



REQUEST FOR PROPOSALS

Personal Responsibility Education Program (PREP) One-Year Renewal Application Federal Fiscal Year 2021

County Office: Salt Lake County Health Department, Community Health Division, Outreach Bureau

Funding Opportunity Title: Personal Responsibility Education Program

Total Funding Available: \$120,000

Approximate Award Amount: \$ 60,000

Eligible Applicants: Non-profits, institutions of higher education, other community agencies

Due Date for Applications: Monday, October 5, 2020 by 5:00 PM MST

Funding Notification: Applicants will be notified of funding status on or before Thursday, October 15, 2020.

Project Period: The contract resulting from this RFP will be for a period of one year. The project year will run as follows:

Year 1: 10/1/2020 to 9/30/2022

For Questions Contact: Salt Lake County Health Department

Annie Omer
Healthy Teens
385-468-5346
anomer@slco.org

Kevin Condra
Outreach Bureau
385-468-5276
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FUNDING OPPORTUNITY DESCRIPTION

The Salt Lake County Health Department (SLCoHD) is soliciting applications for Personal Responsibility Education Programs (PREP) in Salt Lake County.

Funding for these programs is made possible by the U.S. Department of Health and Human Services, Administration on Children, Youth and Families' (ACYF), Family and Youth Services Bureau (FYSB).

This funding announcement instructs applicants on how to apply for Fiscal Year 2021 funding.

The ongoing COVID-19 pandemic has significantly disrupted many educational/youth serving programs. UDOH and SLCoHD anticipate that these disruptions will continue to present barriers to program implementation throughout the 2021 Fiscal Year. As such, applicants are required to develop plans that reflect this reality. Applicants are encouraged to consider innovative strategies throughout their application, including programmatic and budgetary decisions. The review committee will not accept business-as-usual continuance plans.

Funding Purpose: PREP funds must be used to implement an evidence-based program designed to educate youth, ages 14-19, and/or their parents on both abstinence and contraception to prevent adolescent pregnancy and sexually transmitted infections (STIs), including HIV/AIDS. Additionally, programs must incorporate at least three of six adulthood preparation subjects, including healthy relationships, education and career success, financial literacy, healthy life skills, parent-child communication, and adolescent development.

Funding recipients must implement one or more of the following evidence-based interventions or curricula:

| | |
|--|-------------------------------|
| All4You | Be Proud, Be Responsible |
| Be Proud, Be Responsible, Be Protective | Families Talking Together |
| Get Real | Love Notes |
| Making Proud Choices | Teen Outreach Program® (TOP®) |
| Sexual Health & Adolescent Risk Prevention (SHARP) | |

Due to the restrictive nature of Utah's State Board of Education policies regarding human sexuality education, PREP cannot be implemented in school-based settings. All funded programs will operate in after-school, community, or clinical settings.

Q & A Session: This call will give an opportunity to ask questions, learn more about SRAE programs, considerations related to COVID-19 challenges, and receive any necessary guidance. The dates and information for the Q & A call is as follows: September 24, 2020: 10 AM – 11 AM / email kcondra@slco.org for a meeting link

Priority Population: Because Utah’s overall teen pregnancy and birth rates are lower than national rates, it is imperative that this funding be utilized to specifically prioritize teens with the greatest need. Several populations have been identified as high priority for Utah PREP. These include the following: youth ages 14-19 and/or their parents, with a specific focus on youth in the Utah juvenile justice and foster care systems; youth of Hispanic, Black/African American, Pacific Islander, or American Indian origin; pregnant and parenting teens; and youth residing in rural areas or other disadvantaged geographical areas with teen birth rates higher than Utah’s average.

Review and Award Process: Funding will be awarded based on the need of the area, the strength of the application, and ability of the potential sub-awardee to implement and sustain an evidence-based program model with the proposed priority population. The Salt Lake County Health Department (SLCoHD) will establish a panel of experts who will review the proposals submitted by each applicant agency. Reviewers will provide an overall impact/priority score to reflect their assessment of each application. Reviewer criteria can be found on Page 40-44 of this document.

