U.S. Department of Health and Human Services Office of the Assistant Secretary for Health Office of Adolescent Health

Centers for Teen Pregnancy Prevention and Adolescent Health Promotion Research

Announcement Type: New

Announcement Number: AH-TPE-17-001

Catalog of Federal Domestic Assistance (CFDA) No. 93.500

Funding Opportunity Announcement And Application Instructions

Application Due Date: March 24, 2017

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

Adolescent Health

FUNDING OPPORTUNITY TITLE: Announcement of Anticipated Availability of Funds

for Centers for Teen Pregnancy Prevention and Adolescent Health Promotion Research

ACTION: Notice

ANNOUNCEMENT TYPE: INITIAL COMPETITVE COOPERATIVE AGREEMENT

FUNDING OPPORTUNITY NUMBER: AH-TPE-17-001

CFDA NUMBER: 93.343

CFDA PROGRAM: Public Health Service Evaluation Funds

DATES:

Non-binding Letters of Intent: We are requesting non-binding letters of intent. Your letter of

intent is due 5 p.m. January 31, 2017.

<u>Technical Assistance</u>: A technical assistance webinar for potential applicants will be held within

30 days of this announcement. Please visit http://www.hhs.gov/ash/oah/.

Applications: Your application is due March 24, 2017 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

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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. 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 (for example, GRANT####) 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. Note: failure to have an active System for Account Management (SAM) registration prior to the application due date 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 U.S. mail or other provider or PDF via email) from applicants obtaining prior written approval. You must still submit your application by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via U.S. 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.

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

executive SUMMARY: The Office of Adolescent Health announces the anticipated availability of funds for Fiscal Year (FY) 2017 cooperative agreements under the authority of Section 241 of the Public Health Service Act. This notice solicits applications from qualified organizations for teen pregnancy prevention and adolescent health promotion research center grants. These centers will conduct, synthesize and translate research into practice for the prevention of teen pregnancy and promotion of adolescent health and in support of OAH's priorities and mission. The Centers are expected to address important and relevant topic areas in pregnancy prevention and adolescent health and to be a national leader in one of five priority areas affecting teen pregnancy. The priority areas are (1) safe and supportive environments, (2) healthy relationships, (3) meaningful connections to supportive adults, (4) engaging youth and families, and (5) youth in out-of-home care and foster care systems. Centers are expected to evaluate or assess best practices or evidence-based/evidence-informed approaches in their priority area and make that information easily accessible to providers working with youth to prevent teen pregnancy.

The Centers are expected to have a high caliber of scientific and technical competency, be forward-looking, provide strong leadership, and collaborate with stakeholders and community

partners including state and local health agencies and non-profit, community (including youth and parents) and non-governmental organizations in the development and delivery of research to practice products.

OAH will fund no more than one cooperative agreement per priority area. Organizations may apply for more than one priority area; however, each application may only address a single priority area. Funded organizations will be referred to from here on as "centers". The three national centers will be expected to coordinate and collaborate with each other and OAH.

A. PROGRAM DESCRIPTION:

BACKGROUND

The Office of Adolescent Health

The Office of Adolescent Health (OAH) is dedicated to improving the health and well-being of adolescents. OAH leads through promoting strength-based approaches, bolstering multi-sector engagement, and bringing in youth voices to support healthy development and transitions to productive adulthood. OAH supports research, services, prevention and health promotion activities, training, education, partnership engagement, national planning and information dissemination activities.

The Office of Adolescent Health's mission is: *Leading the nation to ensure that*America's adolescents thrive and become healthy, productive adults. OAH administers two large grant programs: 1) the Teen Pregnancy Prevention (TPP) Program—a national, evidence-based program that funds diverse organizations that are working to prevent teen pregnancy across the United States and 2) the Pregnancy Assistance Fund (PAF) – a program that funds states and Tribal entities so they can provide a seamless network of support services to expectant and parenting teens, women, fathers, and their families. Under the authority of Section 241 of the

Public Health Service Act, OAH also supports a large, rigorous research and evaluation program to significantly contribute to the evidence base of what works to prevent teen pregnancy.

Building on lessons learned over the past 6 years implementing the two pregnancy prevention grant programs, OAH concluded that implementation of evidence-based curricula alone is not sufficient to have the greatest possible impact on reducing teen pregnancy.

Adolescents have many other needs that influence their ability to access and actively participate in these curricula and to adopt safe sex behaviors. The adolescent years can present health, safety, and developmental challenges.

Five Essentials for Healthy Adolescents

OAH's Adolescent Health: Think, Act, Grow® (TAG) is a national call to action to improve health, to reduce risky behavior and to promote engagement and healthy development among young people. As part of this program, OAH sought the input of professionals who, through their work in after-school or community-based programs, education, faith-based organizations, health care, public health, and social services settings, reach a large number of adolescents. Together these national leaders identified five essential components of adolescent health.

Adolescents should have:

Positive connections with supportive people: Adolescents crave safe, stable, and
nurturing relationships with supportive adults, whether with parents, coaches, neighbors,
grandparents, teachers, older adults in the community, program leaders, or mentors.
 These types of connections are important for all teens and may be difficult for vulnerable
youth to find and sustain.

- 2. Safe and secure places to live, to learn, and to play: Safe and supportive places such as schools, neighborhoods, communities, and healthy environments foster and support healthy adolescent development across the spectrum, including physical and mental health, social interactions, and cognitive growth. Adolescents also benefit from safe places to congregate and just "hang out."
- 3. Access to high-quality, teen-friendly health care: Adolescents benefit from access to high-quality medical and dental care, mental and behavioral health services, and to healthcare providers who understand and value adolescents. Services that are youth-friendly, culturally competent, affordable, convenient, and confidential are preferred by young patients. Health care that is adolescent-centered and involves parents, but allows for increased autonomy as adolescents reach their late teens, is desirable.
- 4. Opportunities for teens to engage as learners, leaders, team members, and workers: Active youth involvement with people and programs is important for promoting healthy adolescent development. This includes activities at school, home, or in the community, such as school clubs, sports, music, the arts, or out-of-school time programs, jobs, or activities at places of worship. Adolescents also benefit from opportunities to become involved in shaping programs and activities, which not only improve the programs for other youth, but provide them with valuable leadership experiences and confidence.
- 5. Coordinated, adolescent- and family-centered services, as needed: Adolescents enter service systems at multiple points and places. Integrated and coordinated services can help ensure better health outcomes and support healthy development for adolescents.
 Unfortunately, the systems for providing services and supports to adolescents are often

fragmented, spread across government agencies, nonprofit organizations, healthcare providers, businesses, and faith-based organizations. There is a clear benefit from a more coherent, integrated approach to fostering health and healthy development for adolescents.

OAH recognizes the need for more evidence/research in these areas because adolescents are at higher risk of experiencing pregnancy or birth when their needs in these five essential areas are not being met. OAH incorporates these five essentials for healthy adolescents into our grant programs and is committed to making the evidence and research findings more accessible to the providers working with teens, to have a significant impact on reducing teen pregnancy and existing disparities. Therefore, OAH has designated 5 high priority topic areas in which we wish to fund centers for TPP research.

