

RFA # 20173/ Grants Gateway # DOH01-CAPP2-2023

New York State Department of Health
*Center for Community Health/Division of Family
Health/Adolescent Health Unit*

Request for Applications

Comprehensive Adolescent Pregnancy Prevention

KEY DATES:

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| Release Date: | September 29, 2022 |
| Letter of Interest/Intent Due: | October 13, 2022 |
| Questions Due: | October 20, 2022 |
| Questions, Answers and Updates Posted (on or about): | November 3, 2022 |
| Applications Due: | November 29, by 4:00 PM |
| NYSDOH Contact Name & Address: | Betty Castle Bureau of Women, Infant and Adolescent Health New York State Department of Health 821 Corning Tower Albany, NY 12237 capprfa@health.ny.gov |

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I. Introduction

The New York State Department of Health (NYSDOH), Bureau of Women, Infant and Adolescent Health (BWIAH), announces the availability of up to \$19.7 million annually to support the Comprehensive Adolescent Pregnancy Prevention (CAPP) initiative throughout the state for the anticipated funding period of July 1, 2023 through June 30, 2028.

This Request for Applications (RFA) represents the continued commitment of the NYSDOH to support comprehensive programming that fosters the prevention of adolescent pregnancy, sexually transmitted infections (STIs) and Human Immunodeficiency Virus (HIV), and) and aligns with NYSDOH's Title V Maternal and Child Health priorities for adolescent health.

NYSDOH is committing public health resources to communities with the highest need where impact will be greatest to improve population health outcomes and advance health equity. To accomplish this, the CAPP RFA incorporates key guiding principles within a comprehensive public health framework to promote health and opportunities in communities for New York State (NYS) adolescents. These principles include: a performance management approach to measure, monitor, and improve health outcomes; the social ecological model approach, which recognizes health as a function of individuals and the environments in which they live; and a youth development approach that provides supports and opportunities for young people within communities to enable them to develop to their full potential.

CAPP programs serve youth populations, ages 10-21, that lack social and economic opportunities to enable them to develop to their full potential. Priority populations include youth from racial and ethnic minorities; all youth from socioeconomically disadvantaged communities, and/or otherwise have special circumstances such as youth living in foster care; youth who identify as lesbian, gay, bisexual, transgender, and questioning; youth with special healthcare needs (including youth with cognitive learning delays, on the autism spectrum, or otherwise learning impaired); youth who are homeless; youth involved in the juvenile justice system; and other marginalized adolescent populations.

CAPP community-based programs are part of the statewide adolescent prevention initiatives that utilize a youth development framework (refer to http://www.actforyouth.net/youth_development) and implement evidence-based practices to promote health in communities that lack resources and opportunities. CAPP programs will be located in areas with high need as identified by the Adolescent Sexual Health Needs Index (ASHNI, see Attachment 1). Using this information, applicants must serve ZIP codes that have the highest ASHNI scores relevant to their applicant communities. The ASHNI is an indicator, calculated at the ZIP code level, to provide a single, multidimensional measure related to adolescent pregnancy and STIs. The ASHNI takes into consideration a variety of key factors related to these outcomes, including the size of the adolescent population, actual burden (number) of adolescent pregnancies and STI cases; and a number of specific demographic and community factors (education, economic, and race/ethnicity indicators) that are associated with sexual health outcomes.

The needs of lesbian, gay, bisexual, transgender, and questioning youth need to be considered and organizations need to identify how their programs will be inclusive of and non-stigmatizing toward such participants.

II. Who May Apply

Minimum Eligibility Requirements

- Applicants must be a NYS youth-serving organizations, such as city and county health departments, school districts, youth bureaus; and from not-for-profit 501(c)(3) organizations, including, but not limited to, Article 28 healthcare providers, community-based health and human service providers, and local health and human service agencies.
- Applicants not approved under Article 28 of the NYS Public Health Law (PHL) to provide family planning services must submit a Letter of Referral Arrangement from one or more family planning providers serving the priority community stating their intent to collaborate with the CAPP applicant organization to accept the contractor's referrals for Medicaid patients and able to provide a full range of medical family planning services. See Attachment 6 – Letter of Referral Arrangement.
- Applicants must complete and upload Attachment 15 – Application Cover Page under Pre-Submission uploads
- Applicants must complete and upload Attachment 3 – State of Assurances under Pre-Submission uploads. Attachment 3 must be signed by an individual authorized to sign for the applicant organization.
- Applicants must be prequalified in the New York State Grants Gateway, if not exempt, on the date and time applications are due.

A. Available Funding

Counties in NYS have been assigned to one of seven regions (see Table 1). Applicants can request funding up to the maximum award amount listed in Table 1 in the proposed counties/regions for the anticipated period of funding from 7/1/2023 through 6/30/2028 . **Please note:** Applicants who wish to serve more than one region through the CAPP initiative must submit a separate application for each region they wish to provide services in. Applicants who apply for multiple regions may request the amount of available funding for each region listed in Table 1. Requested funding needs to be consistent with the scope of services proposed, be reasonable and cost effective. Funding is available in two separate Program Components – Programmatic Component One and Programmatic Component Two. Applicants must apply for the provision of Programmatic Component One and Programmatic Component Two, and cannot choose to apply for only one of the two Programmatic Components. Both Programmatic Components are described in detail in section III.B.

At least 85% of Programmatic Component One funding is required to be for costs attributed to offering and arranging of family planning services as noted in Table 1 below and further detailed in section III.B. Applicants may apply for up to \$80,000 for Programmatic Component Two funding per application.