APPLICATION INSTRUCTIONS

Applicants must complete each of the sections in the Application Packet (Pages 6-28), Appendix D, and the budget spreadsheet, to be considered for a funding award. All portions of the Application Packet should be submitted as one document in Adobe PDF file formats. Complete packets should be submitted via email to Annie Omer at anomer@slco.org and Kevin Condra at kcondra@slco.org by 5:00 PM MST on Monday, October 5, 2021.

No late submissions will be considered.

Primary Grant Contact:

Annie Omer
Health Teens Facilitator
Salt Lake County Health Department
385-468-5346
anomer@slco.org

Secondary Grant Contact:

Kevin Condra
Outreach Bureau Manager
Salt Lake County Health Department
385-468-5276
kcondra@slco.org

APPLICATION PACKET

Personal Responsibility Education Program (PREP) Grant
FY 2021 Funding

SECTION 1: COVERSHEET

Applicant Agency Name and Mailing Address:

Primary Grant Application Contact Name, Telephone, and Email:

Secondary Grant Application Contact Name, Telephone, and Email:

Type of Applicant Agency:

- Local Government
- Tribal Government
- Other Tribal Organization
- School District
- Non-Profit
- Other Community Agency
- Other _____

Geographical Area(s) Covered Within Salt Lake County:

Funding Amount Requested:

\$

Does the Award:

- Enhance an Existing Program
- Initiate a New Program

Name and Title of the Official Authorized to Sign:

By signing this cover sheet, all parties are providing certification that the components of their submitted application are true and accurate. This document also serves as an assurance that the grant applicant understands and agrees to all grant requirements and expectations as outlined in Appendix A (Page 21-22) and throughout this funding announcement. Before signing the coversheet, all parties should review this funding announcement document thoroughly.

Signature of Authorized Official: _____

Date:

SECTION 2: PRIORITY POPULATION

Because Utah's overall teen pregnancy and birth rates are lower than national rates, it is imperative that this funding be utilized to specifically prioritize teens with the greatest need. Several populations have been identified as high priority for Utah PREP.

2a. Please select the population(s) to be reached through the applicant agency's programming.

- Juvenile Justice youth
- Foster care youth
- Pregnant and parenting teens
- Black youth/families
- Hispanic youth/families
- Pacific Islander youth/families
- American Indian youth/families
- Rural areas
- Areas with higher rates than the U.S. average (See Appendix B for data)
- Areas with higher rates than the Utah average (See Appendix B for data)
- Other _____

2b. Is this a new priority population for your agency's PREP program?

- Yes
- No

2c. Why was this group selected?

(500 words or less)

2d. How is the applicant qualified to reach the selected priority population?

(500 words or less)

2e. What strategies will be used to reach this group? (i.e. How will they be recruited/retained/engaged in programs? How will your team build trust and create safe spaces for this group?)

(500 words or less)

SECTION 3: NEEDS OF POPULATION/COMMUNITY

In addition to the data found in Appendix B and outlined in your agency’s previous applications for PREP funding, are there other needs of your priority population(s)/community that have been identified?

Are there new needs as a result of the ongoing COVID-19 pandemic and associated disparities?

How will your agency utilize funding to address these needs?

(500 words or less—not including graphs, charts or tables.)

SECTION 4: EVIDENCE-BASED INTERVENTIONS

As stated in federal funding guidance, PREP funding recipients are required to “replicate evidence-based effective programs...that have been proven on the basis of rigorous scientific research to change behavior, which means delaying sexual activity, increasing condom or contraceptive use for sexually active youth, or reducing pregnancy among youth.”

There are three broad categories of interventions that a funding recipient may implement with PREP funding. Each program model covers material on both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS.

4a. Select the category the applicant plans to implement. (An applicant may select up to three models. A corresponding 0.5 FTE position at minimum is REQUIRED to support each model selected. Please reflect this requirement in the submitted budget. Applicant can find more information on program models in Appendix C.)

Youth focused sexual health education* [PLEASE COMPLETE TRACK 1 INFORMATION BELOW]

Youth development programming (Teen Outreach Program®) [PLEASE COMPLETE TRACK 2 INFORMATION BELOW]

Parent education (Families Talking Together) [PLEASE COMPLETE TRACK 3 INFORMATION BELOW]

**Each of the youth focused sexual health curricula approved for use with PREP require educators to teach information on condom use and safe sex. These elements MUST be incorporated if an applicant selects one of these curricula. Please ensure that all agency leadership, staff involved in the program, and potential community partners are aware and comfortable with this requirement prior to making the selection.*

Track 1: Youth Focused Sexual Health Education

4b. Select the specific curricula to be implemented. (More information on each curricula can be found in Appendix C.)

