

REQUEST FOR APPLICATION (RFA)
California Personal Responsibility Education Program (CA PREP)
December 1, 2014



California Department of Public Health
Center for Family Health
Maternal, Child and Adolescent Health Division

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PART I. FUNDING OPPORTUNITY DESCRIPTION

A. Overview

The California Department of Public Health, Maternal, Child and Adolescent Health Division (CDPH/MCAH) is soliciting applications from eligible organizations to implement California's Personal Responsibility and Education Program. CA PREP is intended to educate youth on preventing pregnancy and sexually transmitted infections (STIs) including the human immunodeficiency virus (HIV). PREP programming must include both abstinence and contraception, and must cover selected adulthood preparation subjects (APS). CA PREP funds shall be used primarily to replicate or substantially incorporate elements of effective evidence-based program models (EBPMs) that have been proven to change sexual risk-taking behavior including delaying sexual activity, reducing number of sexual partners, and increasing condom and/or contraceptive use among sexually active youth. CA PREP funds may also be used to support complementary activities including community engagement around improving adolescent sexual health, and promotion of clinical linkages to local reproductive health services.

CA PREP will be implemented in California counties with the highest localized need for sexual health education statewide. A list of eligible counties can be found in Part II, Eligibility Information. Local need for adolescent sexual health services is defined at the Medical Service Study Area (MSSA) level and was determined based on counts and rates of adolescent births, percentages of repeat adolescent births, rates of adolescent gonorrhea infections, percentages of youth in concentrated areas of poverty, high school drop-out rates, community racial and ethnic composition, and community rural status [see [Appendix 1](#) for a description of the California Adolescent Sexual Health Needs Index (CASHNI)].

This program is managed under the direction of CDPH/MCAH. Cooperative agreements will be awarded for three fiscal years, beginning July 1, 2015 and ending June 30, 2018, contingent on future federal allocations from the Family and Youth Services Bureau (FYSB).

This solicitation will be awarded under the Cooperative Agreement Act, Health & Safety Code (Sections 38070-38081.1). A cooperative agreement is an agreement between the department and a unit of local government, any other unit of state government, or a nonprofit organization that provides for a contract under CDPH/MCAH and CA PREP.

Organizations, both governmental and non-profit, are invited to review and respond to this Request for Application (RFA). Applicants must comply with the instructions contained in this document to submit an application to provide CA PREP services. CA PREP services are described in Part I. D, Program Requirements. Applicants must meet the minimum qualification requirements set forth in Part II, Eligibility Information.

Applications are due to CDPH/MCAH on **January 21, 2015**. Applicants must adhere to the due dates in Part V. A, Key Action Dates.

B. Background

The adolescent birth rate in the United States decreased significantly over the past 30 years, reaching a record low of 34.4 live births per 1,000 female youth aged 15 to 19 in 2010.¹ In California, the decline has been even more substantial, from an adolescent birth rate of 70.9 per 1,000 in 1991 to 25.7 per 1,000 in 2012.² Nationally, the reduction in adolescent births is linked primarily to improvements in contraceptive use, including increased use of any contraceptive method, increased use of the most effective contraceptives such as long active reversible contraceptive (LARC) methods, and increases in dual use of condoms and other methods.^{3,4} California's success also likely relates to a multifaceted approach including policy support for comprehensive sexual education, accessible family planning services for youth, and a long history of providing effective adolescent pregnancy prevention programs.

While great progress has been made, there are still substantial disparities in rates of adolescent childbearing and sexually transmitted infections (STIs) based on race, ethnicity, geography, and other social and demographic characteristics. Notably, three out of four adolescent births are to Hispanic mothers, although Hispanic females account for only one-half of the adolescent population.⁵ Other vulnerable populations, including youth in foster care and juvenile justice systems, homeless/runaway youth, female adolescents with a major mental illness, and male and female youth who identify as lesbian, gay or bisexual, also have higher rates of early pregnancy, childbearing and/or STIs including HIV when compared to other adolescents. For example, almost half of female youth in foster care have been pregnant by age 19, compared with one fifth of female youth outside of the foster care system.⁶ These vulnerable adolescents are in substantial need of targeted sexual health education and support services.

Youth with special needs, including developmental and physical disabilities, are a frequently overlooked population in need of tailored sexual health education. Evidence suggests that youth with intellectual disabilities have a higher risk of becoming adolescent parents, becoming sexually active earlier, and experiencing sexual abuse in childhood compared with their peers.⁷ Due to the heterogeneity of conditions and needs among adolescents in this group, it can be challenging to ensure that all youth with special needs receive effective sexual health instruction. It is both a requirement of California law (CA Ed. Code 51933) and a CA PREP priority to provide sexual health services that are accessible to and inclusive of youth with disabilities.

Providing adolescents with the knowledge and motivation to make informed decisions around their sexual and reproductive health is an important tool in addressing the health disparities

faced by youth across the State and assisting youth in becoming healthy and successful adults. Preventing unplanned, early pregnancies and promoting positive youth development may contribute to increased educational and vocational attainment among future parents, influencing personal development, relationships, career and educational prospects across generations. By continuing the progress made to date in delaying pregnancy and parenthood, more California youth will have the opportunity to build a strong and healthy foundation for the future.

C. Program Description

The main goal of CA PREP is to reduce rates of births and STIs including HIV among high-need youth populations by replicating or substantially incorporating elements of effective evidence-based program models (EBPMs) that educate adolescents on prevention of pregnancy and STIs including HIV.

Key components of CA PREP include:

- Implementation of evidence-based program models
- Integration of adulthood preparation subjects
- Compliance with California Health & Safety and Education Codes
- Community outreach and engagement activities
- Dissemination of information about Family PACT and other youth services
- Participation in required evaluation and monitoring activities

The federal funding guidelines emphasize that PREP service providers should aim to reduce adolescent birth and STI rates for youth populations most at-risk for these outcomes. A complete list of youth populations considered high-needs by CA PREP is available in Part I. D, Program Requirements.

CA PREP awardees have the flexibility and credibility to bridge public and private sectors. They have the ability to work with a wide variety of entities providing services to youth including health departments, schools, clinics, foster care agencies, juvenile justice facilities, after-school programs, and others. They are expected to work collaboratively with stakeholders in their unique communities to identify and address the sexual health and developmental needs of youth at high risk for unplanned pregnancies and/or STIs including HIV.

CA PREP funds shall be primarily used to replicate or substantially incorporate elements of evidence-based program models (EBPMs). The five CA PREP program models come from the Office of Adolescent Health's list of effective programs. These programs were reviewed as part of the US Department of Health and Human Services (HHS) pregnancy prevention research

review and “found to be effective at preventing teen pregnancies or births, reducing sexually transmitted infections, or reducing rates of associated sexual risk behaviors (defined by sexual activity, contraceptive use, or number of partners).”⁸

Additional activities to be supported by CA PREP funds include: maintaining a coalition of local stakeholders around adolescent sexual health; outreach to parents of PREP youth and community members; building partnerships with local Family PACT and other reproductive health care providers; and participation in required data collection, continuous quality improvement, and evaluation activities.

Section 2953 of the Patient Protection and Affordable Care Act of 2010 added Section 513 to Title V of the Social Security Act, codified at 42 U.S.C. 713, which authorized PREP. Through federal appropriation, CDPH/MCAH was awarded funds to implement CA PREP. The appropriation is allocated by a formula that calculates the proportion of youth in California between the ages of 10 and 19 to the total number of similarly aged youth in all of the United States and territories. The available funds will be used to support program activities in California counties with the greatest localized need for youth sexual health education. Counties eligible for CA PREP funding are listed below (see Part II, Eligibility Information, for a description of how counties were identified):

Alameda	Mendocino	Santa Barbara
Butte	Merced	Santa Clara
Contra Costa	Monterey	Shasta
Fresno	Orange	Solano
Humboldt	Riverside	Sonoma
Imperial	Sacramento	Stanislaus
Kern	San Bernardino	Sutter
Kings	San Diego	Tehama
Lake	San Francisco	Tulare
Los Angeles	San Joaquin	Ventura
Madera	San Mateo	Yuba

D. Program Requirements

1. Target high-risk youth ages 10-19.

Youth are considered high-risk by CA PREP if they meet one or more of the following criteria:

- a. Reside or attend school in a high-needs MSSA (see [Appendix 1](#) for a list of all high-need MSSAs in the eligible counties, and information on how to check the MSSA of potential sites)
- b. Receive services at a reproductive health clinic in a high-needs MSSA
- c. Are homeless and/or runaway youth
- d. Attend an alternative or continuation school
- e. Are in or emancipated from the foster care system
- f. Are incarcerated in a juvenile justice facility, or are in the probation system
- g. Identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ)
- h. Reside in or receive outpatient services from a mental health or substance abuse treatment facility or group home
- i. Have special needs, defined as youth who “have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that required by children generally”⁹
- j. Are or live in families that are migrant farmworkers, defined as individuals who are “required to be absent from a permanent place of residence for the purpose of seeking employment in agricultural work”¹⁰
- k. Are expectant or parenting female youth (up to age 21)

All youth served by CA PREP must meet at least one of the criteria above. CDPH/MCAH encourages applicants to propose serving youth with the highest needs described in criteria c-k above.