Table 1

| Region | Counties | Programmatic Component One Funding Range | Programmatic Component Two Funding Range |
|--------|--|--|--|
| 1 | Allegany, Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans, Wyoming | \$250,000-\$450,000 | Up to \$80,000 |
| 2 | Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne, Yates | \$250,000-\$450,000 | Up to \$80,000 |
| 3 | Broome, Cayuga, Chenango, Cortland, Jefferson, Lewis, Madison, Onondaga, Oswego, St. Lawrence, Tioga, Tompkins | \$250,000-\$450,000 | Up to \$80,000 |
| 4 | Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Herkimer, Montgomery, Oneida, Otsego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren, Washington | \$250,000-\$450,000 | Up to \$80,000 |
| 5 | Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, Westchester | \$250,000-\$450,000 | Up to \$80,000 |
| 6 | Bronx, Kings, New York, Queens, Richmond | \$350,000-\$550,000 | Up to \$80,000 |
| 7 | Nassau, Suffolk | \$250,000-\$450,000 | Up to \$80,000 |

Programs should refer to templates located in the NYS Master Grant Contract for both the budget (Attachment B-1s) and work plan (Attachment C). These are the templates that need to be used and are available in the NYS Grants Gateway.

Applicants are required submit a 12-month budget, assuming a 7/1/2023 start date, and using the on-line template in Grants Gateway. Applicants also must complete the four additional budgets for years 2-5 using the (Excel workbook) located under Pre-Submission Uploads. All costs must be related to the provision of CAPP, as well as be consistent with the scope of services, reasonable and cost effective. Justification for each cost must be submitted in the budget narrative forms in Grants Gateway. Food and beverages that are served during CAPP activities have to follow the Guidelines for Healthy Food and Beverages for Adolescent Health Programs, developed by the ACT CCA. The Guidelines can be found at: http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf. For additional information on youth engagement, please visit: http://actforyouth.net/youth_development/engagement/

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 are required to develop a cost allocation methodology for compliance with grant

requirements regarding administration and allowable costs using the principles applicable to your organization. Ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items. If the budget is not within the stated amount of funding available as indicated in Table 1 above, the award amount will be adjusted.

This initiative **will not fund** direct clinical/medical/laboratory services and supplies, including, but not limited to: case management, mental health counseling, crisis intervention, pap smears (supplies or laboratory costs), pregnancy test supplies or laboratory costs, contraceptives including condoms, STI test supplies and associated laboratory costs, or education done in clinic waiting rooms. This initiative will also not include GED preparation, job placement, and childcare or services that are available through other resources.

The CAPP initiative **will not fund** direct services that are available through other resources, such as; case management, GED preparation, mental health counseling, crisis intervention, childcare services or staff costs related to enrollment of adolescents in health insurance including the Family Planning Benefit Program (FPBP). However, applicants should incorporate partnerships and strategies to identify needs for such services and make referrals to address the needs that have been identified. Note: Final budgets will be negotiated with the successful applicant and are dependent upon the availability of funds and approval from the NYS Office of the State Comptroller (OSC).

III. Project Narrative/Work Plan Outcomes

The NYSDOH is committed to funding community-based programs that serve youth, ages 10-21, living in underserved and under-resourced communities. Funded programs are expected to develop and implement activities with the goal of improving opportunities for adolescents to develop and initiate positive health behaviors to prepare them for young adulthood. 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. Topics, messages, and teaching methods should be suitable to specific age groups of youth, based upon varying capacities of cognitive, emotional, and behavioral development. Programs need to describe informational and supportive activities where impact will be greatest to improve population health outcomes and equity.

This RFA has a Standardized Work Plan (**Attachment 5**) set in Grants Gateway. The Objectives, Tasks, and Performance Measures cannot be removed from the work plan. The applicant will adhere to the implementation of work plan activities per the Standardized Work Plan.

Applicants who propose to provide services in multiple regions of the state as defined in this procurement must submit one application for each region they are applying for in response to this RFA.

Applications failing to provide all required application sections will be removed from consideration.

Staff Health Education Standards

- Applicants are required to meet the staff health education standards listed in Attachment 2.

- Applicants are required to attest to this requirement on the Statement of Assurances, Attachment 3.

Evidence-Based Program Fidelity

- Applicants are required to ensure that all evidence-based programs (EBPs) conducted with CAPP funds be implemented with fidelity.¹ All elements of EBPs that are being implemented using CAPP funds have to be implemented in their entirety. No component that is part of the core curriculum can be changed or removed. For example, if condom demonstrations are part of the EBP, then this component cannot be removed. See Attachment 4 for information on approved EBPs.
- Applicants are required to execute written and signed agreements with the organizations (schools, foster care agencies, youth detention facilities, community-based organizations, etc.) where they plan to implement EBPs. The curriculum should be reviewed with the appropriate official at the selected venue to obtain their agreement in writing to ensure that all components of EBP(s) are implemented with fidelity.

Accessible Programming

- Applicants are required to ensure that programming is held in fully accessible spaces and project modifications and/or accommodations for participants with disabilities are ascertained and provided. Applicants will need to attest to this requirement on the Statement of Assurances, Attachment 3.
- Applicants are required to ensure that all youth will be eligible to participate in program services without regard to race, ethnicity or sexual identity. Applicants will need to attest to this requirement on the Statement of Assurances, Attachment 3.
- Applicants are required to participate in state evaluation requirements. Applicants will need to attest to this requirement on the Statement of Assurances, Attachment 3.
- Applicants are required to participate in additional NYSDOH adolescent health research projects upon request. Applicants will need to attest to this requirement on the Statement of Assurances, Attachment 3.
- Applicants are required to identify if the organization receives additional State and/or Federal funding for teen pregnancy prevention. The type of services and location for program activities will need to be stated.

A. Performance Management

Performance management is the practice of actively using objective-based performance data to improve the public's health.² Performance management centers on a clear and focused approach to

¹ Fidelity refers to the degree to which an intervention is delivered as designed; that is, how well the program is implemented without compromising its core content which is essential for the program effectiveness.