All4You (Original version with service learning included)

All4You2 (Sexual health only-no service content)

Be Proud, Be Responsible (This curriculum will only be approved for tribal or Transitioning to Adult Living foster care programs)

Be Proud, Be Responsible, Be Protective

Get Real (High school version)

Love Notes (Original version)

- Making Proud Choices (Original community-based and out-of-home youth versions)
- Sexual Health and Adolescent Risk Prevention (SHARP)
- Other*

**Applicants must submit specific justification and evidence-based findings supporting the program for any other curricula outside of UDOH's approved list.*

4c. Why was this curriculum selected? How is it an appropriate fit for the priority population?

(500 words or less)

4d. Are there any anticipated adaptations based on developmental, cultural, or other specific needs of the priority population?

(500 words or less)

Track 2: Youth Development Programming
Teen Outreach Program® (TOP®)

4e. Why was this intervention selected? How is it an appropriate fit for the priority population?

(500 words or less)

4f. Are there any anticipated adaptations based on developmental, cultural, or other specific needs of the priority population?

(500 words or less)

4g. Is the applicant willing and able to participate in some minor additional evaluation and data collection required by the national TOP® developer?

Yes

No

Unsure (Please contact UDOH for more information)

Track 3: Parent Education

Families Talking Together(500 words or less)

4h. Why was this intervention selected? How is it an appropriate fit for the priority population?

(500 words or less)

4i. Are there any anticipated adaptations based on developmental, cultural, or other specific needs of the priority population?

(500 words or less)

SECTION 5: ADULT PREPARATION SUBJECTS

****Prior to completing this section, the applicant should complete the worksheets found in Appendix D. The applicant will be required to submit these worksheets as an appendix in their final application packet.*

5a. Select at least three adult preparation subjects that will be covered through programming. (See Appendix E for detailed information on specific adult preparation subjects and curricula.)

5b. How will the applicant integrate the selected subjects into programming?

Subject #1:

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

Additional comments on approach: (Optional)

Subject #2:

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

Additional comments on approach: (Optional)

Subject #3:

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

- Healthy life skills
- Education and career success

- Financial literacy
- Adolescent development
- Healthy relationships
- Parent-child communication

Additional comments on approach: (Optional)

Subject #4 (OPTIONAL):

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

Additional comments on approach: (Optional)

Subject #5 (OPTIONAL):

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

Additional comments on approach: (Optional)

Subject #6 (OPTIONAL):

- Included in the evidence-based program model or intervention selected previously.
- Covered by incorporating an entire other curriculum in addition to the model or intervention selected previously.
- Covered by adding selected lessons from another curriculum.
- The applicant will develop original content.
- Other _____.

List other curricula or materials to be used:

Additional comments on approach: (Optional)

SECTION 6: NUMBERS SERVED

The following are general expectations for numbers served through successful programs.

- *Rural Programs: 50-100*
- *Urban Program: 100-300*

6a. How many youth and/or parents does the applicant expect to serve annually through programming?

- >50
 50-100
 100-200
 200-300
 300+
 Other _____

6b. If your agency is unable to meet the expected benchmark, please describe any barriers (including COVID-19). What makes funding justifiable for a smaller number of participants served?

(500 words or less)

SECTION 7: INNOVATION

The ongoing COVID-19 pandemic has significantly disrupted many educational and youth serving programs. UDOH & SLCoHD anticipate that these disruptions will continue to present barriers to program implementation throughout the 2021 Fiscal Year. As such, applicants are required to develop plans that reflect this reality. Applicants are encouraged to consider innovative strategies throughout their application, including programmatic and budgetary decisions.

Business-as-usual continuance plans will not be accepted.

**Applicants may partner with schools and other community agencies to accomplish these tasks.*

7a. In what format will you implement programs for the 2021 Fiscal Year?

In Person (appropriately following state and local social distancing guidelines)

In Person Implementation:

7b. Describe how programming will be adapted in response to the COVID-19 pandemic.