Successful applications will address **one** priority area:

- 1. Safe and supportive environments Ensuring youth feel safe and supported in their environment is essential to teen pregnancy prevention efforts as this can enhance self-esteem, self-confidence, and autonomy, which will equip youth with skills and knowledge necessary for healthy decision-making [1]. Youth who have been exposed to violence are more likely to become teen parents, with those who have experienced physical and sexual abuse more likely to experience a repeat pregnancy [2]. Ensuring environments are positive, safe, supportive, and healthy for youth and their families includes being inclusive of all youth, including LGBTQ youth, applying Positive Youth Development practices, and using a trauma-informed approach.
- 2. *Healthy Relationships* During adolescence, youth learn how to form safe and healthy relationships with friends, parents, teachers, and romantic partners. These relationships

influence youths' development and inform how they manage other relationships [3]. Protective factors that contribute to a decrease in risky sexual behaviors have been identified through research. For example, teens are more likely to use condoms or contraceptives when their romantic partners support their use. Communication between partners about contraception, STIs, methods of preventing infection, and sexual histories increases likelihood of condom use and use of other forms of contraception [4]. Peer relationships also play a role in adolescent sexual behavior. Teens are more likely to use condoms if they believe that their friends support condom use [4]. Additionally, adolescents that report feeling close to others in school, living in a two-parent home, and participation in volunteering or community service are less likely to report an adolescent pregnancy [5].

3. *Meaningful Connections to Supportive Adults* - Positive youth development research has shown that youth benefit from positive relationships with caring adults [4, 6]. Teens are less likely to have sex at an early age and have sex less frequently when they have considerable parental support and feel connected to their parents [4]. Typically, those caring adults are parents, but in many cases, youth benefit from relationships with other adults to either supplement or substitute for relationships with their parents [6]. In some cases, teens are more comfortable discussing sensitive topics, such as sex, with someone other than a parent [7]. When teens are involved in their communities and have mentors, a supportive adult other than a parent, they are less likely to engage in sexual behavior [4].

- 4. Engaging Youth and Families Youth engagement occurs when youth are meaningfully involved in a program and take an active role in their own development [8]. Engaging youth is important because research tells us that enhancing protective factors, such as youths' belief that adults care about them as individuals, is important for avoiding risky behaviors [9]. Families also influence teens' sexual risk behavior. A teen is more likely to have early sex, unprotected sex, and become pregnant, or cause a pregnancy, when their parents or siblings express values or model behavior consistent with early childbearing or sexual risk-taking. Parental disapproval of sexual risk behaviors and support of contraceptive use are protective factors [4]. Engaging parents and families is important to teen pregnancy prevention efforts because youth report that parents influence their decisions about sex [7, 10]. Research shows that connection and communication with family is associated with protective sexual behaviors [4, 11, 12].
- 5. Youth in Out-of-Home Care Youth in out-of-home care are more likely to engage in risky sexual behaviors (e.g., unprotected sexual intercourse, anal sex, sexual activity while using drugs or alcohol) and more likely to engage in early sexual activity. Foster youth may also be more likely to have multiple sexual partners, and engage in transactional sex. Teen girls who are in foster care are 2.5 times more likely than their counterparts who are not in foster care to become pregnant by age 19 [13]. Young women in foster care are also more likely to experience a repeat pregnancy, however, young women who remain in foster care after age 18, instead of aging out, have a reduced likelihood of becoming pregnant [14]. Caseworkers have expressed a desire to provide more services to prevent pregnancy among the youth with whom they work, but express

that more training is needed to be able to provide educational services on this topic [15]. More research is needed to understand what strategies child welfare agencies are using to address youths' sexual health needs and the outcomes of any interventions being implemented with this population [16].

PURPOSE

This Funding Opportunity Announcement seeks applications from qualified organizations for teen pregnancy prevention and adolescent health promotion research center grants. These centers will conduct, synthesize and translate research into practice for the promotion of adolescent health and the prevention of teen pregnancy in support of OAH's priorities and mission. The Centers are expected to address important and relevant topic areas in pregnancy prevention and adolescent health and to be a national leader in one of five priority areas. The priority areas are (1) safe and supportive environments, (2) healthy relationships, (3) meaningful connections to supportive adults, (4) engaging youth and families, and (5) youth in out-of-home care and foster care systems. Centers are expected to evaluate or assess best practices or evidence-based/evidence-informed approaches in their priority area and make that information easily accessible to providers working with youth. Collectively, the Centers are intended to support a more evidence-reliant provider system for those working with adolescents.

The Centers are expected to have a high caliber of scientific and technical competency, be forward-looking, provide strong leadership, and collaborate with stakeholders and community partners (including state and local health agencies and non-profit, community and non-governmental organizations) in the development and delivery of research-to-practice products. Key tasks include:

- Assessing research needs and existing research-to-practice resources
- Developing and maintaining research alliances
- Developing a research agenda in the priority area
- Funding and implementing research projects in support of the research agenda
- Disseminating products broadly
- Collaborating and coordinating with other related organizations

OAH will fund one cooperative agreement per priority area. Applicants should state for which priority area of the 5 listed they are applying.

EXPECTATIONS OF FUNDED APPLICANTS

GOALS AND OBJECTIVES

Assessing the research and support needs and resources in the priority area

Applicants are expected to have performed, before submission of their application, an initial comprehensive needs and resources assessment in the priority area to identify research and data needs in the priority area, and existing research-to-practice resources available. OAH expects grantees to conduct an ongoing, systematic, and transparent assessment of these research needs and include strategies for soliciting the input of other researchers, practitioners and policymakers. The research needs assessment is expected to identify a small set of priority topic areas for the Center's work during the grant period. OAH expects grantees to develop a summary of the state of the research in the priority area, including needs and available resources, as well as a Center agenda for advancing the knowledge, translation, and use of the existing research or research to be conducted.

A grantee-developed process or system that could invite others, as appropriate, to request data and analysis support, presentations, etc. from the grantee is also highly encouraged. Requests that do not fall within the scope of the Center's work could be directed to other federal technical assistance providers (see also the Collaboration section).

Within the first 6 months of the grant, grantees are expected to update their comprehensive research needs and resources assessment. Throughout the life of the project, grantees should report on their progress toward filling the gaps found in the needs and resources assessment as part of their progress reports. In the final 6 months of the project, OAH expects grantees to conduct another comprehensive research needs and research-to-practice resources assessment to identify and describe successes, challenges and lessons learned in filling the gaps, improving resources, and improving access to resources for the priority area, and what gaps still remain.

Identifying and maintaining research alliances in the priority area

The primary mechanism for carrying out the work of the Centers shall be the research alliances. These research alliances may include researchers at institutions, businesses, community groups including youth, parents, providers, agencies, state and local governments, health departments and others with similar priority area research-to-practice concerns. The proposed alliances may already be in existence, or the grantee may propose to develop new alliances. On an annual basis, the grantee will be expected to report on the progress of the Center's work with their research alliance, as well as the challenges and lessons learned across the alliance and how those lessons will affect future alliance activity.

The research alliance will help the grantee develop a research agenda for the priority area. The grantee is expected to maintain research alliances through meetings, communications, and assessment of alliance activities. Members may participate through meetings, conference calls, and other communications, to establish and continue each partnership structure as needed. The activities to refine and maintain the alliances will serve to solidify the agenda of work and specific activities that will be implemented by the Center and provide an opportunity for practitioners and policy makers to give input and feedback to researchers at all stages of the analytic work including design, implementation, and dissemination of findings.