² Turning Point Performance Management Collaborative, <http://www.turningpointprogram.org/Pages/perfmgt.html> last accessed April 9, 2012.

improving outcomes and the strategic use of performance standards measurements to guide the development and implementation of improvement strategies. Performance standards measurements are generally accepted, objective standards of measurement against which a grantee's level of performance can be compared; the standards measurements establish the level of performance expected.

Collectively, these performance standards measurements serve to describe specific, tangible processes and outcomes that need to be accomplished through this particular initiative.

The CAPP performance measurement framework includes four performance standards objectives. These performance standards objectives contribute to the achievement of the primary goals of improved key population health outcomes including reducing adolescent pregnancy and STIs, including HIV, in the proposed community(ies).

The implementation of strategies for the CAPP initiative will focus on adolescents and address the following four performance standards:

- Practice health promoting behaviors/reducing risk behaviors;
- Engage in preventive reproductive health care services;
- Promote healthy, safe, and nurturing environments and relationships; and
- Identify risk factors and special needs (medical, psychosocial, developmental) early and address these needs through accessible and coordinated supports.

Applicants have the flexibility to propose specific strategies that they determine will be most effective to improve the health of adolescents in the context of the strengths and capacity of the priority communities. Using the social ecological model for performance standards, all grantees are required to propose and implement strategies to address factors at the ecological levels they identify as most appropriate to improve outcomes.

B. Program Components

The CAPP initiative incorporates two programmatic components. Applicants must apply for the provision of both Programmatic Component One and Component Two, and cannot choose to apply for only one of the two components.

Programmatic Component One is focused on comprehensive adolescent sexual health education that ensures access to reproductive health care and family planning services. Component One activities must provide for the offering and arranging of family planning reproductive health services, defined as disseminating written and oral information about available family planning health services, providing for individual and/or group discussions about all methods of family planning and family planning services, and assisting with arranging visits to a medical family planning provider. These services may be accomplished by assuring or increasing access to family planning services, education and STI/HIV screening for adolescents. Applicants may also choose to implement evidence-based or best practice parent education strategies to improve parent-child communication on sexual health topics that include education on family planning. Projects are required to demonstrate direct linkages and connections with community family planning service providers in the targeted region. Applicants need to apply for the required performance standards under Component One.

Programmatic Component Two is focused on youth-led, multi-dimensional (educational, social, vocational, economic, and recreational) opportunities for adolescents to provide alternatives to sexual

activity and to develop skills that can support a successful transition into healthy young adulthood.

Programmatic Component One

The following information describes the first component of CAPP that is required for all applicants.

Performance Standard 1: Reduce the adolescent pregnancy rate and the rate of unintended pregnancy by practicing health promoting behaviors and reduce risk behavior.

- (Required Activity) - Implement comprehensive, evidence-based, age-appropriate sexual health education.

Comprehensive sexual health education provides adolescents with the information and skills they need to make healthy decisions related to their sexual health. Providing sexual health education through EBPs is an effective way to support youth in making these decisions. For teens who are already having sex, EBPs can help them understand the risks of pregnancy, STIs, and HIV and how to protect themselves. For those who are not yet having sex, EBPs have been shown to delay sexual initiation.³ The evidence shows that youth who receive comprehensive sex education are more likely to delay sexual activity.

Component One will allow for evidence-informed curricula in addition to EBPs to help reach youth with cognitive delays/impairments, youth in foster care systems, and youth involved in juvenile justice. Applicants may be able to implement programs from an approved modified listing of alternate evidence-informed/promising programs to be considered for these specific priority populations. Approved evidence-informed programs are included in Attachment 4.

Note: Applicants need to select one or more EBP or EIP from Attachment 4 that best meets the needs of the priority population(s) to be served.

- The use of incentives to encourage attendance at EBPs is permitted if the proposed incentives are within the requirements listed in **Attachment 10**. Incentives may be used for EBPs conducted in out-of-school settings and/or after-school settings. Incentives may not be used for programs conducted in in-school settings.
- To reach disenfranchised and transient youth that are prone to greater health disparities and teen pregnancy and STI rates, applicants must implement curricula with youth in an out-of-school setting.
- EBPs and EIPs may be offered to youth through a virtual on-line environment that is consistent with maintaining program fidelity and approved by the program model developers. NYSDOH recognizes that there may be need for a provider to switch from in-person programming to a virtual setting in response to the ongoing COVID-19 health pandemic. Programs will be required to work with the Assets Coming Together for Youth Center for Community Action (ACT CCA) to ensure they maintain program fidelity in the event of the need to transition from in-person to virtual.
- Food for youth attending EBPs and/or other CAPP programming is also an allowable operating expense. Food may be used in out-of-school settings and/or after-school settings. Food and

³ Science and Success – Programs That Work To Prevent Teen Pregnancy, HIV and Sexually Transmitted Infections In The United States, Advocates for Youth, 2008.

beverages that are served during CAPP activities have to follow the Guidelines for Healthy Food and Beverages for Adolescent Health Programs developed by the ACT CCA. The guidelines can be obtained at the following link:

http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf.

- Applicants that identify a need to include education on adolescent development and/or anatomy, prior to implementation of EBP(s) may propose to do so in their application. The additional session(s) would need to be negotiated with the EBP implementation sites to allow for the additional timeframe involved prior to submission of the application.
- Once a successful applicant is notified of their award under this RFA, NYSDOH and the ACT CCA will collaborate with the successful applicant to implement their selected EBP(s). Any potential adaptations that may need to be made to EBP(s) will be done in consultation with and approval from the ACT CCA prior to implementation of EBP(s) and be consistent with guidelines on project adaptation from the Administration on Children and Families (ACF), Centers for Disease Control and Prevention (CDC), and Healthy Teen Network. If adaptations are proposed, successful applicants will need to provide a justification or rationale for any proposed adaptations.
- All funded programs will be required to participate in the implementation of pre- and post-tests that will be provided by the ACT CCA.

