

Addendum #1
10/4/18

RFA # 18080 / Grants Gateway # DOH01-SRAE01-2019

New York State Department of Health

*Center for Community Health/Division of Family Health/
Bureau of Women, Infant and Adolescent Health*

Request for Applications

Sexual Risk Avoidance Education

The following has been updated/modified in the RFA. Strike-through indicates deleted text; underlined text is new.

Attachment 5 Adolescent Sexual Health Needs Index Table (ASHNI) is missing page 7 of 8 pages. The missing Page 7 is following with this addendum.

Page 7 covers the high-risk zip codes of Sullivan to Westchester Counties. These high-risk zip codes listed in the attached addendum are eligible for funding.

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Request for Applications

Sexual Risk Avoidance Education

KEY DATES:

Release Date:	10/1/2018
Applicant Conference Registration Deadline:	10/12/2018 by 4:00 PM EST
Applicant Conference:	10/16/2018
Questions Due:	10/22/2018 by 4:00 PM EST
Questions, Answers and Updates Posted (on or about):	11/14/2018
Applications Due:	11/30/2018 by 4:00 PM EST
DOH Contact Name & Address:	Karen Barrett Bureau of Women, Infant and Adolescent Health New York State Department of Health Room 859, ESP Corning Tower Albany, NY 12237 SRAERFA@health.ny.gov

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I. Introduction

The New York State Department of Health (NYSDOH) is issuing this Request for Applications (RFA) to announce the availability of funding to implement the Sexual Risk Avoidance Education (SRAE) initiative as described in this RFA. Funds will be awarded to 12-16 community-based projects throughout New York State communities, which bear the greatest burden of adolescent childbearing. The **Sexual Risk Avoidance Education (SRAE) Initiative**, will support the implementation of program models that incorporate education and supervised activities provided by adults for early adolescent youth ages 10-13, including those in foster care, to ease their transition into young adulthood.

The SRAE initiative is funded by federal Title V State Sexual Risk Avoidance Education (SRAE) funds awarded to NYSDOH by the Health and Human Services, Administration for Children, Youth, and Families (ACYF). The goal of the federal SRAE is to provide messages to youth that normalize the optimal health behavior of avoiding non-marital sexual activity. In turn, Federal Funding Opportunity guidance for the SRAE indicates that funded states are responsible to develop flexible, medically accurate and effective sexual risk avoidance-based plans responsive to their specific needs. States applying for SRAE funds were provided the flexibility to develop state plans that implement sexual risk avoidance education and/or strategies with an evidence-based approach based on adolescent learning and developmental theories for the age group receiving the education as well as the promotion of positive behavior change through a positive youth focus, addressing risk and protective factors in young people's lives that are known to influence sexual activity, and address the trauma needs of vulnerable youth.

New York's State SRAE plan focuses on evidence-based education and adult supervision programs as an innovative strategy to promote abstinence from sexual activity and support a healthy transition to adolescence among early adolescent youth and SRAE projects need to be consistent with federal SRAE requirements. Through the funded activities, an awarded SRAE project will have a primary emphasis on each of the following topics:

- Holistic individual and societal benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making and future focused
- Advantages of refraining from nonmarital sexual activity
- The increased likelihood of avoiding poverty by attaining self-sufficiency and emotional maturity before engaging in sexual activities
- Healthy relationships and their impact on healthy marriages / safe and stable families
- Impact other youth risk behaviors that may increase the risk for sexual activities
- How to resist/avoid/receive help regarding sexual coercion and dating violence, recognizing that even with consent teen sex remains a youth risk behavior

All information and materials used by grantees must be medically accurate. Medical accuracy means that medical information must be verified or supported by the weight of research conducted in compliance with accepted scientific methods and published in peer-reviewed journals, where applicable, or be comprised of information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective and complete. All applicants will attest to this by signing the required Statement of Assurances (Attachment 1).

NYS has been a leader in adolescent pregnancy prevention efforts and has made significant progress in reducing teen pregnancy. NYS's teen pregnancy rate has declined by 69% from its peak in 1993 of 95.3 pregnancies per 1,000 15 to 19-year-old females to 29.5 in 2015 (most recent data available). However, consistent with national trends, NYS continues to have striking racial/ethnic and regional disparities in

adolescent pregnancy rates although these rates have also declined over time. Pregnancy rates are consistently almost three and half times higher for black and Hispanic teens than for white teens. In 2014, the white teen pregnancy rate was 14.7 per 1,000 females age 15-19 which was much lower than the rate for black (51.3) and Hispanic (47.3) females of the same age.

The sexual health outcomes for adolescents are impacted by the social determinates of health, or the conditions in which they are born, live, work and mature. There are five major categories of the determinants of health: social environment, biology and genetics, physical environment, individual behavior and access to health services.¹ Inequities among one or more of these determinants may impact the health outcomes of individuals and/or entire communities. This funding opportunity attempts to impact these inequities through medically accurate information and providing opportunities to meet the unique needs of New York State's youth including priority populations residing in under-resourced communities, culturally underrepresented youth populations especially Hispanic, African-Americans, and other marginalized/priority populations which may include:

- Youth in or aging out of foster care/adjudication systems
- Youth who are victims of trafficking
- Runaway and homeless youth

NYSDOH will fund community-based projects that implement the NYSDOH recommended age-appropriate comprehensive sexual-risk avoidance education prevention programs (Attachment 2), and use an approach of evidence-based education, adult-supervised activities designed for early adolescence, and providing parenting education to parents, guardians and caregivers. The anticipated funding period will be from 7/1/2019 through 6/30/2024.

The purpose of the initiative is to develop, enhance or expand prevention programs aimed at delaying the onset of adolescent sexual activity and decreasing the incidence of adolescent pregnancy and childbearing to successfully transition youth to adolescence. This initiative strives to implement strategies to build protective factors to promote the optimal transition of youth between the ages of 10 and 13 living in priority communities, from middle childhood to adolescence fostering a transition to a healthy, productive, connected young adulthood. A key factor in promoting this transition is improving an early adolescent's sense of achievable life prospects and a positive outlook for the future, factors that are contingent upon delaying sexual activity.

The goal of the SRAE initiative is to support and enhance children and adolescents' social-emotional development and relationships and to reduce racial, ethnic, economic and geographic disparities while promoting health equity across this population.

Providing opportunities for young people to increase the number of developmental assets they have is a primary organizing concept of this initiative. The Search Institute has identified 40 developmental assets that are the building blocks of healthy development for youth in "middle childhood" and will help them grow into healthy, caring and responsible young adults. (Refer to Attachment 3) Examples of the 40 developmental assets for youth ages 8 to 12 include: adult role models, other adult relationships, service to others, child programs, family support, positive family communication, a sense of purpose, healthy lifestyle, planning and decision making, resistance skills, and a positive view of one's personal future. Enhancing the developmental assets of youth ages 10-13 provides an opportunity for them to transition into healthy adolescents who can realize their individual potential.

¹ Centers for Disease Control and Prevention. Social Determinants of Health. Available at: <http://www.cdc.gov/socialdeterminants/definitions.html>.

Applicants will deliver an integrated model of evidenced-based education, adult-supervised to youth in priority communities through the strategies described. Project components will promote such developmental assets as positive family communication; creative activities; motivation to do well in school; healthy lifestyle; planning and decision making; resistance skills; a positive view of one's personal future; responsibility; self-esteem; and sense of purpose. Parents, guardians and caregivers of young people will be provided with the opportunity to attend parenting education classes to enhance their parenting skills.

Services will be delivered to individuals or groups in such venues as schools, community and faith-based organizations, other community settings, and congregate care settings. All funded projects, including those implemented directly or in partnership with faith-based organizations or programs, must adhere to the federal guidance prohibiting use of religious materials/programs (Refer to Attachment 4).

Applicants will be expected to provide services to youth residing in one or two counties among high need areas, as identified by the Adolescent Sexual Health Needs Index (ASHNI). (Attachment 5) The ASHNI is an indicator, calculated at the ZIP code level, to provide a single, multidimensional measure related to adolescent pregnancy and STDs. The ASHNI takes into consideration a variety of key factors related to these outcomes, including the size of adolescent population, actual burden (number) of adolescent pregnancies and STD cases, and several specific demographic and community factors (education, economic, and race/ethnicity indicators) that are significantly associated with adverse sexual health outcomes (Refer to Attachment 5 for selection of highest need ZIP codes for each county).

Applicants will develop sustainability plans for their program that includes collaborating partners. The plan should detail how the proposed project activities will continue after SRAE funding ends. Applicants should plan to sustain key elements of their grant-supported projects (strategies or services and interventions) which have been effective in improving practices and outcomes for youth and families.

II. Who May Apply

A. Minimum Eligibility Requirements

Please note: Applications must meet all the following minimum eligibility requirements to be reviewed. All minimum eligibility requirements must be included on the Applicant Cover Sheet (Attachment 8)

- Applications will be accepted from state and local government entities such as city and county health departments, school districts, and youth bureaus; and from not-for-profit 501(c)(3) organizations, including, but not limited to, Article 28 healthcare facilities, and community-based health and human service agencies.
- Applicants may propose to serve youth in one or two New York State counties. Within their identified focused county(ies), applicants need to define a specific priority area for their proposed project, as defined by high risk ZIP codes based on the ASHNI. (Attachment 5). The applicant must demonstrate a clear need to provide services in their proposed areas and populations.
- Applicants must select a DOH recommended evidence-based curriculum from the selection worksheet for SRAE-compliant evidence-based programs list to implement in their program (Attachment 2)
- Applicant must be prequalified in the New York Grants Gateway, if not exempt, on the date applications are due.

B. Preferred Eligibility Requirements

Preference will be given to applicants that demonstrate the following:

- A minimum of five years' experience serving youth in foster care systems, adjudication systems, youth who are victims of trafficking and/or runaway and homeless youth or other marginalized youth between the ages of 10-13.
- Letters of commitment from all schools, service providers, institutions and community-or faith-based organizations, juvenile detention centers, residential care facilities or other venues where project services will take place. Letters should be signed and submitted on official letterhead and uploaded into the pre-submission upload section in the Grants Gateway.

C. Available Funding

It is anticipated that between 12-16 awards will be made through this initiative, for a total of approximately \$3,000,000 in awarded funds annually, for a five-year period contingent upon satisfactory performance and availability of funds.

Applicants may request an annual award amount between \$175,000 to \$275,000. Applicants are not required to provide matching funds, but may include matching funds and/or in-kind funds to their project as a part of their sustainability plan. During the first year of the program, all providers will be required to develop a sustainability plan that maintains key elements of their SRAE grant-supported projects after contract funding ends. The provider agency should maintain key elements that have been effective in improving practices and outcomes for youth and families.

D. Project Requirements

By signing the Statement of Assurances, Attachment 1, applicants are attesting to the following project requirements:

- All educational materials that are presented as factual will be grounded in scientific research, medically accurate and complete. Education strategies must be appropriate for the ages of the youth served. All educational materials and curricula designed, mass produced and used for instructional and informational purposes will be medically accurate. *Note:* Medical accuracy means that medical information must be verified or supported by the weight of research conducted in compliance with accepted scientific methods and published in peer-reviewed journals, where applicable, or be comprised of information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective and complete.
- The applicant must select evidence-based curricula for implementation from the pre-approved NYSDOH recommended list (Attachment 2)
- Evidence-based programs will be implemented with fidelity and adhere to the developer's guidelines
- The New York State Department of Health (NYSDOH) will be informed of all materials proposed for use in the project for purposes of reviewing them for medical accuracy.
- Programming and materials to be used by the proposed project will not contradict the federal guidance for religious programs (Refer to Attachment 4)
- Programming will be held in fully accessible spaces and program modifications and accommodations for participants with disabilities are ascertained and provided.