The alliance should assist the Center with collaboration, with providing assistance for conducting and implementing the research agenda, and educating and engaging practitioner and policy stakeholders. Effective outreach is necessary to ensure that research findings are translated for and reach the people who can benefit from them –practitioners. Alliance outreach activities should address priority area needs and implement innovative strategies for meeting those needs with a focus on impacting the practitioner environment. Centers should include plans to develop linkages and communication with other governmental and non-governmental bodies involved in research in the priority area. Collaboration activities that facilitate the translation of research into the hands of the practitioners and the community are expected. Outreach and other approaches that target the priority area at the community, state, or national level are also expected.

The grantee is expected to identify and maintain as many partnerships as are needed to adequately address the research agenda in the priority topic area. OAH expects grantees to determine and justify the number, size, and scope of the alliance needed to offer breadth and depth of knowledge to the priority area. The research alliance should maintain a consistent core

of members to ensure continuity and progress with the research agenda. Successful applicants will include letters of commitment from existing and/or prospective alliance members in their applications.

Conducting research studies to benefit providers working with youth

The Centers should provide technical assistance through applied research and development projects by identifying and developing research-to-practice resources. These resources should be targeted primarily to practitioners and policymakers working with youth to prevent pregnancy and promote healthy adolescent development. To carry out the research agenda for the Center, OAH expects the grantee to conduct short-term research studies that investigate key policy or practice concerns in the priority area as they relate to teen pregnancy prevention and adolescent health. Using appropriate and scientifically valid methods, the research studies should result in increased capacity, collaboration, skill development, and research translation for policymakers and practitioners working with youth in the priority area. Examples of such studies include cataloging and summarizing the policies relating to the priority area or a particular aspect of the priority area, assessing and summarizing best practices in the priority area, how-to-guides, syntheses of research, analyses of existing data, development of training guides and technical assistance products.

There are several current examples of research and products that OAH expects to result from this grant. One of these examples can be found in the US Department of Education's Regional Educational Laboratory Program http://ies.ed.gov/ncee/edlabs/. The Regional Educational Laboratories (RELs) work in partnership with school districts, state departments of education, and others to use data and research to improve academic outcomes for students.

Fundamentally, the mission of the RELs is to provide support for a more evidence-reliant education system, just as the goal for this FOA is to support a more evidence-reliant teen pregnancy prevention provider system.

The What Works Clearinghouse's "Practice Guides" are another example of research projects and products that can be applied to the field of teen pregnancy prevention and adolescent health http://ies.ed.gov/ncee/wwc/. The Practice Guides review the existing research on different programs, products, practices, and policies in education with the goal of providing educators with the information they need to make evidence-based decisions. Results from high-quality research are used to answer the question "What works in the field?" Successful applicants will describe the possible research projects in the priority area, provide appropriate justification for the proposed work, literature citations, data from other sources, or from investigator-generated data.

The Centers will ensure all products and materials are medically accurate, age appropriate, culturally and linguistically appropriate, and inclusive of Lesbian, Gay, Bisexual, Transgender, and Questioning (LGBTQ) youth.

Disseminating products strategically and broadly

To ensure the Centers have the greatest possible impact, OAH expects grantees to disseminate products broadly to practitioners and policymakers and using best practices in how to help stakeholders understand and use these materials. OAH expects products to be presented in an accessible way (including the use of plain language) and to convey information that is timely and meaningful to the relevant audiences. Evaluating dissemination strategies so that activities and the body of evidence on effective dissemination practices improves and expands is expected. The Centers may make presentations at national meetings such as the Society for

Adolescent Health and Medicine (SAHM), the Society for Research on Adolescence (SRA), the American Public Health Association (APHA) and others to share information with providers.

OAH can assist and amplify broad dissemination when it's appropriate by disseminating the Center's products through established OAH channels of communications (including for example, the HHS Adolescent Health Work Group and the Interagency Working Group on Youth Programs).

OAH expects grantees to ensure that the products are communicated in a way that is accessible, timely, and meaningful to the day-to-day work of teen pregnancy prevention and adolescent health practitioners and policy makers. OAH expects grantees to utilize several avenues for communication, including diverse approaches (e.g., public website, social media) for disseminating and communicating information about project activities with key stakeholders and organizing face-to-face meetings and webinars designed to facilitate awareness, understanding, and use of products through a dialogue between researchers and adolescent health stakeholders (research-to-practice "bridge events"). These bridge events may be conducted for members of the research alliance or a broader set of participants as a way to share relevant information. For the purpose of the bridge events or other forms of dissemination, the grantee may prepare communication products tailored to specific stakeholders, such as one- to four-page briefs that highlight relevant details of a report or product.

OAH also expects grantees to develop and carry out a process for assessing the utility of and satisfaction with the dissemination activities and products implemented. On an annual basis, the grantee shall describe the lessons learned in disseminating Center products and information and how those lessons will affect any shifts in dissemination strategies in the subsequent year(s).

Memorandum of Understanding (MOU) with the Copyright Holder (if applicable) -

Applicants who choose to use any copyrighted materials in their proposed project must include a signed MOU with the developer or purveyor of the materials that demonstrates that the applicant has permission to use the materials as planned. This should include, but is not limited to, permission to use the materials as proposed in the application, to alter them as needed, and to document and disseminate evaluation results. Without an MOU with the developer or purveyor the project will not be funded for implementation by OAH.OAH must be acknowledged as a funding source in all disseminated products from this project. OAH expects grantees to forward copies of products related to this project to OAH.

Collaborating and coordinating with the other Centers and with OAH

In order to ensure the work of the Centers contributes to the development of a cohesive and potentially deep body of knowledge nationally, OAH expects grantees to identify opportunities for collaboration and coordination with the other Centers and OAH grantees and contractors or other federal technical assistance providers, as appropriate. OAH expects grantees to collaborate and coordinate with the other Centers, once awarded, to promote efficiency in meeting teen pregnancy prevention and adolescent health needs, address national concerns as appropriate, prevent unnecessary duplication of activities, and ensure sharing and best use of available resources across Centers. Collaboration includes working with other relevant centers (for example, the other OAH-funded adolescent health research centers, the UCSF adolescent and young adult resource center and research network, CDC Prevention Research Centers) and OAH to ensure strategic deployment of resources across the priority areas.

CAPACITY AND EXPERIENCE OF THE APPLICANT ORGANIZATION

OAH expects grantees to have sufficient staffing such as, but not limited to, subject matter experts, research assistants, statisticians, technical writers/editors, for successfully completing all aspects of the project. The organization's leadership is able to manage and support the project as the project aligns with the organization's mission and is similar in size and scope as other research projects the organization(s) conducts. The grantees are expected to establish partnerships as needed to complete the project. Grantees will use appropriate fiscal controls and accounting procedures to ensure prudent use, proper and timely disbursement (if applicable) and accurate accounting of funds received under this funding opportunity announcement. Grantees are expected to address any challenges or risks to the funded project.

PROJECT MANAGEMENT & WORK PLAN

Grantees are expected to have an experienced team, able to manage and conduct the proposed project. The Principal Investigator (PI)/Project Director (PD) is expected to have experience and training relevant to all aspects of the project. Key staff members are expected to have clear roles and responsibilities and to be responsible for the grant-related requirements. Grantees are expected to maintain signed Memorandum of Understanding (MOU) with any partners. Grantees are expected to carry out their approved work plan for up to a 36-month project period.

OAH anticipates the following activities by grant year:

Year 1:

- Assess the research and support needs in the priority area
- Synthesize the resources that exist
- Develop the research agenda

- Identify research alliance
- Collaborate and coordinate with other related groups
- Develop products to disseminate.

