with civil rights laws that prohibit discrimination.

[www.hhs.gov/ocr/civilrights/understanding/index.html](http://www.hhs.gov/ocr/civilrights/understanding/index.html).

HHS provides guidance to recipients of federal financial assistance on meeting the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency. See *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*, 68 Fed. Reg. 47311, 47313 (HHS Office for Civil Rights, 2003, [www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf](http://www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf)) or [www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html](http://www.hhs.gov/ocr/civilrights/resources/laws/revisedlep.html) . You must ensure your contractors and subrecipients also comply with federal civil rights laws.

The *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (National CLAS Standards), 78 Fed. Reg. 58539, 58543 (HHS Office of Minority Health, 2013, [www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf](http://www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf)), provides a practical framework for grant applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. Compliance with the National CLAS Standards meets the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency

#### Smoke- and Tobacco-free Workplace

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.

#### Acknowledgement of Funding and HHS Rights to Materials and Data

Federal grant support must be acknowledged in any publication you develop using funds awarded under this program, with language such as:

This publication (journal article, etc.) was supported by Award No. \_\_\_\_\_ from the Office of the Assistant Secretary of Health (OASH). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of OASH.

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), you own the copyright for materials that you develop under this grant, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for Federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this grant and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

#### 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](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://www.hhs.gov/grants/contracts/contract-policies-regulations/efficient-spending/>

#### Pilot Whistleblower Protection

If you receive an award, you will be subject to a term and condition that applies the terms of 48 CFR § 3.908 to the award, and requires that grantees inform their employees in writing of employee whistleblower rights and protections under 41 U.S.C. 4712 in the predominant native language of the workforce.

#### Same-sex Spouses, Marriages, and Households

A standard term and condition of award will be included in the final Notice of Award (NOA) that states: “In any grant-related activity in which family, marital, or household considerations are, by statute or regulation, relevant for purposes of determining beneficiary eligibility or participation, grantees must treat same-sex spouses, marriages, and households on the same terms as opposite-sex spouses, marriages, and households, respectively. By “same-sex spouses,” HHS means individuals of the same sex who have entered into marriages that are valid in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. By “same-sex marriages,” HHS means marriages between two individuals validly entered into in the jurisdiction where performed, including any of the 50 states, the District of Columbia, or a U.S. territory or in a foreign country, regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex

marriage. By “marriage,” HHS does not mean registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage.”

### Human Subjects Protection

Federal regulations (45 CFR Part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in 45 CFR part 46 – Protection of Human Subjects. You may find it online at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

### 3. Reporting

#### Performance Reports

You must submit performance reports on a semi-annual basis. Your performance reports must address content required by 45 CFR § 75.342(b)(2). You must submit your performance reports by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

You will also be required to submit a final progress report covering the entire project period 90 days after the end of the project period. You must submit the final report by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

#### Performance Measures

We will review the awardee's semi-annual progress reports to determine the extent to which tasks/activities of the FPNTC-SDI that were included in the annual workplan have been completed, reasons for not completing any tasks/activities, and steps that are being taken to address any uncompleted tasks/activities. This information will be submitted to OPA through GrantSolutions.

### Financial Reports

You will be required to submit quarterly and annual Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of grant award. You will also be required to submit a final FFR covering the entire project period 90 days after the end of the project period. You must submit FFRs via our grants management system (GrantSolutions.gov) FFR module.

Quarterly cash reporting to the HHS Payment Management System on the FFR is also required. Please note, at this time, these FFR reports are separate submissions via the Payment Management Services. At this time, data is not transferable between the two systems and you will report twice on certain data elements.

### Audits

If your organization receives \$750,000 or greater of Federal funds, it must undergo an independent audit in accordance with 45 CFR part 75, subpart F or regulations and policy effective at the time of the award.

### Non-competing Continuation Applications and Awards

Each year of the approved project period, you will be 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. Specific guidance will be provided via Grant Solutions well in advance of the application due date. HHS/OASH will award continuation funding based on availability of funds, satisfactory progress of the project, and grants management compliance, including timely reporting. Additionally, failure to provide final progress or financial reports on other grants with HHS may affect continuation funding.

#### 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.

#### Reporting of Matters Relating to Recipient Integrity and Performance

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)) about civil, criminal, or administrative proceedings described in paragraph 2 of Appendix XII to 2 CFR part 200—Award Term and Condition for Recipient Integrity and Performance Matters. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public

Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. For more information about this reporting requirement related to recipient integrity and performance matters, see Appendix XII to 2 CFR part 200.

#### Other Required Notifications

Before you enter into a covered transaction at the primary tier, in accordance with 2 CFR § 180.335, you as the participant must notify HHS/OASH, if you know that you or any of the principals for that covered transaction:

- (a) Are presently excluded or disqualified;
- (b) Have been convicted within the preceding three years of any of the offenses listed in 2 CFR § 180.800(a) or had a civil judgment rendered against you for one of those offenses within that time period;
- (c) Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses listed in 2 CFR § 180.800(a); or
- (d) Have had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

At any time after you enter into a covered transaction, in accordance with 2 CFR § 180.350, you must give immediate written notice to HHS/OASH if you learn either that—

- (a) You failed to disclose information earlier, as required by 2 CFR § 180.335; or
- (b) Due to changed circumstances, you or any of the principals for the transaction now meet any of the criteria in 2 CFR § 180.335.

#### **G. HHS AGENCY CONTACTS**

##### Administrative and Budgetary Requirements and Program Requirements:

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

Robin Fuller

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: [robin.fuller@hhs.gov](mailto:robin.fuller@hhs.gov)

For information on program requirements, contact the program office. The Letter of Intent should be sent to this address:

Lorrie Gavin, MPH, PhD

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: [lorrie.gavin@hhs.gov](mailto:lorrie.gavin@hhs.gov)

## **H. OTHER INFORMATION**

### Awards under this Announcement

**We are not obligated to make any Federal award as a result of this announcement. Only the grants officer can bind the Federal government to the expenditure of funds.** If you receive communications to negotiate an award or request additional or clarifying information,

this does not mean you will receive an award; it only means that your application is still under consideration.

### Application Elements

The below is a summary listing of all the application elements required for this funding opportunity.

Application for Federal Assistance (SF-424)

Budget Information for Non-construction Programs (SF-424A)

Assurances for Non-construction Programs (SF-424B)

Disclosure of Lobbying Activities (SF-LLL)

Project Abstract Summary

Project Narrative

Budget Narrative

Appendices [work plan, letters of commitment from subrecipient organizations and agencies, biographic sketches for key staff, organizational chart]

*Susan B. Moskosky* 01-06-2016

Susan B. Moskosky, MS, WHNP-BC  
Acting Director, OPA

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# Appendix Preliminary Logic Model for the Family Planning National Training Center- Service Delivery Improvement