The following requirement will be added to any funding award for sub-contractors and as such will become part of the final contract requirements.

Any COVID-19 exposures to your program participants or cohort must be reported to the SLCoHD and advisement will be given to the program administrator(s) based on current state and local HD guidelines. SLCoHD reserves the right to mandate a transition to a hybrid program implementation OR 100% virtual program implementation at any time if the spread of COVID-19 in your organization or program is deemed high risk by SLCoHD infectious disease experts. Recipients of funding awards contractually agree to comply with these COVID-19 considerations and allow SLCoHD to be the ultimate deciding entity when COVID-19 exposures occur to program participants.

- Please describe your plans to comply with this requirement.
(500 words or less)

The following considerations must also be addressed:

- How will the applicant ensure that program and participants are safe?
- What specific strategies will the applicant use to social distance, screen participants/staff, clean, document, minimize touch, and otherwise mitigate risk?
- How will the applicant follow federal, state, and local guidelines? (Please refer to UDOH and CDC detailed guidance for safe schools and other youth-serving settings: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/prepare-safe-return.html> and <https://coronavirus.utah.gov/utahs-health-guidance-system/>)
- What additional efforts will be made by staff to build trust, create safe spaces, and make connections in this unfamiliar environment? (Example: Because it is more challenging to read facial expressions with masked individuals, program staff will spend more time on introductory activities and ground rules and check in with participants more frequently.)
- What is your plan to continue programming if state and/or local authorities close schools or issue more restrictive social distancing guidance, such as stay-at-home orders, at any point during the Fiscal Year?
- Does your agency have the capacity to transition to virtual implementation? Please describe in detailed how this would be accomplished.
- How will staff address the unique social and emotional needs of youth at this time, in addition to educational outcomes?

(500 words or less)

- Virtual
- Hybrid
- Other _____

Virtual Implementation:

7c. Describe how programming will be adapted in response to the COVID-19 pandemic. The following considerations must be addressed:

- What virtual platforms will staff utilize for programming?
- How familiar are staff with the platforms listed above? How will staff receive necessary training to develop fluency with new platforms and strategies?
- How will programs/curricula be adapted for virtual spaces, while still maintaining fidelity to the evidence-based program models?
- What additional equipment may be needed?
- How will technological access be addressed? (Example: How will devices and WiFi be made broadly available to program participants and families?)
- What additional expectations will be given to parents/guardians if youth are viewing/participating in sensitive content from home?
- How will staff build relationships, strengthen connections, create safe spaces, and actively engage youth with virtual platforms?
- How will staff address the unique social and emotional needs of youth at this time, in addition to educational outcomes?

*There are a number of resources to support applicants in adapting or designing virtual program activities. One useful resource is ETR's Design 4 Learning Virtual Vitality Tip sheets, found at: <https://www.etr.org/design-4-learning/>

(500 words or less)

SECTION 8: PROGRAM STRUCTURE & MANAGEMENT

8a. How will the proposed program be structured?

- The applicant will sub-award funding to local partners to provide services.
- The applicant will implement programs utilizing internal staff.
- The applicant will do both of the above.
- Other

Please provide the following staffing information for various program components:

Program Management/Oversight (*Primary point of contact for the grant, supervision of staff implementing programs, participation in monthly check in with SLCoHD, coordinates site visits, attendance at annual UDOH grant training, familiar with program budget and expenditures, may complete or submit reports or grant applications*):

8b. Name(s) of individual(s) assigned to this role:

8c. How many FTEs is this position?

8d. How many FTEs are supported by the grant?

8e. Is any training needed for this individual to operate effectively in this role?

Direct Program Implementation/Education (*Provides education/services directly to youth and/or families, required training in evidence-based program model(s), required training in other adolescent/sexual health competencies, may attend annual grant training, may participate in monthly check in as needed, participates in site visits, completes fidelity logs as required*):

8f. Name(s) of individual(s) assigned to this role:

8g. How many FTEs is this position?

8h. How many FTEs are supported by the grant?

8i. Is any training needed for this individual to operate effectively in this role?

Data Collection (*Administers surveys, tracks attendance, inputs data, completes reports, ensures that data is stored securely*):

8j. Name(s) of individual(s) assigned to this role:

8k. How many FTEs is this position?