2. Deliver effective evidence-based program models (EBPMs) with fidelity.

In accordance with federal requirements for PREP funding, CA PREP awardees will replicate or substantially incorporate elements of EBPMs that have been proven through rigorous scientific research to have significant, positive behavioral outcomes related to adolescent births, STIs, and HIV prevention. CDPH/MCAH has selected five EBPMs that have been shown to change behaviors including delaying sexual activity and increasing use of condoms and/or contraception among sexually active youth.

EBPM Selection

The five CDPH/MCAH-selected EBPMs are identified in Table 2. Applicants must choose at least one of the EBPMs listed that best suits the needs of their target population (see note below on proposing alternative curricula). Applicants serving more than one target population (for example, youth in juvenile justice and youth in alternative high schools), may select different EBPMs for each population. **Applicants must select at least one of the EBPMs in Table 2.**

EBPMs have typically been designed for specific populations (e.g., race/ethnicity, age, and gender) in specific settings (e.g., schools, clinics, juvenile justice facilities). Therefore, knowing which population and setting were used in the original evaluation or replication studies of an EBPM is important when selecting an EBPM. Refer to [Appendix 2](#), Evidence-Based Program Model Resources, for more information about CA PREP approved EBPMs.

Appropriate EBPM selection increases the likelihood that the program will be implemented with fidelity, thereby increasing the likelihood of achieving the desired outcomes. Not all EBPMs are appropriate for all adolescents, organizations, and communities. Selecting an EBPM based on the needs of the target population(s) increases the chance it will be appropriate for and accepted by participating adolescents. Additionally, EBPMs that reflect the culture, language, and values of the target population(s) increase the chances of improving outcomes.¹¹

Please note: Other curricula, including those on the Office of Adolescent Health list of approved evidence-based programs, will be considered if the applicant provides a strong rationale and justification for the selection of a different model. Applicants are permitted to propose an alternate curricula and/or overview of proposed adaptations in addition to their chosen EBPM from Table 2 if the applicant plans to serve a population for which there is no appropriate EBPM listed or for which substantial adaptations would be required to meet the needs of the target population. After notice of intent to award, CDPH/MCAH will work with awardees to determine the best program model for their target population(s) and setting(s). If applicants choose to propose an additional curriculum, it must be reviewed and approved by CDPH/MCAH prior to training and implementation.

Please note that all curricula include a demonstration of condom use skills. Individual participants may opt out of this activity if they choose.

Table 2: CA PREP Approved Evidence-Based Program Models
1. Be Proud! Be Responsible! 4 th Edition, 2012, 2 nd Printing
2. Cuídate! 2 nd Edition, 2012, 2 nd Printing
3. Sexual Health and Adolescent Risk Prevention (SHARP), also known as HIV Risk Reduction Among Detained Adolescents 1 st Edition, 2010
4. Making Proud Choices! 4 th Edition, 2013, 4 th printing
5. Reducing the Risk 5 th Edition

Fidelity

Awardees will be required to maintain fidelity to the core components of the EBPMs. Implementing a program model with fidelity requires implementing the EBPM in its entirety and with the core components of each module delivered as intended. All awardees will attend training on how to implement a selected EBPM with fidelity. Awardees are permitted to adapt EBPMs to meet the needs of their target population(s) and/or setting(s).

Acceptable adaptations that do not alter the internal logic or change core components of the intervention will be considered and must be approved by CDPH/MCAH prior to implementation. Applicants should refer to the core component summaries in [Appendix 2](#) before proposing adaptation to the EBPM(s).

Training and technical assistance will be provided to awardees to consider whether adaptations are necessary for their selected EBPM. Awardees will also be provided with fidelity monitoring tools to ensure the EBPMs are implemented as intended.

Cultural and Linguistic Context

Information and activities must be provided in the cultural and linguistic context that is most appropriate for the target population(s). Awardees will agree to provide services in a manner that respects the beliefs, privacy, and dignity of the individual. Individuals have the right to accept or reject services and their participation must be voluntary.

EBPM Training

Awardees will be required to attend training provided by CDPH/MCAH on their selected EBPM(s) prior to implementation. Awardees will ensure program staff hired to implement EBPM(s) are able to meet the EBPM core components and implement the EBPM(s) with fidelity. In addition, staff hired shall be able to implement the EBPM(s) in a culturally and linguistically appropriate manner for the target population(s).

California Laws

CA PREP awardees are required to comply with the following California laws (CDPH/MCAH will review all EBPMs for compliance and will provide guidance and adaptations, if needed, to comply with the CA Health & Safety and Ed. Codes):

- **Health Education Content Standards for California Public Schools: Kindergarten through Grade Twelve**
<http://www.cde.ca.gov/be/st/ss/documents/healthstandmar08.pdf>
- **California Comprehensive Sexual Health and HIV/AIDS Prevention Education Act** (Education Code sections 51930-51939)
<http://ssku.k12.ca.us/documents/EdCode5193039.pdf>
- **Sexual Health Education Accountability Act** (California Health and Safety Code (H&S) sections 151000-151003)
<http://www.leginfo.ca.gov/cgi-bin/displaycode?section=hsc&group=150001-151000&file=151000-151003>

EBPM Resources

When selecting an EBPM(s), applicants are strongly encouraged to review each of the resources listed in [Appendix 2](#), Evidence-Based Program Model Resources.

Changing EBPMs After Award

Awardees will not be permitted to change the selection of their EBPM(s) or approved implementation plan after the contract award without prior CDPH/MCAH approval.

3. Integrate adulthood preparation subjects into EBPM implementation.

Adulthood preparation subjects (APS) are a set of six youth development topics. Integrating three of the six adulthood preparation subjects into EBPM implementation is a requirement of federal PREP funding. The APS are listed below; the first three below (in bold) have been selected by MCAH as topic areas that CA PREP awardees must cover during EBPM implementation.

- **Adolescent Development**
- **Healthy Life Skills**
- **Healthy Relationships**
- Educational and Career Success
- Financial Literacy
- Parent-Child Communication

Each EBPM provides different coverage of the CA PREP topic areas; not all models adequately cover each topic. In Spring 2014, CDPH/MCAH conducted a review of APS in CA PREP evidence-based program models to determine which subjects require additional content to meet minimum standards. The review identified areas of need across all EBPMs reviewed. For more background on the review and the content of each of the CA PREP APS, see [Appendix 3](#).

Awardees will integrate APS in the following ways:

- a. Required: CA PREP facilitators must view or attend topical trainings prior to delivering EBPMs. Following training, CA PREP facilitators will incorporate APS content and themes into EBPMs throughout implementation using strategies and adaptations provided by CDPH/MCAH.
- b. Encouraged: Awardees may add relevant activities (such as an activity on puberty and physical development, or a course on healthy relationships) before or after implementation, with prior approval from CDPH/MCAH.

Awardees may also propose and implement other activities on any of the six APS with approval from CDPH/MCAH prior to implementation.

4. Develop and/or maintain a Local Stakeholder Coalition to raise awareness around and improve adolescent sexual and reproductive health in the community.

CA PREP awardees will be required to facilitate and/or participate in regular meetings with a Local Stakeholder Coalition (LSC) to collaborate with community representatives concerned about local youth, raise awareness about adolescent pregnancy, STI, and HIV/AIDS prevention efforts, garner support for CA PREP, and educate the community about essential adolescent sexual and reproductive health services. Engaging local stakeholders can result in sustainable efforts to improve the community environment for adolescents and reduce early pregnancy, childbearing, STI, and HIV rates. Applicants must work directly with local stakeholders in developing their RFA application.

The purpose of the local stakeholder coalition is to:

- Develop relationships with members of the community to contribute to the success and sustainability of CA PREP;
- Identify strategies to seek and maintain community support for CA PREP services;
- Educate members of the community on risk and protective factors associated with adolescent pregnancy, STIs, and HIV, and identify strategies to overcome risk factors;
- Identify opportunities for youth input and community involvement; and,
- Increase awareness of the importance of providing adolescents access to health care services, including family planning and reproductive health services.