Performance Standard 1: Reduce the adolescent pregnancy rate and the rate of unintended pregnancy by practicing health promoting behaviors and reduce risk behavior.

- (Optional Activity) Implement evidence-based or best practice parent education strategies to improve parent child communication on sexual health topics that include education on family planning.

Research has demonstrated that increased parent-child communication related to sexual health topics and connectedness are protective factors for adolescent sexual behavior. There are education programs that have been effective in improving parent-child communication and connectedness, which have led to improved sexual health outcomes. Person-to-person interventions with parents have been shown to help increase the capacity of adults to talk with their children leading to a positive influence on sexual protective and risk behaviors.

Parents, caregivers and other adults in the community often need effective strategies to begin a dialogue related to sexual matters with youth. Applicants can propose to incorporate education, in-person or through a virtual platform, for parents/caregivers to provide improved knowledge and communication skills related to adolescent sexual health, and family planning.

Potential strategies/activities can include:

- Implement an adult role model parent/parent peer education program designed to provide parents with the information and skills they need to become the primary sexuality educators of their children. This education should include family planning.
- Implement evidence-based or promising parent education program(s) that have been shown to improve parent child communication on sexual health topics, including family planning.

Performance Standard 2: Increase the percentage of adolescents who receive preventive reproductive health care services.

- (Required Activity) Identify specific factors and barriers, through community assessments, that

This application has been updated with the attachments posted in the New York State Grants Gateway. A firewall application on the state network blocked some applicants from downloading these files because they were improperly marked. The attachments have also been posted on the Grants Management website.

Note: Applicants not approved under Article 28 of the Public Health Law to provide family planning services **must** provide a letter from one or more family planning providers serving the priority community stating their intent to collaborate with the CAPP applicant organization/agency. The letter needs to indicate the provider's willingness to accept referrals, including referrals of Medicaid clients; appropriate assessment and referral; ability to provide a full range of medical family planning services; and follow-up agreements.

Letters should be submitted as an attachment and uploaded in Grants Gateway, see Attachment 6 – Letter of Referral Arrangement.

Potential strategies/activities can include:

- Reach youth with sexual health information through text messaging, digital media videos, public service announcements (PSAs), social media campaigns, websites, applications for cell phones, and organizational websites that are mobile friendly, and to identify local resources that provide comprehensive reproductive and family planning health services, including the Family Planning Benefit Program (FPBP).
- Conduct in-person or web-based clinic tours.
- Address concerns about the confidentiality of services with youth in all outreach activities.

Programmatic Component Two

The following information describes the second component of CAPP that is required for all applicants.

Please Note: in the 2017 CAPP procurement issued by NYSDOH, program participation in Component Two activities were optional. Now this is a required activity. Applicants must address both Performance Standards 3 and 4.

Performance Standard 3: (Required Task) Provide programs that are evidence-informed and developed in coordination with youth.

Performance Standard 4: Increase the percent of youth-serving programs that engage youth, particularly youth representative of populations impacted by health disparities, (including racial and social injustice) in program planning and implementation.

Adolescents are faced with many challenges beyond sexual reproductive health. Youth engagement is a central [principle of youth development](https://actforyouth.net/youth_development/development/).⁴ According to the ecological perspective of human

⁴ https://actforyouth.net/youth_development/development/

development, young people are agents of their own development. Youth are more than passive recipients of external influences; they are actively involved in shaping their development by interacting with the people and opportunities made available within their environments. Through youth engagement, communities can do a better job of creating the [services, opportunities, and supports](#)⁵ that young people need to develop in healthy ways. Youth engagement offers community leaders the expertise and partnership of young people, helping adults fully understand what it is like to grow up in a rapidly changing world. From a political point of view, youth engagement is important because young people deserve the right to represent their own interests. Youth civic engagement is important to prepare young people to be active citizens in a democracy. For young adults, with or without special health care needs, the transition to adulthood is a crucial time in their development. While Component Two activities should be developed with youth participating in the program development, there are several evidence-informed and promising programs that promote adolescent wellness and healthy relationships that have been included for program's consideration in Attachment 11 Potential Evidence-Informed Programs for Programmatic Component Two.

Young adults may move away from their parents, transition to adult health care, become increasingly sexually active, continue their education, and/or start a career. Navigating these transitions can be difficult for youth as their independence continues to grow. Often, an increased sense of independence can lead to an increase of unhealthy risky behaviors. The CAPP program will provide youth with support to help prepare for and navigate this transition. CAPP activities that address this performance standard should:

- Create a youth-serving program based on positive-youth development principles that includes youth participation.
- Ensure adolescent-serving programs provide training on adulthood preparation subjects, such as, healthy relationships, effective communication, career and education opportunities, health care transition, and financial literacy for adolescents with and without special health care needs to prepare them for a transition into adulthood.
- Apply a health equity lens to activities to address social determinants of health and reduce disparities that impact adolescents' health and well-being.
- Be based on evidence informed or best practices for positive youth programming.

Potential strategies/activities can include:

- Provide education on the components of healthy relationships. One of the developmental tasks of adolescence is to gain experience and competence in building peer relationships, friendships and eventually romantic relationships. Many teens lack the knowledge and skills needed to effectively communicate their feelings to another person. In addition, they may confuse their feelings and seek out relationships that involve risky sexual behavior. The addition of other influences such as the media, technology, alcohol, or drugs can make relationships even more complex. Educators can assist youth in the development of relationship skills and the importance that healthy relationships play in their lives. See potential programs for consideration in Attachment 11.

