Frequently Asked Questions and Answers

Office of Adolescent Health

Teenage Pregnancy Prevention Initiative

Tier 1: Replicating Evidence-based Programs

General Questions

1. **Question:** Who administers the Teenage Pregnancy Prevention Tier 1 Grant Program?

    Answer: The Office of Adolescent Health (OAH) within the Office of Public Health and Science at the U.S. Department of Health and Human Services administers the program.

2. **Question**: Who is eligible to receive a Teenage Pregnancy Prevention (TPP) Tier 1 cooperative agreement?

    Answer: Eligible recipients include public or private nonprofit and for-profit organizations or agencies which demonstrate to the satisfaction of the Secretary the capability to provide the appropriate services. Examples include: Nonprofit organizations with 501C3 IRS status; Nonprofit without 501C3 IRS status; For-profit organizations (other than small business); Small, minority, and women-owned businesses; Universities; Colleges; Research institutions; Hospitals; Community-based organizations; Faith-based organizations; Federally recognized or state-recognized American Indian/Alaska Native tribal governments; American Indian/Alaska native tribally designated organizations; Alaska Native health corporations; Urban Indian health organizations; Tribal epidemiology centers; State and local governments or their Bona Fide Agents (this includes the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, the Commonwealth of the Northern Marianna Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau); or Political subdivisions of States (in consultation with States).

3. **Question**: What is the difference between a Tier 1 and a Tier 2 TPP cooperative agreement?

    Answer: Tier 1 funding (addressed through this funding announcement) provides funding for the replication of programs that have been proven effective through rigorous evaluation to reduce teenage pregnancy, behavioral risk factors underlying teenage pregnancy, or other associated risk factors. Tier 2 funding (addressed through a separate funding announcement) provides funding for

research and demonstration grants to develop, replicate, refine, and test additional models and innovative strategies for preventing teenage pregnancy.

4. **Question**: What is the difference between a grant and a cooperative agreement?

Answer: A cooperative agreement is a form of a grant. Grants and cooperative agreements are quite similar. When there is likely to be substantial involvement in the planning and implementation of the programs funded on the part of the federal agency, a cooperative agreement is used. Departmental-recipient involvement is the major practical difference between the two award instruments.

Application Submission Questions

5. **Question**: May an individual submit a grant application?

Answer: Grants are awarded to organizations rather than individuals. An application may be submitted by an individual authorized to act/sign for an organization and to assume the obligations imposed by the legislation and any additional conditions of the grant. However, the award will not go directly to that individual but to the organization which the individual represents.

6. **Question**: How should applications be submitted?

Answer: The Office of Public Health and Science (OPHS) provides multiple mechanisms for the submission of applications. While applications are accepted in hard copy, the use of the electronic application submission capabilities provided by the Grants.gov and GrantSolutions.gov systems is encouraged.

Electronic grant application submissions must be submitted no later than 11:00 p.m. Eastern Time on June 1, 2010. **Paper grant application submissions must be submitted no later than 5:00 p.m. Eastern Time on June 1, 2010.** All required hardcopy original signatures, mail-in items, and hardcopy applications (if applicable) must be received by the Office of Grants Management, Office of Public Health and Science (OPHS), Department of Health and Human Services (DHHS) c/o Grant Application Center, 1515 Wilson Blvd., Suite 100, Arlington, VA 22209, no later than 5:00 p.m. Eastern Time on the next business day after the deadline date. Applications will not be considered valid until all electronic application components, hardcopy original signatures, and mail-in items are received by the OPHS Office of Grants Management according to the deadlines specified above.

Applications submitted for programs that are not on the list of programs in Appendix A – the list of program models that have been found by an independent review to meet specified evidence and programmatic standards - must be submitted no later than **5:00 p.m. Eastern Time on May 17, 2010, for hard-copy applications to the above address and no later than 11:00 p.m. Eastern**

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> **Time for electronic applications** submitted via Grants.gov Website Portal or the GrantSolutions System on the same deadline date.
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> Applicants are encouraged to initiate electronic applications early in the application development process, and to submit early on the due date or before. This will aid in addressing any problems with submissions prior to the application deadline.

7.   **Question**: Should the application narrative be submitted in a specific format?