Applicants must collaborate with coalition members to identify:

- a. Target populations: the most high-risk population(s) within the county
- b. MSSAs: location(s) of target population(s) within the county
- c. EBPM(s) best suited to meet the needs of target population(s)
- d. Service location(s)

At a minimum, the local stakeholder coalition must include representatives from the following:

- a. Family PACT providers
- b. Foster care – county/state agencies and/or private organizations/providers
- c. Social service providers (e.g., those who provide high-risk adolescents with services related to homelessness, substance use/abuse, intimate partner violence)
- d. Schools and educators (e.g., school board member, administrator, teacher)
- e. Local Maternal, Child and Adolescent Health Director or their public health designee
- f. Current or potential CA PREP service delivery site(s) serving the awardee's target population

In addition, awardees are strongly encouraged to include additional representatives from the following:

- Youth from the target population and their parents/guardians
- Law enforcement
- Pregnant and parenting youth service providers (e.g., the Adolescent Family Life Program, Cal-SAFE, locally-funded Cal-Learn)
- Youth-service and/or youth-focused organizations
- Local government representative(s) or designee(s)
- The local business community (e.g., businesses that serve and/or employ youth, Chamber of Commerce)
- Parks and recreation
- Faith-based community
- Service organizations (e.g., Rotary, Lions, Soroptomists, Shriners)

Awardees are required to meet at least once per quarter with the local stakeholder coalition and present on CA PREP progress and successes to the community at least once annually (data will be provided routinely by CDPH/MCAH).

Other Activities

Applicants are encouraged to propose additional community outreach activities. For example, CA PREP funds may be used to engage the parents of CA PREP youth, including presentations to

explain the content of the CA PREP EBPMs to parents, or to provide parents with information and strategies to support them in their role as their child's primary sexual health educator. Another example would be outreach to local businesses that employ youth. Applicants are encouraged to propose innovative additional activities. All proposed activities must be approved by CDPH/MCAH prior to implementation.

5. Promote youth awareness of and access to local Family PACT health services and other youth support services.

CA PREP awardees will be required to establish formal partnerships with Family PACT providers within their local communities to increase adolescent access to family planning and reproductive health services. Awardees will promote awareness of, and provide information about, the availability, confidentiality, and cost of services to all CA PREP youth. Activities shall include, but are not limited to, incorporating information about Family PACT and other services into EBPM implementation, and dissemination of promotional materials to create awareness about local Family PACT providers and other local youth services, including crisis counseling for youth experiencing sexual and/or dating violence. Applicants are encouraged to propose additional activities, such as on-site teen tours of Family PACT or other reproductive health care clinics.

6. Ensure adequate staffing to meet CA PREP program requirements and deliver evidence-based program model(s) with fidelity.

Awardees will hire a sufficient number of staff to complete all CA PREP contract requirements. Staff hired to implement EBPMs should be able to meet the core competencies and deliver the program in a culturally and linguistically appropriate manner for the target population(s). Core competencies generally include qualities such as training in the EBPM, ability and willingness to engage youth in the program, comfort and accuracy with discussing sexual health information, and a caring, non-judgmental attitude. Refer to [Appendix 2](#) for the core competencies of implementation program leaders. Applicants are also encouraged to refer to the Adolescent Sexual Health Workgroup (ASHWG) Core Competencies for Adolescent Sexual and Reproductive Health (Guiding Principles are in [Appendix 4](#); full document available at: <http://www.californiateenhealth.org/ashwg-core-competencies>).

Standard CA PREP staffing generally includes a designated Project Director whose responsibility is ensuring the viability and success of CA PREP activities; a Project Coordinator with overall responsibility for coordinating and documenting project activities; and a facilitator(s) to conduct and implement CA PREP intervention activities. It is beneficial to structure staffing such that facilitators have a sufficient percentage of their time devoted to CA PREP that they are able to implement frequently and build investment and skill in delivering the program.

While staffing structures vary by agency size and planned implementation activities, CDPH/MCAH will fund all awardees at levels sufficient to support, at a minimum, one health educator (100% FTE) and one project coordinator (at least 25% FTE).

7. Participate in required monitoring, evaluation, and continuous quality improvement (CQI) activities.

Awardees will participate in the CA PREP monitoring and evaluation activities described in the five categories below. Awardees are not required to hire an outside evaluator to perform or meet evaluation requirements outlined in this RFA.

- a. Implementation monitoring: CA PREP services are targeted towards youth in high-needs areas who historically have been provided fewer resources, such as the populations listed in the Program Requirements section. Awardees are required to provide documentation that programming matches youth characteristics and program delivery settings. Awardees are also required to maintain an online calendar of planned implementation.
- b. Fidelity monitoring: Awardees are required to collect and report fidelity data for each cohort of youth served. A cohort is defined as a group of youth participating in one cycle of PREP implementation. At a minimum, this will include collection of youth demographic, attendance and dosage data, completion of a fidelity tracking log, and internal observations of program delivery. Awardees are also required to participate in any requested site-visits, interviews, and external observations of program delivery.
- c. Facilitator competencies: CA PREP facilitators should possess knowledge in adolescent development, sexual health, family planning, and the program model(s) selected. Effective facilitators should also have the attitudes and skills to help youth succeed and achieve behavioral change. CDPH/MCAH will monitor these competencies through required surveys of facilitators and program coordinators at regular intervals following training activities.
- d. Youth experiences and outcomes: CA PREP services should be interactive, engaging, respectful, and culturally sensitive so participants can become invested in the program and feel safe in their learning environment. Awardees are required to administer surveys to every participant served at program entry and exit. Entry and exit surveys are Institutional Review Board approved and provided to awardees by CDPH/MCAH. CA PREP agencies must work with their local school districts and other sites to ensure that they will be allowed to administer the surveys. Surveying is federally mandated and the surveys cover topics such as sexual activity, healthy relationships, knowledge of reproductive health and services, and opinions about the program.

- e. Other evaluation activities: Awardees are required to participate in any evaluation activities that improve the quality or demonstrate the effectiveness of CA PREP programming. These activities may include participation in a rigorous longitudinal evaluation and/or continuous quality improvement (CQI). CDPH/MCAH will provide further instructions on other evaluation activities after award.

8. Compliance with reporting and other administrative requirements.

Meetings, trainings, and site visits

- a. Awardees shall attend all trainings, workshops, and conferences as directed by CDPH/MCAH.
- b. Awardees shall participate in regular program discussions and meetings as determined by CDPH/MCAH.
- c. CDPH/MCAH will perform, at its discretion, formal and/or informal site visits. The site visits will be conducted to monitor implementation activities, fidelity to the EBPM(s), and ensure compliance with the contract.

Material development, use, and approval process

- a. All documents (e.g., print, video, audio, radio or television public service announcements) produced, reproduced or purchased under the contract shall be approved by CDPH/MCAH before printing, production, distribution, or use.
- b. The awardee shall credit CDPH/MCAH on all materials produced under this contract.
- c. CDPH/MCAH will retain copyright ownership for any and all original materials produced with CDPH/MCAH contract funding, including, but not limited to, brochures, resource directories, protocols or guidelines, posters, or reports.

Reporting requirements

- a. Semi-Annual Progress Reports - Awardees shall complete Semi-Annual Progress Reports. Progress Reports shall be received on or before the due date determined by CDPH/MCAH.
- b. Annual Community Report - Awardees shall develop and present an Annual Community Report to local stakeholders to share CA PREP activities and accomplishments. The Annual Community Report will educate the community regarding adolescent pregnancy prevention services, progress in reducing adolescent birth rates, and successes and challenges related to connecting adolescents to information and support, with the intent of increasing community involvement.
- c. Single Organization-wide Financial and Compliance Audit - Awardees shall, if applicable, comply with the Single Audit Act and the audit reporting requirements set forth in OMB

Circular A-133. *In accordance with federal requirements, an awardee that expends during its fiscal year \$500,000 or more of federal funds from all sources must agree to have an independent audit of such funds conducted in accordance with the federal Office of Management and Budget (OMB) Circular A-133. OMB Circular A-133 further requires that the final report for such audit be completed within nine months of the end of the awardee's fiscal year.*

- d. Other Reports - Awardees shall participate in the collection, monitoring, and reporting of program implementation and outcomes through a uniform set of performance measurements determined by the federal funders. Awardees may be required to complete and submit other CDPH/MCAH performance and/or financial reports.

PART II. ELIGIBILITY INFORMATION

A. Minimum Requirements

The following entities and organizations may apply for funding:

1. Units of local government agencies including, but not limited to, cities, counties, and other government bodies or special districts.
2. State/public colleges or universities also known as institutions of higher education, or school districts.
3. Public and/or private nonprofit health or social service agencies, non-profit community based organizations, hospitals, or community clinics classified as 501(c) (3) tax exempt under the Internal Revenue Code. Please note: organizations within this category that do not currently receive CA PREP funding must submit a copy of an IRS determination letter indicating nonprofit or 501(c)(3) tax-exempt status.

Applicants must have:

1. Five years' experience providing adolescent pregnancy and/or HIV/STI prevention services to high-risk youth.
2. Five years' experience in program monitoring, including data collection and reporting of performance measures.
3. Organizational capacity to fulfill CA PREP and administrative contract requirements.
4. Three years' experience developing and/or participating in and maintaining stakeholder groups.

