

ADDENDUM # 3

November 9, 2023

RFA # 20400/ Grants Gateway # DOH01-SRAE01-2024

New York State Department of Health
*Center for Community Health/Division of Family Health/
Bureau of Perinatal, Reproductive and Sexual Health*

Request for Applications
Sexual Risk Avoidance Education Program

Extension to RFA Submission Deadline

The New York State Department of Health has extended the Sexual Risk Avoidance Education Program RFA submission deadline to **Tuesday, November 14, 2023 at 4:00 PM**.

If you have already submitted your application, and wish to change your answers for any reason, please email grantsgateway@its.ny.gov. In the email, request that your grant application be reopened. Please provide the organization's name and the application number and state, "I acknowledge that it is my responsibility to re-submit the application prior to the new deadline." Your application will then be reopened, and you can work on any portion of your application. Please note that once an application is reopened, you must resubmit your application by **Tuesday, November 14, 2023 at 4:00 PM** in order to be eligible for funding under this RFA.

If you have already submitted your application and do not wish to change anything in your application, you do not need to take any further action.

Submission of applications in the New York State Grants Gateway must be completed by **Tuesday, November 14, 2023 at 4:00 PM** to be eligible for consideration. Late applications cannot be accepted.

Addendum #2

RFA # 20400/ Grants Gateway # DOH01-SRAE01-2024

New York State Department of Health

Center for Community Health/Division of Family Health/ Bureau of Perinatal, Reproductive and Sexual Health

Request for Applications

Sexual Risk Avoidance Education

10/26/2023

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

1. Section III.B. Component 1:

Education on sexual risk avoidance must ensure that it is unambiguous and has primary emphasis and context for youth that normalizes the optimal health behavior of avoiding premarital sexual activity. **is medically accurate and complete.**

2. Section V.A.8. Budget and Staffing Plan:

Applicants are instructed to complete the budget template in the NYS Grants Gateway. Refer to the Grants Gateway Budget Instructions (Attachment 12), and Grants Gateway Budget Data Entry Guidelines (Attachment 13), **and SRAE BPRASH Budget Guidance (Attachment 16).**

3. Section VI. Attachments

Attachment 12: Grants Gateway Budget Instructions* **(Revised 10/26/2023)**

Attachment 13: Grants Gateway Budget Data Entry Guideline* **(Revised 10/26/2023)**

Attachment 14: Vendor Contact Form*

Attachment 15: Subcontractor Information Form (if applicable)*

Attachment 16: SRAE BPRASH Budget Guidance

4. Attachment 12

- ~~• A minimum of 15% of the total award amount must be allocated toward Non-Personal Expenses.~~
- ~~• Line item detail of funds (either grant or in-kind) used to support the purchase of Contraceptive supplies. This should be included in the narrative justification under NPS "Operating Expenses" and include the cost per unit multiplied by the~~

~~total number of units purchased. The acquisition cost for all contraceptives must reflect current 340B costs.~~

- ~~• Advertising/Marketing Expenses, when supported with grant funding, must include line item detail for the expense, a clear timeframe when ads/campaign will run, and a brief description of how efforts will be assessed (i.e. tracking patient calls, volume, website clicks) during specified time period. The justification must clearly state that all materials will be reviewed and approved by the I & E Committee.~~
- ~~• Funds can not be used to provide abortion or abortion related services.~~

5. Revised Attachment 12 is included.

6. Attachment 13

- Personal Services – Salary Narrative:** ~~The following positions are a required part of the FPP and must clearly be identified in the budget. These positions can be found in either Personal Services or Non Personal Services (when fulfilled through a contractual relationship) as appropriate. If one (or more) of these positions is not supported by grant funds, you must still include the narrative justification (including FTE percentage or line item detail) for the position in the appropriate narrative section. Positions required include: Program Director/Manager (who serves as primary FPP contact); Medical Director (who must have specific training/experience in reproductive health); Pharmacist or Pharmacy Consultant; Medical Records Specialist/Consultant; Health Educator.~~ Provide breakdown of Personal Services Salary here.
- Personal Services – Fringe Narrative:** Program Specific Instructions/Requirements. If additional space is needed from the justification section, specify here, the components (FICA, Health and Life Insurance, Unemployment Insurance, Disability Insurance, Worker's Compensation, and Retirement) and their percentages comprising the fringe benefit rate. If different rates are used for different positions, provide details for each rate in the space provided and specify which positions are subject to that rate.
- Non Personal Services:** Non Personal Service expenses. For each Non Personal Service expense not supported by grant funds, the applicant should include a description in the appropriate NPS Narrative section. For example if you contract with a Pharmacist Secretary using other funds you would list under the Contractual Contractual Narrative - Pharmacist Secretary \$25/hour for 20/hours total cost \$500.00.
- Contractual – Type/Description:** Provide the name of the organization, company or individual and the type of service being provided. If not known, enter TBH in place of the name of the organization, company or individual. (i.e. Pharmacist Community Based Organizations - TBH)
- Contractual Narrative:** ~~The following positions are a required part of the FPP and must clearly be identified in the budget. These positions can be found in either Personal Services or Non Personal Services (when fulfilled through a contractual relationship) as appropriate. If one (or more) of these positions is not~~

supported by grant funds, you must still include the narrative justification (including FTE percentage or line item detail) for the position in the appropriate narrative section. Positions required include: Program Director/Manager (who serves as primary FPP contact); Medical Director (who must have specific training/experience in reproductive health); Pharmacist or Pharmacy Consultant; Medical Records Specialist/Consultant; Health Educator. **Provide breakdown for specific services which cannot be accomplished by existing staff as well as for any services/expenses which will be provided by a subcontractor. Include expenses such as contracted staff, per diem staff, bookkeeping, payroll, and audit services. Include the time frame for the delivery of services. Contractors may be required to submit subcontracts to the Department for review and approval prior to execution of the subcontract. The contractor remains fully responsible for all work performed by the subcontractor.**

- **Equipment Narrative:** Program Specific Instructions / Requirements Not applicable—leave blank **Provide breakdown for purchased equipment here.**
- **Space/Property: Rent Narrative:** Program Specific Instructions / Requirements Not applicable—leave blank Use space as needed for additional justification
- **Space/Property: Own Narrative:** Program Specific Instructions / Requirements Not applicable—leave blank Use space as needed for additional justification
- **Utilities Narrative:** Program Specific Instructions / Requirements Not applicable—leave blank Use space as needed for additional justification
- **Operating Expenses Narrative:** Program Specific Instructions / Requirements Line item detail of funds (either grant or in-kind) used to support the purchase of Contraceptive supplies must be provided. This should include the cost per unit multiplied by the total number of units purchased. The acquisition cost for all contraceptives must reflect current 340B costs. Advertising/Marketing Expenses, when supported with grant funding, must include line item detail for the expense, a clear timeframe when ads/campaign will run, and a brief description of how efforts will be assessed (i.e. tracking patient calls, volume, website clicks) during specified time period. The justification must clearly state that all materials will be reviewed and approved by the I & E Committee. Promotional items are not an allowable expense. **Provide breakdown of Operating Expenses here. Promotional items are not an allowable expense. Promotional items are defined as articles of merchandise (often branded with a logo or slogan) which are given away to promote a company, corporate image, brand, or event at trade shows, conferences, or as part of marketing campaigns (e.g., water bottles, tote bags, pens, T-shirts, hats, pens etc.).**
- **Other Narrative:** Program Specific Instructions / Requirements Not applicable—leave blank **Use space as needed for additional justification**
- ~~Companion~~ **Companion** Document to Grants Gateway Budget Instructions

7. Revised Attachment 13 is included.

8. Attachment 16 is included.

ADDENDUM # 1

September 22, 2023

RFA # 20400/ Grants Gateway # DOH01-SRAE01-2024

New York State Department of Health
*Center for Community Health/Division of Family Health/
Bureau of Perinatal, Reproductive and Sexual Health*

Request for Applications
Sexual Risk Avoidance Education Program

Change to RFA Submission Deadline

The New York State Department of Health has changed the Sexual Risk Avoidance Education Program RFA submission deadline from Tuesday November 21, 2023 to **Thursday, November 9, 2023 at 4:00 PM**.

Submission of applications in the New York State Grants Gateway must be completed by **Thursday, November 9, 2023 at 4:00 PM** to be eligible for consideration. Late applications cannot be accepted.