- A designated individual employed within the organization will be responsible for SRAE administration, operation and oversight. This individual will be accessible to NYSDOH full-time (including by e-mail) and attend SRAE provider meetings with other appropriate staff.
- Any changes in services, the designated contact person, staffing levels, space or project sites will be reported immediately in writing to the NYSDOH Adolescent Health Unit.
- Biannual project reports will be submitted to the NYSDOH within 30 days of the completion of the period.
- Upon execution of the contract a full agency budget including other funds that support the program will be required within 30 days of execution. Failure to complete any required budget forms will result in a delay in processing payments.
- The applicant organization will develop a sustainability plan by the end of the first contract year (6/30/2020).

III. Project Narrative/Work Plan Outcomes

The NYSDOH is committed to funding community-based programs that serve youth, ages 9-21, living in underserved, under-resourced communities. SRAE community-based projects are a component of statewide primary prevention programs, which utilize a youth development framework and implement evidence-based or promising approaches to promote health and reduce risk in priority communities in NYS. Applicants are expected to develop and implement specific activities based on the developmental, socio-economic, racial, ethnic and cultural needs and perspectives of the population(s) to be served, and the resources and needs of the priority communities.

Award recipients will deliver an integrated model of evidenced-based education, adult-supervised activities, and parenting education classes for parents, guardians and caregivers of youth, ages 10-13. Project components will promote such developmental assets as positive family communication; adult role models; creative activities; motivation to do well in school; healthy lifestyle; planning and decision making; resistance skills; a positive view of one's personal future; responsibility; self-esteem; and sense of purpose.

Services will be delivered to individuals or groups in such venues as schools, community and faith-based organizations, other community settings, and congregate care settings. All funded projects, including those implemented directly or in partnership with faith-based organizations or programs, must adhere to the federal guidance prohibiting use of religious materials/programs (Attachment 4).

Services funded under this RFA should be provided during those times when children are not engaged in school, including after school hours on weekdays, school vacation breaks, weekend hours and the summer vacation period. Services provided should be sustained efforts rather than one-time or sporadic contacts. Service providers

Provider organizations should deliver a trauma informed care (TIC) organizational approach that understands the impact of trauma on a personal level and acts to prevent additional trauma. Trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being. TIC builds protective factors for individuals to overcome the impact of their previous adverse childhood experiences, including abuse and neglect, as well as other traumatic events that have occurred. Youth-serving organizations often provide services with populations at a heightened susceptibility for experiencing trauma and have a significant role in developing resiliency, youth empowerment, and fostering healthy relationships for our youth. Please visit the ACT for Youth Center for Community Action's (ACT CCA) website at the link provided for additional resources.

http://actforyouth.net/sexual_health/community/capp/trauma.cfm.

Community-based SRAE projects are expected to work with other service providers and individuals in their respective communities to identify and provide or expand a range of positive opportunities for youth and their families. Since youth reached through this initiative may require additional supports and services that are outside the scope of the SRAE program, projects must implement mechanisms to refer them to other federal, state, county and local community service providers for physical, social, emotional, educational, and developmental services as necessary. Funded programs need to have a mechanism in place to provide adolescent pregnancy prevention-related health care service referrals to other providers of health care services (e.g., substance abuse, including alcohol, tobacco cessation, mental health issues, and intimate partner violence). The description must, identify referral resources, include information about how referrals will be made to other services and programs, and how follow up will take place, when appropriate. Referral resources should include, but not be limited to, substance use and abuse, and mental health services. Programs should encourage enrolling eligible youth in health assistance programs such as Medicaid and Children's Health Insurance Program (CHIP), or any other federal or state assistance program for which they may be eligible. It is anticipated that this process will foster a network of community service resources, which will facilitate referrals to, and utilization of, needed community services by young people and their families. Successful applicants will incorporate the input of a diverse group of stakeholders, including the young people they intend to serve, parents, caregivers, and representatives from relevant community organizations and institutions, including traditional and non-traditional partners and formal and informal community leaders to inform program planning and implementation as well as identify and address issues around health equity.

This initiative will **not** fund direct services such as child care, health care, or other services that are available through other resources. However, applicants should incorporate partnerships and strategies to identify needs for such services and make referrals to address the needs that have been identified.

Proposed projects need to describe the outreach and recruitment of adult volunteers working with youth. It is the responsibility of funded grantee organizations to assure that the safety of youth participating in programs is protected. Adult volunteers working with youth should complete an application, have a personal interview, and provide personal and professional reference checks. Criminal background checks should be done if adult volunteers will have any responsibilities that involve a one-to-one relationship with youth and ongoing supervision.

A. Performance Management

Performance management is the practice of actively using performance data to improve the public's health. Performance management centers on a clear and focused approach to improving outcomes and the strategic use of performance standards to guide the development and implementation of improvement strategies. Performance standards are generally accepted, objective standards of measurement against which a grantee's level of performance can be compared; the standards establish the level of performance expected. Collectively, these performance standards serve to describe specific, tangible processes and outcomes that need to be accomplished through this initiative. The SRAE initiative performance management framework includes four performance standards. These performance standards contribute to the achievement of improving key population health outcomes including fostering the prevention of adolescent pregnancy and childbearing.

The goal of the SRAE initiative is to support and enhance children's and adolescents' social-emotional development and relationships and to reduce racial, ethnic, economic and geographic disparities while promoting health equity across this population. The implementation of strategies for the SRAE initiative will focus on youth and their parents, guardians and caregivers and address the following performance standards:

- Decrease the initiation of sexual activity and other risky behaviors among early adolescent youth through the support of community-based projects that incorporate evidenced-based education and

adult-supervised activities provided by adults for youth ages 10-13 who reside in priority communities in NYS;

- Create and expand opportunities and provide support and alternatives to sexual activity and risky behaviors for youth to promote optimal transition into healthy young adulthood;
- Provide education to the parents, guardians and caregivers of youth to enhance their parenting skills.

B. Program Components

Proposed projects should include all three of the components described below as part of a well-articulated, integrated overall program. Utilizing the framework of the three components, applicants are to design and implement effective projects based on the Resources and Needs of the focused community and the developmental, socioeconomic, racial, ethnic, cultural needs and perspectives of the population(s) to be served. Applicants may propose to expand or enhance an established adult-supervision program that meets the requirements of this RFA or may propose to establish a new program.

Component 1: Provide sexual risk avoidance education with an evidenced-based approach based on adolescent learning and developmental theories for the age group receiving the education.

Implement evidence-based education that includes medically accurate and complete information referenced in peer-reviewed publications, by educational, scientific, governmental or health organizations and be culturally appropriate recognizing the experiences of the youth from diverse communities, backgrounds and experiences. Education on sexual risk avoidance must ensure that the unambiguous and primary emphasis and context for youth that normalizes the optimal health behavior of avoiding non-sexual activity. Through this component, awarded SRAE programs will:

- Provide data that demonstrates how the selected intervention applies key program elements that have been found to be effective in positive youth behavior change, especially delaying initiation of sexual activity, returning to a lifestyle without sex and refraining from sexual activity.
- Teach the benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making, healthy relationships, avoiding poverty, resisting sexual coercion and dating violence and other youth risk behaviors, such as drug and alcohol usage.
- Have health educators/facilitators trained on the program strategies, approaches, and intervention provided by the ACT CCA.
- Link program participants to services with local community partners and other agencies that support the health, safety and well-being of program participants. The partnering agencies should share a commitment for optimal health outcomes which do not normalize teen sex.

Applicants must choose one of the approved evidence-based curricula identified in Attachment 2.

Component 2 Provide or expand adult-supervised activities that create educational, recreational, or vocational opportunities for youth ages 10-13.

Youth benefit from exposure to a wide variety of activities framed in a youth development philosophy that introduce them to new situations, ideas and people, and challenge them to build or learn skills. These opportunities can offer youth first-hand experiences that build on their strengths and assets and shape their ideas about and aspirations for the future. Activities should stimulate cognitive, social, physical, and/or emotional growth and provide a context for productive relationship building between adults and youth and among youth. The activities provide alternatives to and demonstrate the advantages of postponing sexual activity and promote the development of a skill set that can support a successful transition into healthy young adulthood. Adult-supervised activities can occur within another after school or youth group program, or as a

stand-alone program.

Examples of appropriate activities would include but may not be limited to:

- Workplace visits, job shadowing, or career exploration
- Cultural events and facilities (e.g., concerts, plays, museums, art exhibits)
- Sports and other physical activity (e.g., individual and team, competitive and noncompetitive)
- Performing arts (e.g., live theatre and dance)
- Visual arts (e.g., carefully selected films which are appropriate for the age and developmental stage of the youth)
- Scientific exploration (e.g., robotics, computers, science centers, experiments, and field studies)
- Mentally stimulating games (i.e., games that challenge the mind and encourage deep interaction among participants, such as chess and selected computer games)
- Nature-focused outdoor activities (e.g., hiking, gardening, and bird-watching)
- Service-learning activities

All planned activities should be cost-effective and incorporate specific strategies that help build new skills and learning and stimulate youth development, consistent with the description above. Cost-effective is defined as the minimum amount of grant fund resources being used to achieve desired work plan goals and objectives. General recreational activities or one-time events without a clear rationale that is well-articulated as part of a larger program strategy will not be supported with this grant.

Component 3: Provide parenting education to the parents, guardians, and other adult caregivers of youth, ages 10-13.

Parents can play a key role in communicating to their children about values and responsible behaviors. The purpose of the parenting education component is to enhance and strengthen the communication and supervision skills of parents, guardians and other adult caregivers; these skills will help them guide their youth through their adolescent years. Surveys and focus groups indicate that many adolescents view their parents as a primary source of information regarding sexual health behaviors, however many parents are uncomfortable having sexual discussions and have the same misconceptions or fears about sexuality as their children. Parents often need and welcome assistance to begin an effective dialogue related to sexual matters with their children.

Effective parent/child communication results in positive emotional development and self-esteem. Projects are required to incorporate education for parents, caregivers, and other adults in the community to provide improved knowledge and communication skills related to adolescent sexual health and risky behaviors.

According to the National Resource Center for Community-Based Child Abuse Prevention (<http://friendsnrc.org>), “successful parent education programs help parents acquire and internalize parenting and problem-solving skills necessary to build a healthy family.” Projects funded through this RFA will provide information and education to parents at such venues as schools, the workplace and other community-based settings. Workshops can be conducted with parents alone or with parents together with children to improve communication skills. The range of topics to be addressed might include strategies for:

- Understanding pre-adolescent and adolescent development including the physical, cognitive, emotional, and social changes of adolescence, and nurturing children’s development of healthy attitudes and values about growth and development, body image and positive self-esteem, respect and appreciation for human diversity and other related subjects.
- Adapting to and communicating effectively with maturing children, discussing risk-taking behaviors with pre-adolescents and adolescents, identifying and addressing warning signs of risky or dangerous behavior, and keeping adolescents safe.
- Understanding the importance of non-parental adults in adolescents’ lives.

- Raising adolescents in a new/changing and diverse culture.
- Modeling and nurturing healthy relationships, including friendships, social peer relationships, romantic relationships and family relationships, and positively addressing dynamics such as gender roles, peer pressure, bullying and power balances in relationships.
- Educational and career success, such as maximizing school success, exploring career alternatives and goals and developing skills for employment preparation.
- Supporting the development of good study habits, school attachment and achievement, educational and career aspirations.
- Nurturing the development of healthy life skills such as health behaviors, goal setting, decision making, negotiation, communication and interpersonal skills, use of available resources and stress management

General Program Information

- Food and beverages that are served during SRAE activities must follow the Guidelines for Healthy Food and Beverages for Adolescent Health Programs, developed by the Assets Coming Together for Youth Center for Community Action (ACT CCA). The Guidelines have been updated and can be found at:
http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf
- All planned activities should be cost-effective and incorporate specific strategies that help build new skills and learning and stimulate youth development, consistent with the description above. Cost-effective is defined as the minimum amount of grant fund resources being used to achieve desired work plan goals and objectives. Activities need to have a clear rationale that is well-articulated as part of a larger program strategy.
- Applicants may subcontract components of the scope of work, however the applicant is responsible to retain a minimum of 51% of total contract activities. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors, and will be the primary contact for the NYSDOH. All subcontractors should be approved by the NYSDOH.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health / Division of Family Health / Bureau of Women, Infant and Adolescent Health. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

B. Question and Answer Phase

All substantive questions must be submitted in writing or via email to:

sraerfa@health.ny.gov

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFA. This includes Minority and Women Owned Business Enterprise (MWBE) questions and questions pertaining to the MWBE forms.