B. Eligible Counties

Eligible counties are listed in Part I. C, Program Description. In recognition of the disparities in sexual and reproductive health outcomes across the State, CDPH/MCAH developed a California

Adolescent Sexual Health Needs Index (CASHNI) to determine eligibility for CA PREP. The CASHNI was developed at the Medical Service Study Area (MSSA) level using the process described below:

- Six indicators of community risk were standardized and summed to form an index of overall community risk. The six indicators were: 2010-2012 aggregate adolescent birth rate, 2010-2012 aggregate percentage of repeat births, 2010-2012 aggregate gonorrhea incidence rate, 2012 estimated percentage of youth living in concentrated areas of poverty, 2012 estimated percentage of youth living in racially isolated areas of African Americans, Hispanics or American Indian/Alaskan Natives, and the 2012 high school cohort drop-out rate.
- Overall community risk was ranked from one to five based on the distribution of sums; rankings were multiplied by two for rural MSSAs.
- Resulting values (range 1 – 10) were multiplied by the 2010-2012 average annual numbers of live births to females ages 15 – 19.

CASHNI scores range from 1 to 2728 across California's 542 MSSAs. Counties with a total countywide CASHNI score above 400 are eligible for CA PREP services (see [Appendix 1](#) for a list of CASHNI scores by county and MSSA).

PART III. AWARD INFORMATION

A. Available Funding

The estimated annual funding amount to be allocated through this RFA is \$5,000,000. This estimated total is contingent on future federal allocations from Section 513 of Title V of the Social Security Act.

CDPH/MCAH expects to award 20 – 25 cooperative agreements to eligible and qualified applicants with the greatest capacity to achieve the program goals. Cooperative agreements will be for a three-year period (July 1, 2015 – June 30, 2018). CDPH/MCAH reserves the right to determine the level of funding to be awarded.

B. Funding Tiers

CA PREP funds will be awarded within tiers based on the countywide CASHNI (see [Appendix 1](#) for an explanation of the CASHNI and CASHNI scores by County and MSSA). Counties in Tier 1 have the highest countywide need and/or highest numbers of eligible youth, followed by Tier 2 and then 3. Applicants will be scored against other applicants within the same tier.

Funding levels will be within the funding ranges by tier described in Table 3. The amount awarded within the funding range will be determined by CDPH/MCAH based upon availability of funding, the applicant’s proposed budget, and CA PREP funding priorities.

Up to three awards may be made per county. The minimum award given to all applicants chosen for funding will be \$125,000.

Table 3: CA PREP Funding Tiers			
Tier	CASHNI Score	Eligible Counties	Funding Range
Tier 1	Greater than 5,000	Fresno, Kern, Los Angeles, Riverside, San Bernardino, San Diego, Tulare	\$125,000 to \$400,000
Tier 2	1,000 – 4,995	Alameda, Contra Costa, Imperial, Kings, Madera, Merced, Monterey, Orange, Sacramento, San Joaquin, Santa Barbara, Santa Clara, Stanislaus, Ventura	\$125,000 to \$250,000
Tier 3	400 – 995	Butte, Lake, Humboldt, Mendocino, San Francisco, San Mateo, Santa Cruz, Shasta, Solano, Sonoma, Sutter, Tehama, Yuba	\$125,000 to \$150,000

C. Use of Funds

The funds awarded through this RFA are specifically for the purpose of this project and may not be used for any other program activities that are not defined in the CA PREP RFA.

Funds may not be used to:

1. Reimburse costs incurred prior to effective date of the agreement.
2. Reimburse costs currently covered by another CDPH grant or contract.
3. Reimburse costs that are not consistent or allowable according to local, state, and/or federal guidelines and regulations.
4. Supplant state or local health department funds.
5. Provide direct medical care.
6. Reimburse membership dues.
7. Reimburse subscriptions.
8. Reimburse professional licensure.
9. Reimburse malpractice insurance.

PART IV. PROGRAM NARRATIVE

Applicants should provide a detailed narrative describing the need for CA PREP services in their area and their capacity and plan for effectively reaching high-need youth. Applications will be scored based on adequacy, thoroughness, and the degree to which it complies with the RFA requirements and meets CDPH/MCAH program needs as described in the RFA. Points for each program narrative component described below will be based on the following scoring system:

Table 4: Point Scoring System		
Points	Interpretation	General Basis for Point Assignment
0	Inadequate	Response (i.e. content and/or explanation offered) is inadequate or does not meet CDPH/MCAH’s needs/requirements or expectations. The omission(s), flaw(s), or defect(s) are significant and unacceptable.
1-20	Barely Adequate	Response is barely adequate or barely meets CDPH/MCAH’s needs/requirements or expectations. The omission(s), flaw(s), or defect(s), are inconsequential and acceptable.
21-40	Fully Adequate	Response is fully adequate or fully meets CDPH/MCAH’s needs/requirements or expectations. The omission(s), flaw(s), or defect(s), if any, are inconsequential and acceptable.
41-60	Excellent or Outstanding	Response is above average or exceeds CDPH/MCAH’s needs/requirements or expectations. Minimal weaknesses are acceptable. Applicant offers one or more enhancing features, methods or approaches that will enable performance to exceed our base expectations.

Weighting of application scores by section are as follows:

- 1. Background, Agency Experience, and Organizational Capacity 15%**
- 2. Implementation Plan 50%**
- 3. Community Engagement 15%**
- 4. Clinical Linkages 15%**
- 5. Budget Detail and Justification 5%**

A. Program Narrative Instructions

Please note that all applicants selected for award will work collaboratively with their CDPH/MCAH Program Consultant prior to the start of the cooperative agreement to ensure the

feasibility and success of their CA PREP activities, including revising proposed activities, if needed.

1. Background, Agency Experience, and Organizational Capacity (15%)

- Describe local trends in adolescent birth rates, STI/HIV rates, and past and present adolescent pregnancy prevention efforts, using citations where appropriate.
- Highlight high-needs populations, health disparities, and any other geographic/demographic (e.g., rural/urban, major industries) information relevant to the RFA.
- Address whether the population(s) the applicant plans to serve is currently served by other sexual health education programs in the applicant's county.
- **Clearly indicate how many years of experience the applicant has with regard to adolescent pregnancy and/or STI/HIV prevention efforts, evidence-based program models, and data collection and reporting as described in Part II. A, Minimum Requirements.**
- See [Appendix 1](#) for adolescent sexual health data resources to help support writing of this section.
- Address staff capacity and experience, organizational structure, and the organization's ties to the community and other local youth-serving agencies.

Word limit: 2,000 words. Required attachments: none. Optional attachments: [Attachment 4](#), Organization Chart and Resumes.

2. Implementation Plan (50%)

- Include: 1) explanation of and rationale for selected target population(s) and setting(s); 2) proposed EBPM and implementation schedule; 3) proposed staffing; and 4) proposed number of youth to reach annually and cost per youth.
- If proposing more than one setting or EBPM (e.g., one plan for alternative schools and one for juvenile justice), include separate descriptions for each plan as applicable.
- The implementation plan should include all details needed to understand the applicant's planned CA PREP activities.
- Use [Appendix 5](#), the CA PREP Scope of Work, to inform planning for this section.

Guidance for completing the implementation plan:

- A. Target Population(s) and Setting(s):** Use the categories in the Program Requirements section to describe selected target population(s). Include the setting(s) where the applicant proposes to reach the target

population(s) (e.g., foster care group home, alternative school, juvenile justice facility). Briefly explain why the selected target population is in need of CA PREP services, and how the participants might benefit from the program.

B. EBPM and Implementation Schedule: Tables 1 and 2 in Appendix 2, EBPM Resources, should be used to inform the applicant’s proposal in this section. This section should address:

- Proposed EBPM(s);
- Proposed implementation schedule;
- Anticipated facilitator to student ratio;
- Anticipated cohort sizes;
- Approximately how many cohorts will be delivered annually;
- Plans to incorporate adulthood preparation subjects into implementation;
- How the EBPM(s) and implementation schedule(s) will best serve the needs of the target population(s) and fit with the setting(s);
- How the evidence from the chosen program model(s) supports the applicant’s goals and selection of target population; and
- Any other details needed to fully describe the applicant’s implementation plan.

If proposing a different curriculum in addition to one of the five approved CA PREP EBPMs, please include a separate implementation plan for the additional curriculum, along with:

- Information on the content, length, typical class size and facilitator requirements of the program model;
- Why, how, and when the curriculum was developed;
- Whether the curriculum is evidence-based, evidence-informed, or neither;
- Whether it has been reviewed for and/or meets the California Health & Safety and Education Code requirements; and
- Any other relevant information to help CDPH/MCAH consider the proposed program model.