8l. How many FTEs are supported by the grant?

8m. Is any training needed for this individual to operate effectively in this role?

Fiscal Management (*Familiar with program budget, tracks expenditures, submits quarterly invoices to SLCoHD*):

8n. Name(s) of individual(s) assigned to this role:

8o. How many FTEs is this position?

8p. How many FTEs are supported by the grant?

8q. Is any training needed for this individual to operate effectively in this role?

Other staff involved in the grant:

8r. Name(s) of individual(s):

8s. What role(s) does this individual have in the project?

8t. How many FTEs is this position? How many FTEs are supported by the grant?

8u. Is any training needed for this individual to operate effectively in this role?

SECTION 9: GOALS & OBJECTIVES

This section is an illustration of what the applicant proposes to accomplish over the one-year grant period. Plans should describe major goals, measurable objectives, and related activities, for the program proposal. Applicants must include a minimum of one goal, two objectives, two activities and one outcome. The applicant should complete the template on page 21. Additional activities and objectives for each goal are optional.

9a. Goals: Provide a brief description of the organization’s goals, which should be broad statements of what the applicant’s plans to accomplish with the project. **Your plan should include at least one goal.**

EXAMPLE GOAL: To increase youth attitudes, beliefs, and behaviors that support condom use.

9b. Objectives: Objectives are statements that describe program results to be achieved and how they will be achieved. A useful framework for developing measurable goals and objectives is the SMART method—that is, **Specific, Measurable, Achievable, Realistic, and Time-phased.**

- Specific objectives include who will be targeted and what will be accomplished.
- Measurable objectives include how much change is expected specifically enough that achievement of the objective can be measured through counting or documenting change.
- Achievable objectives can be realistically accomplished given your program’s existing resources and constraints.
- Realistic objectives address the scope of the health problem and propose reasonable programmatic steps.
- Time-phased objectives provide a timeline indicating when the objective will be met.

EXAMPLE OBJECTIVES:

Objective 1.1: By December 31, 2020, the Prevention Center will implement a positive youth development program in 8 out of 12 clubs.

Objective 1.2: By March 31, 2021, the Prevention Educator will analyze and report preliminary findings on the increase in attitudes, beliefs, and behaviors that support condom use.

Objective 1.3: By June 30, 2021, the Center will make adjustments to the program if preliminary findings indicate such a need.

Your project plan should include at least two objectives.

9c. Outcome Statement: How will the problem have improved at the end of the grant cycle? List anticipated changes to the priority population (e.g., an increase in knowledge and changes in attitudes, beliefs, and behaviors). Your project plan should include at least one outcome statement for each goal in your project plan.

EXAMPLE OUTCOME STATEMENT: Within one year, attitudes, beliefs, and behaviors that support condom use have increased by 10% among students in grades 7-12 in funded communities as evidenced by pre/post-tests.

GOALS & OBJECTIVES TEMPLATE

*Applicants must include at least one goal and two objectives/activities

Goal 1:

Objective 1:

Activity 1.1:

Activity 1.2:

Activity 1.3 (Optional):

Activity 1.4 (Optional):

Objective 2:

Activity 2.1:

Activity 2.2:

Activity 2.3 (Optional):

Activity 2.4 (Optional):

Outcome Statement:

SECTION 10: BUDGET

The applicant should complete the Form 1 PREP Budget Template Excel Spreadsheet, included with the funding communication.

The applicant is **REQUIRED** to include a 0.5 FTE position for every program model selected in Section 4. Applicants that plan to sub-award funding to community partners are encouraged to include an additional 0.5 FTE position to oversee grant management and administrative responsibilities.

Indirect costs cannot be billed to this grant, unless an applicant has a federally negotiated rate. In this case, please attach documentation in an appendix directly following the grant application.

The Cost Estimates Sheet in Appendix F may also be referenced for guidance.