Questions of a technical nature can be addressed in writing via email directed to the attention of Karen Barrett at SRAErfa@health.ny.gov. **Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.**

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this RFA.

- <https://grantsreform.ny.gov/grantees>
- Grants Gateway Videos (includes a document vault tutorial and an application tutorial) on YouTube: <https://grantsreform.ny.gov/youtube>
- Grants Gateway Team Email: grantsgateway@its.ny.gov
Phone: 518-474-5595
Hours: Monday thru Friday 8am to 4:30pm
(Application Completion, Policy, and Registration questions)
- Agate Technical Support Help Desk
Phone: 1-800-820-1890
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@agatesoftware.com
Technical questions

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the NYS Grants Gateway website at: https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportals.aspx and a link provided on the Department's public website at: <http://www.health.ny.gov/funding/>. Questions and answers, as well as any updates and/or modifications, will be posted on the Grants Gateway. All such updates will be posted by the date identified on the cover of this RFA.

C. Applicant Conference

An applicant conference call **will** be held for this project, on October 16, 2018 at 11:00AM. Applicants are directed to call: **1-844-633-8697** or **518-549-0500** then enter the Participant code: **955 681 22**, followed by the # key to participate in this call. The Department requests that potential applicants register for this conference by sending an e-mail to SRAERFA@health.ny.gov with the subject line of SRAE Applicant Conference, to ensure that adequate accommodations be made for the number of prospective attendees. A maximum number of two representatives from each prospective applicant will be permitted to participate in the applicant conference if calling from different phones. Failure to participate in the applicant conference call will not preclude the submission of an application. Deadline for reservations is posted on the cover page of this RFA.

D. How to file an application

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this RFA. Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Reform website at the following web address: <https://grantsreform.ny.gov/Grantees> and select the “Grantee Quick Start Guide Applications” from the menu on the left. There is also a more detailed “Grantee User Guide” available on this page as well. Training webinars are also provided by the Grants Gateway Team. Dates and times for webinar instruction can be located at the following web address: <https://grantsreform.ny.gov/training-calendar>.

To apply for this opportunity:

1. Log into the Grants Gateway as either a “Grantee” or “Grantee Contract Signatory”.
2. Click on the “View Opportunities” button under “View Available Opportunities”.
3. In the Search Criteria, enter the Grant Opportunity name <INSERT NAME> and select the Department of Health as the Funding Agency.
4. Click on “Search” button to initiate the search.
5. Click on the name of the Grant Opportunity from the search results grid and then select the “APPLY FOR GRANT OPPORTUNITY” button located bottom left of the Main page of the Grant Opportunity.

Once the application is complete, prospective grantees are **strongly encouraged** to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient opportunity for the applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. **Failure to leave adequate time to address issues identified during this process may jeopardize an applicant’s ability to submit their application.** Both DOH and Grants Gateway staff are available to answer applicant’s technical questions and provide technical assistance prior to the application due date and time. Contact information for the Grants Gateway Team is available under Section IV. B. of this RFA.

PLEASE NOTE: Although DOH and the Grants Gateway staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding

The Grants Gateway will always notify applicants of successful submission. If a prospective grantee does not get a successful submission message assigning their application a unique ID number, it has not successfully submitted an application. During the application process, please pay particular attention to the following:

- Not-for-profit applicants must be prequalified on the due date for this application submission. Be sure to maintain prequalification status between funding opportunities. Three of a not-for-profit’s essential financial documents - the IRS990, Financial Statement and Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit’s prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles “Grantee Contract Signatory” or “Grantee System Administrator” can submit an application.
- Prior to submission, the system will automatically initiate a global error checking process to protect against incomplete applications. An applicant may need to attend to certain parts of the

application prior to being able to submit the application successfully. Be sure to allow time after pressing the submit button to clean up any global errors that may arise. You can also run the global error check at any time in the application process. (see p.66 of the Grantee User Guide).

- Grantees should use numbers, letters and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also be aware of the restriction on file size (10 MB) when uploading documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

Role	Create and Maintain User Roles	Initiate Application	Complete Application	Submit Application	Only View the Application
Delegated Admin	X				
Grantee		X	X		
Role	Create and Maintain User Roles	Initiate Application	Complete Application	Submit Application	Only View the Application
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

PLEASE NOTE: Waiting until the last several days to complete your application online can be dangerous, as you may have technical questions. Beginning the process of applying as soon as possible will produce the best results.

Late applications will not be accepted. **Applications will not be accepted via fax, e-mail, hard copy or hand delivery.**

E. Department of Health’s Reserved Rights

The Department of Health reserves the right to:

1. Reject any or all applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department’s sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of applications.

6. Use application information obtained through site visits, management interviews and the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.
13. Utilize any and all ideas submitted with the applications received.
14. Unless otherwise specified in the RFA, every offer is firm and not revocable for a period of 60 days from the bid opening.
15. Waive or modify minor irregularities in applications received after prior notification to the applicant.
16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's application and/or to determine an offerer's compliance with the requirements of the RFA.
17. Negotiate with successful applicants within the scope of the RFA in the best interests of the State.
18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the state.

F. Term of Contract

Any contract resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period: July 1, 2019 – June 30, 2024. Continued funding throughout this five-year period is contingent upon

availability of funding and state budget appropriations. DOH also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started.

G. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to not for profit grant contractors in an amount not to exceed 25%
2. The grant contractor will be required to submit quarterly invoices and required reports of expenditures to the State's designated payment office (below) or, in the future, through the Grants Gateway: Via email to dfh.boa@health.ny.gov

Grant contractors must provide complete and accurate billing invoices in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: epayments@osc.state.ny.us or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law.

3. The grant contractor will be required to submit the following reports to the Department of Health at the address above and, in the future, through the Grants Gateway:

Biannual reports are due 30 days after the end of the six-month report period and submitted electronically.

All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Contract for Grants.

H. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health ("DOH") recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State

of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

Business Participation Opportunities for MWBEs

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of **30%** as follows:

- 1) For Not-for Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the budget in total.

The goal on the eligible portion of this contract will be 15% for Minority-Owned Business Enterprises ("MBE") participation and 15% for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor ("Contractor") on the subject contract ("Contract") must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine "good faith efforts," refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at: <https://ny.newnycontracts.com>. The directory is found in the upper right hand side of the webpage under "Search for Certified Firms" and accessed by clicking on the link entitled "MWBE Directory". Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting an application, a grantee agrees to complete an MWBE Utilization plan as directed in **Attachment 6** of this RFA. DOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, DOH may issue a notice of deficiency. If a notice of deficiency is issued, Grantee agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. DOH may disqualify a Grantee as being non-responsive under the following circumstances:

- a) If a Grantee fails to submit a MWBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a notice of deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If DOH determines that the Grantee has failed to document good-faith efforts to meet the established DOH MWBE participation goals for the procurement.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

I. Limits on Administrative Expenses and Executive Compensation

On July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo's Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR – Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to the Executive Order #38 website at: <http://executiveorder38.ny.gov>.

J. Vendor Identification Number

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please include the Vendor Identification number on the application cover sheet. If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: http://www.osc.state.ny.us/vendor_management/forms.htm

Additional information concerning the New York State Vendor File can be obtained on-line at: http://www.osc.state.ny.us/vendor_management/index.htm, or by contacting the SFS Help Desk at 855-233-8363 or by emailing at helpdesk@sfs.ny.gov.

K. Vendor Responsibility Questionnaire

The New York State Department of Health strongly encourages that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <http://www.osc.state.ny.us/vendrep/index.htm> or go directly to the VendRep system online at <https://portal.osc.state.ny.us>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at ciohelpdesk@osc.state.ny.us.

Applicants should complete and submit the Vendor Responsibility Attestation (Attachment 7).

L. Vendor Prequalification for Not-for-Profits

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, New

York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the [Grants Reform Website](#).

Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date listed on the cover of this RFA cannot be evaluated. Such applications will be disqualified from further consideration.

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Reform Website details the requirements and an [online tutorial](#) are available to walk users through the process.

1) Register for the Grants Gateway

- On the Grants Reform Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the Division of Budget at the address provided in the instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username, please email grantsgateway@its.ny.gov. If you do not know your Password, please click the [Forgot Password](#) link from the main log in page and follow the prompts.

2) Complete your Prequalification Application

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Gateway Team at grantsgateway@its.ny.gov.

3) Submit Your Prequalification Application

- After completing your Prequalification Application, click the *Submit Document Vault Link* located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.

- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.
- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.

M. General Specifications

1. By submitting the "Application Form" each applicant attests to its express authority to sign on behalf of the applicant.
2. Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.
3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter attached to the application.
4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.
5. Provisions Upon Default
 - a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.
 - b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.
 - c. If, in the judgement of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

V. Completing the Application

A. Application Format/Content

Please refer to the Quick Start Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Reform website at:

<https://grantsreform.ny.gov/grantees>

Program Specific Questions

Please respond to each of the sections described below when completing the Grants Gateway online application. Your responses comprise your application. Please respond to all items within each section. When responding to the statements and questions, be mindful that application reviewers may not be familiar with the agency and its services. Therefore, answers should be specific, succinct and responsive to the statements and questions as outlined.

Application Cover Page (Not Scored):

Attachment 8 is provided to serve as the Grant Application Cover Page for the application. All requested information should be supplied on this form. Once completed, applicants are instructed to upload their Grant Application Cover Page as Attachment 8 in the Pre-Submission section of the Grants Gateway online application.

Statement of Assurances (Not Scored):

To be eligible for approval to operate a Sexual Risk Avoidance Education (SRAE) project, the applicant organization's Chief Executive Officer or Executive Director must attest to compliance with all of the statements listed on Attachment 1. The applicant should complete and sign the Statement of Assurances. The statement should be signed by the Chief Executive Officer of the applicant organization or the CEO's designee. Once signed, applicants are instructed to upload their Statement of Assurances as Attachment 1 in the Pre-Submission section of the Grants Gateway online application. Thrive

1. Program Summary (Maximum Score: 20 points)

The purpose of this section is for the applicant to summarize the entire proposed program.

101. Provide a program summary by describing the program design and how it is consistent with each of the three core components described in Section III B. Program Components
102. Describe the county and geographic service area selected for this project, with associated ASHNI scores for the proposed community. Include ZIP codes. Applicants may choose to serve one or two counties, however, each community chosen is to be clearly identified.
103. Describe the priority populations to be served including age range and gender as well as the cultural, racial and ethnic composition.
104. Describe how the organization will provide related health care service referrals to other providers of health care services to link program participants to services with local community partners and other agencies that support the health, safety and well-being of program participants, including for substance use and abuse, and mental health services. **Note:** Partnering agencies should share a commitment for optimal health outcomes which do not normalize teen sex.
105. Describe how the program will develop/implement sustainability efforts for this program, detailing how the proposed project activities will continue after grant funding ends.

106. Describe how the program will incorporate a trauma-informed care approach with SRAE participants to build resiliency and foster healthy relationships.

2. Organizational Experience and Capacity (Maximum Score: 15 points)

The purpose of this section is for the applicant to describe the current services of the applicant organization and proposed subcontractors, if applicable, and their capacity to implement and administer the proposed project; and to provide evidence of prior success with similar initiatives that have included serving communities that lack multiple resources for youth.