RFA# 20400 Grants Gateway# DOH01-SRAE01-2024

New York State Department of Health
*Center for Community Health/Division of Family Health/
Bureau of Perinatal, Reproductive and Sexual Health*

Request for Applications
Sexual Risk Avoidance Education Program

KEY DATES:

Release Date: 9/21/2023

Letter of Interest/Intent Due: 10/4/2023

Questions Due: 10/11/2023 by 4:00 PM EST

**Questions, Answers and
Updates Posted (on or about):** 10/25/2023

11/14/2023

Applications Due: ~~11/21/2023~~ by 4:00 PM EST

NYSDOH Contact Name & Address: Anitra Stinney
Bureau of Perinatal, Reproductive, and Sexual Health
New York State Department of Health
Room 821, Empire State Plaza, Corning Tower
Albany, New York 12237
SRAERFA@health.ny.gov

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I. Introduction

The New York State (NYS) Sexual Risk Avoidance Education (SRAE) initiative focuses on evidence-based education and adult supervised programs as a strategy to prevent premarital sexual activity, to prevent sexual abuse, coercion, and support a healthy transition to middle adolescence among early adolescent youth and ensures Sexual Risk Avoidance Education projects are consistent with the federal program requirements. Through the funded activities, an awarded Sexual Risk Avoidance Education project will have a primary emphasis on each of the following topics:

- Improving an early sense of achievable life prospects and a positive outlook for the future.
- Promoting holistic individual and societal benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making and future focused.
- Promoting the advantages of refraining from premarital sexual activity.
- Highlighting the increased likelihood of increased financial stability by attaining self-sufficiency and emotional maturity.
- Discussing healthy and unhealthy relationships, including consent, personal boundaries, online safety and their impact on healthy relationships, marriages, and safe stable families.
- Examining the impact other youth risk behaviors have that may increase the risk for sexual activities.
- Providing knowledge and skills to recognize sexual abuse, sexual coercion and intimate partner violence.
- Assisting in the identification and methods to seek help if unhealthy and unsafe behaviors and situations occur, including bullying and abuse.

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

New York State has been a leader in adolescent pregnancy prevention efforts and has made significant progress in reducing teen pregnancy. In 1997, the pregnancy rate per 1,000 for teens aged 15-19 was 87.8 statewide (Vital Statistics Annual Report 1997). During the three-year period 2018-2020, the teen pregnancy rate for females aged 15-19 averaged 20.6 per 1,000 statewide resulting in a 76.5% decrease in teen pregnancy across NYS. [New York State Health Indicators by Race/Ethnicity, 2018-2020 \(ny.gov\)](#).

Consistent with national trends, NYS continues to have striking racial/ethnic and regional disparities in adolescent pregnancy rates although these rates have also declined over time. Pregnancy rates are consistently higher for Black and Hispanic teens than for White teens. Pre-adolescent and adolescents are also at a particularly high risk due to sexual abuse and coercion, although the prevalence is difficult to determine because it is often unreported.

According to The World Health Organization (WHO) the sexual health outcomes for adolescents are impacted by the social determinates of health, otherwise known as the conditions in which they are

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

- Youth in or aging out of foster care/adjudication systems.
- Youth who are victims of trafficking and sexual abuse.
- Runaway and homeless youth.
- Youth with disabilities and unique learning needs.
- Youth who identify as Lesbian, Gay, Bisexual, Transgender, Queer plus (LGBTQ+).

The purpose of the Sexual Risk Avoidance Education initiative (SRAE) is to develop, enhance, and expand prevention programs aimed at delaying the onset of adolescent sexual activity, preventing sexual abuse, coercion, and decreasing the incidence of adolescent pregnancy. While the federal funding for this initiative allows youth ages 10-19 to be served, the New York State plan for SRAE funds prioritizes youth ages 10-13 living in priority communities to implement strategies that build protective factors and promote optimal transition to a healthy, productive, connected middle adolescence.

The Search Institute has identified 40 developmental assets that are the building blocks of healthy development for youth in "middle childhood" and will help them grow into healthy, caring, and responsible young adults (Attachment 2). Examples of the 40 developmental assets for youth, include adult role models, other adult relationships, service to others, child programs, family support, positive family communication, a sense of purpose, healthy lifestyle, planning and decision making, resistance skills, and a positive view of one's personal future. Enhancing the developmental assets of youth ages 10-13, through initiatives like Sexual Risk Avoidance Education, provides an opportunity for them to transition into healthy adolescents who can realize their individual potential. Providing opportunities for young people to increase the number of developmental assets they have is a primary organizing concept of this initiative.

NYSDOH will fund community-based projects that:

1. Implement the NYSDOH recommended age appropriate comprehensive sexual-risk avoidance education prevention programs (Attachment 3).
2. Use a combined approach of evidence-based education and adult-supervised activities designed for early adolescence.
3. Provide parenting education to parents, guardians, and caregivers.

Awardees will deliver an integration of evidence-based education and adult-supervised activities to prioritized youth in selected communities through the strategies described. Project components or activities will promote developmental assets as described by The Search Institute (Attachment 2), such as but not limited to positive family communication, creative activities, motivation to do well in school, healthy lifestyle, planning and decision making, resistance skills, a positive view of one's

personal future, responsibility, self-esteem, and sense of purpose. Parents, guardians, and caregivers of young people will be provided with the opportunity to attend parenting education classes to enhance their parenting skills.

The strategies and/or programs indicated above will be delivered to individual or a group of youth in priority communities in such venues as schools, community and faith-based organizations, other community settings, and congregate care settings. All funded projects, including those implemented directly or in partnership with faith-based organizations or programs, must adhere to the federal guidance prohibiting use of religious materials and/or programs (Attachment 4).

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

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

II. Who May Apply

A. Minimum Eligibility Requirements

- Applicants must be prequalified in the NYS Grants Gateway, if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA.
- Applicants must complete and upload a Statement of Assurances (Attachment 1) in the Pre-Submission uploads section of the Grants Gateway online Application.
- Applicants must be a youth-serving organization, such as city or county health department, school district, youth bureau; or a not-for-profit 501(c)(3) organization, including, but not limited to, Article 28 healthcare provider, community-based health and human service provider, or a local health and human service agency, serving youth in New York State.
- Applicants must provide programming to one or more priority zip codes as defined by the Adolescent Sexual Health Needs Index score within their identified focused county(ies) (Attachment 5).
- Applicants must only apply for one NYS region (Upstate or Downstate) per application.
- Applicants must select at least one of the three Sexual Risk Avoidance Education compliant evidence-based curriculum from the selection worksheet (Attachment 3).
 - Adult Identity Mentoring (Project AIM)

- Making a Difference! (MAD)
- Teen Outreach Program (TOP)

B. Available Funding

It is anticipated that between 12-16 awards will be made through this initiative (a total of \$3,000,000 in awarded funds annually) for a five (5) year period contingent upon availability of funds. Applicants may request an annual award amount up to \$275,000 for a single application. Funding will be awarded consistent with the table below.

Region	Available Annual Funding for Region
Downstate (Bronx, Kings, Nassau, New York, Queens, Richmond, Suffolk, and Westchester)	\$1,890,000
Upstate (NYS counties excluding those in Downstate region, defined above)	\$1,110,000

Please note: Applicants who wish to serve more than one region through the Sexual Risk Avoidance Education initiative must submit a separate application for each region they wish to provide services in. Failure to submit a separate application for each region may result in disqualification.

The anticipated funding period will be from **7/1/2024 through 6/30/2029**.

C. Statement of Assurances for Project Requirements

By signing the Statement of Assurances (Attachment 1), Applicants are attesting to the minimum eligibility requirements as well as the following project requirements:

- Ensure that staff health education standards listed in Attachment 6, Health Education Standards will be met.
- Ensure that programming is held in fully accessible spaces and project modifications and accommodations for participants with disabilities are ascertained and provided.
- Ensure that all youth will be eligible to participate in program services without regard to race, ethnicity, or sexual identity.
 - https://www.cdc.gov/healthcommunication/Preferred_Terms.html#:~:text=Use%20gender%2Dneutral%20language%20whenever,%2Dbe%3B%20expectant%20parents
 - <https://www.cdc.gov/healthyyouth/terminology/sexual-and-gender-identity-terms.htm>
 - <https://www.nih.gov/nih-style-guide/sex-gender-sexuality>
 - <https://www.nih.gov/nih-style-guide/inclusive-gender-neutral-language>
- Participate in the Federal and State evaluation requirements, upon request.
- Participate in additional NYSDOH adolescent health research projects upon request.
- Participate in additional federal adolescent health research projects upon request by the federal Health and Human Services Administration for Children and Families (HHS ACF).
- Ensure that youth are referred as needed to other providers of health care services (e.g., substance abuse, alcohol abuse, tobacco cessation, reproductive health and family planning services, mental health issues, intimate partner violence), local public health and social service agencies, hospitals,

voluntary agencies, and health or social services supported by other Federal programs (e.g., Medicaid, CHIP, TANF) or State/local programs.

- Any changes in services, the designated contact person, staffing levels, space, or SRAE sites will be reported immediately in writing to the Department of Health, Adolescent Health Unit, at Anitra Stinney at sraerfa@health.ny.gov.
- Professional and legal standards of client confidentiality will be strictly maintained per Public Health Law.
- Biannual reports will be submitted to the New York State Department of Health within 30 days of the completion of the reporting period as outlined in Section IV. H. 3. of RFA.
- The NYS Department of Health will be given access to conduct site visits, as necessary.
- The Applicant will select evidence-based curricula for implementation from the pre-approved NYSDOH recommended list (Attachment 3).
- Evidence-based programs will be implemented with fidelity and adhere to the developer's guidelines.
- The NYSDOH will be informed of all materials proposed for use in the project for purposes of reviewing them for medical accuracy.
- Programming and materials to be used by the proposed project will not contradict the Federal guidance for religious programs (Attachment 4).
- A designated individual within the awarded organization will be responsible for Sexual Risk Avoidance Education administration, operation, and oversight. This individual, otherwise known as the contact person, will be accessible to NYSDOH Monday through Friday during business hours (including by e-mail) and attend Sexual Risk Avoidance Education provider meetings with other appropriate staff.
- Awardess will work with ACT (Assets Coming Together) for Youth Center for Community Action technical assistance for technical needs, including staff training for implementation of the selected curriculum from (Attachment 3).
- Any changes in staff, the designated contact person will report **immediately** in writing to the assigned ACT for Youth Center for Community Action technical assistant and the NYSDOH's Adolescent Health Unit.
- Biannual project reports will be submitted to the NYSDOH within 30 days of the completion of the period.
- Upon execution of the contract, a full agency budget including other funds that support the project will be required within 30 days of execution. Failure to complete any required budget forms will result in a delay in processing payments.
- The Applicant will develop a sustainability plan by the end of the first contract year (No Later Than 6/30/2025).
- Failure to comply with any of the above project requirements may also result in a Corrective Action Plan that NYSDOH will implement and assign to the awardee. Failure to abide by the Corrective Action Plan may result in further action(s) that may include withholding funds.