> **Answer:** Yes. A suggested outline is provided in the Funding Opportunity Announcement. The typed, double-spaced, 50 page limit for the program narrative should be strictly observed. The 100 page application limit when appendices are included should also be strictly observed. Applications that exceed the 50 page limit on the narrative or the 100 page total page limit will be deemed non-responsive and will not be reviewed. **All pages in the application should be numbered.** Applications should be submitted on the PHS 5161 form. Only the appendices listed in the Funding Opportunity Announcement should be included in the submitted application.

8.   **Question**: What is the latest date the awards can be issued?

> **Answer**: Cooperative agreement awards under this program announcement must be issued no later than September 30, 2010.

9.   **Question**: What documents need to be signed?

> **Answer**: An authorized representative of the organization should sign the face page of the PHS 5161 Application (Form 424). Signing this form indicates the applicant's agreement to all of the Certifications and Assurances within the PHS 5161 Application. The PHS 5161 application should be reviewed for any additional signatures needed.

10.   **Question**: Are TPP Tier 1 projects subject to Intergovernmental Review under Executive Order 12372?

> **Answer**: Applicants under this announcement are not subject to the review requirements of Executive Order 12372, "Intergovernmental Review of Federal Programs," as implemented by 45 CFR Part 100.

11.   **Question**: What is the Catalog of Federal Domestic Assistance number?

> **Answer**: All Federal domestic assistance programs are assigned an identifying number by the Office of Management and Budget. OAH's number for TPP projects is 93.297. These numbers are used as a reference to available programs

and are published in a [complete catalog for easy access](#) by any interested organizations or members of the public.

12.   **Question**: Will OAH extend the deadline for submission of applications?

Answer: No. Any applications submitted after the deadline will not be reviewed for possible funding.

Funding Decision Questions

13.   **Question**: Who will make the funding decision?

Answer: Applications in response to this solicitation will be reviewed on a nationwide basis and in competition with other submitted applications. Eligible applications will be reviewed by an Objective Review Committee which will apply the review criteria noted in the funding announcement in order to derive priority scores. Final award decisions will be made by the Director of the Office of Adolescent Health. In making decisions, the Director will take into account the score and rank order given by the Objective Review Committee, and other considerations as follows:

- The availability of funds.
- Representation of evidence-based teenage pregnancy prevention programs across communities, including varied types of interventions and evidence-based strategies.
- Geographic distribution of evidence-based projects nationwide.
- Inclusion of communities of varying sizes, including rural, suburban, and urban communities.
- Feasibility of the evaluation plan (Ranges C and D).
- Inclusion of a range of populations disproportionately affected by teenage pregnancy.

14.   **Question**: Will only one organization from a particular state or city be eligible for funding?

Answer: Funding decisions will be made based on the merit of the application being reviewed as well as the needs of the community. It is possible that more than one organization will be awarded in a particular state or city. Organizations in a given area can form collaborations or partnerships and apply for funding together to expand the reach of services across their community; however only one organization can serve as the applicant entity. Applicants should provide evidence in Memoranda of Understanding (MOUs) stating that all partners (e.g., schools, community-based organizations, others) have agreed to implement programs with fidelity.

15.   **Question:** How many applications is the OAH expecting and how many awards will be made under this funding announcement?

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Answer: OAH does not know how many applications will be received in response to this funding announcement. OAH estimates that a large number of organizations will apply for funding. Successful applications will result in the award of an **estimated 150 cooperative agreements**. These cooperative agreements will be made across all four funding ranges requested under this announcement. OAH is requesting a letter of intent from interested applicants to assist in planning for the objective review process. The letter of intent is due on May 3, 2010. The letter of intent should be sent to Allison Roper, Office of Adolescent Health, 1101 Wootton Parkway, Suite 700, Rockville, MD 20852, (240) 453-2806 or via E-mail at oah.gov@hhs.gov.

Technical Assistance Questions

16. **Question:** Does OAH provide any technical assistance to prospective applicants for this funding opportunity?

Answer: Yes. OAH will facilitate a webinar for interested applicants to learn more about this funding opportunity. The net conference workshop will be recorded in its entirety and will subsequently be available on the Internet for prospective applicants to view until the closing date of this announcement. Please see the OAH website (http://www.hhs.gov/ophs/oah) for more information regarding the technical assistance workshop and for access to the webinar recording. Registration information will be posted on the OAH web site.

The TPP Project Officers are also available to answer specific questions via phone or email. Please contact the OAH office at (240) 453-2806 or Oah.gov@hhs.gov for assistance.