C. Proposed Staffing Structure: Please include number and classification of proposed program staff positions, including project director, project coordinator, and facilitator(s). Address the proposed structure of supervision and staff support, and how staffing will support optimal delivery of CA PREP services. Staffing will vary by program size. Across all programs, reviewers will look for adequate supervisory staff time (project

director and/or project coordinator) to support facilitators and provide coordination to community outreach and clinical linkage activities, and the proposed number and FTE percentage of facilitators. CDPH/MCAH highly recommends planning for PREP facilitators to have all or most of their FTE percentage devoted to PREP (i.e., not split across multiple projects), so they can implement regularly and build skill and comfort with delivering the curricula. The expectation at the minimum funding level (\$125,000) is at least one full-time facilitator and one project coordinator at no less than 25% FTE.

D. Reach Numbers and Cost Per Youth: The numbers from the proposed implementation schedule above, along with Tables 1 and 2 in [Appendix 2](#), will help applicants to propose their annual reach and cost per youth. To find the annual reach, first multiply the anticipated number of cohorts per year by the expected number of youth per cohort. Then account for the likely attrition rate for the proposed EBPM and schedule (see Table 2 in [Appendix 2](#)) to find the anticipated number of participants completing the program per year. The number of participants who complete the program per year is the anticipated annual reach. Cost per youth can be determined by dividing the total annual funding amount requested by the annual reach. The annual funding amount is the total proposed in [Attachment 5](#), the Budget Template.

For example:

The calculations for an agency planning to implement Be Proud! Be Responsible! in 3 or more sessions in a foster care setting might appear as follows:

32	<i>Anticipated cohorts per year</i>
x	
13	<i>Average cohort size (# of participants)</i>
= 416	<i>Youth who begin the program</i>
x	
83.1%	<i>Retention rate</i>
= 346	<i>Annual reach (youth completing the program each year)</i>
\$200,000	<i>Total funding requested</i>
÷	
346	<i>Annual reach</i>
= \$578	<i>Cost per youth</i>

In FY 2013-2014, the average cost per youth across CA PREP agencies was approximately \$400. Exact numbers varied by agency depending on EBPM, setting, target population, and county population size. Agencies will not receive higher scores for a lower cost per youth, but cost per youth should not exceed \$750.

Reviewers will look for the following when assigning points to this section:

- PREP services are targeted to the highest-needs youth in the county/MSSA.
- The selected EBPM(s) and implementation schedule(s) are appropriate and likely to be effective for the target population(s).
- With regard to adulthood preparation subjects, activities are proposed beyond what is required. For example, adding activities on healthy relationships before or after EBPM implementation.
- The annual reach number is both adequate and feasible given the population of eligible youth in the applicant's county and the applicant's proposed implementation plan.

Word limit: 1,000 words for each plan. Required attachments: none.

3. Plan for Community Outreach (15%)

- Include: the needs of the community around adolescent sexual and reproductive health as identified by key stakeholders; plans to address the requirement to develop and/or maintain a Local Stakeholder Coalition; and any additional community outreach efforts the applicant wishes to propose.
- Applicants proposing new strategies and activities around community outreach may receive higher scores for this section.
- Include a roster of current and/or potential members for your local stakeholder coalition, and three to five letters of support. Letters of support from the following entities are required: one or more local Family PACT providers (see Section 4. Plan for Clinical Linkages below); the local Maternal, Child and Adolescent Health Director or his/her public health designee; a representative from a current or potential CA PREP service delivery site that serves your target population(s), addressing willingness to support CA PREP implementation, including evaluation requirements.

Word limit: 500 words. Required attachments: [Attachment 6](#), Local Stakeholder Coalition Roster and [Attachment 7](#), Local Stakeholder Coalition Letters of Support

4. Plan for Clinical Linkages (15%)

- Describe the applicant's relationship and history of partnering with local Family PACT and other teen-friendly reproductive health service providers, and explain

the applicant's plan for creating links between CA PREP implementation and access to Family PACT services.

- Applicants are also encouraged to propose additional activities to promote use and awareness of teen-friendly reproductive health services in their community.
- **The Family PACT provider letter of support, required above in Section 3, should address willingness to partner with CA PREP on proposed activities.**

Word limit: 500 words. Required attachments: none.

5. Budget Detail and Justification (5%)

- Complete a budget template for each contract year (FY 15-16, FY 16-17, FY 17-18).
- Applicants may, but are not required to, attach a written budget justification beyond the descriptions included in the template if more explanation is needed.
- If proposing a program model outside of the five approved CA PREP EBPMs, please submit a budget proposal only for the chosen approved EBPMs; applicants may also submit budget templates for the additional proposed program model, but it is not required. The budget can be revised as needed after CDPH/MCAH reviews the proposed curricula and determines whether it may be used for CA PREP implementation.
- Please see Part IX. D, Operating Expenses, for more information on creating the budget proposal.

Word limit: 500 words for each year (optional). Required Attachments: [Attachment 5](#), Budget template (three templates: Years 15-16, 16-17, and 17-18.)

PART V. APPLICATION REQUIREMENTS AND INFORMATION

A. Key Action Dates

CDPH/MCAH reserves the right to adjust any date and/or time as necessary. Date and time adjustments will be posted on the [CDPH/MCAH CA PREP webpage](#). It is the applicant's responsibility to check the website frequently.

Table 5: Key Action Dates		
Event	Date	Time, if applicable
RFA Release	December 1, 2014	
Deadline to Submit RFA Questions Submit via e-mail at: PREP_RFA@cdph.ca.gov Subject Line: CA PREP RFA Questions	December 10, 2014	5:00 PM
Q&A Responses Published	December 18, 2014	
Voluntary Letter of Intent (Attachment 3)	January 5, 2015	5:00 PM
Application Due	January 21, 2015	5:00 PM
Public Notice of Intent to Award	March 6, 2015	
Dispute Filing	March 13, 2015	5:00 PM
Cooperative Agreements Commence	July 1, 2015	

B. RFA Delivery Methods

Application packages must be **received or postmarked** by January 21, 2015. Applications that are emailed or faxed **WILL NOT BE ACCEPTED**. Applications received or postmarked after the date and time listed in the RFA Key Action Dates will be considered late and will not advance to the review process.

Applications must be labeled and submitted by U.S. Mail, Express Mail, or may be hand-delivered to CDPH/MCAH staff. U.S. Mail and Express Mail must be postmarked by the certifying carrier company by the RFA submission due date listed in the RFA Key Action Dates. Applications must be hand-delivered by the date and time listed in the RFA Key Action Dates. CDPH/MCAH is not responsible for delayed or lost mail or failure to submit a timely application.

Table 6: RFA Submission Delivery Methods		
U.S. Mail	Express Mail	Hand Delivery
ATTN: CA PREP RFA 15-10010 California Department of Public Health Maternal, Child and Adolescent Health Division P.O. Box 997420, MS 8305 Sacramento, CA 95899-7420	ATTN: CA PREP RFA 15-10010 California Department of Public Health Maternal, Child and Adolescent Health Division 1615 Capitol Avenue Suite 73.560, MS 8305 Sacramento, CA 95814	ATTN: CA PREP RFA 15-10010 California Department of Public Health Maternal, Child and Adolescent Health Division 1615 Capitol Avenue Suite 73.560, MS 8305 Sacramento, CA 95814 Telephone: 1-866-241-0395

C. RFA Questions

CDPH/MCAH will accept questions related to the RFA until the deadline to submit questions listed in the RFA Key Action Dates. Questions may include but are not limited to the services to be provided for the RFA and/or its accompanying materials, instructions, or requirements. All questions should include the name of the organization and the name of the individual submitting the question. Please submit a topic and reference the application page number or attachment/appendix number, if applicable, to the question.

Questions and answers will be posted on the CA PREP program website at <http://www.cdph.ca.gov/programs/mcah/Pages/CAPREP.aspx> under News, Hot Topics, & Updates. CDPH/MCAH reserves the right to seek clarification of any inquiry received, and to answer only questions considered relevant to this RFA. At its discretion, CDPH/MCAH may consolidate and/or paraphrase similar or related inquiries.

D. Voluntary Letter of Intent

General information

Prospective applicants are asked to voluntarily indicate their intention to submit an application. The Letter of Intent is not binding, but assists CDPH/MCAH in planning for the review process. Failure to submit a Letter of Intent will not affect the acceptance of any application. **Please use the Voluntary Letter of Intent ([Attachment 3](#)) for this purpose.**

Submission of a Letter of Intent

If the applicant chooses to submit the Voluntary Letter of Intent Form, it must be emailed to PREP_RFA@cdph.ca.gov by **5:00 PM on January 5, 2015**.