III. Project Narrative/Work Plan Objectives

The NYSDOH has historically funded community-based projects that serve youth, ages 9-21, living in underserved, under-resourced communities. Sexual Risk Avoidance Education community-based projects are a component of statewide primary prevention programs, which utilize a youth

development framework and implement evidence-based or promising approaches to promote health and reduce risk in priority communities in NYS. Applicants are expected to implement activities as defined on page 11 of this RFA 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.

Programming funded under this RFA may be provided during regular school hours, on weekdays after school hours, school vacation breaks, weekend hours, and summer vacation period. Programming during regular school hours will be approved by NYSDOH on a case-by-case basis. If an awardee is approved to provide services during regular school hours, the awardee must follow all additional guidelines given by NYSDOH. Services provided to individuals should be sustained efforts rather than one-time or sporadic contacts. Services that can not be sustained must be discussed with your assigned ACT for Youth Center for Community Action's technical assistant and/or NYSDOH.

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

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

Community-based Sexual Risk Avoidance Education projects are expected to work with other service providers and youth in their respective communities to identify and provide or expand a range of positive opportunities for youth and their families. Since youth reached through this initiative may require additional supports and services that are outside the scope of the Sexual Risk Avoidance Education project, projects must implement mechanisms to refer them to other federal, state, county, and local community service providers for physical, social, emotional, educational, and developmental services as deemed needed for the individual youth being served. Funded projects need to have a mechanism in place to provide adolescent pregnancy prevention-related health care service referrals to appropriate providers of health care services (e.g., substance abuse, including alcohol, tobacco cessation, mental health issues, and intimate partner and sexual violence) as deemed needed for the individual youth being served. The description must identify referral resources, include information about how referrals will be made to other services and programs, and indicate how follow up will take place, when appropriate. Referral resources should include, but are not limited to, substance use and abuse, and mental health services. Using the referral process, Sexual Risk Avoidance Education projects should facilitate enrolling eligible youth in health assistance programs such as Medicaid and Children's Health Insurance Program (CHIP), or any other federal or state assistance program for which they may be eligible. It is anticipated that Sexual Risk Avoidance Education initiative services will foster a network of community service resources, which will facilitate referrals to, and utilization of, needed community services by young people and their families. Awardees will incorporate the input of a diverse group of stakeholders, including the young people they intend to serve, parents,

caregivers, and representatives from relevant community organizations and institutions including traditional and non-traditional partners, and formal and informal community leaders. The input from this group of stakeholders must be utilized to inform project planning and implementation as well as identify and address issues around health equity.

This initiative will **not** fund direct services such as childcare, health care, or other services that are available through other resources. However, Applicants should incorporate partnerships and strategies to identify needs for such services and make referrals to address the needs that have been identified for youth being served. Referrals can be made using the Post-Exposure Prophylaxis (PEP) hotline as applicable. NYS or NYC PEP hotline: Outside NYC: 844-PEP4NOW (844-737-4669) In NYC: 844-3-PEPNYC (844-373-7692)

Proposed projects must describe the outreach and recruitment of adult volunteers working with youth. It is the responsibility of awardees to assure that the safety of youth participating in programs is protected. Adult volunteers working with youth being served by a project must complete a volunteer application, have a personal interview with project administration/leadership, provide personal and professional reference checks and complete appropriate project related trainings. Criminal background checks must be done if adult volunteers will have any responsibilities that involve a one-to-one relationship with or ongoing supervision of youth being served by the project.

A. Performance Management

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

The goal of the Sexual Risk Avoidance Education initiative is to support and enhance adolescents social-emotional development, relationships and reduce racial, ethnic, economic, and geographic disparities while promoting health equity across this population. The education for this initiative will focus on youth, their parents, guardians, caregivers and address the following performance standards which are also the work plan objectives:

1. Provide sexual risk avoidance education with an evidenced-based approach based on adolescent learning and developmental theories for the age group receiving the education. Teach the benefits of personal responsibility, self regulation, goal setting, healthy decision-making, healthy relationships, consent, increased financial stability, recognizing sexual coercion, dating violence, risk behaviors such as drug, alcohol use and seek help if unhealthy, unsafe behaviors occur;
2. Provide or expand adult supervised activities that create educational, recreational, or vocational opportunities for preteen youth. Youth build on their strengths and assets and shape their ideas

- about aspirations for the future; and
3. Provide education to the parents, guardians, and other adult caregivers of preteen youth. Enhance and strengthen the communication and supervision skills of parents, guardians and other caregivers in locations such as schools, the workplace and other community-based settings.

B. Project Components

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

Component 1: Implement sexual risk avoidance education utilizing an evidence-based approach based on adolescent learning and developmental theories for the age group receiving the education.

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

- Provide data that demonstrates how the education provided applies key program elements that have been found to be effective in positive youth behavior change, and refraining from interpersonal sexual activity.
- Teach the benefits associated with personal responsibility: self-regulation, goal setting, healthy decision-making, healthy relationships, becoming financially independent, recognizing sexual coercion, dating and intimate partner violence sexual violence and other youth risk behaviors, such as drug and alcohol usage.
- Have health educators/facilitators trained on the program strategies, approaches, and activities provided by the ACT for Youth Center for Community technical assistance.
- Link program participants to services with local community partners and other agencies that support the health, safety and well-being of youth served by the project. The partnering agencies shall share a commitment for optimal health outcomes which do not normalize sexual activity between teens.

Applicants must choose one of the New York State Department of Health approved evidence-based curricula identified in Attachment 3.

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

Youth benefit from exposure to a wide variety of activities framed in a youth development philosophy that introduce them to new situations, ideas, people, and challenge them to build or learn skills. These opportunities can offer youth first-hand experiences that build on their strengths, assets and shape their ideas about aspirations for the future. Activities should stimulate cognitive, social, physical, emotional growth, and provide a context for productive relationship building between adults and youth, and youth among youth. The activities will provide alternatives to and demonstrate the advantages of postponing sexual activity and promote the development of a skill set that can support a successful transition into healthy middle adolescence. Adult-supervised activities can occur within another after school or youth group program, or as a stand-alone program. Examples of appropriate activities would include, but may not be limited to:

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

All planned activities should be cost-effective and incorporate specific strategies that help build new skills and learning and stimulate youth development, consistent with the description above. Cost-effective is defined as the minimum amount of grant fund resources being used to achieve desired work plan (Attachment 7) goals and objectives. General recreational activities or one-time events without a clear rationale that is well-articulated as part of a larger project strategy will not be supported with this grant.

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

Parents, guardians, and other adult caregivers (herein referred to as parents) can play a key role in communicating to their children about values and responsible behaviors. The purpose of the parenting education component is to enhance and strengthen the communication and supervision skills of parents, guardians, and other adult caregivers. These skills will help them guide their youth through their adolescent years. Historically, surveys and focus groups have indicated that many adolescents view their peers, social media and entertainment forums (not their parents) as a primary source of information regarding sexual health behaviors. However, many parents are uncomfortable having sexual discussions and have the same misconceptions or fears about sexuality as their children. Parents often need and welcome assistance to begin an effective dialogue related to sexual matters with their children.

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

sexual health and risky behaviors.

According to the National Resource Center for Community-Based Child Abuse Prevention (<http://friendsnrc.org>), “successful parent education programs help parents acquire and internalize parenting and problem-solving skills necessary to build a healthy family.” Projects funded through this RFA will provide information and education to parents at such venues as schools, the workplace, and other community-based settings. Workshops can be conducted with parents alone or with parents together with children to improve communication skills. The range of workshop topics to be addressed might include, but are not limited to:

- Understanding adolescent development, including the physical, cognitive, emotional, and social changes of adolescents and nurturing children’s development of healthy attitudes and values about growth and development, body image, positive self-esteem, respect and appreciation for human diversity and other related subjects
- Adapting to and communicating effectively with maturing children, discussing risk-taking behaviors with adolescents, identifying, and addressing warning signs of risky or dangerous behavior, and keeping adolescents safe
- Understanding the importance of non-parental adults in adolescents lives
- Raising adolescents in a new/changing and diverse culture
- Modeling and nurturing healthy relationships, including friendships, social peer relationships, romantic relationships, family relationships, and positively addressing dynamics such as gender roles, peer pressure, bullying and power balances in relationships
- Educational and career success, such as maximizing school success and developing skills for employment preparation
- Supporting the development of good study habits, achievement in school, educational and career aspirations
- Nurturing the development of healthy life skills such as goal setting, decision making, negotiation, communication, interpersonal skills, and stress management

C. General Project Information

- Food and beverages that are served during Sexual Risk Avoidance Education activities must follow the Guidelines for Healthy Food and Beverages for Adolescent Health Programs, developed by the ACT for Youth Center for Community Action. The Guidelines have been updated and can be found at:
http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf.
 - All activities, as described on page 11 of this RFA, should be cost-effective and incorporate specific strategies that help build new skills and learning as well as stimulate youth development.
 - An Applicant may subcontract components of the Work Plan (Attachment 7) to be performed by Applicant pursuant to the terms of its Application. However, the applicant is responsible to retain a minimum of 51% of total contract activities. If known, the Applicant is expected to state in their Application the specific components to be performed through subcontracts as well as the names of the subcontractors. Grantees will need to name subcontractors prior to reimbursement. Applicants should note that the lead organization (that is, the successful Applicant, as Contractor) will have overall responsibility for all Contract activities, including those performed by subcontractors and will be the primary contact for the NYSDOH. All subcontractors and subcontracts will be required to be approved by the NYS Department of
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Health.