⁵ https://actforyouth.net/youth_development/communities/

- Provide opportunities for youth to participate in Service Learning Programs. Information on service-learning programs can be found on the ACT CCA website at: http://www.actforyouth.net/sexual_health/community/service-learning.cfm.
- Provide individual, small group, and/or team mentoring for youth. Mentoring is defined as “a structured and trusting relationship that brings young people together with caring individuals (adults) who offer guidance, support and encouragement aimed at developing the competence and character of the mentee.”⁶
- Engage a core group of youth working with adults as advocates to promote adolescent development while addressing community needs.
- Provide accurate information about preventive health care for adolescents including information on local resources using web-based platforms, mobile-friendly applications and PSA’s.

Performance Standard 5: Increase specific activities to promote the wellness of adolescents, including promoting and facilitating routine well visits, reproductive health care, oral health, and behavioral health while addressing the special needs of adolescents.

For young adults, with or without special health care needs, the transition to adulthood is a crucial time in their development. Young adults may move away from their parents, transition to adult health care, become increasingly sexually active, continue their education, and/or start a career. Navigating these transitions can be difficult for youth as their independence continues to grow. Often, an increased sense of independence can lead to an increase of unhealthy risky behaviors. Addressing this performance standard will provide youth with support to help prepare for and navigate this transition by creating relationships in the community to develop a mechanism for referrals services outside the scope of the CAPP initiative.

Strategies could include:

- Developing and/or enhancing community partnerships and linkages that focus on adolescent health, mental health and wellness.
- Developing a robust referral system for adolescents that will provide additional supports and services that are outside the scope of the CAPP initiative.
- Promote home and community environments that support adolescent health and safety.
- Provide community mapping that details local health and wellness support systems for youth.

General Program Information

Food and beverages that are served during CAPP activities have to follow the Guidelines for Healthy Food and Beverages for Adolescent Health Programs, developed by the ACT CCA. The Guidelines can be found at: http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf . For additional information on youth engagement, please visit:

⁶ National Mentoring Partnership. MENTOR: For Mentors. http://www.mentoring.org/get_involved/for_mentors

http://actforyouth.net/youth_development/engagement/

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.

The CAPP initiative **will not fund** direct services such as case management, GED preparation, mental health counseling, crisis intervention, childcare or services and staff costs related to enrollment of adolescents in health insurance, including the Family Planning Benefit Program (FPBP), 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. Applicants may subcontract components of the scope of work. However the lead organization is required to retain at least 51% implementation of all program 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 NSYDOH. All subcontractors will need to be approved by NYSDOH.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the NYSDOH, Division of Family Health (DFH)/BWIAH/Adolescent Health Unit (AHU). The NYSDOH 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 via email before the specified date in the Key Dates section on the RFA Cover Page to:

capprfa@health.ny.gov

This includes Minority and Women Owned Business Enterprise (MWBE) questions and questions pertaining to the MWBE forms. 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.

Questions of a technical nature related to formatting or other minor details related to preparation of an Application may also be addressed in writing to the email address noted above.

All questions must be received by the date and time referenced on the cover page of this RFA.

All questions submitted by email should state the RFA number in the subject line.

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

- <https://grantsmanagement.ny.gov/resources-grant-applicants>
- Grants Gateway Videos: <https://grantsmanagement.ny.gov/videos-grant-applicants>
- Grants Gateway Team Email: grantsgateway@its.ny.gov
Phone: 518-474-5595
Hours: Monday thru Friday 8am to 4pm
(Application Completion, Policy, Prequalification and Registration questions)
- Agate Technical Support Help Desk
Phone: 1-800-820-1890
Hours: Monday thru Friday 8am to 8pm
Email: helpdesk@agatesoftware.com
(After hours support w/user names and lockouts)

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/goportal.aspx and a link provided on the NYSDOH's public website at: <https://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. Letter of Interest

Prospective Applicants are strongly encouraged to complete and submit a letter of interest (refer to Attachment 18). Prospective Applicants who submit a letter of interest by the date identified on the cover of this RFA may receive email notifications when updates to and modifications of this RFA are posted, including responses to written questions. Letters of interest should be submitted via the Grants Gateway under the Pre-Submission Uploads section of the online application. Please note that you will receive an error message when uploading the letter into the application as other Pre-Submission uploads are not due until the application is submitted. A copy should also be emailed to capprfa@health.ny.gov Please ensure that the RFA number is noted in the subject line and Letters of Interest are submitted by the date posted on the cover of the RFA.

Submission of a letter of interest is not a requirement of this RFA, nor does the submission of a letter of interest impose any obligation upon the Applicant to submit an Application in response to this RFA.

D. Applicant Conference

An Applicant Conference **will not be held** for this project.

E. 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 Management website at the following web address: <https://grantsmanagement.ny.gov/> and select the “Apply for a Grant” from the Apply & Manage menu. There is also a more detailed “Grants Gateway: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants 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://grantsmanagement.ny.gov/live-webinars>.

To apply for this opportunity:

1. Log into the [Grants Gateway](#) as either a “Grantee” or “Grantee Contract Signatory”.
2. On the Grants Gateway home page, click the “View Opportunities” button”.
3. Use the search fields to locate an opportunity; search by State agency (NYSDOH) or enter the Grant Opportunity name <INSERT RFA NAME>.
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 Applicants 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 NYSDOH 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 NYSDOH 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 for the submission of an Application, 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 an Applicant of successful submission. If a prospective Applicant 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 an incomplete Application. 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.68 of the Grants Gateway: Vendor User Guide).
- Applicants 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. Applicants should ensure that any attachments uploaded with their application are not “protected” or “pass-worded” 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 | | |
| 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, paper copy or hand delivery.**

F. 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. Negotiate with successful Applicants within the scope of the RFA in the best interests of the State.
13. Conduct contract negotiations with the next responsible Applicant, should the Department be unsuccessful in negotiating with the selected applicant.
14. Utilize any and all ideas submitted with the Applications received, at the Department's sole discretion.
15. Unless otherwise specified in the RFA, every offer in an Applicant's Application is firm and not revocable for a period of 60 days from the bid opening.
16. Waive or modify minor irregularities in Applications received after prior notification to the Applicant.
17. 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 Applicant's application and/or to determine an Applicant's compliance with the requirements of the RFA.
18. Eliminate any term of this RFA that cannot be complied with by any of the Applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the State.