E. *Internet Access for RFA Documents and Addendums*

All documents related to this RFA can be downloaded from the [CDPH/MCAH CA PREP webpage](#). It is the applicant's responsibility to visit the CDPH/MCAH website on a regular basis for current postings and any addenda that may occur. This includes but is not limited to:

1. RFA Document
2. Attachments
3. Appendices
4. Exhibits, including sample forms
5. Cooperative Agreement Award Announcement
6. Important notifications concerning the RFA and process
7. Please send an email to PREP_RFA@cdph.ca.gov to report any problems with the CDPH/MCAH website or documents published.

F. *Instructions for Preparation and Submission of Applications*

General instructions

Follow all RFA instructions issued by CDPH/MCAH in the form of question and answer notices, clarification notices, or RFA addenda.

Arrange for the timely delivery of the application package(s) to the address specified in this RFA.

Submission Content

Submit one original application (paper copy with signatures) and one compact disc (CD) containing all application documents in electronic form.

Each application set must include the following:

- Application Cover Sheet ([Attachment 1](#))
- Application Checklist ([Attachment 2](#))
- Program Narrative, including components 1-5 as described in Part IV
- Optional Organization Chart and Resumes ([Attachment 4](#))
- Budget Templates ([Attachment 5](#))
- Local Stakeholder Coalition Roster ([Attachment 6](#))

- Local Stakeholder Coalition Letter of Support ([Attachment 7](#))
- Agency Information Form ([Attachment 8](#))
- IRS determination letter indicating nonprofit or 501(c)(3) status, if applicable.

Format Requirements

1. Use one-inch margins at the top, bottom, and both sides.
2. Use Calibri or Times New Roman 12 point font and 1.15 line spacing.
3. Print pages single-sided on white paper.
4. Sequentially paginate the pages in each application section.
5. Bind or staple the application in the upper left-hand corner in a way that enables easy page removal.

Submission Process

The person legally authorized to bind the applicant must sign each RFA attachment that requires a signature. RFA attachments that require a signature must be signed in blue ink. Signature stamps are not acceptable.

After completing and signing the applicable attachments, assemble them in the order shown above. Remember to place all originals in the application package marked “Original” and photocopies in other required application sets.

The RFA attachments and other documentation placed in the extra application sets may have photocopied signatures.

Mail or arrange for hand delivery of your application to the California Department of Public Health, Maternal, Child and Adolescent Health Division. **Applications may not be transmitted electronically by FAX or email.**

Applications must be postmarked or hand delivered by **5:00 p.m. on January 21, 2015**. Please note: Late applications will not be reviewed or scored.

Applicant Costs

Applicants are responsible for all costs of developing and submitting an application. Such costs cannot be charged to CDPH/MCAH or included in any cost element of an applicant’s proposed budget.

Applicant Warning

CDPH's internal processing of U.S. mail may add 48 hours or more to the delivery time.

Consider using certified or registered mail and request a receipt upon delivery. If hand delivery is chosen, allow sufficient time to locate on-street metered parking and to sign in at the security desk. Be prepared to give security personnel the main CDPH/MCAH telephone number, 1(866)-241-0395.

PART VI. REVIEW INFORMATION

A. Evaluation and Selection

First Stage

Applicants must meet the eligibility criteria in the Eligibility Information section in order to enter the evaluation process. Please see Part I. C, Program Description, for a list of eligible counties.

Second Stage

Evaluation of the application will be based on the extent to which the elements in the narrative are developed. Refer to the scoring table in Part IV, Program Narrative.

B. Procurement Requirements and Information

Non-responsive applications:

In addition to any condition previously indicated in this RFA, the following occurrences **may** cause CDPH/MCAH to deem an application non-responsive.

1. If an applicant submits an application that is materially incomplete or contains material defects, alterations or irregularities of any kind.
2. If an applicant supplies false, inaccurate or misleading information or falsely certifies compliance on any RFA attachment.
3. If CDPH/MCAH discovers, at any stage of the selection process or upon Agreement award, that the applicant is unwilling or unable to comply with the contractual terms, conditions and exhibits cited in this RFA or the resulting agreement.

PART VII. AWARD ADMINISTRATION INFORMATION

A. *Notice of Awards*

Upon successful completion of the review process, CDPH/MCAH will post a notice of intent to award funds at <http://www.cdph.ca.gov/programs/mcah/Pages/CAPREP.aspx>. Note: the term of the resulting cooperative agreements is expected to be 36 months and is anticipated to be effective from July 1, 2015 through June 30, 2018, contingent on continued federal allocations of funding. The agreement term may change if CDPH/MCAH cannot execute the agreement in a timely manner due to unforeseen delays. The resulting cooperative agreements will not be in force or effect until signed by both parties. The applicant is cautioned not to commence performance until all approvals are obtained. Should performance commence before all approvals are obtained, said services may be considered to have been volunteered. Upon written request to CDPH/MCAH, applicants will receive their review rating sheet.

After any disputes are resolved, CDPH/MCAH will formally notify the successful applicants individually in writing.

B. *Dispute Process*

There is no dispute appeal process for late or substantially incomplete applications (i.e., applications failing to pass first stage are not eligible for the Dispute Process). Only non-funded applicants that comply with the RFA instructions may file a dispute. Disputes are limited to the grounds that CDPH/MCAH failed to correctly apply the standards for reviewing applications in accordance with this RFA. Disagreements with the content of the review committee's evaluation are not grounds for dispute. Applicants may not dispute solely on the basis of funding amount. Only timely and complete disputes that comply with the dispute process stated herein will be considered.

The written appeal shall fully identify the issue(s) in dispute, the practice that the applicant believes CDPH/MCAH has improperly applied in making its award decision(s), the legal authority or other basis for the applicant's position, and the remedy sought. Written disputes to CDPH/MCAH final award selections shall be received by CDPH/MCAH no later than 5:00 p.m. on March 13, 2015. Submit a written dispute signed by an authorized representative of the organization. Label and submit the dispute using one of the following methods:

Table 7: Dispute Submission Methods	
U.S. Mail	Hand Delivery or Overnight Express
ATTN: Dispute CA PREP RFA California Department of Public Health Maternal, Child and Adolescent Health Division P.O. Box 997420, MS Code 8305 Sacramento, CA 95899-7420	ATTN: Dispute CA PREP RFA California Department of Public Health Maternal, Child and Adolescent Health Division 1615 Capitol Avenue, Suite 73.560, MS 8305 Sacramento, CA 95814

NOTE: Applicants hand delivering a dispute must have the building lobby security officer call CDPH/MCAH at 1-866-241-0395 between 8:00 AM and 5:00 PM and ask to have a CDPH/MCAH representative receive the document. CDPH/MCAH will provide a proof of receipt at the time of delivery.

The Chief of CDPH/MCAH or her designee shall review each timely and complete dispute and will resolve the dispute by considering the contents of the written dispute letter. At its sole discretion, CDPH/MCAH reserves the right to collect additional facts or information to aid in the resolution of any dispute.

The decision of the hearing officer shall be final and there will be no further administrative appeal. Applicant will be notified of the decisions regarding their disputes in writing within 15 working days of the written dispute letter.

C. *Disposition of Applications*

All materials submitted in response to this RFA will become the property of the California Department of Public Health and, as such, are subject to the Public Records Act (PRA), Government Code, Section 6250 et seq. CDPH/MCAH will disregard any language purporting to render all or portions of any application confidential.

Upon posting of Public Notice of Intent to Award, all documents submitted in response to this RFA and all documents used in the selection process will be regarded as public records under the California PRA and subject to review by the public. Applicant’s correspondence, selection working papers, or any other medium shall be held in the strictest confidence until the Award Notice is issued and/or posted.

D. *Inspecting or Obtaining Copies of Applications*

Any person or member of the public can inspect or obtain copies of any application materials. Please follow the instructions per the PRA.

E. CDPH/MCAH Rights

CDPH/MCAH reserves the right to do any of the following up to the application submission deadline:

1. Modify any date or deadline appearing in this RFA or the RFA Time Schedule.
2. Issue clarification notices, addenda, alternate RFA instructions, forms, etc.
3. Waive any RFA requirement or instruction for all applicants if CDPH determines that a requirement or instruction was unnecessary, erroneous or unreasonable.
4. Allow Applicants to submit questions about any RFA change, correction, or addenda.
5. If this RFA is corrected, clarified, or modified, CDPH intends to post all clarification notices and/or RFA addenda at the following Internet Web address:
<http://www.cdph.ca.gov/programs/mcah/Pages/CAPREP.aspx>

CDPH/MCAH reserves the right at its sole discretion to take any of the actions described below. These actions may be initiated at the onset of various events including but not limited to a determination that an insufficient number of applications are responsive, additional funding is identified, anticipated funding decreases, geographic service coverage is insufficient, applicant's funding needs exceed available funding, etc.