17. **Question:** If a program receives technical assistance from OAH during the application process, does this assistance give the applicant priority for funding?

Answer: No. An applicant who receives technical assistance from OAH during the application process will not receive any special consideration for funding.

18. **Question:** Does OAH provide any technical assistance to grantees who have been awarded a TPP cooperative agreement?

Answer: Yes. After an award is made, Project Directors and Program Evaluators are required to attend an annual meeting which provides assistance in program development, evaluation, policy and many other areas of interest. Travel and logistics for initial and annual orientation meetings must be estimated and included in the applicant's budget. OAH also provides technical assistance opportunities for grantee staff during the course of the cooperative agreement. TPP projects should plan and budget for three people to attend three face-to-face workshops each project year. On-site technical assistance is available for grantees

as requested. Additionally, each grantee will have a Project Officer assigned to the project. The TPP Project Officer provides one-on-one technical assistance via phone, site visit, and email.

Program Selection and Implementation

19. **Question**: What is the target population for this funding announcement?

Answer: The target population for funded projects are individuals 19 years of age or under at program entry. Youth who are not yet teenagers are eligible since many of the evidence based programs include pre-teens as a target audience for the program intervention. Applicants are encouraged to serve specific priority populations as long as there is a sound rationale with supportive statistical data provided. Some evidence-based programs also include program services for parents and other family members. Based on the evidence-based model selected, programs can serve youth at a variety of sites.

20. **Question**: Can these funds be used to provide evidence-based programs to teen parents to prevent repeat pregnancies?

Answer: Under this FOA, only program models that meet the evidence review criteria, as listed in Appendix A and the OAH web page, are eligible for replication. Other program models not listed in this Appendix with a strong evidence base for prevention would need to be submitted in the other manner described in the funding announcement.

21. **Question:** What types of program models are eligible under this funding announcement?

Answer: Programs eligible for funding under this announcement must either be: (1) curriculum-based interventions that seek to educate young people on issues such as responsible behavior, relationships, and pregnancy prevention, or (2) youth development programs that seek to reduce teenage pregnancy and a variety of risky behaviors through a broad range of approaches. Youth development program usually incorporate multiple components, such as service learning, academic support, or opportunities to participate in sports or the arts. They also collaborate with multiple networks and/or provide youth with development-focused activities. The FOA seeks to fund programs that will increase the capacity of communities to implement and evaluate evidence-based interventions to prevent teenage pregnancy.

22. **Question**: Are programs required to provide full contraceptive services or to provide an abstinence only model?

Answer: Programs eligible for funding under this FOA are those that seek to replicate a program model that meets the evidence standard described in detail in

the appendices to the FOA and on the OAH website. In brief, these are program models that have been found through high quality evaluation to prevent teen pregnancy or positively affect risk factors associated with teen pregnancy. Successful applicants will replicate with fidelity the evidence-based model they have selected. Approved evidence-based models were selected based on their rigor and effectiveness and not on their specific approach or the programmatic elements they include (i.e., comprehensive sex education, provision of contraception or abstinence). The evidence-based program models reviewed represent a variety of effective teenage pregnancy prevention approaches.

Evidence-based Program Model Questions

23. **Question**: How is the term "evidence-based model" being defined?

Answer: The U.S. Department of Health and Human Services (HHS) defined a set of rigorous standards an evaluation must meet for a program to be considered effective and therefore eligible for funding as an evidence-based program. Under a contract with HHS, Mathematica Policy Research, Inc. (MPR) conducted an independent systematic review of the evidence base for programs to prevent teenage pregnancy.

The MPR review did not start with program types or programs themselves but with evaluations of programs. The review did not seek out a certain type of program. Rather, it conducted a rigorous search of available research to determine which programs models (interventions) were eligible for replication. This search included a literature review, a call for papers from the public, a search of websites, and a keyword search of journal databases.

MPR defined the criteria for the quality of an evaluation study and the strength of evidence for a particular intervention. Studies were assessed for quality of the research design and its implementation. Each study was assessed on study design, attrition, baseline equivalence, reassignment, and confounding factors. The review included four key steps which included: Finding potentially relevant studies through a thorough review process and call for studies; Screening of studies for review to determine eligibility and high quality; Assessment of quality of studies to examine the rigor of the evidence and assign a standardized score to the study; and Assessment of the evidence of effectiveness by developing a framework for grouping programs into different evidence categories, based on the impact findings of studies meeting the criteria for a high or moderate rating. More information about the studies and the review criteria can be found on the OAH web site at http://www.hhs.gov/ophs/oah.