IV. Administrative Requirements

A. Issuing Agency

This RFA is issued by the New York State Department of Health (hereinafter referred to as NYSDOH, or the Department), Division of Family Health's Bureau of Perinatal, Reproductive And Sexual Health. The Department is responsible for the requirements specified herein and for the evaluation of all Applications. *See*, Section V.C. (Review and Award Process).

B. Question and Answer Phase

All substantive questions by Applicants with respect to any aspect of the RFA must be submitted in writing to Adolescent Health Unit in the NYSDOH, Division of Family Health's Bureau of Perinatal, Reproductive, and Sexual Health, at the following email address: SRAErfa@health.ny.gov. This includes Minority and Women Owned Business Enterprise (M/WBE) questions and questions pertaining to the M/WBE forms. *See*, Section IV.I. (Minority & Women-Owned Business Enterprise (M/WBE) Requirements). 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. Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.

To the degree possible, each question submitted by a potential Applicant pursuant to the terms of this RFA should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the Cover Page of this RFA.

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 responses by the Department to questions submitted with
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respect to this RFA which result in clarifications of or exceptions to the terms, conditions, and provisions of this RFA and/or the Master Contract for Grants, are to be raised during the Question and Answer Phase. The Applicant must clearly note what exceptions the Applicant is requesting be incorporated should the application result in a funded award. All questions and answers will be published by the Department to ensure equal access and knowledge by all prospective Applicants at https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx by the date specified on the Cover Page of this RFA.

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 Department's public website at: <https://www.health.ny.gov/funding/>.

All Questions must be received by the date and time specified on the Cover Page of this RFA, under “Key Dates”, opposite the heading “Questions Due”.

All questions submitted by email should state the RFA Title and Number set forth on the Cover Page (RFA# 20400 DOH01-SRAE01-2024) in the subject line of the email.

Questions and answers, as well as any updates, addendums to, and/or other modifications of this RFA, will be posted on these websites. All such questions and answers, updates, and other modifications to this RFA will be posted by the date identified on the Cover Page of this RFA under “Key Dates”.

C. Letter of Interest

Prospective Applicants are strongly encouraged to complete and submit a Letter of Interest (Attachment 8). Prospective Applicants who submit a Letter of Interest by the date specified on the Cover Page 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 SRAERFA@health.ny.gov. Please ensure that the RFA number and title (**20400, DOH01-SRAE01-2024**) is noted in the subject line and Letters of Interest that are submitted by the date posted on the Cover Page 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 by a prospective Applicant impose any obligation upon the Applicant to submit an Application in response to this RFA. An application may be submitted without first having submitted a Letter of Interest.

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 Page of this RFA under the heading “Key Dates”.

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 (that is, to submit an Application):

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 **DOH01-SRAE01-2024** .
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, a prospective Applicant is **strongly encouraged** to submit their Application at least **48 hours prior to the** Application’s due date and time specified on the Cover Page of this RFA. 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 an 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. (Question and Answer Phase) 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 on time and, therefore, considered for funding.

The Grants Gateway will always notify an Applicant of successful submission of the Applicant’s Application. 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, if not exempt, on the date and time Applications in response to this Request for Applications (RFA) are due as specified in the “Key Dates” set forth on the Cover Page of this RFA. Be sure to maintain prequalification

status between funding opportunities. **NOTE:** Three of a not-for-profit's essential financial documents - the IRS990, its Financial Statement, and its 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 on behalf of an Applicant.
- Prior to submission, the Grants Gateway 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. An Applicant must be sure to allow time after pressing the submit button to clean up any global errors that may arise. An Applicant 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.

Applications will not be accepted via fax, e-mail, paper copy or hand delivery.

LATE APPLICATIONS WILL NOT BE ACCEPTED.

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;

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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, in the Department's sole discretion;
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 Department'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 application 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; and

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, 2024 – June 30, 2029.

Continued funding throughout this period is contingent upon availability of funding and state budget appropriations and the Grantee's continued satisfactory performance of its obligations under the Contract. 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 a successful not-for-profit grant Applicant under this RFA (a "Grantee") in an amount not to exceed 25 percent of the annual grant provided for under the Grantee's Contract.
2. The Grantee will be required to submit invoices and required reports of expenditures based upon the terms for payment set forth in Attachment A-1 to its Grant Contract to the State's designated payment office (below) or, if requested by the Department, through the Grants Gateway:

dfh.boa@health.ny.gov

A Grantee must provide complete and accurate billing invoices in order to receive payment of the grant funding provided for under the terms of its Grant Contract. 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 Grantee shall only be rendered electronically unless payment by paper check is expressly authorized by the Commissioner of Health, 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. Each Grantee acknowledges that it will not receive payment on any claims for reimbursement submitted under its Grant 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 claims for reimbursement by the State (Department) 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 Grantee 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:
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

<https://nysemail.sharepoint.com/sites/HealthIntranet/fmgweb/Pages/MWBE-.aspx>

Pursuant to New York State Executive Law Article 15-A, the Department recognizes its obligation to promote opportunities for maximum feasible participation of New York State-certified minority- and women-owned business enterprises (M/WBEs) 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 ("M/WBE") 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 Department of Health hereby establishes a goal of **30%** as follows:

- 1) For Not-for-Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and Municipality Applicants: Eligible Expenditures include the value of the total amount of the Budget provided for the Work Plan in the Grant Contract entered into pursuant to this RFA.

The goal on the Eligible Expenditures portion of a Grant Contract awarded pursuant to this RFA will be **15%** for Minority-Owned Business Enterprises ("MBE") participation and **15%** for Women-Owned Business Enterprises ("WBE") participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified M/WBE firms). A Grantee awarded a Grant Contract pursuant to this RFA must document good faith efforts to provide meaningful participation by

M/WBEs as subcontractors or suppliers in the performance of the Grant Contract and Grantee will agree under the terms of its Grant Contract that NYSDOH may withhold payment pending receipt of the required M/WBE documentation required by the Department or the OSC. For guidance on how NYSDOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified M/WBEs 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 by a Grantee to evidence its good faith efforts to encourage M/WBE participation in the performance of its obligations under its Grant Contract.

By submitting an Application, each Applicant and potential Grantee agrees to complete an M/WBE Utilization plan as directed in **Attachment 9** of this RFA. NYSDOH will review the M/WBE Utilization Plan submitted by each Grantee. If a Grantee’s M/WBE Utilization Plan is not accepted, NYSDOH may issue a Notice of Deficiency. If a Notice of Deficiency is issued, Grantee agrees that it shall respond to the Notice of Deficiency within seven (7) business days of receipt. NYSDOH may disqualify a Grantee as being **non-responsive** under the following circumstances:

- a) If a Grantee fails to submit a M/WBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a Notice of Deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If NYSDOH determines that the Grantee has failed to document good-faith efforts to meet the established NYSDOH M/WBE participation goals for the procurement.

In addition, Grantees 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 of a grant to a successful Applicant pursuant to the terms of this RFA and in order to initiate a Grant Contract with the New York State Department of Health, a Grantee 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, the Applicant should include the Vendor Identification number 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 Department strongly encourages each Applicant to file 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 10) 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

Each not-for-profit Applicant subject to prequalification is required to prequalify prior to submitting its Application in the Grants Gateway.

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 a not-for-profit Applicant to register in the Grants Gateway and complete the Vendor Prequalification process in order for any application submitted by that Applicant to be evaluated. Information on these initiatives can be found on the [Grants Management Website](#).

An application received from a not-for-profit Applicant that (a) has not Registered in the Grants Gateway or (b) has not Prequalified in the Grants Gateway on the Application's due date specified on the Cover Page 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 New York State agency from which you have received the most grants. 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 primary New York State 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.

All potential Applicants are strongly encouraged to begin Grants Gateway Registration and Prequalification 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. Grantees 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 awarded pursuant to this

RFA 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 terms and conditions contained in this RFA, including the terms and conditions of the Master Contract for Grants. Any exceptions the Applicant would like considered by the Department relating to the terms and conditions of this RFA and/or Master Contract for Grants must have been raised during the Question and Answer Phase of this RFA (See, Section IV.B.).
4. An Applicant may be disqualified from receiving an award 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. If an Applicant is awarded a grant pursuant to this RFA, the services to be performed by the successful Applicant pursuant to the terms of the Grant Contract entered into with the Department 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”.