201. Describe the applicant organization's mission, the range of services it provides, and communities where these services are provided.

202. Describe the populations currently served by this organization including such factors as age, gender, race, ethnicity, socioeconomic status and other significant characteristics as appropriate.

203. Describe the applicant organization's experience in providing youth programming and services to youth from priority communities, including those in foster care, adjudication systems, youth who are victims of trafficking, runaway and homeless youth and/or other marginalized youth between the ages of 10-13. Describe evidence of prior success with similar initiatives that have included serving communities that lack multiple resources for youth.

204. Discuss the applicant organization's relationships with schools, institutional settings, and/or community organizations, which serve youth in the priority communities. Include how the applicant organization will work with other service providers and individuals in their respective communities to identify and provide or expand a range of positive opportunities for the youth and their families.

205. Confirm that the applicant organization will employ a SRAE project director/coordinator who will be accessible to the NYSDOH (including by e-mail); perform the essential tasks required to administer the project; be the lead in programmatic activities; and ultimately be responsible for the successful completion of the project/contract.

206. Indicate the agency's length of experience with administrative, fiscal, and programmatic oversight of government contracts, including timely and accurate submission of fiscal and project reports. Indicate any present/prior collaborations with the NYSDOH.

3. Community Resources Assessment (Maximum Score: 15 points)

The purpose of this section is to determine local health and human services available resources and needs affecting adolescent pregnancy and childbearing in the priority communities. Applicants may choose to serve up to two counties selecting the highest scoring ASHNI ZIP codes within the selected counties; however, each separate and distinct priority community is to be clearly reflected in this section. Relevant data can be found at:

http://www.health.ny.gov/statistics/vital_statistics/

<http://www.health.ny.gov/statistics/chac/perinatal/>

<http://www.health.ny.gov/statistics/chac/indicators/index.htm#chai>

301. Discuss the identified community resources currently available to serve youth ages 10-13 in the proposed priority community and how this project fills in gaps in those resources.

302. Discuss the identified needs in the priority community for the proposed project that pose an increased risk for early adolescent sexual activity

303. Identify health inequities for the selected priority population(s)/proposed communities and describe the strategies to be implemented to promote health equity.

304. Describe how the project incorporates the input from a diverse group of stakeholders, including youth, parents/caregivers, racial, ethnic and/or cultural minority groups and persons with disabilities.

4. Description of Project Narrative with Proposed Activities (Maximum Score: 30 points)

The purpose of this section is to describe the design and structure of the proposed project, including the activities that will be developed and implemented and how the components will complement each other. Note: Additional information on these components can be found in Section III B. Program Components. The responses for 401-405 should incorporate an overview for the proposed project in support of the three components. Specific responses on each component should be addressed in the responses to 406-419.

401. Describe the design and structure of the proposed project.

402. Describe how the proposed program design addresses the needs and draws on the resources identified in Section V. 5. Community Resources and Needs Assessment.

403. Identify the priority population to be served and how the proposed services are relevant to this population.

404. Describe how your agency will work with other local service providers to foster a network of community resources.

405. Identify the locations where project services will be provided and confirm that they are appropriate and accessible for the priority population.

Provide the component-specific information listed below:

Component 1: Provide sexual risk avoidance education with an evidenced-based approach based on adolescent learning and developmental theories for the age group receiving the education and be culturally appropriate recognizing the experiences of the youth from diverse communities, backgrounds and experiences Clearly identify the proposed evidenced-based program to be implemented from Attachment 2.

406. Describe the rationale for choosing the selected EBP. Include information on how the selection was made based on the findings of the priority population identified in the Community Resources and Needs Assessment. Include the proposed venues for EBP and rationale for choosing the venue.

407. Describe how the implementation of the EBP will be consistent with the developer's guidelines.

408. Provide estimates of the overall number of program participants and rationale for the estimates.

409. Describe the number of health educators/staff that will deliver the EBPs and the process to ensure that staff are adequately trained to deliver EBPs with fidelity.

Component 2: Provide adult-supervised activities that create educational, recreational, or vocational opportunities for youth, ages 10-13.

410. Describe the specific adult-supervised activities to be conducted and how these activities will have a primary emphasis on the topics outlined in this procurement in Section I, Introduction (page 1).

411. Describe the orientation and training that adults working with youth will receive and indicate the number of adult volunteers who will provide adult-supervised activities and how

they will be selected as well as the orientation and training that volunteers working with youth will receive.

Component 3: Provide parenting education to the parents, guardians, and other adult caregivers of youth, ages 10-13.

412. Provide an overview of the topics to be covered under this component, the number of participants and number of sessions for each topic area.

413. Describe the process of engaging and recruiting adult caregivers to participate in parenting education sessions.

5. Work Plan (Not Scored)

The objectives, tasks and performance measures have been completed for you on the work plan.

For the Grant Gateway Work Plan Project Summary, applicants are instructed to insert the Project Summary as listed on page 1 of Attachment 9. In the Grants Gateway Work Plan Organizational Capacity section, applicants are instructed to list this as “not applicable.” Any additional Project Summary or Organizational Capacity entered into these areas will be removed

Note: The NYSDOH-funded ACT CCA will work with each individual funded project and NYSDOH to develop and conduct an evaluation for both community-based project activities as well as the overall SRAE initiative in NYS. All awardees will be required to participate in the evaluation process. Please note all proposed programming will be subject to initial and ongoing review by the NYSDOH and CCA for appropriateness.

6. Budget and Staffing Plan (Maximum Score: 20 points)

Applicants are instructed to complete the budget template in the NYS Grants Gateway. Refer to the Grants Gateway Budget Instructions and SRAE Budget Data Entry Guidelines provided in Attachment 10.

THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES PURSUANT TO THIS RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES. ALLOCATION OF PERSONNEL COSTS TO GRANT FUNDS MUST BE PROPORTIONATE ACROSS REVENUE STREAMS.

Complete Year 1 of the budget in the Grants Gateway (Refer to Attachment 10 for Grants Gateway Budget Instructions for completing the online budget) assuming a start date of July 1, 2019.

All costs must be related to the provision of SRAE and consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form. For all existing staff, the Budget Justification must delineate how the percentage of time devoted to this initiative has been determined. Final budgets will be negotiated with successful applicants and are dependent upon the availability of funds.

- List all personal services from the applicant organization/agency, including a Project Director/Coordinator accessible for communications, including by e-mail, who will perform the essential tasks required to administer the project, be the lead in programmatic activities and ultimately responsible for successful completion of the project/contract; and non-personal services related to this project, regardless of funding source. Indicate the funding source for each line item as indicated on the budget forms.

- Include travel expenses for up to two staff to attend an annual two-day provider meeting in Albany, N.Y.
- Expenditures will **not** be allowed for the purchase of major pieces of depreciable equipment (although limited computer/printing equipment may be considered) or for remodeling or modification of structure.
- Non-profit agencies receiving federal funds are eligible to charge their federally approved indirect cost rate (ICR; also known as Facilities & Administrative rate). If utilizing a federal ICR rate, complete Certification of Indirect Costs Certification of Indirect Costs) and upload it to the appropriate Program Specific Question and upload a copy of the current federal rate agreement with it (you must combine all pages into one pdf file for uploading) organizations without a federally-approved indirect cost rate will be limited to no more than 10% of total direct costs. Calculated indirect cost rates will be subject to NYSDOH review and approval. Direct costs may include Personal Service, Fringe Benefits, Space, Program Operations, Travel, Equipment and Other budget costs.
- Funds may be used to ensure cultural sensitivity, for instance, to translate materials to appropriate languages, provide formats that are accessible to those who are visually or hearing impaired, hiring of bi-lingual staff, and/or as needed to provide wheelchair accessible transportation or interpreters (including sign language).
- Funds may be used to include costs for background checks.
- The initiative will **not** provide funding for other direct clinical/medical services and supplies, including, but not limited to: case management, mental health counseling, health care, crisis intervention, child care or services that are available through other resources. Funds may be used to increase access to these or other community services or supports through referrals.

Applicants' budget requests will be evaluated on: the alignment of the proposed budget with the scope of activities to be conducted (including an appropriate overall staffing pattern); how in-kind services indicate an organizational commitment to this project; and a clear and appropriate budget justification for each line item. It is the applicant's responsibility to ensure that all materials included in the application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the date and time posted on the cover of this RFA. The value assigned to each section is an indication of the relative weight that will be given when scoring your application.

Additionally, a budget for Year 1 needs to be completed in the Grants Gateway.

Budget Year 1 –July 1, 2019 – June 30, 2020.

B. Freedom of Information Law

All applications may be disclosed or used by DOH to the extent permitted by law. DOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly**

and specifically designated in the application. If DOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

C. Review & Award Process

Applications meeting the guidelines set forth above will be reviewed and evaluated competitively by the NYSDOH Division of Family Health, Bureau of Women, Infant and Adolescent Health.

In the event of a tie score, a higher score in Section 4. Description of Project Narrative with Proposed Activities, will break the tie.

Applications with minor issues (missing information that is not essential to timely review and would not impact review scores) *MAY* be processed, at the discretion of the State, but all issues need to be resolved prior to time of award. An application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

Applications failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration *or* an overall lower score may result.

It is anticipated that between 12-16 awards will be made through this initiative (a total of approximately \$3,000,000 in awarded funds annually) for a five (5) year period contingent upon satisfactory performance and availability of funds.

- Applicants may request an annual award amount between \$175,000 – 275,000.
- The requested funding needs to be consistent with the proposed scope of services, reasonable, and cost effective.
- All applications will be pre-screened to ensure the minimum eligibility requirements are met. Minimum eligibility requirements are listed in Section II.A. Applications that do not meet these minimum requirements will not be reviewed for funding.
- Applications meeting the minimum eligibility criteria will be reviewed and scored by a NYSDOH team of trained reviewers using a standardized review tool developed specifically for this RFA.
- An application **must** have a minimum score of 70 to be considered for funding.
- An applicant **must** propose to provide services in no more than two New York State counties.
- An applicant **must** propose to provide programming to neighborhoods with high ASHNI scores (Attachment 5) respective of their proposed county(ies).
- Applications will be ranked per their review score.
- Awards will be made to the highest scoring passing applicants within the limits of the total amount available to support this RFA.
- In the event of a tie, the applicant who scores higher for section 4. Project Narrative, will break the tie.
- The requested funding needs to be consistent with the scope of services proposed and be

reasonable and cost effective.

- Applicants will be deemed to fall into one of three categories: (1) approved and funded, (2) approved but not funded due to resources, and (3) not approved (not receiving a passing score). Approved but not funded applications may be funded should additional funds become available.
- If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

Once an award has been made, applicants may request a debriefing of their application. Please note the debriefing will be limited only to the strengths and weaknesses of the subject application and will not include any discussion of other applications. Requests must be received no later than fifteen (15) business days from date of award or non-award announcement.

To request a debriefing, please send an email to Karen Barrett at SRAErfa@health.ny.gov. In the subject line, please write: *Debriefing request SRAE RFA*.

In the event unsuccessful applicants wish to protest the award resulting from this RFA, applicants should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at <http://www.osc.state.ny.us/agencies/guide/MyWebHelp>.

VI. Attachments

Please note that certain attachments are accessed in the “Pre-Submission Uploads” section of an online application and are not included in the RFA document. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory”.

- Attachment 1: Statement of Assurances*
- Attachment 2: NYSDOH SRAE pre-approved Evidence-based Program Worksheet/list
- Attachment 3: The Search Institute Developmental Assets for Children, Ages 8-12
- Attachment 4: Federal Guidance for Religious Programs
- Attachment 5: New York State Adolescent Sexual Health Needs Index (ASHNI)
- Attachment 6: Minority & Women-Owned Business Enterprise Requirement Forms*
- Attachment 7: Vendor Responsibility Attestation*
- Attachment 8: Application Cover Page*
- Attachment 9: Workplan Instructions
- Attachment 10: Grants Gateway Budget Instructions & SRAE Budget Data Entry Guidelines

*These attachments are located/included in the Pre Submission Upload section of the Grants Gateway on line application.