**APPENDIX A:
RESPONSIBILITIES OF PERSONAL RESPONSIBILITY EDUCATION PROGRAM
(PREP) GRANT FUNDING RECIPIENTS**

- Implement only state approved evidence-based programs, and maintain fidelity to the selected intervention or curricula through the following:
 - Require all staff implementing programs to participate in formal curriculum certification training provided by the State or program developers.
 - Provide all supplementary materials, such as PowerPoint presentations or handouts, to the Department for approval prior to implementation.
 - Submit an Adaptation Request to the Utah Department of Health before making any adaptations or changes to approved curricula or materials.
- Ensure that the implemented program does not contain or promote any religious information, references, or instruction.
- Ensure that the implemented program is developmentally appropriate, culturally sensitive, inclusive, and trauma-informed.
- Ensure the medical accuracy of programs supported with these funds.
- Participate in state and federal evaluation, including administration of pre and post tests to program participants.
- Obtain parent/guardian permission forms for each youth prior to participation in the program and administration of a pre-survey and post-survey.
- Collect all other required data on federal and state indicators and numbers served.
- Report implementation progress, numbers served, and other indicators and data by January 8th, April 2nd, July 9th, and September 17th of 2021.
- Submit a quarterly invoice to the Department by the same dates listed above
- Participate in a monthly check-in call with program staff from the Department to evaluate progress toward goals and objectives and to provide any necessary technical assistance.
- Participate in the Salt Lake County Healthy Teens Coalition’s meetings and events, including participation in the Teen Health Summit Planning Committee.
- Participate in at least one site visit with program staff from the Department and/or the Utah Department of Health to monitor compliance with federal project guidelines.

- Participate in at least one grant-related professional development opportunity or training offered by the Utah Department of Health each year. This is in addition to required curriculum training.
- Appropriately manage sub-awards or any formal or informal agreements for work with community partners.
- Give credit to the U.S. Department of Health and Human Services, Administration on Children, Youth and Families (ACYF), Family and Youth Services Bureau (FYSB) when funding is used for the following:
 - Written or verbal advertising
 - Discussion of the program in brochures, flyers, websites, informational materials, presentations, etc.

**APPENDIX B:
UTAH ADOLESCENT BIRTH DATA
2018**

Table 1: Utah Adolescent Birth Rates, Age 15-19 by Local Health District, 2018

| Location | Rate per 1,000 females |
|----------------------|-------------------------------|
| TriCounty | 30.0 |
| San Juan | 21.4 |
| Weber-Morgan | 17.9 |
| U.S. AVERAGE | 17.4 |
| Southwest | 16.5 |
| Salt Lake County | 16.2 |
| Tooele County | 16.1 |
| Central | 13.8 |
| Wasatch County | 13.6 |
| Southeast | 17.6 |
| STATE AVERAGE | 13.1 |
| Davis County | 10.3 |
| Bear River | 8.2 |
| Utah County | 7.8 |
| Summit | 4.9* |

**Use caution in interpreting; the estimate has a coefficient of variation > 30% and is therefore deemed unreliable by Utah Department of Health standards.*

Table 2: Utah Adolescent Birth Rates, Age 15-19 by Race, 2018

| Race | Rate per 1,000 females |
|----------------------------------|-------------------------------|
| Black or African American | 24.6 |
| American Indian/Alaskan Native | 20.0 |
| Native Hawaiian/Pacific Islander | 15.2 |
| White | 11.7 |
| Asian | 3.2* |

**Use caution in interpreting; the estimate has a coefficient of variation > 30% and is therefore deemed unreliable by Utah Department of Health standards.*

Table 3: Utah Adolescent Birth Rates, Age 15-19 by Ethnicity, 2018

| Race | Rate per 1,000 females |
|--------------|------------------------|
| Hispanic | 32.6 |
| Non-Hispanic | 8.8 |