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

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

Project Specific Questions

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

It is each Applicant’s responsibility to ensure that all materials included in its application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the application deadline date and time specified on the Cover Page of this RFA.

1. Cover Sheet (Not Scored):

Attachment 11 is provided to serve as the Cover Sheet for the application. All requested information must be supplied on this form. Once completed, Applicants are instructed to upload their Cover Sheet as Attachment 11 in the Pre-Submission section of the Grants Gateway online application.

2. Statement of Assurances (Not Scored):

To be eligible for approval to operate a Sexual Risk Avoidance Education project, the Applicant organization’s official signatory, such as Chief Executive Officer, Executive Director, Chief Fiscal Officer, must attest to and affirm compliance with all of the statements listed on Attachment 1. The Applicant should complete and sign the Statement of Assurances. Once signed, Applicants are instructed to upload their Statement of Assurances as Attachment 1 in the Pre-Submission section of the Grants Gateway online application.

3. Project Summary (Maximum Score: 10 points)

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

301. Provide a project summary by describing the project design and how it is consistent with each of the three core components described in Section III B. Project Components.

302. Describe the county and geographic service area selected for this project, with associated Adolescent Sexual Health Needs Index scores for the proposed community as indicated on Attachment 5. Include zip codes. Each community chosen is to be clearly identified.

303. Describe the priority populations to be served including age range and gender as well as the cultural, racial and ethnic composition.

4. Organizational Experience and Capacity (Maximum Score: 16 points)

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

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

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

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

404. Indicate the Applicant organization'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 Assessment (Maximum Score: 20 points)

The purpose of this section is to determine local health and human services available resources and needs affecting adolescent pregnancy and childbearing in the priority communities. Applicants may choose to serve multiple counties selecting the zip codes within the selected counties with the highest Adolescent Sexual Health Needs Index scores; however, each separate and distinct priority community is to be clearly reflected in this section. Relevant data can be found at:

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

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

502. Discuss the identified needs in the proposed priority community (ies) that pose an increased risk for pre-adolescent and adolescent sexual activity.

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

504. Describe how the project incorporates the input from a diverse group of stakeholders, including

youth, parents/caregivers, racial, ethnic and/or cultural minority groups, and persons with disabilities.

6. Description of Project Narrative, Components and Activities (Maximum Score: 34 points)

The purpose of this section is to describe the design and structure of the proposed project, including the activities that will be developed and implemented and how the components will complement each other. Note: Additional information on these components can be found in Section III B. Project Components.

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

602. Describe how the proposed project design addresses the needs and draws on the resources identified in Section V.A.5. Community Resources Assessment.

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

604. Describe how the Applicant organization will provide related health care service referrals to other providers of health care services to link program participants to services with local community partners and other agencies that support the health, safety and well-being of program participants, including for substance use and abuse, and mental health services.

Note: SRAE funded agencies and their partnering agencies should share a commitment for optimal health outcomes which do not normalize teen sex.

605. Describe the rationale for choosing the selected evidence-based program(s) as indicated in Section III. B. Project Components, Component 1. Clearly identify the proposed evidence-based program to be implemented from Attachment 3. Include information on how the selection was made based on the findings of the priority population identified in the Community Resources Assessment. Describe how the implementation of the evidence-based program(s) will be consistent with the developer's guidelines, including the choice of venue(s) for this evidence-based program(s) implementation. Provide estimates of the overall number of program participants and rationale for the estimates. Describe the number of health educators/staff that will deliver the evidence-based program(s) and the process to ensure that staff are adequately trained to deliver the chosen evidence-based program(s) with fidelity.

606. Describe the specific adult-supervised activities, as described in Section III. B. Project Components, Component 2, to be conducted and how these activities will have a primary emphasis on the topics outlined in this procurement in Section I. Introduction. Describe the orientation and training that adults working with youth will receive and indicate the number of adult volunteers who will provide adult-supervised activities and how they will be selected as well as the orientation and training that volunteers working with youth will receive.

607. Provide an overview of the topics to be covered as indicated in Section III. B. Project Components, Component 3, as well as the number of participants and number of sessions for each topic area. Describe to process of engaging and recruiting adult caregivers to participate in parenting education sessions.

7. Work Plan (*Not Scored*)

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

For the Grants Gateway Work Plan Project Summary, Applicants are instructed to insert the Project Summary as listed on page 1 of Attachment 7. In the Grants Gateway Work Plan Organizational Capacity section, Applicants are instructed to list this as “not applicable.” Any additional Project Summary or Organizational Capacity entered into these areas will not be reviewed.

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

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

Applicants are instructed to complete the budget template in the NYS Grants Gateway. Refer to the Grants Gateway Budget Instructions (Attachment 12), ~~and~~ Grants Gateway Budget Data Entry Guidelines (Attachment 13); ~~and~~ **SRAE BPRASH Budget Guidance (Attachment 16).**

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

Complete Year 1 of the budget in the Grants Gateway (Refer to Attachment 12 for Grants Gateway Budget Instructions for completing the online budget) assuming a start date of July 1, 2024.

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

Applicants must:

- List all personal services from the Applicant organization/agency. Include a Project Director/Coordinator or Program Manager accessible for communications, and those who will perform the essential tasks required to administer the project, including the lead in programmatic activities responsible for successful completion of the project/contract. Also, include non-personal services related to this project regardless of funding source. Indicate the funding source for each line item as indicated on the budget forms; and email contact information as applicable.
- Include travel expenses for up to two staff to attend an annual two-day provider meeting in Albany, New York.

Other budget related elements include:

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

Applicants' budget requests will be evaluated on the alignment of the proposed budget with the activities (as defined on page 11 of this RFA) to be conducted (including an appropriate overall staffing pattern); how in-kind services indicate an organizational commitment to this project; and a clear and appropriate budget justification for each line item. It is the Applicant's responsibility to ensure that all materials included in the application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the date and time posted on the cover of this RFA. The value assigned to each section is an indication of the relative weight that will be given when scoring your application.

Any 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.

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 1 - Statement of Assurances

2. Attachment 9 - MWBE forms
3. Attachment 10 - Vendor Responsibility Attestation
4. Attachment 11 - Cover Sheet
5. Attachment 14 - Vendor Contact Form
6. Attachment 15 - Subcontractor Information Form, if needed

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 and will be available to the public in accordance with the New York State Freedom of Information Law (FOIL). **Any portion of an application that an Applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the general rule regarding the availability to the public of State agency records under the provisions of the Freedom of Information Law, must be clearly and specifically designated in the application.** If NYSDOH agrees with the Applicant's claim regarding the proprietary nature of any portion of an application, 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

An application that does not meet (PASS/FAIL) the minimum criteria as specified in Section II. A. of this RFA will not be evaluated. An application that does not provide all required information will be omitted from consideration.

Applications meeting the guidelines set forth above will be reviewed and evaluated competitively by the NYSDOH Division of Family Health/Bureau of Perinatal, Reproductive, and Sexual Health's Adolescent Health Unit.

In the event of a tie score, a higher score in Section 6, Description of Project Narrative, Components and Activities, will break the tie. Should a second tie breaker be needed, a higher score in Section 5, Community Resources Assessment, will break the tie.

Applications with minor issues (for example, an application missing information that is not essential to timely review and would not impact review scores) may be processed and evaluated, at the discretion of the State, but any issues with an application which are identified by the Department **must** be resolved prior to time of award. An application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified. Applications failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration.

To be considered for award, an application **must**:

- Receive a passing score for the minimum criteria as specified in Section II. A.;
- Have a minimum score of 70 points out of 100 points on the Program Specific Questions portion of this RFA to be considered for funding;

- Propose to provide services in no more than one NYS region per Application; and
- Propose to provide programming to neighborhoods as defined by priority zip codes based on the Adolescent Sexual Health Needs Index score within their identified focused county(ies) (Attachment 5).

Applications will be ranked per their review score.

- Awards will be made to the highest scoring passing applicants within the limits of the total amount available for the respective region to support this RFA.
- After funding has been allotted to the highest scoring passing applications from each region, the remaining funding from both regions will be pooled and subsequent awards will be made to the next highest scoring passing application regardless of region.
- If this additional funding is insufficient to award an additional application, the Department reserves the right to negotiate with the ‘next’ overall highest scoring application OR distribute the additional funding to all awarded applications.

NYSDOH may issue a conditional award letter to an awardee indicating that they are recommended for an award. If NYSDOH staff finds that the application is missing information or if clarification is needed, the conditional award letter will instruct the awardee that they need to clarify the outstanding issues within a certain timeframe. If the awardee does not meet the criteria within the timeframe indicated in the conditional award letter, the award will be denied, and the NYSDOH will utilize its right to conduct contract negotiations with the next highest scoring, passing, responsible Applicant.

If changes in funding amounts are necessary for this initiative or if additional funding becomes available, funding will be modified and awarded in the same manner as outlined in the award process described above.

Applicants will be deemed to fall into one of three categories: 1) not approved, 2) not funded due to limited resources, and 3) approved and funded. Not funded applications may be awarded should additional funds become available.