The MPR review process sorted the studies by their rigor and quality. HHS used this information to identify program models that were determined to meet the legislated specification of having evidence of effectiveness through rigorous evaluation.

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Appendix A of the FOA provides a list of program models that meet the evidence criteria established for this FOA. As discussed in the FOA and in Q 24 below, an applicant that seeks to replicate a program model that is *not* on this list must submit relevant evaluation studies (that have not already been reviewed by MPR) and other information about the program model's impacts on relevant outcomes. Additional studies submitted for consideration must meet the same rigorous standards.

24.   **Question**: How do I know if a program is an evidence-based model and can be replicated under this funding announcement?

Answer: HHS independently contracted with MPR to conduct a rigorous review of evidence-based teenage pregnancy prevention models. As a result, a list of MPR reviewed and scored evidence-based models for replication is available for prospective applicants to review. Information about the review process and the list of evidence-based models reviewed for this funding announcement can be found on the OAH web site (http://www.hhs.gov/ophs/oah). Additional studies that have not already been reviewed by MPR may be submitted for consideration, but must meet the same rigorous standards.

25.   **Question:** Is there an opportunity to replicate a model believed to be effective that is not on the HHS reviewed evidence-based list?

Answer: There are two opportunities to replicate or implement program models that are not on the HHS evidence-based list through funding from the Office of Adolescent Health.

> 1. If an organization believes that they have rigorous evidence of a program model and that evidence was not previously reviewed by MPR, there is an opportunity to submit this evidence along with the grant application for funding to HHS. The evidence will then be reviewed by MPR using the same criteria used during the initial review, as described on the OAH web site. If the program model is assessed as a rigorous evidence-based model based on the criteria noted on the OAH web site, the application will then be included in the competitive review process with the other applications. If the program model is not assessed as a rigorous evidence-based model, the application will not be reviewed for funding. In order to pursue this opportunity, applicants will be given 45 days from the date of the funding announcement release for development and submission of their application and request for evidence review instead of 60 days. This will allow MPR time to review the evidence submitted.
> 2. The second opportunity to implement a program that is not on the HHS list of evidence-based programs is to apply under the other TPP funding stream, through which up to $25 million will be made available for the development, implementation, and evaluation of innovative and promising

> projects. Interested applicants should go to grants.gov or the OAH web site for more information on this additional funding opportunity.

26.   **Question:** How can I submit my program's evidence to be included on the HHS approved list of effective evidence-based teenage pregnancy prevention programs?

> **Answer:** For this funding announcement, applicants may submit new evidence for review. Applicants are submit evidence for a program model along with their application (45 day due date) for review using the rigorous criteria described above. Applicants are encourages to read the evidence review criteria and the list of studies that were previously reviewed by MPR. This information is on the OAH web site before submitting evidence. For future years, HHS anticipates establishing an ongoing process to continue to identify and review evaluation studies, and to update summary materials available to the public.

27.   **Question:** I have seen several evidence-based lists of effective programs related to teenage pregnancy prevention and other adolescent health areas. Some of the programs noted on those lists are not included on the list on the OAH web site. Why is that?

> **Answer:** HHS supported an independent systematic review by MPR of the evidence base for programs to prevent teen pregnancy. This review defined the criteria for the quality of an evaluation study and the strength of evidence for a particular intervention. Studies that met the screening criteria were assessed for quality of the research design and its implementation. It is possible that some of the studies noted on other lists were reviewed and did not meet the criteria set out in the HHS review of studies. A searchable database is available on the OAH web site which includes all studies reviewed and their results related to inclusion or exclusion.

Program Model Replication Questions

28.   **Question:** What does it mean to replicate a program model (intervention)?

> **Answer***:* Applicants for this funding should clearly define how they will implement one of the identified evidence-based program models. This replication effort must maintain a high level of fidelity to the original evidence-based model with minimal adaptations. It is key that programs maintain fidelity to the core components of the original model in order to be considered a true replication. The core components are those aspects defined by the developer to be key elements related to the achievement of the identified outcomes. Replicating an evidence-based program also means maintaining fidelity to the core elements of the program related to teaching methods and implementation.