Years 2-3:

- Maintain research alliance
- Fund and implement new research projects with the Alliance members that start to address the research agenda
- Update research and resources synthesis
- Disseminate products broadly
- Collaborate and coordinate with other related groups

Failure of a grantee to meet major milestones as required/defined by OAH may result in the discontinuation of grant funding at any time during the project period.

The Office Adolescent Health will be substantially involved in the administration and management of the cooperative agreement to assist the grantees in achieving all project objectives and requirements. Elements of substantial involvement include, but are not limited to following:

- Identification of other awardees and organizations with whom the awardee may be asked to develop cooperative and collaborative relationships and partnerships;
- Assisting the awardee to establish, review, and update priorities for activities conducted under the auspices of this cooperative agreement; and
- Review and approval to move forward with the product development phase of the project after the research agenda has been created.

In addition to the substantial involvement, OAH will perform the usual monitoring and

technical assistance provided under a cooperative agreement including but not limited to monthly

meetings via phone call to review project plans and activities; ongoing review of all activities

and procedures, work plans, and budgets; and review of procedures of accomplishing the

objectives of the project funded under this cooperative agreement.

AUTHORITY: Section 241 of the Public Health Service Act

В. FEDERAL AWARD INFORMATION

The Office of Adolescent Health intends to make available approximately \$1,500,000 for

competing cooperative agreements. The final funding amount will not be determined until

enactment of the FY 2017 federal budget.

We will fund grants in annual increments (budget periods) and generally for a project

period of up to 3 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 Federal Funds Available: \$1,500,000

Anticipated Number of Awards: 3

Range of Awards (Federal Funds): up to \$500,000 per budget period

Anticipated Start Date: 07/01/2017

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Period of Performance: Not to exceed 3 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 entity is eligible to apply for a grant under this announcement, including:

State (includes District of Columbia, public institutions of higher education and hospitals)

Local (includes State-designated Indian Tribes, excludes institutions of higher education

and hospitals)

Public nonprofit institution/organization (includes institutions of higher education and

hospitals)

Federally Recognized Indian Tribal Governments

Commonwealth of Puerto Rico, US Virgin Islands, Commonwealth of Northern Mariana

Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia and

the Republic of the Marshall islands (includes institutions of higher education and

hospitals)

Profit organization

Private nonprofit institution/organization (includes institutions of higher education and

hospitals)

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Faith-based organizations and American Indian/Alaska Native/Native American
 (AI/AN/NA) organizations are eligible to apply for these grants.

2. Cost Sharing or Matching

You are not required to provide cost sharing or matching in your proposed budget.

3. Other Eligibility Information

Application Responsiveness Criteria

We will review your application to determine whether it meets the following responsiveness criteria. If your application does not meet the responsiveness criteria, we will eliminate it from the competition and it will not be reviewed.

The applicant appears to have demonstrated:

The application addresses one, and only one, of the five key priority areas for a teen pregnancy prevention and adolescent health promotion research center listed on pages 7-9 of this FOA through its Project Narrative.

Application Disqualification Criteria

If your application is appropriately submitted, it will be screened to assure a level playing field for all applicants. If your application fails to meet the criteria described below it will be disqualified, that is, **not** reviewed and will receive **no** further consideration.

- a) Your application must be submitted electronically via www.grants.gov (unless an exemption was granted 2 business days prior to the deadline) by 5 p.m. ET on the date indicated in the DATES section on page 1 of this announcement.
- b) If you successfully submit duplicate applications from the same organization for the same project, only the last application received by the deadline will be reviewed.

c) 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.

d) Your Project Narrative must **not** exceed 30 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).

e) Your total application, including the Project Narrative plus Appendices, must **not** exceed 50

pages. NOTE: items listed in "d" immediately above do not count toward total page limit.

f) Your Federal funds request does **not** exceed the maximum indicated in Range of Awards.

g) 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

2. Content and Form of Application Submission

i. **Letter of Intent:**

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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**. Although you are not required to submit a letter of intent, the information that it contains 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 in 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 Disqualification 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 Disqualification 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. Your documents should be easy to read. You should use the same formatting specified for the Project Narrative. However, documents such as resumes/CVs, organizational charts, tables, letters of commitment may use formatting common to those documents, but the pages must be easily readable.

Project Abstract Summary

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. If your project is funded, HHS may publish information from your form; therefore, do not include sensitive or proprietary information. Research grants may enter 0 for "Estimated number of people to be served as a result of the award of this grant.

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 easilyreadable 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:

The following sections must be included in the application:

- Overall description of the proposed teen pregnancy prevention and adolescent health
 research center
- Description of how research needs and resources available will be assessed
- Description of how research alliances will be identified and maintained
- Description of research studies and products
- Dissemination plan
- Collaboration and coordination plan
- Capacity and Experience
- Project Management
- Work Plan (as an appendix)
- Overall description of the proposed adolescent health research center

The Centers are expected to conduct, synthesize and translate research into practice for the prevention of teen pregnancy and the promotion of adolescent health and in support of OAH's priorities and mission with the ultimate goal of creating a more evidence-reliant provider system. In this section applicants should provide an overall description of the proposed center, its goals and objectives, and provide an overview for how the proposed research activities are expected to have an impact on teen pregnancy prevention and adolescent development through the practitioners and providers working with adolescents. Applicants should also articulate how the activities of their program are integrated within the Center and with other researchers, state and local health departments, community partners, and other non-governmental organizations.

• Description of how research needs and resources available will be assessed

Describe the results of the initial comprehensive research needs and existing research-to-practice resources assessment to identify research and data needs in the priority area, and resources available. Describe your plan for conducting an ongoing, systematic, and transparent assessment of needs in your priority area, your plan for developing a summary of the state of the research in the priority area, and a plan for filling the research gaps found in the assessment. The applicant is encouraged to describe a plan for developing a process for receiving requests from practitioners such as for data and analysis support, presentations, etc.

• Description of how research alliances will be identified and maintained

Describe how you will develop a new or utilize an existing research alliance to carry out the proposed work. Include a description of the organizations that will participate in the research alliance, how the alliance will be maintained, and how activities will be assessed. Describe a plan for reporting on the progress of the Center's work with the research alliance, challenges,

lessons learned. Describe how the research alliance will assist the Center with developing a research agenda, providing assistance for conducting and implementing the research agenda, educating and engaging practitioner and policy stakeholders, and outreach activities. Include plans to develop linkages and communication with other governmental and non-governmental bodies involved in priority area research and activities. Include justification for the number, size, and scope of the alliance. Include in the application letters of commitment from existing and/or prospective alliance members.

Description of research studies and products

Describe a plan for providing technical assistance through applied research and development projects by identifying and developing research-to-practice resources in the selected priority area. Describe the possible research projects in the priority area, provide justification for work proposed, and provide literature citations, data from other sources, or from investigator-generated data. Demonstrate how the research studies will result in increased capacity, collaboration, skill development, and research translation for researchers, policymakers and practitioners working with youth in the priority area. Provide examples of possible research-to-practice products, if available.

Dissemination plan

Describe the methods you will use to disseminate the project's results and findings in a timely manner and in easily understandable formats to providers working with adolescents and policymakers, the general public, and other parties who might be interested in using the results of the project. OAH may assist the Center's dissemination plan by publishing, or posting to our website, appropriate findings and products. Applicants should propose other innovative and

diverse approaches to informing parties who might be interested in using the products from your Center to inform practice, service delivery, program development, and/or policy-making. OAH expects that nationwide dissemination of products and knowledge will occur. Examples of diverse approaches include but are not limited to public websites, and "research to practice" bridge events using webinars, face-to-face meetings, and briefs. Applicants should describe how they will use best practices in helping stakeholders understand and use the dissemination materials produced. The applicant is expected to present a plan for evaluating dissemination activities. Applicants should describe a plan to develop and carry out a process for assessing the utility of and satisfaction with the dissemination activities and products implemented.