Once awards have been made pursuant to the terms of this RFA, an Applicant may request a debriefing of their own application (whether their application was funded or not funded). The debriefing will be limited only to the strengths and weaknesses of the application submitted by the Applicant requesting a debriefing and will not include any discussion of any other application. Requests for a debriefing must be received by the NYSDOH at the following email address, SRAErfa@health.ny.gov, no later than fifteen (15) Calendar days from date of the award or non-award announcement to the Applicant requesting a debriefing.

To request a debriefing, please send an email to Adolescent Health Unit at SRAErfa@health.ny.gov with a copy to adolescenthealthunit@health.ny.gov. In the subject line, please write: *Debriefing Request - SRAE RFA*.

Any unsuccessful Applicants who wish to protest the award(s) 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 <https://www.osc.state.ny.us/state-agencies/gfo/chapter-xi/xi17-protest->

[procedures](#) (Section XI. 17.)

VI. Attachments

Please note that all Attachments to this RFA are accessed under the “Pre-Submission Uploads” section of the Grants Gateway 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, a prospective Applicant must be registered and logged into the NYS Grants Gateway in the user role of either a “Grantee” or a “Grantee Contract Signatory.”

- Attachment 1: Statement of Assurances*
- Attachment 2: The Search Institute Developmental Assets for Children, Ages 8-12*
- Attachment 3: NYSDOH Sexual Risk Avoidance Education pre-approved Evidence-Based Program List*
- Attachment 4: Federal Guidance for Religious Programs*
- Attachment 5: New York State Adolescent Sexual Health Needs Index (ASHNI)*
- Attachment 6: Health Education Standards*
- Attachment 7: Standardized Work Plan*
- Attachment 8: Sample Letter of Interest Format*
- Attachment 9: Minority & Women-Owned Business Enterprise Requirement Forms*
- Attachment 10: Vendor Responsibility Attestation*
- Attachment 11: Application Cover Sheet*
- Attachment 12: Grants Gateway Budget Instructions* (Revised 10/26/2023)
- Attachment 13: Grants Gateway Budget Data Entry Guidelines*(Revised 10/26/2023)
- Attachment 14: Vendor Contact Form*
- Attachment 15: Subcontractor Information Form (if applicable)*
- Attachment 16: SRAE BPRASH Budget Guidance**

*These attachments are located/included in the Pre Submission Uploads section of the Grants Gateway online application.

Grants Gateway Budget Instructions ***Applications OR New Budget Periods***

Data Entry of the Expenditure Budget - A step by step data entry document titled “**Grants Gateway Budget Data Entry Guidelines**” has been provided in Pre-Submission Uploads located in the Forms Menu.

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

Additional Considerations

- All costs must directly relate to the provision of services outlined in this funding opportunity, be consistent with the scope of services, reasonable, and cost effective.
- Contracted organizations must have on file documentation to support allocation of shared costs to the contract in accordance with applicable regulations and approved budget.
- For each section of the budget in which a budget item is proposed, all required fields must be completed. Failure to complete required fields will result in a global error message which must be resolved prior to submission.
- Equipment purchases for major items that will depreciate in a very short period of time (e.g. one to three years) will only be considered when supported by a strong justification. The Department of Health (DOH) recognizes that organizations may classify items as equipment within their own accounting system that do not fall under the definition of equipment and may be included in the equipment budget category.
- Budget justifications should identify the proposed goods/services that are programmatically necessary and describe how this expense supports the Work Plan objectives of the project. The justification should provide sufficient detail to demonstrate that specific uses and amounts of funding have been carefully considered, are reasonable and are consistent with the approaches described in the Work Plan.
- Budget lines that are not well-justified may delay the budget approval process.
- Indirect costs for organizations without a federally-approved indirect cost rate, will be limited to no more than 10% of total direct costs.
- A “match” contribution is **NOT** required for this grant award. Please do not enter information in the match sections of the budget.
- For fields titled “Other Funds” always leave blank. Additional costs incurred by the program, referred to as “in-kind contributions” should be detailed under the narrative sections for the respective budget category. (i.e. In-kind staff should not be listed in the Salary Detail, but please identify any in-kind staff and the grant deliverable their work supports in the Personal Services – Salary Narrative)
- **Travel:** All Travel, other than travel for individuals / organizations funded under the contractual service line, subcontractor travel, should be budgeted in this section. Out-of-State travel requires prior approval.
 - OCS Guidelines: <http://www.osc.state.ny.us/agencies/travel/manual.pdf>
 - USGSA: <http://www.gsa.gov/portal/category/21283>

Sexual Risk Avoidance Education (SRAE) Specific Requirements:

In order to be approved, all SRAE budgets **must** clearly include the following:

- The following positions are a required part of the SRAE and must clearly be identified in the budget. These positions can be found in either Personal Services or Non-Personal Services (when fulfilled through a contractual relationship) as appropriate. If one (or more) of these positions is not supported by grant funds, you must still include the narrative justification (including FTE percentage or line item detail) for the position in the appropriate narrative section. Positions required include:
 - Program Director/Manager (who serves as primary SRAE contact)
 - Health Educator
- ~~A minimum of 15% of the total award amount must be allocated toward Non Personal Expenses.~~
- Line item detail of funds (either grant or in-kind) used to support travel for at least two staff to attend the Bureau of Perinatal, Reproductive and Sexual Health Provider Meeting.
- ~~Line item detail of funds (either grant or in-kind) used to support the purchase of Contraceptive supplies. This should be included in the narrative justification under NPS "Operating Expenses" and include the cost per unit multiplied by the total number of units purchased. The acquisition cost for all contraceptives must reflect current 340B costs.~~
- ~~Advertising/Marketing Expenses, when supported with grant funding, must include line item detail for the expense, a clear timeframe when ads/campaign will run, and a brief description of how efforts will be assessed (i.e. tracking patient calls, volume, website clicks) during specified time period. The justification must clearly state that all materials will be reviewed and approved by the I & E Committee.~~
- ~~Funds can not be used to provide abortion or abortion related services.~~
- Please refer to the Bureau of Perinatal, Reproductive and Sexual Health Budget Guidance Document for additional information on allowable expenses.

Document Uploads (as applicable)

Other Expenses Detail – Indirect Costs: If using a Federally Approved Rate Agreement, upload a copy of the current federal rate agreement

Other Helpful Links:

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

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

* An asterisk has been placed next to specific budget categories which require that additional information be provided. Refer to "Grants Gateway Budget Instructions" under the section Required Uploads.

Grants Gateway Field	Character Limits	Enter Required Information as Instructed Below
Personal Services - Salary		* Refer to Grants Gateway Budget Instructions document for additional information. In the Salary section only include staff positions related to the implementation and administration of the project. ONLY staff that are employees of the applicant organization are to be included here. All other staff should be listed under Contractual Services. If Salary is not applicable, leave this section blank.
Position/Title	55	Provide the position title and employee name , if known. TBH should be entered in place of the employee name if the position is vacant at the time of budget submission.
Role/Responsibility	500	Provide a brief narrative of how the position will contribute directly to this project, Include the percent of time the incumbent will work on the program on a full-time basis. One (1.0) FTE is based on the number of hours worked in one week (e.g. 40-hour workweek). To determine a % FTE, divide the hours per week spent on the project, by the number of hours in the workweek. For example: given a 40-hour workweek, an individual working 10 hours per week on the project spends 25 percent of his/her time on the project (i.e. 10/40 = .25) Please show in percentage form - 25%. If TBH, also provide the anticipated start date for this position.
# in Title	N/A	Always enter the number 1. A separate position should be added for "each" position on the contract.
Annualized Salary Per Position	N/A	Enter the annual salary the organization will pay this employee. This figure should NOT be adjusted if a portion of the salary will be paid with other funds. Percentage of time supported with "other funds" should be entered in the PS narrative.
STD Work Week (hrs.)	N/A	Enter the standard (STD) hours worked each week by the employee. This figure should NOT be adjusted for hours paid with other funds.
% Funded	N/A	Enter only the percent of time this position is supported with grant funds.Do NOT include any percentage of time supported by other fund sources. Total grant funding requested divided by annual salary.
# Months Funded	N/A	Enter the estimated number of months this position will work on this grant. If TBH, enter the number of months based upon the anticipated start date.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this position on the project. (Annual Salary / 12 Months x # Months Funded x % Funded).
Total Match Funds	N/A	Always leave blank.
Match %	N/A	Always leave blank.
Total Other Funds		Always leave blank.
> Personal Services - Salary Narrative	4000	The following positions are a required part of the FPP and must clearly be identified in the budget. These positions can be found in either Personal Services or Non-Personal Services (when fulfilled through a contractual relationship) as appropriate. If one (or more) of these positions is not supported by grant funds, you must still include the narrative justification (including FTE percentage or line item detail) for the position in the appropriate narrative section. Positions required include: Program Director/Manager (who serves as primary FPP contact); Medical Director (who must have specific training/experience in reproductive health); Pharmacist or Pharmacy Consultant; Medical Records Specialist/Consultant; Health Educator Provide breakdown of Personal Services Salary here.
Personal Services - Fringe*		Fringe Benefits should be budgeted in line with your organization's Standard Fringe Benefit Policy and/or Negotiated Bargaining Agreements. If Fringe is not applicable, leave this section blank.
Type/Description	125	Provide the requested fringe rate.
Justification	1000	Provide all fringe benefit components included in the calculation of the fringe benefit rate. Show breakdown of fringe benefit rate into component percentages. If additional space is needed enter details in the PS - Fringe Narrative
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Personal Services - Fringe Narrative	4000	Program Specific Instructions / Requirements If additional space is needed from the justification section, specify here, the components (FICA, Health and Life Insurance, Unemployment Insurance, Disability Insurance, Worker's Compensation, and Retirement) and their percentages comprising the fringe benefit rate. If different rates are used for different positions, provide details for each rate in the space provided and specify which positions are subject to that rate.