Table 4: Utah Adolescent Birth Rates, Age 15-19 by Small Area, 2016-2018

| Location | Rate per 1,000 females | Location | Rate per 1,000 females |
|-----------------------------------|------------------------|------------------------------|------------------------|
| West Valley (East) | 45.6 | Washington City | 14.2 |
| San Juan County (Other) | 39.3 | STATE OF UTAH AVERAGE | 13.1 |
| West Valley (Center) | 37.9 | Summit County (East) | 13.0 |
| SLC (Glendale) | 37.8 | West Jordan (West)/Copperton | 12.9 |
| SLC (Rose Park) | 36.2 | Utah County (South) | 12.8 |
| Ben Lomond | 33.0 | Eagle Mountain/Cedar Valley | 12.5 |
| Kearns | 32.2 | Spanish Fork | 11.7 |
| Taylorsville (East)/Murray (West) | 30.9 | Sandy (Center) | 11.2 |
| West Valley (West) | 30.8 | Lehi | 10.8 |
| South Salt Lake | 30.7 | Smithfield | 10.8 |
| Daggett and Uintah County | 30.4 | Orem (West) | 10.7 |
| Ogden (Downtown) | 30.3 | Ivins/Santa Clara | 10.5 |
| Murray | 29.6 | Herriman | 10.1 |
| Duchesne County | 29.3 | North Logan | 9.2 |
| Midvale | 28.7 | Syracuse | 9.1 |
| Tremonton | 28.5 | Saratoga Springs | 9.0 |
| Richfield/Monroe/Salina | 27.5 | Orem (East) | 8.8 |
| Washington County (Other) | 26.0 | Sanpete Valley | 8.8 |
| Magna | 25.5 | SLC (Downtown) | 8.6 |
| Delta/Fillmore | 24.1 | SLC (Sugar House) | 8.4 |
| Provo (West City Center) | 23.6 | Logan | 8.3 |
| South Ogden | 23.1 | Provo (East City Center) | 8.0 |
| Southwest LHD (Other) | 22.9 | Riverton/Bluffdale | 7.9 |
| West Jordan (Northwest) | 22.2 | Weber County (East) | 7.5 |
| Sandy (West) | 21.1 | Bountiful | 7.4 |
| Payson | 21.0 | Woods Cross/West Bountiful | 7.2* |
| Central (Other) | 21.0 | Holladay | 7.5 |
| Orem (North) | 21.0 | Cache (Other)/Rich County | 6.7 |
| Grand County | 20.1 | Pleasant Grove/Lindon | 6.5 |
| Taylorsville (West) | 20.4 | Farmington | 6.4 |
| Riverdale | 20.1 | South Jordan | 6.4 |
| Clearfield Area/Hooper | 19.5 | American Fork | 6.4 |
| Tooele Valley | 18.9 | Kaysville/Fruit Heights | 6.0 |

| | | | |
|--------------------------|-------------|--|------|
| West Jordan (Southeast) | 18.5 | Mapleton | 5.7* |
| Box Elder County (Other) | 17.9 | Salem City | 5.7* |
| Emery County | 17.8 | Millcreek (South) | 5.6* |
| U.S. AVERAGE | 17.4 | SLC (Foothill/East Bench) | 5.5* |
| St. George | 17.1 | Sandy (Northeast) | 5.1 |
| Hurricane/La Verkin | 17.0 | Daybreak | 4.8 |
| Springville | 16.8 | Cottonwood | 4.5 |
| Roy/Hooper | 16.7 | Park City | 4.2 |
| Cedar City | 16.7 | Draper | 4.0* |
| Brigham City | 16.6 | Centerville | 4.0* |
| Nephi/Mona | 16.6 | Millcreek (East) | 3.0* |
| Carbon County | 16.3 | SLC (Southeast Liberty) | 2.8* |
| North Salt Lake | 16.0 | Alpine | 2.2* |
| Tooele County (Other) | 15.8 | SLC (Avenues) | 2.1* |
| Layton/South Weber | 15.3 | Sandy (Southeast) | 2.0* |
| Hyrum | 15.2 | Provo/BYU | 1.5 |
| Wasatch County | 14.7 | Morgan County | ** |
| Blanding/Monticello | 14.6 | <i>*Use caution in interpreting; the estimate has a coefficient of variation > 30% and is therefore deemed unreliable by Utah Department of Health standards.</i> | |

More detailed data can be found on Utah's Public Health Indicator Based Information System (IBIS) (<https://ibis.health.utah.gov/topic/Index.html>) You may also contact the Maternal & Infant Health Program Epidemiologist, Nicole Stone (nstone@utah.gov or 801-273-2873), or the Teen Pregnancy Prevention Specialist, Elizabeth Gerke (egerke@utah.gov or 801-273-2870), for data specific to your area or population.