Programs to Prevent Pregnancy, STDs, and HIV Among Adolescents: *Selection Worksheet for SRAE-Compliant Evidence-Based Programs*

<p>Adult Identity Mentoring (Project AIM)</p> <p>HHS settings:</p> <ul style="list-style-type: none"> ✓ Middle school ✓ Community-based organization 	<p>Cost: Annual licensing fee (\$2,000). Two facilitators and a project manager are required, and must attend training. Additional materials for youth must be purchased. See “Developing a Budget” in the Project AIM Starter Kit: https://www.chla.org/sites/default/files/atoms/files//CHLA-Project-AIM-Starter-Kit-5-5-14.pdf</p> <p>Audience: Youth age 11-14, especially those from families with low income. (Note: evaluated only with African American 7th grade students.) Available in English and Spanish.</p> <p>Main Message: Designed to promote abstinence, delay the initiation of sex, and decrease the intention to engage in sex. Helps adolescents form their “adult identity” by articulating their future goals and considering how risky behavior choices might jeopardize those goals.</p> <p>Length: Twelve 50-minute sessions, 1-2 days per week over 6 weeks.</p> <p>Group Size: Classroom; optimal size 10-18 participants.</p> <p>Components: 4 units with role plays, goal setting, group discussions, guest speakers, small group activities, skill-building.</p> <p>Training: Facilitators required to participate in 3-day training; training for project director also required.</p> <p>Evaluation findings: At 19-week follow-up, participants less likely to report having had sexual intercourse. At 1-year follow-up the effect held for boys only. (Group evaluated was 98% African American.)</p> <p>Information: HHS fact sheet: https://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=11&mid=1 Developer’s website (Children’s Hospital Los Angeles): https://www.chla.org/project-aim</p>
<p>Making A Difference!</p> <p>HHS settings:</p> <ul style="list-style-type: none"> ✓ Middle schools ✓ Community-based settings ✓ After school 	<p>Cost: \$429.99 (5th edition curriculum, activity set, DVDs, and a set of 30 student workbooks). School edition also available. Training recommended.</p> <p>Audience: All populations, age 13 or under, 14 -17. (Note: evaluated only with African American urban youth age 11-13.)</p> <p>Main Message: Goal is to empower young adolescents to change their behavior in ways that will reduce their risk of pregnancy and HIV or other STDs. The curriculum emphasizes that young adolescents should postpone sexual activity and that practicing abstinence is the only way to eliminate the risk for pregnancy and STDs, including HIV.</p> <p>Length: Eight 1-hour modules.</p> <p>Group Size: 6-12 participants. Additional facilitators needed for larger groups.</p> <p>Components: Knowledge about HIV, STDs, unintended pregnancy; behavioral beliefs, attitudes, and perception of risk; skills and self-efficacy. Includes role plays, small group activities, and videos.</p> <p>Training: Training is recommended.</p> <p>Evaluation Findings: At 6- and 12-month follow-ups, sexually experienced youth reported lower frequency of sexual intercourse and higher frequency of condom use than control group.</p> <p>Information: HHS fact sheet: https://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=101&mid=1 ETR Associates: https://www.etr.org/ebi/programs/making-a-difference/</p>
<p>Teen Outreach Program (TOP)</p> <p>HHS settings:</p> <ul style="list-style-type: none"> ✓ In school 	<p>Cost: The ACT for Youth Center for Community Action has the NYS license for TOP. Curriculum cost: \$625. Training is required and will be offered by ACT for Youth.</p> <p>Audience: Middle and high school youth at risk of teen pregnancy, academic problems, and school drop-out; grades 6-12. Evaluated with high-risk high school students. Available in English, Spanish, and Mongolian.</p> <p>Main Message: This youth development program is designed to prevent problem behaviors by helping</p>

<ul style="list-style-type: none"> ✓ After-school ✓ Community settings <p>Systems/ institutions</p>	<p>adolescents develop healthy behaviors, life skills, and a sense of purpose. Engages young people in a high level of community service learning that is closely linked to classroom-based discussions of future life options.</p> <p>Length: Weekly club meetings over 9 months.</p> <p>Group Size: Maximum facilitator to youth ratio: 1 to 25</p> <p>Components: Social emotional skill-building curriculum and community service learning.</p> <p>Training: Facilitator training required.</p> <p>Evaluation Findings: Female participants were less likely to have become pregnant during the 9-month program than girls in the comparison group.</p> <p>Information: HHS fact sheet: http://tppevidencereview.aspe.hhs.gov/document.aspx?rid=3&sid=237&mid=1 Wyman Center: http://teenoutreachprogram.com/top/</p>
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40 Developmental Assets® for Middle Childhood (ages 8-12)

Search Institute® has identified the following building blocks of healthy development—known as Developmental Assets®—that help young people grow up healthy, caring, and responsible.



External Assets	Support	1. Family support —Family life provides high levels of love and support. 2. Positive family communication —Parent(s) and child communicate positively. Child feels comfortable seeking advice and counsel from parent(s). 3. Other adult relationships —Child receives support from adults other than her or his parent(s). 4. Caring neighborhood —Child experiences caring neighbors. 5. Caring school climate —Relationships with teachers and peers provide a caring, encouraging environment. 6. Parent involvement in schooling —Parent(s) are actively involved in helping the child succeed in school.			
	Empowerment	7. Community values youth —Child feels valued and appreciated by adults in the community. 8. Children as resources —Child is included in decisions at home and in the community. 9. Service to others —Child has opportunities to help others in the community. 10. Safety —Child feels safe at home, at school, and in his or her neighborhood.			
	Boundaries & Expectations	11. Family boundaries —Family has clear and consistent rules and consequences and monitors the child's whereabouts. 12. School boundaries —School provides clear rules and consequences. 13. Neighborhood boundaries —Neighbors take responsibility for monitoring the child's behavior. 14. Adult role models —Parent(s) and other adults in the child's family, as well as nonfamily adults, model positive, responsible behavior. 15. Positive peer influence —Child's closest friends model positive, responsible behavior. 16. High expectations —Parent(s) and teachers expect the child to do her or his best at school and in other activities.			
		Constructive Use of Time	17. Creative activities —Child participates in music, art, drama, or creative writing two or more times per week. 18. Child programs —Child participates two or more times per week in cocurricular school activities or structured community programs for children. 19. Religious community —Child attends religious programs or services one or more times per week. 20. Time at home —Child spends some time most days both in high-quality interaction with parents and doing things at home other than watching TV or playing video games.		
			Commitment to Learning	21. Achievement Motivation —Child is motivated and strives to do well in school. 22. Learning Engagement —Child is responsive, attentive, and actively engaged in learning at school and enjoys participating in learning activities outside of school. 23. Homework —Child usually hands in homework on time. 24. Bonding to school —Child cares about teachers and other adults at school. 25. Reading for Pleasure —Child enjoys and engages in reading for fun most days of the week.	
				Positive Values	26. Caring —Parent(s) tell the child it is important to help other people. 27. Equality and social justice —Parent(s) tell the child it is important to speak up for equal rights for all people. 28. Integrity —Parent(s) tell the child it is important to stand up for one's beliefs. 29. Honesty —Parent(s) tell the child it is important to tell the truth. 30. Responsibility —Parent(s) tell the child it is important to accept personal responsibility for behavior. 31. Healthy Lifestyle —Parent(s) tell the child it is important to have good health habits and an understanding of healthy sexuality.
					Social Competencies
	Positive Identity	37. Personal power —Child feels he or she has some influence over things that happen in her or his life. 38. Self-esteem —Child likes and is proud to be the person that he or she is. 39. Sense of purpose —Child sometimes thinks about what life means and whether there is a purpose for her or his life. 40. Positive view of personal future —Child is optimistic about her or his personal future.			

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Federal Health and Human Services Title V State Sexual Risk Avoidance Education Guidance for Grantees that Implement Religious Programs

1. Religious Materials Eliminate all religious materials from the presentation of the federally funded program. This includes:

- Bibles or other books of worship;
- Registration materials that include religious inquiries or references;
- Follow-up activities that include or lead to religious outreach; and
- Religious content in materials.

45 CFR Part 87.2(c). (“If an organization conducts [inherently religious] activities, the activities must be offered separately, in time or location, from the programs or services funded with direct financial assistance from the Department” 69 FR. 42586, 42593 (2004).

2. Separate and Distinct Programs Any program with religious content must be a separate and distinct program from the federally funded program, and the distinction must be completely clear to the recipient. Some of the ways in which this may be accomplished include, but are not limited to, the following examples:

- Creating separate and distinct names for the programs;
- Creating separate and distinct looks for the promotional materials used to promote each program; and
- Promoting *only* the federally funded program in materials, websites, or commercials purchased with *any portion* of the federal funds.

Note: If an organization offers both a federally funded program and a religious program that provide the same social service, or the clients served are children, it is very important that the separation between the programs be accentuated.

45 CFR Part 87.2(c). (“Organizations that receive direct financial assistance from the Department [under any Department program] may not engage in inherently religious activities, such as worship, religious instruction, or proselytization, as part of the programs or services funded with direct financial assistance from the Department.”) 69 FR. 42586, 42593 (2004).

3. Separate Presentations Completely separate the presentation of any program with religious content from the presentation of the federally funded program by time or location *in such a way that it is clear that the two programs are separate and distinct*. If separating the two programs by time but presenting them in the same location, one program must *completely* end before the other program begins.

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Some of the ways in which separation of presentations may be accomplished include, but are not limited to, the following examples:

- The programs are held in completely different sites or on completely different days.
- The programs are held at the same site at completely different times. Separation may be accomplished through such means as:
 - Have sufficient time between the two programs to vacate the room, turn down the lights, leave the stage, etc., in order to reasonably conclude the first program before beginning the second;
 - Completely dismiss the participants of the first program;

- The second program could follow in the same room or, where feasible, in a different room to further distinguish the difference between the programs.
- The programs are held in different locations of the same site at the same time. Separation may be accomplished through such means as:
 - Completely separate registration locations; and
 - Completely separate areas where programs are held such as by room, hallway, or floor, etc.

45 CFR Part 87.2(c). (“If an organization conducts [inherently religious] activities, the activities must be offered separately, in time or location, from the programs or services funded with direct financial assistance from the Department”) 69 FR. 42586, 42593 (2004).

4. Availability of Other Programs After the federally funded program has ended, a grantee may provide a brief and non-coercive invitation to attend a separate religious program.

The invitation should make it very clear that this is a separate program from, and not a continuation of, the federally funded program. It must also be clear that participants are not required to attend the separate religious program, and that participation in federally funded programs are not contingent on participation in other programs sponsored by the grantee organization.

Religious materials, such as a registration that includes religious follow-up, may only be provided in the privately funded program rather than the federally funded program.

45 CFR Part 87.2(c). “Participation [in any privately funded inherently religious activities] must be voluntary for beneficiaries of the programs or services funded with [direct Federal financial] assistance.” 69 FR 42586, 42593 (2004).

5. Cost Allocation

Demonstrate that federal funds are being used only for the federally funded program. Some of the ways in which separation of funds may be accomplished include, but are not limited to, the following examples:

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- Implement the use of time sheets that keep track of all staff hours charged to the federally funded grant, whether the staff work in other programs or not.
- Require any staff working in both federally funded programs and other programs to clearly indicate how many hours are spent on each program.
- If any staff works on both a federally funded program and a non-federally funded program at the same site on the same day, require the staff to clearly indicate not only how many hours are spent on the federally funded program but also which specific hours are spent on the federally funded program. The hours should reflect that time spent on any program with religious content have been completely separated from hours spent on the federally funded program.
- Show cost allocations for all items and activities that involve both programs, such as staff time, equipment, or other expenses such as travel to event sites.