29.   **Question**: Can programs selected from the MPR reviewed and assessed list of evidence-based program models be adapted to meet specific needs in my community?

Answer: Funded applicants will be required to maintain fidelity to the original evidence-based program model with minimal adaptations as necessary for new settings or different youth populations. Central to the replication of evidence-based programs is the need to maintain fidelity to the original program core components that led to the outcomes associated with the program. The "core components" of evidence-based programs are defined as those parts of the curriculum or its implementation that are determined by the developer to be the key ingredients related to achieving the outcomes associated with the program. Fidelity is not only relevant to the content in a program but also to the "core elements" of the teaching methods and implementation. Maintaining fidelity to those core components is crucial in replicating a program appropriately. While applicants must ensure fidelity to the core components of the program model, applicants can propose to add additional program elements to an evidence based program model as long as these "add on" components are ancillary to the core components of the evidence-based program.

Common adaptations that would be allowable under Tier 1 include changing names or details in a role play, updating out-dated statistics, adjusting reading and comprehension levels, making activities more interactive or tailoring learning activities and instructional methods to youth culture or development level. Significant adaptations, which would require applicants to apply under Tier 2, include changes such as adding activities, changing the sequence of activities, or replacing supplementary materials (such as videos). Applicants may propose adaptations of an evidence-based program to make the program more relevant to ethnic, racial or linguistic characteristics of the population to be served. OAH approval of any adaptation is required prior to use in the fully implemented program.

30.   **Question**: How can we select the best "fit" for our community and environment?

Answer: Selecting the best curriculum and program model for an organization can be challenging. Organizations face difficult issues that must be addressed (mixed ethnic classes, restricted time to engage teens, community norms, and so forth). Applicants should carefully review the list of evidence-based program models found on the OAH web site to determine which ones have elements that best meet community needs. This process should be thoughtful and intentional in nature in order for the organization to be successful in fully replicating the program. Applicants are encouraged to ask program developers about their materials to help determine the best fit.

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31. **Question:** Is it possible to implement an evidence-based program in a community that the evidence-based program was not previously tested in (e.g., different racial or ethnic community or geographic area)?

Answer: It is possible to adapt an evidence-based program to meet the needs of a different population. It is important to remember that you must still maintain fidelity to the program model so it will be important to determine what the core elements of the program are. If a core element of the program is directly tied to the community being served, adapting that element may not be the best choice and another program should be explored. Otherwise, adaptations related to applying the program model to a different community are reasonable to propose for OAH approval.

32. **Question**: What if my organization has never implemented one of the selected evidence-based programs? Will other organizations that have past experience implementing those programs have a competitive advantage in the funding process?

Answer: Organizations who have experience implementing evidence-based programs, or who have created their own evidence base in the past, will not receive an automatic advantage in the review process. Applicants will be reviewed and scored based on the strength of their applications and their readiness to implement a strong replication program.

33. **Question:** What if none of the evidence-based program models listed on the OAH web site meet our community's needs, even through small adaptations?

Answer: If none of the identified evidence-based models meet your organization's or community's needs, the TPP Tier 1 funding stream may not be appropriate. Please consider reviewing the announcement for the TPP Tier 2 funding announcement which provides competitive funding for the implementation and demonstration of innovative and promising programs. You can find more information on this funding stream on grants.gov or the OAH web site (http://www.hhs.gov/ophs/oah) as it becomes available.

34. **Question**: Can organizations provide access to contraceptive services under this funding announcement?

Answer: This grant program supports replication of youth development and curricular based teen pregnancy prevention programs, some of which include access to contraceptive services. Applicants may propose adaptations to these programs that work in concert with the underlying program model and do not significantly alter the core components of the underlying program.

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Evaluation Questions

35. **Question**: Are applicants expected to evaluate their projects?

Answer: Applicants who request funding from Ranges A and B are not expected to conduct an individual, grantee-level evaluation. Applicants who request funding from Ranges C and D are expected to conduct a rigorous grantee-level evaluation. Applicants should plan to allocate 20-25 percent of their budget, but not more than a total of $500,000, to support evaluation activities. Evaluation designs will be assessed during the first year of funding for feasibility and strength and must be approved by OAH prior to implementation.

36. **Question**: Will grantees, regardless of their funding range, have any evaluation expectations to be aware of?