1. Offer agreement modifications or amendments to funded organizations for increased or decreased services and/or increased/decreased funding following successful negotiations.
2. Extend the term of any resulting agreement and alter the funding amount.

CDPH/MCAH reserves the right to remedy errors caused by:

1. CDPH/MCAH office equipment malfunctions or negligence by applicant staff.
2. Natural disasters (e.g., floods, fires, earthquakes).

F. Agreement amendments after award

CDPH/MCAH reserves the right to amend any agreement resulting from this RFA. Amendments may include term extensions, CA PREP Scope of Work modifications, budget or funding alterations, etc.

G. Staffing changes after award

CDPH/MCAH reserves the right to approve or disapprove changes in key personnel that occur after awards are made.

Please note: The issuance of this RFA does not constitute a commitment by CDPH/MCAH to make an award. CDPH/MCAH reserves the right to reject all applications and to cancel this RFA if CDPH/MCAH determines it is in the best interest to do so.

H. Federal Certification Clauses

The Applicant certifies to the best of its knowledge and belief, that it and its principals:

1. Are not presently debarred, suspended, proposed for debarment, declared in-eligible, or voluntarily excluded by any federal department or agency.
2. Have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or local) transaction or Agreement under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property.
3. Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses enumerated in paragraph 2 of this certification.
4. Have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or local) terminated for cause or default.
5. It shall not knowingly enter into any lower tier covered transaction with a person who is proposed for debarment under 48 CFR part 9, subpart 9.4, debarred, suspended, declared ineligible, or voluntarily excluded from participation in such transaction, unless authorized by the State.
6. It will include a clause entitled "Debarment and Suspension Certification" that essentially sets forth the provisions herein, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
7. If the Applicant is unable to certify to any of the statements in this certification, the Agreement shall submit an explanation to the program funding this contract.

I. Contractual Terms and Conditions

Each funded Applicant must enter into a written agreement that may contain portions of the Applicant's application (e.g., Budget, CA PREP Scope of Work). If an inconsistency or conflict arises between the terms and conditions appearing in the final agreement and the proposed terms and conditions appearing in this RFA, any inconsistency or conflict will be resolved by giving precedence to the final agreement.

PART VIII. ADMINISTRATIVE REQUIREMENTS

This section outlines CA PREP administrative requirements. Awardees must be familiar with these requirements prior to entering into a contract with the CDPH/MCAH, and meet the requirements throughout the contract term. The Contract will include all administrative and program requirements.

A. *Standard Payroll and Fiscal Documents*

Awardees shall maintain adequate employee time recording documents (e.g., timesheets, time cards, and payroll schedules) and fiscal documents based on Generally Accepted Accounting Principles (GAAP) or practices, Code of Federal Regulations, and OMB Circular Nos. A-87, A-110, A-122, and A-133.17. It is the responsibility of the awardee to adhere to these regulations.

B. *Use of Funds*

Funds from this contract are restricted to the support of CA PREP activities only.

Allowed Activities

Funds may be used to pay for salaries and benefits of CA PREP program staff, meeting expenses, travel for program and training purposes, EBPMs and standardized APS curricula, outreach materials, postage, supplies, rent, equipment, software, and telephone expenses.

Funds may be used for incentives for CA PREP participants with limitations. Limitations include:

- Gift certificates/cards are allowed if their use supports the CA PREP program. An agreement with the vendor must be made indicating that any unredeemed value will be returned to the awardee within an agreed upon and reasonable timeframe. Gift certificates/cards must only be distributed to CA PREP participants on a one-time basis with a total value not to exceed \$20 per participant per year.
- Food is allowed but must be a reasonable expense for CA PREP participants. A reasonable expense would be considered refreshments at a cost of no more than \$2 - \$5 per participant per day of implementation (regardless of number of sessions held on that day).
- Recreational activities are allowed but must be a reasonable one-time expense for CA PREP participants with a total value not to exceed \$20 per participant per year.
- Cash is not an allowable incentive.

Disallowed Activities

CA PREP funding may not be used for any of the following:

- Support of religious activities, including but not limited to, religious instruction, worship, prayer, or proselytizing
- Purchase or improvement of land, or building alterations, renovations or construction
- Fundraising activities
- Political education or lobbying
- Supplanting or replacing current public or private funding
- Supplanting usual activities of any organization involved with CA PREP
- Reimbursement of pre-award costs
- Support of planning efforts and other activities associated with the development and submission of the CA PREP RFA application

C. *Deliverables-Based Contract*

Contracts awarded as a result of this RFA will be deliverables-based. Deliverables must be completed in accordance with details outlined in the Scope of Work and in the contract. Deliverables must be approved by CDPH/MCAH before a contract payment will be authorized. Payments may be reduced or adjusted for incomplete and/or unapproved deliverables. The CDPH/MCAH may withhold payment for failure to complete deliverables and/or non-compliance with contract requirements.

D. *Quarterly Invoices*

Awardees will submit invoices each quarter. CDPH/MCAH will provide additional information about payments and invoicing upon execution of the contract.

E. *Interpretation of Contact/Captions/Word Usage*

Unless the context of this CA PREP contract clearly requires otherwise, words used in the singular include the plural and the plural includes the singular number; the masculine, feminine and other neutral genders shall each be deemed to include the others; “shall,” “must,” “will,” or “agrees” are mandatory, and “may” is permissive; “or” *is not exclusive*; and “includes” and “including” *are not limiting*.

F. Contract Terms and Conditions

Exhibits

Awardees shall enter into a Contract that will contain standard contract provisions and exhibits. CDPH/MCAH reserves the right to substitute the latest version of any form or exhibit.

An awardee's unwillingness or inability to agree to the terms and conditions of the Contract may cause the CDPH/MCAH to deem an awardee non-responsive and ineligible. The CDPH/MCAH will not accept alterations to the contract language.

Prior to and during contract negotiations, awardees may be required to submit additional information to meet the CDPH/MCAH requirements.

G. Additional Requirements

1. CDPH/MCAH requires the use of the internet, electronic mail, scanning equipment, telephones, and computers with current versions of Adobe and the Microsoft Office suite (Word, Excel, Access and PowerPoint). Additional technology may be required during the contract period.
2. Awardees must obtain prior approval from CDPH/MCAH to participate in data collection or research studies using CA PREP data for purposes other than the requirements of the Contract.
3. Awardees must begin CA PREP activities immediately upon contract execution. During the entire contract term, awardees are expected to continue CA PREP services in accordance with the Contract.
4. Awardees shall be able to cover at least 90 days' worth of CA PREP expenses prior to reimbursement by the State.
5. Awardees automatically grant the State a royalty-free, unrestricted, and irrevocable license throughout the world to reproduce, prepare derivative works, distribute, use, duplicate or dispose of all products. This includes material and data that are collected, created and fixed in any medium of expression, produced, developed or delivered and paid for under the Contract for governmental purposes, and to have or permit others to do so. The provisions set forth herein shall survive the termination or expiration of the Contract or any project schedule. (See [Appendix 6](#), Exhibit D (F), Provision 10).
6. Awardees will not be permitted to use abstinence-only, abstinence only-until-marriage, and fear-based instructions, activities and/or curricula.

H. Subcontractor Agreements

CDPH/MCAH requires awardees to provide CA PREP services directly to the public. The use of subcontractors, consultants, or any other non-employee for CA PREP services is not permitted.

PART IX. CONTRACT BUDGET AND JUSTIFICATION

The California Department of Public Health, Maternal, Child and Adolescent Division posted this Cooperative Agreement RFA to solicit applications to fund the implementation of California’s Personal Responsibility and Education Program (CA PREP).

CDPH/MCAH will be requiring a standard five (5) line budget. In order to facilitate continued availability of federal funds, CDPH/MCAH is implementing an accountability process for the contract that is deliverables-based. This process requires that deliverables be completed in accordance with details and due dates outlined in the final Scope of Work. Submitted deliverables must be approved by the CDPH/MCAH before a contract payment will be authorized. Payments may be reduced or adjusted for incomplete and/or unapproved deliverables.

Applicants must submit a five (5) line item budget for each term within the Contract:

Table 8: Contract Budget Terms	
July 1, 2015 – June 30, 2016	Contract Term 1
July 1, 2016 – June 30, 2017	Contract Term 2
July 1, 2017 – June 30, 2018	Contract Term 3

A. Budget Template

The CA PREP Applicant Budget Template ([Attachment 5](#)) contains three worksheets.

The “Budget Instructions” worksheet (first tab) contains instructions on how to complete the Budget Attachments.

The “Budget Detail and Justification” worksheet (second tab) shall be used to enter specific cost breakdowns for each budget line item. Completion of the second tab will automatically populate the “Original Budget Summary Page” (third tab).

Use whole dollars only when entering costs into the budget templates. Round fractional dollar amounts or cents to the nearest whole dollar amount.