This may be accomplished through such means as:

o Example: if transportation is used to go to a site where a federally funded program is conducted and a religious or non-religious program funded through other means is also conducted by the grantee at the same site, one half of the travel costs (gas, lodging, etc.) should be charged to the federally funded program. If *three* separate and distinct programs are conducted at a site by an SRAE grantee and one of them is the federally funded program, only one third of the travel costs should be charged to the federally funded program, etc.

o Example: if an electronic device is used 30 percent of the time for the federally funded SRAE program, this should be demonstrated through clear record keeping. Only 30 percent of the cost of the electronic device should be charged to the program.

6. **Advertisements** Federally funded programs cannot limit advertising the grant program services exclusively to religious target populations.

45 CFR Part 87.2(e). "An organization that participates in programs funded by direct financial assistance from the Department shall not, in providing services, discriminate against a program beneficiary or prospective beneficiary on the basis of religion or religious belief."

Adolescent Sexual Health Needs Index (ASHNI)

Attachment 5

ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI
ALBANY		ALLEGANY		BRONX		BROOME		CAYUGA		CHAUTAUQUA		CHENANGO	
12007	0	14060	0	10458	562	13862	8	13021	83	14767	4	13780	2
12009	9	14708	0	10459	412	13865	12	13026	6	14769	2	13801	2
12023	3	14709	2	10460	482	13901	94	13033	6	14775	5	13809	3
12041	1	14711	3	10461	79	13903	39	13034	3	14781	5	13815	32
12046	1	14714	1	10462	231	13904	21	13071	2	14782	6	13830	9
12047	41	14715	4	10463	134	13905	81	13081	2	14784	2	13832	1
12054	15	14717	0	10464	3	CATTARAUGUS		13092	4	14787	10	13841	1
12059	2	14721	0	10465	77	14041	1	13111	4	CHEMUNG		13844	1
12067	2	14727	5	10466	462	14042	7	13118	9	14814	3	CLINTON	
12077	10	14735	5	10467	475	14065	3	13140	11	14816	1	12901	68
12084	3	14739	6	10468	446	14070	7	13147	2	14825	3	12903	1
12110	42	14744	5	10469	266	14101	2	13156	3	14838	4	12910	3
12120	1	14754	1	10470	32	14129	2	13160	4	14845	34	12912	3
12143	12	14770	3	10471	25	14138	5	13166	12	14861	3	12918	3
12147	1	14777	1	10472	403	14171	4	CHAUTAUQUA		14864	4	12919	5
12158	6	14802	12	10473	414	14706	19	14048	57	14871	11	12921	4
12159	7	14803	1	10474	100	14719	7	14062	6	14872	4	12923	1
12183	3	14804	2	10475	143	14726	5	14063	49	14889	4	12924	1
12186	7	14806	3	BROOME		14729	2	14136	10	14894	4	12934	2
12189	34	14813	4	13744	1	14731	2	14701	136	14901	113	12935	3
12193	2	14822	2	13746	4	14737	9	14710	6	14903	18	12952	1
12202	73	14880	2	13748	6	14738	5	14712	4	14904	73	12955	1
12203	60	14884	0	13754	6	14741	2	14716	9	14905	22	12958	3
12204	19	14895	16	13760	80	14743	3	14718	6	CHENANGO		12959	2
12205	41	14897	2	13777	2	14748	3	14723	4	13124	0	12962	6
12206	305	BRONX		13787	7	14753	2	14724	5	13136	2	12972	8
12207	21	10451	373	13790	38	14755	5	14728	1	13155	1	12978	0
12208	30	10452	564	13795	6	14760	41	14733	10	13411	5	12979	3
12209	32	10453	657	13797	3	14772	9	14736	1	13460	7	12981	8
12210	46	10454	326	13802	1	14779	20	14740	2	13464	2	12985	1
12211	12	10455	328	13813	2			14747	5	13730	5	12992	9
12303	78	10456	774	13833	6			14750	7	13733	8		
12469	1	10457	599	13850	20			14757	6	13778	9		

Adolescent Sexual Health Needs Index (ASHNI)

Attachment 5

ZIP Code	ASHNI												
COLUMBIA		DELAWARE		DUTCHESS		ERIE		ERIE		ESSEX		FRANKLIN	
12017	0	12167	3	12501	4	14001	15	14150	73	12851	0	12937	3
12029	1	12421	1	12507	0	14004	20	14170	3	12852	0	12945	0
12037	4	12430	1	12508	33	14006	16	14201	99	12855	0	12953	20
12060	1	12455	1	12514	3	14025	4	14202	12	12857	0	12957	3
12075	2	12474	1	12522	6	14026	1	14203	19	12870	1	12966	3
12106	2	12760	1	12524	13	14030	3	14204	130	12883	7	12969	0
12115	0	12776	2	12531	3	14031	12	14206	74	12913	1	12970	4
12125	3	13731	1	12533	25	14032	9	14207	161	12928	2	12980	2
12130	1	13739	1	12538	22	14033	3	14208	215	12932	1	12983	11
12136	1	13740	0	12540	7	14034	4	14209	40	12936	0	12986	7
12165	0	13750	2	12545	7	14043	32	14210	59	12941	1	12989	1
12173	3	13751	0	12546	3	14047	7	14211	390	12942	0	13655	8
12184	7	13752	1	12564	8	14051	23	14212	87	12943	0	GENESEE	
12502	1	13753	13	12567	3	14052	20	14213	208	12944	5	14005	3
12503	1	13755	2	12569	11	14055	3	14214	128	12946	5	14013	3
12513	1	13756	1	12570	8	14057	12	14215	717	12950	1	14020	47
12516	2	13757	1	12571	18	14059	11	14216	52	12956	3	14036	7
12517	1	13775	2	12572	6	14068	9	14217	33	12960	1	14040	3
12521	2	13782	1	12578	2	14069	1	14218	62	12961	0	14054	2
12523	2	13783	5	12580	5	14072	31	14219	24	12964	0	14058	4
12526	4	13786	1	12581	2	14075	54	14220	68	12974	2	14125	7
12529	2	13788	1	12582	7	14080	5	14221	58	12987	0	14143	1
12534	42	13804	1	12583	4	14081	7	14222	35	12993	2	14416	5
CORTLAND		13838	7	12585	1	14085	9	14223	39	12996	2	14422	4
13040	6	13839	2	12590	40	14086	42	14224	53	12997	1	14482	11
13045	90	13842	1	12592	1	14091	2	14225	82	FRANKLIN		14525	4
13077	10	13846	0	12594	7	14102	2	14226	47	12914	2	GREENE	
13101	5	13849	5	12601	175	14111	7	14227	28	12916	4	12015	4
13141	1	13856	9	12603	60	14127	31	14228	39	12917	2	12042	0
13158	4					14134	0			12920	3	12051	15
13803	10					14139	3			12926	4	12058	3
13863	1					14141	16			12930	1	12083	4

Adolescent Sexual Health Needs Index (ASHNI)

Attachment 5

ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI
GREENE		HAMILTON		JEFFERSON		KINGS		LEWIS		MADISON		MONROE	
12087	2	12139	0	13616	4	11215	34	13473	1	13072	3	14604	6
12176	1	12164	0	13618	2	11216	287	13489	1	13082	7	14605	225
12192	3	12190	1	13622	7	11217	34	13619	19	13122	2	14606	138
12405	1	12812	0	13624	8	11218	110	13620	3	13310	0	14607	16
12413	9	12842	1	13634	9	11219	134	13626	5	13332	3	14608	181
12414	18	12847	0	13636	1	11220	212	13648	4	13334	3	14609	242
12418	1	13360	0	13637	13	11221	510	13665	2	13346	17	14610	12
12422	1	HERKIMER		13638	1	11222	20	LIVINGSTON		13355	3	14611	303
12423	1	13322	2	13650	3	11223	107	14414	6	13402	2	14612	52
12424	0	13324	4	13656	5	11224	130	14423	4	13408	19	14613	118
12427	1	13331	0	13659	2	11225	232	14435	2	13409	4	14615	72
12431	1	13338	2	13661	4	11226	578	14437	13	13418	0	14616	76
12439	0	13340	16	13673	5	11228	32	14454	19	13421	25	14617	32
12442	2	13350	35	13679	5	11229	84	14462	0	13485	3	14618	41
12444	1	13357	28	13682	1	11230	110	14480	1	MONROE		14619	168
12450	0	13361	1	13685	2	11231	37	14481	2	14420	55	14620	37
12451	3	13365	18	13691	7	11232	72	14485	5	14428	12	14621	402
12454	0	13406	2	13693	1	11233	595	14486	0	14445	16	14622	20
12460	1	13407	12	KINGS		11234	163	14487	5	14450	45	14623	104
12463	2	13416	5	11201	47	11235	67	14510	6	14464	16	14624	71
12468	1	13420	1	11203	424	11236	514	14517	4	14467	16	14625	12
12470	1	13431	4	11204	87	11237	214	14533	2	14468	22	14626	46
12473	1	13454	2	11205	116	11238	77	14545	0	14472	11	MONTGOMERY	
12480	2	JEFFERSON		11206	307	11239	72	14836	1	14506	1	12010	72
12482	2	13601	103	11207	805	LEWIS		14846	1	14514	9	12066	2
12485	2	13602	8	11208	610	13325	1	MADISON		14526	20	12068	7
12492	1	13603	36	11209	51	13327	2	13030	5	14534	35	12070	2
12496	1	13605	11	11210	175	13343	4	13032	16	14543	5	12072	4
HAMILTON		13606	5	11211	124	13345	1	13035	11	14546	7	12166	2
12032	1	13607	3	11212	912	13367	14	13037	13	14559	27	13317	6
12108	0	13608	4	11213	346	13368	2	13052	2	14580	61	13339	14
12134	5	13612	6	11214	82	13433	4	13061	1	14586	16	13428	2

Adolescent Sexual Health Needs Index (ASHNI)

Attachment 5

ZIP Code	ASHNI												
NASSAU		NASSAU		NASSAU		NEW YORK		ONEIDA		ONEIDA		ONONDAGA	
11001	15	11563	14	11804	3	10034	147	13042	4	13492	17	13205	220
11003	91	11565	4	NEW YORK		10035	241	13054	3	13494	0	13206	44
11010	16	11566	19	10001	30	10036	12	13301	0	13495	4	13207	114
11020	5	11568	7	10002	136	10037	107	13303	1	13501	190	13208	128
11021	8	11570	17	10003	73	10038	31	13304	2	13502	127	13209	23
11023	5	11572	20	10004	1	10039	195	13308	8	ONONDAGA		13210	259
11024	7	11575	84	10005	1	10040	164	13309	11	13027	48	13211	21
11030	8	11576	6	10006	0	10044	13	13316	15	13029	12	13212	37
11040	23	11577	8	10007	2	10065	6	13318	5	13031	23	13214	34
11050	19	11579	3	10009	82	10075	6	13319	4	13039	25	13215	26
11096	26	11580	59	10010	20	10128	23	13323	24	13041	16	13219	18
11501	13	11581	18	10011	28	10280	2	13328	1	13057	27	13224	42
11507	5	11590	94	10012	7	NIAGARA		13354	5	13060	4	ONTARIO	
11509	1	11596	6	10013	13	14008	4	13363	5	13063	3	14424	36
11510	50	11598	7	10014	7	14012	6	13403	12	13066	12	14425	19
11514	3	11702	10	10016	13	14028	4	13413	14	13078	11	14432	9
11516	5	11709	4	10017	2	14067	11	13417	5	13080	7	14456	56
11518	7	11710	22	10018	3	14092	14	13424	4	13084	6	14466	2
11520	134	11714	15	10019	19	14094	132	13425	3	13088	33	14469	8
11530	19	11732	1	10021	9	14105	8	13438	6	13090	52	14471	4
11542	35	11753	7	10022	9	14108	14	13440	101	13104	19	14475	0
11545	8	11756	34	10023	28	14120	78	13456	6	13108	9	14504	3
11548	7	11758	36	10024	23	14131	13	13461	3	13110	4	14512	7
11550	301	11762	11	10025	94	14132	15	13469	1	13112	3	14532	8
11552	32	11765	0	10026	150	14172	7	13471	8	13116	6	14548	7
11553	110	11771	6	10027	355	14174	11	13476	8	13120	7	14560	2
11554	26	11783	13	10028	14	14301	91	13477	3	13152	9	14561	6
11557	5	11791	14	10029	414	14303	38	13478	4	13159	8	14564	11
11558	7	11793	18	10030	225	14304	67	13480	6	13164	3	ORANGE	
11559	6	11797	5	10031	281	14305	107	13483	1	13202	51	10916	5
11560	4	11801	37	10032	295			13486	2	13203	84	10917	2
11561	30	11803	14	10033	184			13490	2	13204	191	10918	12