* An asterisk has been placed next to specific budget categories which require that additional information be provided. Refer to "Grants Gateway Budget Instructions" under the section Required Uploads.

Grants Gateway Field	Character Limits	Enter Required Information as Instructed Below
Non Personal Services		Non Personal Service expenses. For each Non Personal Service expense not supported by grant funds, the applicant should include a description in the appropriate NPS Narrative section. For example if you contract with a Pharmacist Secretary using other funds you would list under the Contractual Contractual Narrative - Pharmacist Secretary \$25/hour for 20/hours total cost \$500.00.
Contractual*		* Refer to Grants Gateway Budget Instructions document for additional information. This category should be used to budget for specific services which cannot be accomplished by existing staff as well as for any services/expenses which will be provided by a subcontractor. Include expenses such as contracted staff, per diem staff, bookkeeping, payroll and audit services. Include the time frame for the delivery of services. Contractors may be required to submit subcontracts to the Department for review and approval prior to execution of the subcontract. The contractor remains fully responsible for all work performed by the subcontractor. ALL related expenses are to be budgeted under this section (any non-personal service costs to include travel) associated with the staff/organizations allocated to CS. If Contractual Services are not applicable, leave this section blank.
Type/Description	125	Provide the name of the organization, company or individual and the type of service being provided. If not known, enter TBH in place of the name of the organization, company or individual. (i.e. Pharmacist Community Based Organizations - TBH)
Justification	1000	Describe how this expense supports the work plan objectives of the project. Include the timeframe for delivery of services.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Contractual Narrative	4000	The following positions are a required part of the FPP and must clearly be identified in the budget. These positions can be found in either Personal Services or Non-Personal Services (when fulfilled through a contractual relationship) as appropriate. If one (or more) of these positions is not supported by grant funds, you must still include the narrative justification (including FTE percentage or line item detail) for the position in the appropriate narrative section. Positions required include: Program Director/Manager (who serves as primary FPP contact); Medical Director (who must have specific training/experience in reproductive health); Pharmacist or Pharmacy Consultant; Medical Records Specialist/Consultant; Health Educator See *New Text Inserted below
Travel*		* Refer to funding opportunity and/or Grants Gateway Budget Instructions document for additional information. Itemized travel estimates should be based on the lesser of the written policy of the organization, the Office of State Comptroller (OSC) guidelines, or the United States General Services Administration (USGSA) rates. Out-of-State travel requires <u>prior</u> approval by the State. Travel expenses associated with any Subcontractor, Consultant, or Vendor, must be included in the Contractual Services budget line. If Travel is not applicable, leave this section blank.
Type/Description	125	Provide the type of travel. A separate entry should be completed for each category of travel (i.e. Client, Staff Travel, In-State, or Out-of-State).
Justification	1000	Describe how this expense supports the work plan objectives of the project, include the title of the position(s) traveling.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Travel Narrative	4000	Line item detail of funds (either grant or in-kind) used to support travel must be provided. Be sure to include travel expenses for at least two staff to attend the Bureau of Women, Infant, and Adolescent Health Provider Meeting. Please include name and anticipated travel dates for all conferences and trainings included. A breakdown of all costs for each conference or training is required and must include: Registration fee(s), mileage rate x # miles/vehicle rental/airfare, etc., destination location (City, State), travel dates, lodging rate x # nights per person, per diem rate x # days per person, as well as any other applicable expenses.

*Provide breakdown for specific services which cannot be accomplished by existing staff as well as for any services/expenses which will be provided by a subcontractor. Include expenses such as contracted staff, per diem staff, bookkeeping, payroll, and audit services. Include the time frame for the delivery of services. Contractors may be required to submit subcontracts to the Department for review and approval prior to execution of the subcontract. The contractor remains fully responsible for all work performed by the subcontractor.

* An asterisk has been placed next to specific budget categories which require that additional information be provided. Refer to "Grants Gateway Budget Instructions" under the section Required Uploads.

Grants Gateway Field	Character Limits	Enter Required Information as Instructed Below
Equipment		* Refer to funding opportunity and/or Grants Gateway Budget Instructions document for additional information. This section is used to itemize both purchased and rental equipment costs. Equipment is defined as items such as computers, printers, phones, apparatus or fixed asset (other than land or a building) that are tangible personal property having a useful life of more than one year and a purchase price equal or exceeding \$5,000. These items must be inventoried (tagged) and included on the annual equipment inventory form. This also includes a grouping of like items which equals or exceeds \$5,000. Item(s) not falling under this definition should be included under Operating Expenses. If Equipment is not applicable, leave this section blank.
Type/Description	125	Provide the type of equipment and the quantity to be purchased or rented. (i.e. 3 Desk Top PCs)
Justification	1000	Provide the names of the staff that will be using the equipment and provide the calculation used to determine the allocation of this expense to the project. Reminder: staff % Funded (time and effort) must be taken into consideration when determining the appropriate allocation of the expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Equipment Narrative	4000	Program Specific Instructions / Requirements Not applicable—leave blank Provide breakdown for purchased equipment here
Space/Property: Rent		This section is used to itemize costs associated with Space/Property: Rent. A separate entry will be required if more
Type/Description	125	Provide the physical address of the rental property.
Justification	1000	Provide details such as which project(s) operate(s) out of the space, and provide the calculation used to determine the allocation of this expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Space/Property: Rent Narrative	4000	Program Specific Instructions / Requirements —Use space as needed for additional justification
Space/Property: Own		This section is used to itemize costs associated with Space/Property: . If Space/Property: Own is not applicable, leave this section blank. The expenses included are, maintenance, insurance (property and liability). Demonstrate how the total expense being allocated to this program is calculated. Provide the allocation methodology and percent. Occupancy costs must include square foot value of space and total square footage along with methodology used to determine expense.
Type/Description	125	Provide the physical address of the property that is owned.
Justification	1000	Provide details such as which project(s) operate(s) out of the space, and provide the calculation used to determine the allocation of this expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Space/Property: Own Narrative	4000	Program Specific Instructions / Requirements —Use space as needed for additional justification
Utilities		This section is used to itemize costs associated with Utilities. A separate entry is needed for each category of expense relating to utilities (i.e., utilities, telephone, mobile, etc.)using other funds. If Utilities are is not applicable, leave this section blank.
Type/Description	125	Provide the type of expense and include the property address. (i.e. Telephone - 123 Cherry Lane)
Justification	1000	Provide details such as which project(s) share this expense, and provide the calculation used to determine the allocation of this expense to the project.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Utilities Narrative	4000	Program Specific Instructions / Requirements —Use space as needed for additional justification

* An asterisk has been placed next to specific budget categories which require that additional information be provided. Refer to "Grants Gateway Budget Instructions" under the section Required Uploads.

Grants Gateway Field	Character Limits	Enter Required Information as Instructed Below
Operating Expenses		* Refer to funding opportunity and/or Grants Gateway Budget Instructions document for additional information. This section is used to itemize costs associated with the operation of the project, including but not limited to insurance/bonding, photocopying, advertising, office supplies, direct medical service supplies, program supplies/materials. A separate entry for each type of expense is needed. Expenses for any costs shared across multiple projects must be appropriately cost-allocated in accordance with the benefit received or effort provided to the project. If Operating Expenses are not applicable, leave this section blank.
Type/Description	125	Provide the type of expense
Justification	1000	Budget justifications should identify the proposed goods/services that are programmatically necessary and describe how this expense supports the Work Plan objectives of the project. The justification should provide sufficient detail to demonstrate that specific uses and amounts of funding have been carefully considered, are reasonable and are consistent with the approaches described in the Work Plan.
Total Grant Funds	N/A	Enter the total amount of grant funds requested to support this budget category.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Operating Expenses Narrative	4000	Program Specific Instructions / Requirements Line item detail of funds (either grant or in-kind) used to support the purchase of Contraceptive supplies must be provided. This should include the cost per unit multiplied by the total number of units purchased. The acquisition cost for all contraceptives must reflect current 340B costs. Advertising/Marketing Expenses, when supported with grant funding, must include line item detail for the expense, a clear timeframe when ads/campaign will run, and a brief description of how efforts will be assessed (i.e. tracking patient calls, volume, website clicks) during specified time period. The justification must clearly state that all materials will be reviewed and approved by the I & E Committee. Promotional items are not an allowable expense. *See New Text Inserted Below
Other Expenses Detail*		Only Indirect costs are to be budgeted under this section (also referred to as Administrative costs), unless determined not to be allowed by the award. Non-profit agencies receiving federal funds are eligible to charge their federally approved indirect cost rate. A copy of the current federal ICR agreement must be uploaded to the PreSubmission Uploads section of the application. For organizations without a federally-approved indirect cost rate, indirect costs will be limited to no more than 10% of total direct costs. Direct costs may include Personal Service, Fringe Benefits, Space, Program Operations, Travel, Equipment, and Other budget costs. Applicants must provide a description of costs included in the indirect cost calculation in the Other Expenses budget narrative section of the application. Calculated indirect cost rates will be subject to DOH review and approval.
Type/Description	125	Provide the requested indirect costs rate, indicating whether it is based on a Federally Approved Rate Agreement.
Justification	1000	Indicate specifically that the document was uploaded to the Grants Gateway (Federally Approved Rate Agreement)
Total Grant Funds	N/A	Provide the requested value using the formulary provided.
Total Match Funds	N/A	Always leave blank.
Total Other Funds	N/A	Always leave blank.
> Other Narrative	4000	Program Specific Instructions / Requirements Not applicable—leave blank Use this space for additional justification

*Provide breakdown of Operating Expenses here. Promotional items are not an allowable expense. Promotional items are defined as articles of merchandise (often branded with a logo or slogan) which are given away to promote a company, corporate image, brand, or event at trade shows, conferences, or as part of marketing campaigns (e.g., water bottles, tote bags, pens, T-shirts, hats, pens etc.).