Answer: Yes. All grantees will have two primary evaluation expectations (in addition to the more rigorous individual evaluations for Ranges C and D):
1. A rigorous large-scale evaluation will be implemented through Federal-level evaluation efforts. As a condition of the grant award, all funded grantees will be required to participate in a Federal evaluation, if selected, and agree to follow all evaluation protocols established by HHS or its designee. Decisions regarding participation in the Federal evaluation are expected by the end of the planning year.
2. All grantees will be expected to monitor and report on program implementation and outcomes through performance measures. Performance measures are intended for monitoring purposes and to provide feedback to programs about whether they are implementing programs as intended and seeing outcomes as expected.

37. **Question**: Under Ranges C and D, how rigorous of an evaluation design is expected?

Answer: Grantee-level evaluation designs are expected to be rigorous using either random assignment or a quasi-experimental design. Applicants should review carefully the guidance on evaluation included in the appendix to the FOA.

38. **Question**: Will evaluation-related technical assistance be provided to funded projects?

Answer: All funded projects will have their evaluation designs reviewed and assessed. Targeted feedback will be provided by evaluation experts to help strengthen the evaluation approach as necessary. Funded projects will be expected to follow this guidance to strengthen their evaluations.

39. **Question**: Who should evaluate a project?

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> **Answer**: Applicants funded under Ranges C and D are expected to partner with an independent evaluator. A signed Memorandum of Understanding with the identified evaluator should be included in the application. Evaluators should play a collaborative role in drafting the evaluation design as part of the application process.

Curricula and Materials Review

40.   **Question:** If we propose a particular evidence-based curriculum in our application, should we go ahead and purchase the materials now?

> **Answer:** OAH recommends that you wait to purchase any materials until after funding awards have been made by September 30, 2010.

41.   **Question:** How can we obtain more information on a particular program/curriculum?

> **Answer**: Applicants can contact the curriculum developers to ask questions about their materials and program design. Applicants can also find information about curricula on the OAH web site (http://www.hhs.gov/ophs/oah) along with links for additional information.

42.   **Question:** If an applicant is awarded grant funds based on its application, does that mean that the curricula and educational materials that were proposed for use in the application are also approved for immediate use?

> **Answer:** No. Programs funded under this announcement must provide information that is age appropriate, and scientifically and medically accurate. Program models that are eligible for replication under this funding announcement have not been reviewed for scientific and medical accuracy. These programs were reviewed and found eligible for funding solely on the basis of the research evidence. Therefore, in order to ensure that the most current science is reflected in the program materials, a review for scientific and medical accuracy will be necessary for all program materials. Successful applicants will be required to submit all core curriculum materials for use in the project to the OAH for review and approval prior to use in the project. Review and approval of core curricula materials will be conducted after an application is approved for funding.

43.   **Question:** Should TPP projects use curriculum or educational materials in their programs?

> **Answer:** TPP projects should incorporate the associated curriculum from the HHS list of evidence-based models that are being replicated. The TPP Tier 1 funds are specifically geared towards the replication of evidence-based program models that include a curriculum and educational materials.

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44. **Question:** How much time does it take for materials to be approved?

Answer: TPP projects should plan for an estimated eight weeks from the time OAH receives the materials to the time the grantee is notified of the material's status. It is the grantee's responsibility to submit all materials and any proposed adaptations to the OAH.

45. **Question:** Can TPP grantees include the cost of curricula and educational materials in their grants?

Answer: Yes, projects may include the cost of the materials as well as other costs associated with using a particular curriculum or educational materials.

46. **Question:** Can TPP projects include the cost of staff training by the curriculum developers in their grants?

Answer: Yes, funded projects should include the cost of the training in their budgets. Many of the developers of the curricula have training available to assist programs in implementing their curriculum materials. Training to maintain fidelity to a program model is crucial and should be planned for in the first year of funding.

47. **Question:** Should an applicant submit the proposed curriculum with the application?

Answer: No. While the applicant should identify the core curriculum proposed for use in the project, actual materials should not be submitted with the grant application. The curricular review and approval process will occur during the planning phase of the first grant year. The review shall ensure that the materials are age appropriate, scientifically and medically accurate, complete, and up-to-date. All funded grantees must receive approval of curriculum materials prior to use in the fully implemented project.

Funding Questions

48. **Question**: What are the minimum and maximum amounts of funding allowed under this funding announcement?