G. 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, 2023-June 30, 2028.**

Continued funding throughout this period is contingent upon availability of funding and state budget appropriations. NYSDOH 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.

H. Payment & Reporting Requirements of Grant Awardees

1. The Department may, at its discretion, make an advance payment to successful not-for-profit grant Contractors in an amount not to exceed 25 percent of the annual grant provide for under the Contract.
2. The grant Contractor will be required to submit invoices and required reports of expenditures to the State's designated payment office (below) or, if requested by the Department, through the Grants Gateway:

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. Payment terms will be: Contractor will be reimbursed for actual expenses incurred as allowed in the Contract Budget and Work Plan.

3. The grant Contractor will be required to submit the following reports to the Department of Health at the address above or, if requested by the Department, through the Grants Gateway:

Biannual Reports are due 30 days after the end of the six-month report period.

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

I. Minority & Woman-Owned Business Enterprise Requirements

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health (“NYSDOH”) 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 NYSDOH 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 NYSDOH 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 **0%** 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 0% for Minority-Owned Business Enterprises (“MBE”) participation and 0% 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 NYSDOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how NYSDOH 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 on this page under “NYS Directory of Certified Firms” and accessed by clicking on the link entitled “Search the 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.

This RFA does not establish minimum goals for participation of minority or women-owned business. Therefore, completion of the MWBE Utilization Plan is optional (Minority & Women-Owned Business Enterprise Requirement Forms (NFPs) Attachment 13. Funded applicants are encouraged to engage with firms found in the directory for the acquisition of required product(s) and/or service(s) associated with this grant.

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

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 be sure the Vendor Identification number is included in your organization information. If not enrolled, to request assignment of a Vendor Identification number, an Applicant should please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: <https://www.osc.state.ny.us/files/vendors/2017-11/vendor-form-ac3237s-fe.pdf>

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, 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 each Applicant files the required Vendor Responsibility Questionnaire online via the New York State VendRep System. The Vendor Responsibility Questionnaire must be updated and certified every six (6) months. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <https://www.osc.state.ny.us/state-vendors/vendrep/file-your-vendor-responsibility-questionnaire> or go directly to the VendRep system online at <https://www.osc.state.ny.us/state-vendors/vendrep/vendrep-system>.

An Applicant 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 itservicedesk@osc.ny.gov.

Applicants opting to complete online should complete and upload the Vendor Responsibility Attestation (**Attachment 14**) of the RFA. The Attestation is located under Pre-Submission uploads and once completed should be uploaded in the same section.

Applicants opting to complete and submit a paper questionnaire can obtain the appropriate questionnaire from the VendRep website, www.osc.state.ny.us/vendrep, and upload it with their Application in the Pre-Submission uploads section in place of the Attestation.

L. Vendor Prequalification for Not-for-Profits

All not-for-profit Applicants 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-profit Applicants 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 Management 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 Management 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 Management Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the NYS Grants Management office at the address provided in the submission 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 any 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 included with the Application submitted by an Applicant wishing to incorporate any of such exceptions in its Applicants and the Contract awarded pursuant to this RFA.
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, in the State of New York or otherwise.
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 Grantee, 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 Grantee.
- c. If, in the judgement of the Department, the Grantee 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 Grantee. In such case the Grantee shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Grantee 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 Grantee 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 Grants Gateway: Vendor User Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Management website at: <https://grantsmanagement.ny.gov/vendor-user-manual>. Additional information for applicants is available at: <https://grantsmanagement.ny.gov/resources-grant-applicants>.

The Grants Gateway works well in most cases with all browsers, including Microsoft Edge, Google Chrome, Safari, and Firefox. However, you will need to use Internet Explorer Compatibility Mode in Microsoft Edge if you need to save 500-character limit fields in the Work Plan. You can access Internet Explorer mode by right-clicking on a tab in Edge and selecting the option “Reload Tab in Internet Explorer Mode”.

It is the applicant’s responsibility to ensure that all materials to be 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.

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 your agency and its services. Therefore, answers should be specific, succinct, and responsive to the statements and questions as outlined.

Pre-Submission Uploads

As a reminder, the following attachments need to be uploaded under the Pre-Submission Uploads section of the Grants Gateway in order to submit an application in the system.

1. *Attachment 3: Statement of Assurances*
2. *Attachment 6: Letter of Referral Arrangement*
3. *Attachment 12: Budget Table A, A-1 and Table A-2*
4. *Attachment 14: Vendor Responsibility Attestation*
5. *Attachment 15: Application Cover Page*
6. *Attachment 16: Vendor Contact Form*

Program Specific Questions

1. Application Cover Page (0 points)

Complete and upload under Pre-Submissions uploads Attachment 15 – Application Cover Page, Provide all the relevant information about the applicant organization, priority ZIP codes, combined ASHNI score, proposed EBP(s) (selected from Attachment 4) to be implemented; proposed county(ies) and region(s) to be served, and the amount of funding requested.

2. Statement of Assurances (0 points)

Complete and sign the Statement of Assurances (Attachment 3). The form should be signed by an individual authorized to sign for the applicant organization.

3. Program Summary (10 points)

The purpose of this section is to summarize the entire proposed project.

301. Identify health inequities for the selected priority population(s) and proposed communities. Include information on the ASHNI scores relevant to the proposed communities to be served.
302. Describe how the applicant selected the priority populations to be served. Include strengths, opportunities and needs of proposed communities.
303. Describe how chosen strategies align with the core set of performance standards and the needs of the priority population that will be served, and their communities.

4. Organizational Experience and Capacity (20 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. Evidence of prior success with similar initiatives that have included

serving communities that lack multiple resources for adolescents.