• Collaboration and coordination plan

Describe how you will identify opportunities for collaboration and coordination with the other OAH-funded adolescent health research centers, other related researchers and research centers, OAH grantees and contractors, and other related federal or non-federal organizations. The applicant should describe how they will prevent unnecessary duplication of activities and ensure sharing and best use of available resources across Centers.

• Capacity and Experience

Applicants should provide a description of the performance and accomplishments of the center director and other key personnel that are relevant to the success of an adolescent health research center. Examples of past performance and accomplishments include: completion of relevant, high quality research projects; publication of findings in peer reviewed scientific and technical journals; ongoing provision of research consultation and technical assistance in the conduct of research; translation of findings for youth providers and policymakers; translation of research

into implementation; research experience in the priority area; experience addressing research gaps; and creating research-to-practice resources. The application should include (in the appendices) resumes or CV's for proposed key staff along with a staff organizational chart.

Demonstrate sufficient staffing, such as but not limited to, subject matter experts, research assistants, statisticians, technical writers/editors, to complete all aspects of the project. Describe how well the proposed project aligns with the organization's mission and the capacity of the organization's leadership team to support the project. Describe the team's previous and relevant work supporting and managing a project of this size and scope. Describe the organization's ability to establish partnerships and leverage existing systems and networks needed to complete this project. Describe how the organization effectively and efficiently managed financial resources, staff performance, and strategic partnerships with partner organizations. Describe anticipated challenges or risks to the project and the organization's capacity to address the challenges and/or risks.

Applicants must provide evidence (including letter of support) of strong institutional commitment to the proposed Center, including the ability to develop and maintain the necessary infrastructure for the Center. Ensuring that a Center has the full support of, and access to, the diverse resources available at the parent institution is critical in synergizing the efforts, impacts and outcomes of the funding. Institutional commitment may take the form of office space, personnel, equipment, other resources, return of indirect costs, additional funding/resource allocation, faculty release time, travel and meeting/conference support.

• Project Management

The applicant should describe how it will manage, implement, and monitor the overall project. The plan should describe an understanding of the complexity of the overall project and potential challenges. The applicant should describe the approach that will be used to monitor and track progress, completion, and quality of all project objectives and activities. Provide a description of the project team, including the Principal Investigator/Project Director and other key staff. You should clearly delineate the roles and responsibilities of project staff and subrecipients and how they will contribute to achieving the project's objectives and outcomes. You should specify who would have day-to-day responsibility for key tasks such as: leadership of project and of specific tasks, monitoring and tracking the project's on-going progress of tasks and objectives, conducting analyses, preparation of reports, disseminating findings, and communications with other partners and OAH. MOUs should be included for any partners outside of the applicant organization. OAH expects that, throughout the grant period, the Project Director will have involvement in, and substantial knowledge about, all aspects of the project. The applicant should describe its plans for ensuring that all staff responsible for implementing the project, including partner staff, are well trained and prepared to successfully fulfill their roles and responsibilities.

• Work Plan (as an appendix)

Applicants must outline a plan of action that describes the scope and detail of how the proposed project will be accomplished. Applicants must account for all the functions or activities identified in the application and provide a list of organizations, cooperating entities, consultants, or other key individuals that will work on the project, along with a short description of the nature of their effort of contribution. Provide resumes of staff that will work on this project in the

application appendices. Applicants must provide a timeline for implementing the proposed project including major milestones and target dates.

Budget Narrative

You must complete the required budgetary forms and submit a budget narrative with detailed justification as part of your application. You must enter the project budget on the Budget Information Non-construction Programs standard form (SF 424A) according to the directions provided with this standard form. The budget narrative consists of a detailed line-item budget that includes calculations for all costs and activities by "object class categories" identified on the SF-424A and justification of the costs. You must indicate the method you are selecting for your indirect cost rate. See Indirect Charges below for further information.

Project budget calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient to verify the calculations. If matching or cost sharing is required, you must include a detailed listing of any funding sources identified in box 18 of the SF-424 (Application for Federal Assistance).

Please be sure to carefully review section D.6 Funding Restrictions for specific information regarding allowable, unallowable, and restricted costs.

You must provide an object class category budget using Section B, box 6 of the SF 424A for the first year of the proposed project. Provide a budget justification, which includes a budget narrative and a line-item detail, for the first year of the proposed project. The budget narrative should describe how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs.

For subsequent budget years, provide a summary narrative and line item budget. For categories or items that differ significantly from the first budget year, provide a detailed justification explaining these changes. Note, do not include costs beyond the first budget year in the object class budget in box 6 of the SF- 424A or box 18 of the SF-424; the amounts entered in these sections should only reflect the first budget year.

Your budget narrative should justify the overall cost of the project as well as the proposed cost per activity, service delivered, and/or product. For example, the budget narrative should define the amount of work you have planned and expect to perform, what it will cost, and an explanation of how the result is cost effective. For example, if you are proposing to provide services to clients, you should describe how many clients are you expecting to serve, the unit cost of serving each client, and how this is cost effective.

Use the following guidelines for preparing the detailed object class budget required by box 6 of the SF-424A. The object class budget organizes your proposed costs into a set of defined categories outlined below. Both federal and non-federal resources (when required) must be detailed and justified in the budget narrative. "Federal resources" refers only to the HHS/OASH grant funds for which you are applying. "Non-federal resources" are all other non-HHS/OASH federal and non-federal resources. We recommend you present budget amounts and computations in a columnar format: first column, object class categories; second column, federal funds requested; third column, non-federal resources; and last column, total budget. Note, subrecipient/contract and consultant detailed costs should all be included in those specific line items, not in the overall project object class line items, i.e., subrecipient travel should be included in the Contractual line item not in Travel.

Object Class Descriptions and Required Justifications

Personnel Description: Costs of staff salaries and wages, excluding benefits.

Personnel Justification: Identify the project director or principal investigator, if known at the time of application. Provide a separate table for personnel costs detailing for each proposed staff person: the title; full name (if known at time of application), time commitment to the project as a percentage or full-time equivalent: annual salary and/or annual wage rate; federally funded grant salary; non-federal grant salary, if applicable; and total salary. No salary rate may exceed the statutory limitation in effect at the time you submit your application (see D.6 Funding Restrictions, *Salary* Limitation for details). Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant. Contractors and consultants should not be placed under this category.

Fringe Benefits Description: Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

Fringe Benefits Justification: Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, Federal Insurance Contributions Act (FICA) taxes, retirement insurance, and taxes.

Travel Description: Costs of travel by staff of the applicant organization.

Travel Justification: For each trip, show the date of the proposed travel, total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances.

Equipment Description: "Equipment" means an article of nonexpendable, tangible personal property having a useful life of more than one year per unit and an acquisition cost that equals or exceeds the lesser of: (a) the capitalization level established by the organization for the financial statement purposes, or (b) \$5,000. (Note: Acquisition cost means the net invoice unit price of an item of equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired.

Ancillary charges, such as taxes, duty, protective in-transit insurance, freight, and installation, shall be included in or excluded from acquisition cost in accordance with your organization's regular written accounting practices.)