Answer: The minimum amount of funding is $400,000 per year and the maximum amount of funding is $4,000,000 per year. Applicants who request below the minimum amount or above the maximum amount will not be eligible for funding and will not be reviewed.

The TPP Tier 1 funding announcement has been defined by four funding ranges:
- Range A: $400,000 to $600,000 per year
- Range B: $600,000 to $1,000,000 per year

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- Range C: $1,000,000 to $1,500,000 per year
- Range D: $1,500,000 to $4,000,000 per year

49.   **Question**: How many applications can an organization submit under this funding announcement?

Answer: Applicants may only submit **one** application for consideration under the Tier 1 TPP funding announcement. An application should clearly state under which funding range it is being submitted. **If an applicant submits more than one application under this funding announcement, even if they are in different funding ranges, all of those applications will be deemed non-responsive to the funding announcement and will not be eligible for review.**

50.   **Question**: Can an organization apply for both Tier 1 and Tier 2 funding?

Answer: Since the Tier 1 and Tier 2 TPP funding announcements are separate, organizations are eligible to apply for both. It is crucial that organizations read each funding announcement carefully as they are two separate documents with different programmatic and evaluation requirements.

51.   **Question:** How many years of funding can a grantee receive?

Answer: Cooperative agreements may be approved for project periods of up to five years. Projects are funded in annual increments (budget periods). Funding for all approved budget periods beyond the first year of the grant is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

52.   **Question**: Will agencies that apply for TPP funding be able to use the funds to provide small contracts and grants to other organizations for service provision or evaluation?

Answer: Yes. The work plan should include an organizational chart that demonstrates the relationship between all positions (including consultants, sub-grants and/or contractors) to be funded through this grant.

Budget Questions

53.   **Question:** What is a project period and a budget period?

Answer: The project period is the total time for which support of a project has been programmatically approved by OAH. For budgetary and reporting purposes, funding is provided in annual increments called budget periods.

54.   **Question:** What are indirect costs (IDC)?

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        Answer: Indirect costs are costs incurred by an organization that are not readily identifiable with a particular project or program but are nevertheless necessary to the operation of the organization and the performance of its programs. The costs of operating and maintaining facilities (e.g., utilities) and administrative salaries are examples of the types of costs that are usually treated as indirect costs.

55.   **Question:** Are indirect costs allowable under this program?

        Answer: Yes, provided that the applicant has a negotiated indirect cost (IDC) rate agreement with HHS or any other Federal agency, or, if not, the applicant submits a proposal to establish an indirect cost rate agreement no later than three months after the beginning date of the grant budget period. IDC proposals are submitted to the Division of Cost Allocation in the appropriate HHS Regional Office. Applicants who have a negotiated IDC rate should submit a copy of the agreement with the application.

56.   **Question:** How detailed should a budget be?

        Answer: Applicants should include a budget narrative justifying each of the budget categories and describing each personnel position, annual salary, percent of time on the project, and total Federal funds requested.

57.   **Question**: Are matching funds required?

        Answer: No, matching funds are not a requirement for TPP awards. While there is no cost sharing requirement included in this FOA, applicant institutions, including any collaborating institutions, are welcome to devote resources to this effort. Any indication of institutional support from the applicant and its collaborators indicates a greater potential of success and sustainability of the project. Examples of institutional support could include: donated equipment and space, institutional funded staff time and efforts, or other investments. Applicant organizations that plan to provide support should indicate institutional support by outlining specific contributions to the project and providing assurances that their organization and any collaborators are committed to providing these funds and resources to the project.

58.   **Question**: Must TPP projects charge fees for services?

        Answer: No, TPP projects are not required to charge fees for their services. If a project does charge fees for services, these monies should be treated as program income.

59.   **Question**: If a replication program is not able to show positive effects, could the funding be revoked or need to be paid back?

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Answer: Successful applicants from Ranges C and D will be required to develop and implement a strong evaluation. Other entities may be included in a federal evaluation. The full effect of programs funded under this FOA will not be known until the end of the program cycle (up to five years) or the evaluation cycle. If an evaluation finds that the program did not have positive impacts, the grantee will not be required to pay back the funding and since the results will not be known until after the program cycle, this is not a basis for program termination under this FOA. During the program cycle, continued funding is contingent upon the strength of the program and evaluation design and implementation, as well as proper stewardship of Federal funds. Of course, evaluation findings may be used for future evidence-based efforts.