Adolescent Sexual Health Needs Index (ASHNI)

ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI								
ORANGE		ORANGE		OTSEGO		PUTNAM		QUEENS		RENSSELAER		RICHMOND	
10919	1	12780	3	12064	1	10537	2	11375	27	12018	9	10309	24
10921	5	ORLEANS		12116	3	10541	16	11377	113	12022	1	10310	74
10924	16	14098	6	12155	2	10579	4	11378	34	12033	10	10312	42
10925	5	14103	37	12197	3	12563	6	11379	21	12052	1	10314	79
10926	4	14411	40	13315	2	QUEENS		11385	186	12061	8	ROCKLAND	
10928	8	14470	18	13320	3	11004	11	11411	70	12062	2	10901	17
10930	10	14476	3	13326	5	11101	56	11412	175	12090	9	10913	6
10940	156	14477	4	13335	3	11102	51	11413	202	12094	3	10920	7
10941	25	14571	2	13337	1	11103	30	11414	18	12121	3	10923	15
10950	82	OSWEGO		13342	0	11104	20	11415	16	12123	10	10927	46
10958	4	13028	2	13348	2	11105	18	11416	53	12138	4	10931	2
10963	5	13036	14	13415	0	11106	47	11417	52	12140	2	10952	61
10969	2	13044	3	13439	5	11109	0	11418	71	12144	33	10954	20
10973	3	13069	61	13450	0	11354	47	11419	96	12153	1	10956	21
10985	0	13074	8	13468	1	11355	71	11420	96	12154	4	10960	22
10987	2	13076	5	13488	0	11356	26	11421	86	12156	1	10962	7
10990	20	13083	3	13491	6	11357	19	11422	144	12168	3	10964	1
10992	12	13103	1	13776	1	11358	26	11423	66	12169	1	10965	9
10996	11	13114	13	13796	2	11360	8	11426	14	12180	213	10968	1
10998	4	13126	84	13807	2	11361	21	11427	25	12182	40	10970	11
12518	6	13131	8	13808	3	11362	9	11428	31	12185	4	10974	2
12520	2	13132	6	13810	2	11363	3	11429	118	12196	3	10976	5
12543	5	13135	10	13820	64	11364	21	11432	121	12198	9	10977	138
12549	12	13142	11	13825	5	11365	38	11433	217	RICHMOND		10980	12
12550	222	13144	3	13843	2	11366	9	11434	339	10301	112	10983	4
12553	36	13145	4	13859	0	11367	42	11435	126	10302	64	10984	3
12575	2	13167	5	13861	1	11368	386	11436	92	10303	127	10986	2
12577	2	13302	4	PUTNAM		11369	124	11691	254	10304	124	10989	7
12586	22	13437	0	10509	12	11370	78	11692	109	10305	46	10993	11
12729	6	13493	5	10512	14	11372	111	11693	36	10306	44	SARATOGA	
12746	1			10516	2	11373	154	11694	17	10307	10	12019	15
12771	38			10524	2	11374	28	11697	2	10308	21	12020	37

Adolescent Sexual Health Needs Index (ASHNI)

Attachment

ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI	ZIP Code	ASHNI
SARATOGA		SCHOHARIE		SENECA		ST. LAWRENCE		SUFFOLK		SUFFOLK		SUFFOLK	
12027	5	12035	2	14847	3	13684	2	06390	0	11749	5	11933	7
12065	42	12036	0	14860	2	13687	1	11701	87	11751	13	11934	7
12074	4	12043	22	ST. LAWRENCE		13690	1	11703	19	11752	9	11935	2
12086	3	12071	0	12922	0	13694	1	11704	55	11754	14	11937	21
12118	20	12076	2	12965	1	13695	0	11705	6	11755	10	11939	1
12148	3	12092	2	12967	2	13697	3	11706	145	11757	53	11940	4
12151	1	12093	2	12973	0	STEBEN		11713	29	11763	49	11941	5
12170	8	12122	7	13613	4	14572	11	11715	4	11764	10	11942	5
12188	13	12131	0	13614	1	14801	12	11716	10	11766	9	11944	6
12803	11	12149	5	13617	22	14807	5	11717	249	11767	10	11946	18
12822	12	12157	4	13621	1	14808	1	11718	2	11768	12	11948	1
12831	17	12160	1	13625	2	14809	6	11719	3	11769	7	11949	12
12833	6	12175	1	13630	3	14810	25	11720	35	11770	0	11950	40
12835	4	12187	1	13633	0	14819	2	11721	5	11772	74	11951	41
12850	3	12194	0	13635	3	14820	2	11722	129	11776	27	11952	4
12859	2	13459	3	13639	0	14821	8	11724	3	11777	5	11953	18
12863	1	SCHUYLER		13642	19	14823	7	11725	20	11778	13	11954	4
12866	57	14805	1	13646	3	14826	3	11726	47	11779	37	11955	2
12871	6	14812	6	13652	3	14830	35	11727	32	11780	12	11957	1
SCHENECTADY		14815	2	13654	4	14839	1	11729	34	11782	12	11958	0
12008	0	14818	3	13658	2	14840	4	11730	14	11784	33	11961	12
12053	6	14824	3	13660	3	14843	30	11731	21	11786	5	11963	6
12056	3	14841	1	13662	25	14855	3	11733	13	11787	23	11964	1
12137	3	14865	5	13666	1	14858	4	11735	34	11788	12	11965	0
12150	1	14869	2	13667	6	14870	12	11738	22	11789	7	11967	56
12302	40	14878	1	13668	5	14873	5	11740	7	11790	23	11968	13
12304	90	14891	6	13669	27	14874	0	11741	25	11792	7	11971	4
12305	20	SENECA		13670	1	14877	1	11742	14	11795	20	11976	1
12306	54	13148	16	13672	1	14879	7	11743	31	11796	3	11977	3
12307	97	13165	20	13676	33	14885	2	11746	88	11798	89	11978	4
12308	89	14521	6	13680	2	14898	5	11747	12	11901	57	11980	5
12309	31	14541	7	13681	1								

Adolescent Sexual Health Needs Index (ASHNI)

Attachment 5

ZIP Code	ASHNI	ZIP Code	ASHNI
WESTCHESTER		WYOMING	
10605	13	14569	8
10606	31	14591	3
10607	7	YATES	
10701	276	14415	0
10703	49	14418	2
10704	31	14441	1
10705	140	14478	6
10706	7	14507	2
10707	6	14527	17
10708	16	14544	3
10709	5	14837	11
10710	21	14842	1
10801	129		
10803	10		
10804	8		
10805	33		
WYOMING			
14009	8		
14011	11		
14024	3		
14037	1		
14039	0		
14066	3		
14082	1		
14113	1		
14145	2		
14167	2		
14427	3		
14530	9		
14536	1		
14550	2		

Work Plan including Objectives, Tasks and Performance Measures

Objective	Task	Performance Measure (PM)
Objective Name: Component 1	Task Name: Evidence-Based Curricula	PM Name: Education
1. Provide sexual risk avoidance education with an evidenced-based approach based on adolescent learning and developmental theories for the age group receiving the education	1.1 Applicant will select and implement one of the approved evidenced-based curricula identified in Attachment 2	1.1.1. Teach the benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making, healthy relationships, avoiding poverty, resisting sexual coercion, dating violence and other youth risk behaviors such as drug and alcohol usage.
	Task Name: Evidenced-Based Practices (EBP)	PM Name: Training
	1.2. EBP will be delivered consistent with the developer’s guidelines.	1.2.1. Health educators/facilitators are trained on program strategies, approaches and interventions by ACT CCA.
	Task Name: Evaluation	PM Name: Data
	1.3. Evaluation tools and reports requested by DOH are complete and submitted in a timely manner.	1.3.1. Provide data that demonstrates how the selected intervention applies key program elements that have been found to be effective in positive youth behavior change especially delaying the initiation of sexual activity, returning to a lifestyle without sex and refraining from sexual activity.
Task Name: Services	PM Name: Links	
1.4. Applicants will have a system in place to provide adolescent pregnancy prevention-related health care services & other providers of health services such as substance abuse, mental health issues & intimate partner violence.	1.4.1. Link program participants to services with local community partners and other agencies that support the health, safety and well-being of program participants. The partnering agencies should share a commitment for optimal health and outcomes which do not normalize teen sex.	

Objective Name: Component 2	Task Name: Activities	PM Name: Strengths
2. Provide or expand adult-supervised activities that create educational, recreational, or vocational opportunities for preteen youth.	2.1. Implement activities framed in a youth-development philosophy that stimulate cognitive, social, physical and/or emotional growth and provide a context for productive relationship building between adults and youth and among youth.	2.1.1. Youth build on their strengths and assets and shape their ideas about and aspirations for the future.
	Task Name: Training	PM Name: Relationship Building
	2.2. Orientation and training for volunteers working with youth is developed and implemented	2.2.1. Activities provide a context for productive relationship building between adults and youth and among youth.
	Task Name: Evaluation Tools	PM Name: Activities
	2.3. Evaluation tools and reports requested by DOH are complete and submitted in a timely manner.	2.3.1. Activities provide alternatives to and demonstrate the advantages of postponing sexual activity and promote the development of a skill that can support a successful transition into healthy young adulthood.
Objective Name: Component 3	Task Name: Education	PM Name: Venues
3. Provide parenting education to parents, guardians and other adult caregivers of preteen youth.	3.1. Incorporate education for parents, caregivers, and other adults in the community in an effort to provide improved knowledge and communication skills related to adolescent sexual health and risky behaviors.	3.1.1. Venues are to enhance and strengthen the communication and supervision skills of parents, guardians and other caregivers in locations such as schools, the workplace and other community-based settings.
	Task Name: Evaluation Tools	PM Name: Workshops
	3.2. Evaluation tools and reports requested by DOH are complete and submitted in a timely manner	3.2.1. Number of workshops conducted with parents alone and/or with parents together with children.

Grants Gateway Budget Instructions *Applications OR New Budget Periods*

Data Entry of the Expenditure Budget - A step by step data entry document titled “**Grants Gateway Budget Data Entry Guidelines**” has been provided at the end of Attachment 10

- It may be beneficial to use this document as a guide for drafting the budget off-line prior to completing the Expenditure Budget in the Grants Gateway.
- The data entry document highlights the character limits for each field of the Expenditure Budget. Character limits are based on all characters including spaces.

Funding Opportunity Specification – The following specifications should be adhered to when completing the expenditure based budget. Failure to adhere to these specifications may result in a reduction of allotted points. Successful applications recommended for award will require modification to meet these specifications prior to contract approval.

- For each section of the budget entered online in Grants Gateway under the Narrative section enter details about other funds for required components of the program.