Equipment Justification: For each type of equipment requested applicants must provide a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use of the equipment in the project; as well as a plan for the use, and/or disposal of, the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition; include this with your Budget Narrative file. Reference the policy in this justification and include the policy copy in your Budget Narrative file (not your appendices).

Supplies Description: Costs of all tangible personal property other than those included under the Equipment category. This includes office and other consumable supplies with a perunit cost of less than \$5,000.

Supplies Justification: Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

Contractual Description: Costs of all contracts or subawards for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts or subawards with subrecipient organizations (with budget detail), including delegate agencies and specific project(s) and/or businesses to be financed by the applicant. This line item is not for individual consultants.

Contractual Justification: Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open, and free competition. Recipients and subrecipients are required to use 45 CFR § 75.328 procedures and must justify any anticipated procurement action that is expected to be awarded without competition and exceeds the simplified acquisition threshold fixed by 41 U.S.C. § 134, as amended by 2 CFR § 200.88, and currently set at \$150,000. Recipients may be required to make pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc., available to HHS/OASH.

Note: Whenever you intend to delegate part of the project to another agency, the applicant must provide a detailed budget and budget narrative for each subrecipient/contractor, by agency title, along with the same supporting information referred to in these instructions. If you plan to select the subrecipients/contractors post-award and a detailed budget is not available at the time of application, the applicant must provide information on the nature of the work to be delegated, the estimated costs, and the process for selecting the delegate agency.

Other Description: Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: consultants; insurance; food (when allowable);

professional services (including audit charges); space and equipment rent; printing and publication; training, such as tuition and stipends; staff development costs; and any other costs not addressed elsewhere in the budget.

Other Justification: Provide computations, a narrative description, and a justification for each cost under this category.

Indirect Charges Description: Total amount of indirect costs. This category has one of two methods that an applicant may select. You may only select one.

- 1) Your organization currently has an indirect cost rate approved by the Department of Health and Human Services (HHS) or another cognizant federal agency. You should enclose a copy of the current approved rate agreement. If you request a rate that is less than allowed, your authorized representative must submit a signed acknowledgement that the organization is accepting a lower rate than allowed.
- 2) Per 45 CFR § 75.414(f) Indirect (F&A) costs, "any non-Federal entity [i.e., applicant] that has never received a negotiated indirect cost rate, ... may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely. As described in § 75.403, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate for a rate, which the non-Federal entity may apply to do at any time."

This method only applies to applicants that have never received an approved negotiated indirect cost rate from HHS or another cognizant federal agency. Applicants awaiting

approval of an indirect cost rate may request the 10 percent de minimis. When the applicant chooses this method, costs included in the indirect cost pool must not be charged as direct costs to the grant.

Program Income Description: Program income means gross income earned by your organization that is directly generated by this project if funded except as provided in 45 CFR § 75.307(f). Program income includes but is not limited to income from fees for services performed or the use or rental of real or personal property acquired under the award. Interest earned on advances of Federal funds is not program income. Except as otherwise provided in Federal statutes, regulations, or the terms and conditions of the Federal award, program income does not include rebates, credits, discounts, and interest earned on any of them. See also 45 CFR §§ 75.307, 75.407 and 35 U.S.C. §§ 200-212 (applies to inventions made under Federal awards).

Program Income Justification: Describe and estimate the sources and amounts of Program Income that this project may generate if funded. Unless being used for cost sharing, if applicable, these funds should not be added to your budget. This amount should be reflected in box 7 of the SF-424A.

Non-Federal Resources Description: Amounts of non-federal resources that will be used to support the project as identified in box 18 of the SF-424. For all federal awards, any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the recipient's cost sharing or matching when such contributions meet all of the criteria listed in 45 CFR § 75.306. For awards that require matching by statute, recipients will be held accountable for projected commitments of non-federal resources in their application budgets and budget justifications by budget period or by project

period for fully-funded awards, even if the justification by budget period, or by project period for fully-funded awards, exceeds the amount required. A recipient's failure to provide the required matching amount may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports. For awards that do not require matching or cost sharing by statute, where "cost sharing" refers to any situation in which the recipient voluntarily shares in the costs of a project other than as statutorily required matching and are accepted by HHS/OASH, we will include this non-federal cost sharing in the approved project budget and the recipient will be held accountable for the non-federal cost-sharing funds as shown in the Notice of Award (NOA). A recipient's failure to provide voluntary cost sharing of non-federal resources that have been accepted by HHS/OASH as part of the approved project costs and that are shown as part of the approved project budget in the NOA may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports.

Non-federal Resources Justification: You must provide detailed budget information for every funding source identified in box 18. "Estimated Funding (\$)" on the SF-424. Provide this documentation as part of your Budget Narrative file, not your Appendices.

You must fully identify and document in your application the specific costs or contributions you propose in order to meet a matching requirement. You must provide documentation in your application on the sources of funding or contribution(s). In-kind contributions must be accompanied by a justification of how the stated valuation was determined. Matching or cost sharing must be documented by budget period (or by project period for fully-funded awards).

Applications that lack the required supporting documentation will not be disqualified from competitive review; however, it may impact an application's scoring under the evaluation criteria in Section V.1 of this announcement.

Plan for Oversight of Federal Award Funds

You must include a plan for oversight of federal award funds which:

- Describes how your organization will provide oversight of federal funds and how grant activities and partner(s) will adhere to applicable federal grant and programmatic regulations.
- Describes the organizational systems that demonstrate effective control over and accountability for federal funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation.
- Describes organizational controls that will ensure timely and accurate submission
 of Federal Financial Reports to the OASH Office of Grants Management and
 Payment Management Services as well as timely and appropriate withdrawal of
 cash from the Payment Management System.

Appendices

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

- Work Plan (see page 31)
- Signed Memorandum of Understanding (preferred) or Letters of Commitment from Subrecipient/Partner Organizations and Agencies

You should include detailed, signed MOUs or Letters of Commitment for all organizations and entities that have been specifically named as a subrecipient 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, responsibilities, and expectations of the applicant and partner. 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. You should NOT provide letters of support, and letters of support such as this will not be considered during the review.

- Resume/CV for Proposed Staff and Job Descriptions for Positions to be Hired
- Organizational Chart

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 Award 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.

 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 ensure your organization's registration is active in SAM well before the application deadline and will be active through the competitive review period.
- 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 or rejected submission. You are better off having a less-than-perfect application successfully submitted and under consideration than no application.

If your submission fails due to a system problem 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. A "system problem" does not include known issues for which Grants.gov has posted instructions regarding how to successfully submit an application such as compatible Adobe versions or file naming conventions. As the applicant, it is your responsibility to review all instructions available on Grants.gov regarding successfully submitting an application.

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." These requirements apply to you, the applicant, *and* any subrecipients.

Indirect costs may be included per 45 CFR § 75.414. Applicants should indicate which method and/or rate is used for this application. See the Budget Narrative section of this announcement for more information. 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. CAS regional contact information is available at https://rates.psc.gov/fms/dca/map1.html.

Pre-Award Costs:

Pre-award costs are not allowed.

Salary Limitation:

Each year's appropriations act limits the salary amount that you 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. Currently, 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.

The breakdown below provides an example of the application of this limitation to an individual with a base salary of \$350,000 per year and fringe benefits of 25% who works on the project 50% of a full-time equivalent, and how you must adjust the salary to comply with the limitation.