B. Budget Line Items

The five (5) budget line items are: 1) Personnel & Fringe Benefits 2), Operating Expenses, 3) Capital Expense, 4) Other Costs, and 5) Indirect Costs.

C. Personnel & Fringe Benefits

Personnel Costs

Include the following information under “Detail and Justification of Expense” to explain the reasonableness and/or necessity of the proposed budgeted costs appearing on the Budget Template. Include wage and/or salary details and justifications, including, but not limited to:

The annual salary rate or range for each position/classification, and how salary rates or ranges were determined. Note: Awardee staff salaries (paid for with CA PREP funds) shall not exceed rates paid to State Civil Service personnel performing comparable work. CDPH reserves the right to limit salary reimbursement to levels that are comparable to those of Civil Service employees. For more information on Civil Service classifications and pay scales, refer to: www.dpa.ca.gov.

Explain any cost of living, merit or other salary adjustments that are included in the personnel line item. Explain how the amount of each adjustment was determined and explain the frequency or interval at which the adjustment is to be granted. This only applies if you included merit increases, cost of living, or other salary adjustments in the personnel expense line item.

For each funded position title or classification performing CA PREP activities, do not combine multiple staff on the same line. Each position must be on a separate line.

The FTE or annual percentage of time for each position should be expressed as follows: full time [40 hours a week] = 1.0, 1/2 time = 0.50, 3/4 time = 0.75, 1/4 time = 0.25).

Fringe Benefits

Identify and/or explain the expenses that make up fringe benefit costs. Typical fringe benefit costs can include employer-paid social security, worker’s compensation insurance; unemployment insurance, health, dental, vision and/or life insurance, disability insurance, pension plan/retirement benefits, etc. Accrued vacation and severance pay paid to employees upon termination is not an allowed fringe benefit.

Only personnel who are employed by the organization and receive fringe benefits are to be included. If applicable, identify any positions that receive different benefit levels.

Display fringe benefit costs using an average fringe benefit rate (see Budget Template for details).

D. Operating Expenses

General Expense

This category includes all general costs of the operation of the CA PREP Program. Examples of such expenses are office supplies, telephone, postage, photocopying of program materials and other consumable operating supplies.

Travel and Training

Travel costs consist of mileage, airfare, per diem, lodging, parking, toll bridge fees, taxicab fares and car rental. The amount of the mileage reimbursement includes all costs of operating the vehicle.

The agency shall utilize the lowest available cost method of travel. Exhibit G of the CA PREP Contract will include additional information on reimbursable costs.

Indicate the total cost for travel expenses for program. The money budgeted for travel shall be for expenses related to the administration of the program. The travel line item in the budget shall include only the costs specifically related to the staff activities, such as travel to attend conferences and trainings.

Applicants must include a sufficient expense allocation for the meetings and trainings outlined below:

- FY 15-16: One orientation meeting in Sacramento, 1-2 days, for all CA PREP staff.
- Annually: Two in-person regional collaborative meetings, 1 day, for all CA PREP staff.
- Annually: At least one in-person EBPM training, 2-3 days, required for all CA PREP facilitators and strongly encouraged for project directors/coordinators and other staff. (If implementing more than one program model, budget accordingly.)
- FY 16-17: One in-person meeting, 2-3 days, for all CA PREP staff.
- Optional trainings to build staff capacity (e.g., the California Family Health Council's Family Planning Health Worker Course, trainings to implement healthy relationships curricula, etc.)

For budget planning purposes, assume trainings and meetings will be held in Sacramento or the Bay Area and will have a registration cost of approximately \$150.00 per training/meeting.

The cost for client/participant related transportation must not be included here; instead, add all participant-related costs to the Line Item 4 – Other Costs.

Space Rent/Lease

The cost of renting or leasing office space shall designate the total square feet and the cost per square foot. Under state standards, it is permissible to reimburse up to a maximum of 200 square feet of office space per FTE. Please use the following formula to calculate rent/lease costs. Total staff FTE's x 200 sq. ft. x up to \$2.00 per sq. ft. x 12 months.

Note: The cost for renting classroom or meeting space (e.g., at a community or youth center) is allowable but should be prorated to the time of actual use (this expense is budgeted under the Other Costs section).

Audit Costs

The cost of the mandatory financial audit by an independent auditor at the end of each fiscal year shall be included in the budget. Not more than \$3,000 shall be allocated for this line item (See [Appendix 6](#), Exhibit D (F), provision 7).

Communication /Software

CDPH/MCAH requires the use of the internet, electronic mail (Outlook), scanning equipment, telephones, and computers with current versions of Adobe and the Microsoft Office suite (Word, Excel, Access and PowerPoint). Additional technology may be required during the contract period. Examples of software include: Software license fees, software upgrades, etc.

- a. Awardee shall possess current technology to allow for easy flow of communication between the Awardee and CDPH/MCAH such as sending e-mails with large attachments. Awardee must have the ability to access, print and download website information such as files from the CDPH/MCAH website.
- b. All software purchased with CDPH/MCAH funds shall meet or exceed the state standards established by CDPH, available at the following link:
<http://cdphintranet/technology/Documents/OfficeAutomationHardwareSoftwareStandards2012-12-20.pdf>

If applicable, enter \$0 if no operating expenses will be incurred. However, an explanation must be included that describes how the operating needs of the program will be met.

Equipment

Rented equipment shall be budgeted separately in line item three, "Operating Costs." Lease-purchase agreements or options are prohibited.

Minor Equipment is defined as a tangible item with a base unit cost of less than \$5,000, has a life expectancy of one (1) year or more and is purchased or reimbursed with state funds.

Examples of equipment under \$5,000 include computers, printers, etc. (See [Appendix 6](#), Exhibit D (F), Provision 3, a, 2).

E. Capital Expense

Major Equipment is defined as a tangible or intangible item with a base unit cost of \$5,000 or more and a life expectancy of one (1) year or more that is purchased or reimbursed with agreement funds. Major equipment is budgeted under Operating Expenditures category as an individual line item (See [Appendix 6](#), Exhibit D (F), Provision 3, a, 1).

F. Other Costs

Other Costs: Costs that are associated with project participants.

Participant Transportation: Costs directly related to transporting program clients (e.g., bus passes/tokens, bus rental).

Itemize each additional expense line item making up the "Other Costs" and explain why each expense is necessary. Also, explain how the value of each expense was determined. If you offer any services or deliverables on a lump sum or fixed-price basis, please explain how you determine the price or cost.

1. Indicate any direct program expenses that do not clearly fit into the other budget line items. Such costs may include, but are not limited to, costs for items unique to outreach and program development.
2. If any service, product, or deliverable will be provided on a fixed price or lump sum basis, name the items and/or deliverable and indicate "fixed price" or "lump sum" next to the item along with the price or fee.
3. If applicable, enter \$0.

Participant Training: Registration/tuition and material costs directly related to participants.

G. Indirect Costs

Indirect costs include costs that accrue in the normal course of business that can only be partially attributable to performance of a contract (e.g., administrative expenses such as payroll

handling, accounting/personnel expenses, liability insurance coverage, janitorial expenses, security expenses, legal representation, equipment maintenance, Executive Director's time, etc.).

- a. These are costs that a business would accrue even if they were not performing services for the State under a contract.
- b. Specify Indirect cost as 15% of the total personnel including benefits, if not applicable enter \$0.

Applicants may include any other information that will assist CDPH/MCAH to understand how costs were determined and why they are reasonable, justified, and/or competitive. Include explanations for any/all unusually high or disproportionate costs. For example, if this contract is to fund a disproportionately high portion of the organization's indirect (overhead) costs, please provide a justification for the proposed allocation method.

PART X. ACRONYMS

Acronym	Definition
APS	Adulthood Preparation Subjects
ASHWG	Adolescent Sexual Health Workgroup
CASHNI	California Adolescent Sexual Health Needs Index
CDPH/MCAH	California Department of Public Health Maternal, Child and Adolescent Health
CA PREP	California Personal Responsibility Education Program
EBPM	Evidence-Based Program Model
FTE	Full Time Employee
FYSB	Family and Youth Services Bureau
HHS	US Department of Health and Human Services
HIV/AIDS	Human Immunodeficiency Virus and Acquired Immune Deficiency Syndrome
LARC	Long Acting Reversible Contraception
LGBTQ	Lesbian, Gay, Bisexual, Transgender or Questioning
LSC	Local Stakeholder Coalition
MSSA	Medical Service Study Area
OMB	Office of Management and Budget
RFA	Request for Application
STI	Sexually Transmitted Infection

PART XI. REFERENCES

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⁶ The National Campaign to Prevent Teen and Unplanned Pregnancy. Science Says: Foster Care Youth. Number 27; August 2006. Retrieved July 28, 2014 from: http://www.thenationalcampaign.org/resources/pdf/SS/SS27_FosterCare.pdf

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