Additional Considerations

- All costs must directly relate to the provision of services outlined in this funding opportunity, be consistent with the scope of services, reasonable, and cost effective.
- Contracted organizations must have on file documentation to support allocation of shared costs to the contract in accordance with applicable regulations and approved budget.
- For each section of the budget in which a budget item is proposed, all required fields must be completed. Failure to complete required fields will result in a global error message which must be resolved prior to submission.
- Failure to provide complete, clear, and concise information may result in a reduced score.
- Equipment purchases for major items that will depreciate in a very short period of time (e.g. one to three years) will only be considered when supported by a strong justification. The Department of Health (DOH) recognizes that organizations may classify items as equipment within their own accounting system that do not fall under the definition of equipment and may be included in the equipment budget category.
- Budget justifications should identify the proposed goods/services that are programmatically necessary and describe how this expense supports the Work Plan objectives of the project. The justification should provide sufficient detail to demonstrate that specific uses and amounts of funding have been carefully considered, are reasonable and are consistent with the approaches described in the Work Plan.
- Budget lines that are not well-justified may negatively impact the application score and/or delay the budget approval process.
- Indirect costs for organizations without a federally-approved indirect cost rate, will be limited to no more than 10% of total direct costs.
- A “match” contribution is **NOT** required for this grant award. Please do not enter information in the match sections of the budget.

- For fields titled “Other Funds” always leave blank. Additional costs incurred by the program, referred to as “in-kind contributions” should be detailed under the narrative sections for the respective budget category. (i.e. In-kind staff should not be listed in the Salary Detail, but please identify any in-kind staff and the grant deliverable their work supports in the Personal Services – Salary Narrative)
- **Travel:** All Travel, other than travel for individuals / organizations funded under the contractual service line, subcontractor travel, should be budgeted in this section. If awarded Out-of-State travel requires prior approval.
 - OCS Guidelines: <http://www.osc.state.ny.us/agencies/travel/manual.pdf>
 - USGSA: <http://www.gsa.gov/portal/category/21283>

Other Helpful Links:

Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards: <https://www.federalregister.gov/documents/2013/12/26/2013-30465/uniform-administrative-requirements-cost-principles-and-audit-requirements-for-federal-awards>

CFR Subpart E - Basic Considerations: http://www.ecfr.gov/cgi-bin/text-idx?SID=1728c16d0aca3b9aabb3c25d38d5483&mc=true&node=pt2.1.200&rgn=div5#sg2.1.200_1401.sg12

Grants Gateway Budget Entry Guidelines

<u>Grants Gateway Field</u>	<u>Character Limits</u>	<u>Enter Required Information as Instructed Below</u>
Personal Services - Salary		In the Salary section only include staff positions related to the implementation and administration of the project. ONLY staff that are employees of the applicant organization are to be included here. All other staff should be listed under Contractual Services. If Salary is not applicable, leave this section blank.
Position/Title	55	Provide the position title and employee name, if known. TBH should be entered in place of the employee name if the position is vacant at the time of budget submission.
Role/Responsibility	500	Provide a brief narrative of how the position will contribute directly to this project, Include the percent of time the incumbent will work on the program on a full-time basis. One (1.0) FTE is based on the number of hours worked in one week (e.g. 40-hour workweek). To determine a % FTE, divide the hours per week spent on the project, by the number of hours in the workweek. For example: given a 40-hour workweek, an individual working 10 hours per week on the project spends 25 percent of his/her time on the project (i.e. 10/40 = .25) Please show in percentage form - 25%. If TBH, also provide the anticipated start date for this position.
# in Title	N/A	Always enter the number 1. A separate position should be added for "each" position on the contract.
Annualized Salary Per Position	N/A	Enter the annual salary the organization will pay this employee. This figure should NOT be adjusted if a portion of the salary will be paid with other funds. Percentage of time supported with "other funds" should be entered in the PS narrative.
STD Work Week (hrs.)	N/A	Enter the standard (STD) hours worked each week by the employee. This figure should NOT be adjusted for hours paid with other funds.
% Funded	N/A	Enter only the percent of time this position is supported with grant funds. Do NOT include any percentage of time supported by other fund sources. Total grant funding requested divided by annual salary.
# Months Funded	N/A	Enter the estimated number of months this position will work on this grant. If TBH, enter the number of months based upon the

		anticipated start date.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this position on the project. (Annual Salary / 12 Months x # Months Funded x % Funded).
Total Match Funds	N/A	Always leave blank.
Match %	N/A	Always leave blank.
Total Other Funds		Always leave blank.
Personal Services - Salary Narrative	4000	Program Specific Instructions / Requirements
Personal Services - Fringe	Fringe Benefits should be budgeted in line with your organization's Standard Fringe Benefit Policy and/or Negotiated Bargaining Agreements. If Fringe is not applicable, leave this section blank.	
Type/Description	125	Provide the requested fringe rate.
Justification	1000	Provide all fringe benefit components included in the calculation of the fringe benefit rate. Show breakdown of fringe benefit rate into component percentages. If additional space is needed enter details in the PS - Fringe Narrative
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Personal Services - Fringe Narrative	4000	Program Specific Instructions / Requirements If additional space is needed from the justification section, specify here, the components (FICA, Health and Life Insurance, Unemployment Insurance, Disability Insurance, Worker's Compensation, and Retirement) and their percentages comprising the fringe benefit rate. If different rates are used for different positions, provide details for each rate in the space provided and specify which positions are subject to that rate.
Non-Personal Services	Non-Personal Service expenses. For each Non-Personal Service expense not supported by grant funds, the applicant should include a description in the appropriate NPS Narrative section. For example if you contract with a Pharmacist using other funds you would list under the Contractual Narrative - Pharmacist \$25/hour for 20/hours total cost \$500.00.	

Contractual	<p>This category should be used to budget for specific services which cannot be accomplished by existing staff as well as for any services/expenses which will be provided by a subcontractor. Include expenses such as contracted staff, per diem staff, bookkeeping, payroll and audit services. Include the time frame for the delivery of services. Contractors may be required to submit subcontracts to the Department for review and approval prior to execution of the subcontract. The contractor remains fully responsible for all work performed by the subcontractor. ALL related expenses are to be budgeted under this section (any non-personal service costs to include travel) associated with the staff/organizations allocated to CS. If Contractual Services are not applicable, leave this section blank.</p>	
Type/Description	125	Provide the name of the organization, company or individual and the type of service being provided. If not known, enter TBH in place of the name of the organization, company or individual. (i.e. Pharmacist - TBH)
Justification	1000	Describe how this expense supports the work plan objectives of the project. Include the timeframe for delivery of services.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Contractual Narrative	4000	
Travel	<p>Itemized travel estimates should be based on the lesser of the written policy of the organization, the Office of State Comptroller (OSC) guidelines, or the United States General Services Administration (USGSA) rates. Out-of-State travel requires <u>prior</u> approval by the State. Travel expenses associated with any Subcontractor, Consultant, or Vendor, must be included in the Contractual Services budget line. If Travel is not applicable, leave this section blank.</p>	
Type/Description	125	Provide the type of travel. A separate entry should be completed for each category of travel (i.e. Client, Staff Travel, In-State, or Out-of-State).
Justification	1000	Describe how this expense supports the work plan objectives of the project, include the title of the position(s) traveling.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.

Travel Narrative	4000	Program Specific Instructions / Requirements Applicants must include travel expenses for up to two staff to attend an annual two-day provider meeting in Albany, N.Y.
Equipment	This section is used to itemize both purchased and rental equipment costs. Equipment is defined as items such as computers, printers, phones, apparatus or fixed asset (other than land or a building) that are tangible personal property having a useful life of more than one year and a purchase price equal or exceeding \$5,000. These items must be inventoried (tagged) and included on the annual equipment inventory form. This also includes a grouping of like items which equals or exceeds \$5,000. Item(s) not falling under this definition should be included under Operating Expenses. If Equipment is not applicable, leave this section blank.	
Type/Description	125	Provide the type of equipment and the quantity to be purchased or rented. (i.e. 3 Desk Top PCs)
Justification	1000	Provide the names of the staff that will be using the equipment and provide the calculation used to determine the allocation of this expense to the project. Reminder: staff % Funded (time and effort) must be taken into consideration when determining the appropriate allocation of the expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Equipment Narrative	4000	Program Specific Instructions / Requirements If using other funds for required equipment enter the details here
Space/Property: Rent	This section is used to itemize costs associated with Space/Property: Rent. A separate entry will be required if more than one instance of rental property is needed. If Space/Property: Rent is not applicable, leave this section blank. The expenses included are rent, maintenance, and insurance (property and liability). Occupancy costs must include square foot value of space and total square footage along with methodology used to determine expense.	
Type/Description	125	Provide the physical address of the rental property.
Justification	1000	Provide details such as which project(s) operate(s) out of the space, and provide the calculation used to determine the allocation of

		this expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Space/Property: Rent Narrative	4000	Program Specific Instructions / Requirement
Space/Property: Own	This section is used to itemize costs associated with Space/Property: If Space/Property: Own is not applicable, leave this section blank. The expenses included are, maintenance, insurance (property and liability). Demonstrate how the total expense being allocated to this program is calculated. Provide the allocation methodology and percent. Occupancy costs must include square foot value of space and total square footage along with methodology used to determine expense.	
Type/Description	125	Provide the physical address of the property that is owned.
Justification	1000	Provide details such as which project(s) operate(s) out of the space, and provide the calculation used to determine the allocation of this expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Space/Property: Own Narrative	4000	Program Specific Instructions / Requirements
Utilities	This section is used to itemize costs associated with Utilities. A separate entry is needed for each category of expense relating to utilities (i.e., utilities, telephone, mobile, etc.)using other funds. If Utilities are is not applicable, leave this section blank.	
Type/Description	125	Provide the type of expense and include the property address. (i.e. Telephone - 123 Cherry Lane)
Justification	1000	Provide details such as which project(s) share this expense, and provide the calculation used to determine the allocation of this expense to the project.

Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Utilities Narrative	4000	Program Specific Instructions / Requirements
Operating Expenses	This section is used to itemize costs associated with the operation of the project, including but not limited to insurance/bonding, photocopying, advertising, office supplies, direct medical service supplies, program supplies/materials. A separate entry for each type of expense is needed. Expenses for any costs shared across multiple projects must be appropriately cost-allocated in accordance with the benefit received or effort provided to the project. If Operating Expenses are not applicable, leave this section blank.	
Type/Description	125	Provide the type of expense
Justification	1000	Budget justifications should identify the proposed goods/services that are programmatically necessary and describe how this expense supports the Work Plan objectives of the project. The justification should provide sufficient detail to demonstrate that specific uses and amounts of funding have been carefully considered, are reasonable and are consistent with the approaches described in the Work Plan.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Operating Expenses Narrative	4000	Program Specific Instructions / Requirements
Other Expenses Detail	Only Indirect costs are to be budgeted under this section (also referred to as Administrative costs), unless determined not to be allowed by the award. Non-profit agencies receiving federal funds are eligible to charge their federally approved indirect cost rate. A copy of the current federal ICR agreement must be uploaded to the pre-submission uploads section of the application. For organizations without a federally-approved indirect cost rate, indirect costs will be limited to no more than 10% of total direct costs. Direct costs may include Personal Service, Fringe Benefits, Space, Program Operations, Travel, Equipment, and Other budget costs. Applicants must provide a description of costs included in the indirect cost calculation in the Other Expenses budget narrative	

	section of the application. Calculated indirect cost rates will be subject to DOH review and approval.	
Type/Description	125	Provide the requested indirect costs rate, indicating whether it is based on a Federally Approved Rate Agreement.
Justification	1000	Indicate specifically that the document was uploaded to the Grants Gateway (Federally Approved Rate Agreement)
Total Grant Funds	N/A	Provide the requested value using the formulary provided.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
Other Narrative	4000	Program Specific Instructions / Requirements