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
Amount that may be claimed on the application budget due to the legislative salary limitation:	
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 (50% of salary)	\$92,550.00
Fringe (25% of salary)	\$23,137.50
Total amount	\$115,687.50
Appropriate salary limits will apply as required by law.	

7. 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.

Applications, excluding required standard forms, must be submitted as three (3) files (see acceptable file types below). One file must contain the entire Project Narrative, another the entire Budget Narrative including supporting documentation described in the Budget Narrative content section; and the third file must contain all documents in the Appendices. Any additional files submitted as part of the Grants.gov application will not be accepted for processing and will be excluded from the application during the review process.

Any files uploaded or attached to the Grants.gov application must be Adobe PDF,

Microsoft Word, or image formats (JPG, GIF, TIFF, or BMP only) and must contain a valid file

format extension in the filename. HHS/OASH strongly recommends that electronic applications be uploaded as Adobe PDF. If you convert to PDF prior to submission you may prevent any unintentional formatting that might occur with submission of an editable document. Please note, even though Grants.gov allows you to attach any file format as part of your 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 listed above will not be accepted for processing and will be excluded from the application during the review process.

Any file submitted as part of the Grants.gov application that contains password protection will not be accepted for processing and will be excluded from the application during the review process. We will not contact you for passwords or resubmission of unprotected files.

Unprotected information in the application will be forwarded for consideration but password protected portions will not. You should avoid submitting personally identifiable information such as on résumés.

In addition, the use of compressed file formats such as ZIP, RAR, or Adobe Portfolio will not be accepted. We will not contact you for resubmission of uncompressed versions of files.

Compressed information in the application will not be forwarded for consideration.

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 are responsible for reviewing all Grants.gov submission requirements on the Grants.gov site.

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 registration.

E. APPLICATION REVIEW INFORMATION

1. <u>Criteria:</u> Eligible applications will be assessed according to the following criteria:

Overall description of the proposed adolescent health research center (15 points)

- The applicant clearly describes the <u>one</u> priority area for which it will conduct research-topractice translation activities.
- The proposed center activities adequately address the mission and priorities of OAH and
 of the proposed center. The overall strategy, methodology, and products are well-reasoned
 and appropriate to accomplish the specific aims of the application.

- There are adequate connections among the proposed research projects, proposed research alliance, proposed dissemination plans and proposed collaboration to successfully accomplish the mission of the center.
- The goals of the center address policy and translation research.
- Potential problems, alternative strategies, and benchmarks for success are presented in the application.
- The proposed activities of the center will address important gaps to progress in the fields
 of teen pregnancy prevention and adolescent health.
- The proposed research activities are expected to have an impact on teen pregnancy
 prevention and adolescent development through the practitioners and providers working
 with adolescents.
- Scientific knowledge, technical capability, and public health practice be improved and practice of providers changed if the goals of the application are successful.

Assessment of research needs and resources available (10 points)

- The results of the initial comprehensive research needs and existing research-to-practice
 resources assessment are described and research and data needs and currently available
 resources in the priority area have been summarized.
- A feasible plan for conducting an ongoing, systematic, and transparent assessment of needs in the priority area has been presented.
- The plan for developing a summary of the state of the research in the priority area is feasible and should be successful.

- The plan for filling the research gaps found in the assessment is feasible and will be successful.
- The applicant has described a feasible plan for developing a process for receiving requests from practitioners such as for data and analysis support, presentations, etc.

Research alliances will be identified and maintained (10 points)

- The applicant has described a feasible plan for developing a new or utilizing an existing research alliance to carry out the proposed work. The description includes discussion of the organizations that will participate in the research alliance, how the alliance will be maintained, and how activities will be assessed. Letters of support from existing and/or prospective alliance members are included in the application.
- A reasonable justification for the number, size, and scope of the alliance is provided.
- The plan for formation, linkages and communication with the alliance described will lead to successful completion of this grant and work in the priority area including formation of a research agenda, conducting and implementing the research agenda, educating and engaging practitioner and policy stakeholders, and outreach activities.
- The plan for reporting on the progress of the Center's work with the research alliance,
 challenges, and lessons learned is feasible and will provide helpful information to OAH.

Research studies and products (20 points)

 A detailed plan for providing technical assistance through applied research and development projects by identifying and developing research-to-practice resources in the selected priority area has been described.

- Possible research-to-practice projects have been discussed, reasonably justified, and will
 adequately address the needs of youth providers in the priority area.
- The applicant's plan will provide research-to-practice resources through a diversity of approaches, as proposed in the application narrative.
- The proposed research projects will result in increased capacity, collaboration, skill
 development, and research translation for policymakers and practitioners working with
 youth in the priority area.
- The projects will result successfully in the translation of priority area research findings into practice and policy with a potential to impact the field of teen pregnancy prevention.
- The applicant describes the reasonable process that will be used to ensure all products and materials are medically accurate, age appropriate, culturally and linguistically appropriate, and inclusive of LGBTQ youth. The process is feasible and likely to result in the desired outcomes.

Dissemination plan (5 points)

The plan for disseminating the project's results and findings should result in
dissemination in a timely manner and in easily understandable formats to providers
working with adolescents and policymakers, the general public, and other parties who
might be interested in using the results of the project.

- Applicants have proposed other innovative and diverse approaches to informing parties
 who might be interested in using the products from the Center to inform practice, service
 delivery, program development, and/or policy-making.
- The plan includes a mix of webinars, face-to-face meetings, and briefs.
- The applicant provided a reasonable description of how they will use best practices in helping stakeholders understand and use the dissemination materials produced.
- The applicant has presented a feasible plan to develop and carry out a process for assessing the utility of and satisfaction with the dissemination activities and products implemented that will provide useful information to OAH.

Capacity and Experience (25 points)

- The center director, key personnel, project PIs, collaborators, and other researchers are appropriately trained and well suited to carry out the specific aims of this application.
- They are qualified to plan and conduct research and administer a national center for teen pregnancy prevention and adolescent health promotion research.
- The center director has adequate leadership ability, scientific stature, and commitment of time to adequately manage a national center.
- The center director, key personnel, project PI, and other investigators have made significant contributions to the field of pregnancy prevention, adolescent health, and/or the priority area as demonstrated by their accomplishments and publications. Examples of past performance and accomplishments include: completion of relevant, high quality research projects; publication of findings in peer reviewed scientific and technical journals; ongoing provision of research consultation and technical assistance in the

conduct of research; translation of findings for youth providers and policymakers; translation of research into implementation; research experience in the priority area; experience addressing research gaps; and creating research-to-practice resources.

- The applicant demonstrates successful experience with needs assessments and the ability to use the results of the assessment to develop and implement a research agenda.
- The investigators have complementary and integrated expertise, leadership approach,
 governance and organizational structure appropriate for the proposed activities.
- The applicant has provided evidence (including letters of support) of strong institutional commitment to the proposed Center, including the ability to develop and maintain the necessary infrastructure for the Center

Project Management and Work Plan (5 points)

- The applicant describes its plans to manage, implement, and monitor the overall project.
 The plan demonstrates an understanding of the complexity of the overall project and potential challenges. The applicant's planned approach for monitoring and tracking progress, completion, and quality of all program objectives and activities is reasonable and likely to result in the expected outcomes.
- The applicant's proposed staffing plan is adequate and likely to result in the expected objectives and outcomes for the project. The applicant identifies Key Personnel, including the Project Director and lead investigators. The applicant's proposed staff is sufficient and posess the skills and expertise needed for the proposed project supported by submitted resumes/CVs.
- The applicant's timeline for hiring staff is reasonable and aligns with the work plan.