401. Describe how the organization will support the successful implementation of the CAPP initiative, and evidence of integration into the larger organization.
402. Describe the applicant organization's experience in providing educational programming for adolescents and opportunities for youth from under-resourced communities. Include this information also for all proposed subcontractor(s), if included in the application.
403. Describe proposed CAPP staff, qualifications, and previous experience working with youth. Please see health education standards in Attachment 2.
404. 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.

5. Community Resources and Needs Assessment (15 points)

The purpose of this section is to determine available resources and needs through a community assessment. The assessment should focus on the specific strengths and resources, priority needs, and gaps impacting developmental supports and opportunities for adolescents in the community. The priority population(s) and communities that will be served should be clearly reflected in the community's resources and needs assessment. 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>

501. Discuss the identified community resources currently available for adolescents in the proposed project communities. This should include resources that provide protective factors to support adolescents through developmental milestones for transition to a healthy, productive, and connected adulthood.
502. Identify the inequities in the proposed priority communities that impact youth.
503. Identify additional funding that the organization and the priority community(ies) receive to support adolescent pregnancy prevention programming in these communities. Include all Federal and state funding and the venues where these services are/will be provided.
504. Indicate which stakeholders, including youth stakeholders, that had any direct participation in providing information related to the Community Resources and Needs Assessment in preparation for this application.

6. Description of Project (35 points)

The purpose of this section is to describe the design and structure of the proposed CAPP program including the activities that will be implemented for adolescent pregnancy prevention in the service

area, defined by ZIP codes.

Programmatic Component One

601. Indicate the proposed EBPs from Attachment 4 to be implemented. Describe the rationale for choosing the evidence-based or approved promising program(s) proposed for implementation. Include information on how the selection of EBP(s) was based on the findings of the needs of the priority population identified in the Community Resources and Needs Assessment.
602. Discuss why the proposed venue(s) for EBPs were chosen in relation to the priority population(s). Indicate how many venues will be selected in a community setting that is not part of an in-school or after-school program.
603. Discuss how the EBP(s) selected are appropriate for the stage of development, gender, gender identity and other characteristics of the priority population(s) to be served.
604. Describe how the implementation of the EBP(s) will be consistent with the developer's guidelines (Attachment 4).
605. Provide estimates of the overall number of program(s) participants annually and the number participating by proposed project site(s).
606. Describe the proposed evidence-based or best practice strategies that will be implemented to provide parent-child communication on sexual health topics, including contraception. (Optional activity: not scored)
607. Describe how the proposed program will incorporate education for parents/caregivers to provide improved knowledge and communication skills related to adolescent sexual health and family planning. (Optional activity, not scored)
608. Describe the proposed strategies/activities that the applicant plans to implement, which are evidence-based or best practice strategies to ensure adolescents in the priority community(ies) have access to reproductive health care and family planning services.

Note: Applicants not approved under Article 28 of the NYS Public Health Law (PHL) to provide family planning services must submit a letter with a referral arrangement from one or more family planning providers serving the priority community stating their intent to collaborate with the CAPP applicant organization to accept the contractor's referrals for Medicaid patients and able to provide a full range of medical family planning services. *Letter(s) need to be included as uploads when the application is submitted in Grants Gateway. See Attachment 6 – Letter of Referral Arrangement.*

Programmatic Component Two

609. Indicate the planned Component Two activities to be implemented. Provide justification based on evidence-informed or best practice strategies.

610. Discuss how the selection of these activities occurred, including how youth provided direct input into the development of these Component Two activities.

611. Discuss how the applicant will implement a robust referral system for other youth services.

7. Budget

(20 points)

All costs must be related to the provision of the CAPP , as well as be consistent with the scope of services, reasonable, and cost effective. **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.** Applicants proposing to provide services in multiple regions (see Table 1) must submit a separate application for each region where provider services will be covered. Any ineligible budget items will be removed from the budget prior to scoring and/or contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.

701. Complete Year 1 of the budget in the Grants Gateway (See Attachment 7 for Grants Gateway Expenditure Budget Instructions – Year 1 for completing the online budget) assuming a start date of July 1, 2023. Budgets for Years 2-5 need to be completed and uploaded using the (Excel workbook) located under Pre Submission Uploads. All costs must be related to the provision of CAPP, 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.

702. For Years two through five budgets, please be sure to complete all required budget pages. See Attachment 8 for General Budget Instructions/Expenditure Based Budget Years 2-5 Summary.

The budgets for years two through five should be labeled as listed below and combined into one PDF document, then uploaded to the Grants Gateway. Complete the budget forms as directed for a 12-month period. See Attachment 8, Expenditure Based Budget, Years 2-5.

Budget Year 2 – July 1, 2024 – June 30, 2025

Budget Year 3 – July 1, 2025 – June 30, 2026

Budget Year 4 – July 1, 2026 – June 30, 2027

Budget Year 5 – July 1, 2027 – June 30, 2028

703. Include budgeted travel expenses for two staff to attend an annual two-day provider meeting in Albany, NY. Conferences may be provided with an optional virtual attendance option. At that time, providers may submit a budget modification through the Grants Gateway to reallocate the expenses of attending the conference in person.

The initiative will not fund direct clinical/medical/laboratory services and supplies, including, but not limited to: case management, mental health counseling, crisis intervention, pap smears (supplies or laboratory costs), pregnancy test supplies or laboratory costs, contraceptives including condoms, STI test supplies and associated laboratory costs, or education done in clinic waiting

rooms. This project will also not include GED preparation, job placement and child care or services that are available through other resources.

Applicants are required to complete Table A-1 and Table A-2 (Attachment 12) as part of the budget process. Complete Tables A-1 and A-2 as part of each annual budget. The Tables A-1 and Table A-2 (Attachment 12) will be summarized and submitted as an upload in Grants Gateway and submitted as part of the Year 1 budget and budget Years 2-5.