Grants Gateway Budget Data Entry
Where to Budget

Attachment 13
Revised 10/26/2023

Budget Category Side-by-Side – use this chart to assist with aligning cost categories with the (8) defined budget categories, labeled a through f on the budget summary. This a sample listing of those most commonly used

<i>Master Grant Contract Budget Categories</i>	<i>Sample of Budget Categories</i>
Personal Services	ALL employees on payroll
Fringe	Payroll Taxes, Health Insurance, Pension, Worker's Compensation, etc.
Contractual Services*	Vendors*
Contractual Services**	Subcontractors / Consultants / Affiliate Staff
Travel	Travel (ALL - for client, staff, and volunteers). Travel for individuals funded under the Contractual Service budget category must be included under CS.
Equipment Expense	> article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost which equals or exceeds \$5,000, or a grouping of like items which equals or exceeds \$5,000. < \$5,000 budget under Operating Expenses
Space/Property & Utility Expenses	Rent, Depreciation, Maintenance & Repairs, Utilities (including electric, heat, cell phone, internet, telephone)
Operating Expense	Equipment, Office Technology purchases < \$5,000
Operating Expense	Beverages, Food, Meeting Costs. Adherence to Guidelines for Healthy Meetings as adopted from National Alliance for Nutrition and Activity (NANA) Healthy Meeting Guidelines is required: https://www.health.ny.gov/prevention/healthy_lifestyles/guidelines.htm .
Operating Expense	Office Supplies, Program Supplies/Materials
Operating Expenses	Conference Costs/Registration Fees. IF these costs are associated with other reimbursable travel (lodging, mileage, etc.), these costs should be budgeted under travel.
Operating Expenses	Staff Training/Professional Development (for costs such as conference fee - NOT travel)
Operating Expenses	Vehicle Operating Expenses
Operating Expenses	Client Services (medical supplies, translation services, etc.)
Operating Expenses	Direct Medical Supplies
Operating Expense unless fringe benefit related, then it is Personal Services	Insurance (e.g. general liability)
Operating Expense unless it is contracted out, then it is Contractual Services	Database Management, Computer/Network Maintenance
Operating Expense unless it is contracted out, then it is Contractual Services	Media Placement, Advertising (e.g. recruitment ads, program promotion). ALL purchased media placement or advertising requires prior approval.
Operating Expenses any associated travel must go under travel	Educational Materials, Printing, Postage
Other	Special Events, Workshops
	Indirect

*Contractual Services - Vendors: include those persons or organizations that provide the same or similar services to any customer without altering its product. Examples of vendors include audit services, payroll services, bookkeepers, laboratory services, and IT consultants.

**Contractual Services – Subcontractors / Consultants / Affiliate Staff: performs a portion of the scope of work from the lead contractor's project, often off-site and under the direction of a third party. The subcontractor has its performance measured against the objectives of its portion of the scope of work of the lead program.

**New York State Department of Health
Bureau of Perinatal Reproductive and Sexual Health (BPRASH)
Budget Guidance Document**

Purpose: This document provides budget guidance to the Bureau of Perinatal Reproductive and Sexual Health (BPRASH)'s contractors on allowable expenses. All questions should be directed to your contract manager.

1. FOOD

For all BPRASH Programs, purchase of food using contract funds is only allowed for youth/parent focus groups and educational trainings. Purchasing food is not allowed for staff functions or participants (e.g., stakeholders) at community meetings. In the case where both clients and stakeholders are in attendance, DOH will only reimburse for food at meetings if:

- 1) the target audience is primarily youth/parents participating in program, and
- 2) make up 50% or more of the attendees. In addition, contractors must:
 - Use National Alliance for Nutrition and Activity Meeting/Conference Guidance http://www.health.ny.gov/prevention/healthy_lifestyles/guidelines.htm
 - Ensure that any bottle deposit or NYS Sales Tax payments are backed out of the expense before contractor requests reimbursement

For Adolescent Health Programs including SRAE, purchase of food using contract funds is allowed for students and is used as a teachable moment. Contractors must:

- Use Adolescent Food Guidance Document http://www.actforyouth.net/resources/n/n_adolescent_food_guidelines.pdf

2. INCENTIVES

Incentives are allowed for all BPRASH Programs but limited to 1% of the total approved budget. An incentive tracking log must be maintained by the contractor and made available for review upon request. Gift cards must be to businesses that do not sell tobacco or alcohol products (Adolescent programs are an exception due to state laws prohibiting sale of tobacco/alcohol to minors).

Note: Incentives cannot be used for transportation to medical appointments (funds/services are available through Medicaid, see section 4.b. Transportation for Client Travel).

3. MEDIA CAMPAIGNS

Expenses related to media campaigns are allowed in all BPRASH Programs for targeted audiences given appropriate detailed justification is provided. This includes expenses for social media campaigns and associated contracts/research. For requests to be approved, contractors must:

- Provide a line-item budget of anticipated expenses;
- Use market research (e.g., focus groups, community partners) to guide media campaign efforts; and
- Include a method to evaluate the effectiveness of the campaign (demonstrate how the campaign benefits the program).

**New York State Department of Health
Bureau of Perinatal Reproductive and Sexual Health (BPRASH)
Budget Guidance Document**

Note: Contractors are strongly encouraged to seek out free or low-cost media opportunities within their community before requesting use of state funds.

4. TRAVEL

A. TRANSPORTATION for STAFF TRAVEL

Expenses for staff-related travel is allowed. Staff transportation includes travel expenses related to conducting outreach, attending conferences, and educational events/trainings.

B. TRANSPORTATION for CLIENT TRAVEL

Expenses are allowed for client-related travel (e.g., metro cards/bus passes) to assist clients in getting to educational programs.

For Medicaid-eligible appointments, Medicaid-OHIP Contractors should be used. The only exception would be if all other options (rides with family members/friends/Medicaid-OHIP Contractors) are exhausted.

Note: It is highly recommended that Programs work with clients to get family and friends' assistance first, then Medicaid-OHIP Contractors, then if all else fails, can use metro card/bus, etc.

Medicaid Transportation for Medicaid-Eligible Services - Use OHIP Contractors listed below:

- Medical Answering Services at <https://www.medanswering.com/>. Manages transportation for all Medicaid enrollees having Medicaid eligibility through all counties except for Long Island (Nassau and Suffolk counties).
- LogistiCare-LI at <http://longislandmedicaidride.net/>. Manages transportation for all Medicaid enrollees having Medicaid eligibility through either of the two counties encompassing Long Island (Nassau and Suffolk counties).

Individual clients can arrange their own travel via the websites above and confidentiality of users is protected.

5. MEMBERSHIPS, SUBSCRIPTIONS, and PROFESSIONAL ACTIVITY COSTS

Allowed

- Costs of the non-Federal entity's membership in business, technical, and professional organizations.
- Costs of the non-Federal entity's subscriptions to business, professional, and technical periodicals.
- Costs of membership in any civic or community organization are allowable with prior approval by the Federal awarding agency or pass-through entity.

Not Allowed

- Costs of membership in any country club or social or dining club or organization.
- Costs of membership in organizations whose primary purpose is lobbying.

**New York State Department of Health
Bureau of Perinatal Reproductive and Sexual Health (BPRASH)
Budget Guidance Document**

6. PROMOTIONAL ITEMS

Expenses for promotional items are ***not allowed***. Promotional items are defined as articles of merchandise (often branded with a logo or slogan) which are given away to promote a company, corporate image, brand, or event at trade shows, conferences, or as part of marketing campaigns (e.g., water bottles, tote bags, pens, T-shirts, hats, pens etc.).

7. PROGRAM SPECIFIC ITEMS

Expenditures will not be allowed for the purchase of major pieces of depreciable equipment (although limited computer/printing equipment may be considered), or remodeling or modification of structures.

The SRAE initiative will not fund additional budget expenses related to evaluation. Evaluation of the SRAE initiative will be conducted by the NYSDOH funded ACT CCA. The ACT CCA will provide training and technical assistance to the organizations funded through the SRAE initiative and will develop and execute evaluation of the EBP programs, including data collection and analysis, based on relevant health outcomes and the principles of youth development.

The SRAE initiative will not fund other 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, feminine hygiene products, and STI test supplies and associated laboratory costs. This project will also not include High School Equivalency (HSE) preparation, job placement, and childcare services that are available through other resources.