- The organizational chart identifies lines of authority, including who will have management authority over the project and all proposed sub-contractors.
- The applicant has a plan in place to minimize the amount of staff turnover over the course of the grant and ensure that staff are actively engaged in their work.
- The application includes a detailed work plan for the three-year project period that includes goals, SMART objectives, activities to accomplish each objective, and, for each activity, the person(s) responsible, timeline for completing activities, and measures of success. The work plan is consistent with the application narrative.

Collaboration and Coordination Plan (5 points)

- The extent to which the applicant demonstrates experience successfully collaborating with other organizations in the selected priority area.
- The extent to which the applicant demonstrates experience successfully collaborating with organizations focused on teen pregnancy prevention and adolescent health.
- The applicant has plans to partner with other Centers, OAH, and other related organizations in a meaningful way to successfully accomplish the project objectives and will strengthen the project.

Budget (5 points)

The extent to which the applicant includes a combined multi-year Budget Narrative and a
detailed Budget Narrative for each year of the potential grant. The Budget Narrative
clearly shows how the total amount requested for all categories was determined.

- The extent to which the Budget Narrative is detailed, reasonable, adequate, cost efficient, and aligned with the proposed work plan.
- The annual budget includes funds to send 1-2 project staff to national meetings (up to 2 annually), and 1-2 staff to HHS meetings (up to 1 annually).

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 above.

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. The Director of the HHS Office of Adolescent Health will make final award decisions.

OAH will fund no more than one cooperative agreement per priority area. Priority areas are described on page 3.

All award decisions, including level of funding if an award is made, are final and you may not appeal.

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:

- (a) Applicant's financial stability;
- (b) Quality of management systems and ability to meet the management standards prescribed in 45 CFR part 75;
- (c) 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;
- (d) Reports and findings from audits performed; and
- (e) 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. You 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, you 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 agree 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/sites/default/files/grants/grants/policies-regulations/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.

You may only use grant funds to support activities outlined in the approved project plan. If your application is funded, your organization 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 funded project that will require prior approval from the Grants Management Officer for any changes. Modifications to your approved project that will require prior approval, include but are not limited to, a change in the scope or the objective(s) of the project or program (even if there is no associated budget revision such as reduction in services, closing of service or program site(s)); significant 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 each year's appropriations act, 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.

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) or 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), 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. You own the copyright for materials that you develop under this grant, and pursuant to 45 CFR § 75.322(b), 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. 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 <u>in writing</u> of employee whistleblower rights and protections under 41 U.S.C. 4712 in the <u>predominant native</u> <u>language</u> 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

At the end of each funding year of this initiative, the grantee should be able to:

- Describe the process and progress for managing the research alliance.
- Describe the progress made on the research agenda, any revisions needed to the agenda, and progress and challenges in carrying out the agenda. Describe how any challenges are being addressed.
- Describe updates to the research and resources assessment and how that information is incorporated into the research agenda and alliance partnerships.
- Discuss dissemination activities completed during the year and planned for the next year.
- Discuss collaboration and coordination with other related groups throughout the year and plans for the next year
- Describe the lessons learned throughout the project.

Financial Reports

You will be required to submit quarterly 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 System. At this time, data is not transferable between the two systems and you will report twice on certain data elements.

<u>Audits</u>

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-awards 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 A.2 of Appendix XII to 45 CFR part 75—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 45 CFR part 75.

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 grants management specialist listed below.

Dixie Perez

Office of Grants Management

1101 Wootton Parkway, Suite 550

Rockville, MD

Phone: 240-453-8822

Email: Dixie.perez@hhs.gov

For information on program requirements, please contact the program office representative

listed below.

Attn: OAH Research Center FOA

1101 Wootton Parkway, Suite 700

Rockville, MD 20852

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Phone: 240-453-2847

Email: PHSFAQS@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 – Submit all Project Narrative content as a single acceptable file, specified

above.

Budget Narrative - Submit all Budget Narrative content as a single acceptable file, specified

above.

Appendices – Submit all appendix content as a single acceptable file, specified above.

Appendices include Work Plan, MOUs/Letters of Commitment, Resumes/CVs, Job

Descriptions, Organizational Chart

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Guelyn M. Kappeler

Evelyn M. Kappeler

Director, Office of Adolescent Health

FOA Appendices

Appendix A – References

APPENDIX A – References

- 1. HHS Office of Adolescent Health, A Practical Guide for Creating Safe and Supportive Environments in Teen Pregnancy Prevention Programs. 2015.
- 2. Schladale, J., A Trauma Informed Approach for Adolescent Sexuality. 2013: Freeport, ME.
- 3. HHS Office of Adolescent Health. *Healthy Relationships*. 2016; Available from: http://www.hhs.gov/ash/oah/adolescent-health-topics/healthy-relationships/home.html.
- 4. Kirby, D.K., *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*. 2007, The National Campaign to Prevent Teen and Unplanned Pregnancy.
- 5. Maness, S.B., et al., Social Determinants of Health and Adolescent Pregnancy: An Analysis From the National Longitudinal Study of Adolescent to Adult Health. J Adolesc Health, 2016. **58**(6): p. 636-43.
- 6. Jekielek, S., K.A. Moore, and E.C. Hair, *Mentoring Programs and Youth Development: A Synthesis*, C. Trends, Editor. 2002: Washington, DC.
- 7. The National Campaign to Prevent Teen and Unplanned Pregnancy, *Preventing Teen Pregnancy Through Outreach and Engagement: Tips for Working with Parents*. 2012.
- 8. HHS Office of Adolescent Health and ACF Family and Youth Services Bureau, *Incorporating Strategies for Engaging Young People: A Guide for Grantees of the Office of Adolescent Health and the Administration on Children, Youth and Families.*
- 9. CDC. *School Connectedness*. Adolescent and School Health 2015; Available from: https://www.cdc.gov/healthyyouth/protective/school_connectedness.htm.
- 10. The National Campaign to Prevent Teen and Unplanned Pregnancy, *Teens Say Parents Most Influence Their Decisions About Sex: New Survey Data of Teens and Adults Released*. 2012: Washington, DC.
- 11. Amialchuk, A. and L. Gerhardinger, *Contraceptive use and pregnancies in adolescents' romantic relationships: Role of relationship activities and parental attitudes and communication.* Journal of Developmental and Behavioral Pediatrics, 2015. **36**(2): p. 86-97.
- 12. Secor-Turner, M., et al., *Life experiences of instability and sexual risk behaviors among high-risk adolescent females*. Perspectives on Sexual and Reproductive Health, 2013. **45**(2): p. 101-107.
- 13. Ng, A.S. and K. Kaye, *Why It Matters: Teen Childbearing and Child Welfare*. 2013, The National Campaign to Prevent Teen and Unplanned Pregnancy.
- 14. Dworsky, A. and M.E. Courtney, *The risk of teenage pregnancy among transitioning foster* youth: *Implications for extending state care beyond age 18.* Children and Youth Services Review, 2010. **32**(10): p. 1351-1356.
- 15. Love, L.T., et al., *Fostering hope: Preventing teen pregnancy among youth in foster care*, The National Campaign to Prevent Teen Pregnancy, Editor. 2005: Washington, DC.
- 16. Winter, V.R., R.A. Brandon-Friedman, and G.E. Ely, *Sexual health behaviors and outcomes among current and former foster youth: A review of the literature*. Children and Youth Services Review, 2016. **64**: p. 1-14.