CAPP programs provide a variety of services that are eligible for Federal medical assistance percentage funds. Eligible activities include those defined in 18 NYCRR 505.13, “**offering and arranging for family planning services (O&A).**” Offering and arranging for family planning services is defined in 18 NYCRR 505.13 by three broad categories as follows: disseminating written and oral information about available family planning health services, providing for individual and/or group discussions about all methods of family planning and family planning services, and assisting with arranging visits to a medical family planning provider (Attachment 9). At least eighty-five percent (85%) of Component One: Performance Standard 1 and 2 costs related to the health educators and the supervision of health educators, purchase of and training on curricula, and travel for youth to attend EBPs should be designated as offering and arranging expenses. Other supportive costs related to the implementation of activities for Component One Performance Standard 1 and 2 are to be supported by no more than 15% non-offering and arranging funding described in Attachment 9. These would include administrative staff involvement in program activities, supplies (pens, pencils, paper, etc.), incentives for program participation as outlined in Attachment 10, food, and other such items. Incentives and food are permitted in out-of-school settings and/or after-school settings.

For example, should an applicant may request \$300,000 to implement Component One activities, then:

85% of the \$300,000 requested would be \$255,000, which would support activities related to offering and arranging only and would be included in columns 5-9 on Table A-1 and 2-6 on Table A-2; and

15% of the \$300,000 requested for Component One activities would be \$45,000, which would support activities not related to offering and arranging. These expenses would be included in column 10 on Table A-1 and column 7 on Table A-2.

8. Workplan

(Not Scored)

This RFA has a Standardized Work Plan (Attachment 5) set in Grants Gateway. The Objectives and Tasks cannot be removed from the work plan. The applicant will adhere to the implementation of work plan activities per the standardized work plan and Performance Measures.

It is the applicant’s responsibility to ensure that all materials to be 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.

B. Freedom of Information Law

All Applications may be disclosed or used by NYSDOH to the extent permitted by law. NYSDOH 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 an 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 NYSDOH 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, DFH, BWIAH, AHU. An application will be scored and ranked for selection in a specific region. Applicants may or may not receive awards for any and/or all regions applied for.

Applications will be pre-screened to ensure that the minimum eligibility requirements are met. Minimum eligibility requirements are listed in section II.A. Applications that do not meet one or more of these requirements will not be reviewed for funding. Applications will be reviewed and scored by a NYSDOH team of trained reviewers using standardized review tools developed specifically for this RFA. Applications must have a minimum score of 65 to be considered for funding.

In the event of a tie score among eligible applicants, a higher score in the section: Community Resources and Needs Assessment will break the tie. Applications failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration or points may be deducted.

Due to the need in the cities of Buffalo, Rochester, Syracuse, and Albany respective to their total region, at least one award will be made to the highest scoring applicant proposing services in these locations. The scores for the remaining applicants for the regions covering these cities will be ranked highest to lowest and awarded based on their regional scoring rank. If there are no passing applications for the listed cities above, then the applications for each region will be scored and awarded in rank order for each region.

If a region does not have an adequate number of passing applications to fully expend the regional award, the balance will be reserved in a pool. After awards are made for all other regions, the reserved monies will be awarded to the pool of applicants in score-ranked order (highest to lowest). If changes in funding amounts are necessary for this initiative funding will be modified and awarded in the same manner as outlined in the award process described above.

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 NYSDOH, but all issues need to be resolved prior to time of contract execution. An application with unresolved issues at the anticipated contract execution date will be determined to be non-responsive and will be disqualified.

Once awards have been made, applicants may request a debriefing of their application (whether their application was funded or not funded). Please note the debriefing will be limited only to the subject

application and will not include any discussion of other applications. Requests must be received no later than fifteen (15) calendar days from date of award or non-award announcement.

To request a debriefing, please send an email to capprfa@health.ny.gov. In the subject line, please write: Debriefing Request: Comprehensive Adolescent Pregnancy Prevention RFA

Any unsuccessful Applicants who wish to protest the awards resulting from this RFA 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>. (Section XI. 17.)

VI. Attachments

Please note that certain attachments are accessed under 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: Adolescent Sexual Health Needs Index (ASHNI)
- * Attachment 2: Health Education Standards
- * Attachment 3: Statement of Assurances
- * Attachment 4: Evidence-based Programs to Prevent Pregnancy, STIs, and HIV Among Adolescents
- * Attachment 5: Work Plan
- * Attachment 6: Letter of Referral Arrangement
- * Attachment 7: Grants Gateway Expenditure Budget Instructions - Year 1/Grants Gateway Budget
- * Attachment 8: General Budget Instructions / Expenditure Based Budget Years 2-5 Summary
- * Attachment 9: Instructions for Completing Operating Budget and Funding Request (Offering and Arranging)
- * Attachment 10: Guidance for Use of Incentives for EBP Participants
- * Attachment 11: Potential Evidence-Informed Programs for Component Two
- * Attachment 12: Budget Table A, A-1 and Table A-2
- * Attachment 13: Minority & Women-Owned Business Enterprise Requirement Forms (NFPs)
- * Attachment 14: Vendor Responsibility Attestation
- * Attachment 15: Application Cover Page
- * Attachment 16: Vendor Contact Form
- * Attachment 17: Subcontractor Information Form
- Attachment 18: Sample Letter of Interest to Apply

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

Attachment 18

Sample Letter of Interest to Apply

RFA # _____ **/ Grants Gateway #** _____
RFA Title: _____

Date:

NYSDOH Contact
NYSDOH Address

Dear _____:

This letter is to indicate our interest in the above Request for Applications (RFA) and to request that our organization be notified, via the e-mail address below, when any updates, official responses to questions, or amendments to the RFA are posted on the [New York State Grants Gateway website](#).

E-mail address: _____

Sincerely,