APPENDIX C: PROGRAM MODELS & CURRICULUM GUIDE

All4You:

- ✓ Sexual health and community service learning content
- ✓ Appropriate for all youth, age 14-18
- ✓ 14 sessions/26 hours
- ✓ See <http://www.etr.org/ebi/programs/all4you/> for more information regarding specific content

Be Proud, Be Responsible:

- ✓ Sexual health
- ✓ Only approved for Tribal and foster care TAL programs
- ✓ 6 sessions/50 minutes each
- ✓ See <http://www.etr.org/ebi/programs/be-proud-be-responsible/> for more information regarding specific content

Be Proud, Be Responsible, Be Protective:

- ✓ Sexual health
- ✓ Pregnant and parenting teens
- ✓ 8 sessions/60 minutes each
- ✓ See <http://www.etr.org/ebi/programs/be-proud-be-responsible-be-protective/> for more specific information regarding content

Families Talking Together:

- ✓ Parent education
- ✓ All parents of teens or pre-teens (ideally 10-16 year olds)
- ✓ 1-2 sessions/2 hours total
- ✓ Individual or small-group setting
- ✓ See <http://www.clafh.org/resources-for-parents/parent-materials/> for more specific information regarding content

Get Real:

- ✓ Sexual health
- ✓ All youth, ages 14-18
- ✓ 11 sessions/8 hours
- ✓ See <https://www.etr.org/ebi/programs/get-real/> for more specific information regarding content

Love Notes:

- ✓ Sexual health and relationships education
- ✓ Older teens/pregnant and parenting teens
- ✓ 13 sessions/40-80 minutes each
- ✓ See <https://www.dibbleinstitute.org/love-notes-evidence-based/> for more specific information regarding content

Making Proud Choices:

- ✓ Sexual health
- ✓ Appropriate for all youth, age 14-18; foster care specific adaptation available
- ✓ 8 sessions/60 minutes each
- ✓ See <http://www.etr.org/ebi/programs/making-proud-choices/> for more specific information regarding content

Sexual Health & Adolescent Risk Prevention (SHARP):

- ✓ Sexual health
- ✓ Juvenile justice youth
- ✓ 3-4 hours
- ✓ See <https://socio.com/products/pasha-sharp-training-modules> for more specific information regarding content

Teen Outreach Program® (TOP®)

- ✓ Positive youth development and community service learning components
- ✓ Appropriate for all youth, ages 14-18
- ✓ At least 25 sessions/weekly for at least 32 weeks/20 hours community service learning
- ✓ See <http://teenoutreachprogram.com/> for more specific information regarding content

APPENDIX D: ADULT PREPARATION SUBJECTS ASSESSMENT

Directions: Use this worksheet to review and assess the APS topics you are currently implementing.

| What APS Topics are you currently using? | APS Topic: _____ | APS Topic: _____ | APS Topic: _____ | APS Topic: _____ |
|---|------------------|------------------|------------------|------------------|
| Review and Assess Current APS Implementation | | | | |
| What is working well? | | | | |
| Challenges? | | | | |
| Considerations: Ensure APS relevance to program (goals/objectives) and community needs. | | | | |
| <p>Assess/reflect on fit across: <i>population served, setting, engagement of stakeholders and partners (what has changed since you started implementing APS)?</i></p> <p><i>Are APS topics still relevant?</i></p> <p><i>Is it time to select new APS?</i></p> | | | | |
| Staff Development and Capacity Building | | | | |
| What types of training and support are in place/needed to ensure staff have knowledge | | | | |

| | | | | |
|---|--|--|--|--|
| <p>and skill to deliver selected APS?</p> <p>Are guest speakers/content experts used/needed?</p> <p><i>Do staff model gender-neutral and inclusive language?</i></p> <p><i>Do staff use trauma-informed and PYD approaches?</i></p> | | | | |
| Adaptations and Adjustments | | | | |
| <p>What types of adaptations might be needed: to meet needs of population being served, adjustments for virtual implementation, training for staff, etc.</p> | | | | |
| Other Considerations for your APS Topics? | | | | |
| <p>What other considerations, issues, are important for successful implementation of APS topics for your program?</p> <p>What additional training, support, resources are needed?</p> <p>Timeline?</p> | | | | |

Interest in selecting NEW APS Topics?

| What new APS Topics are you interested in? | <i>NEW APS Topic: _____</i> | <i>NEW APS Topic: _____</i> | <i>NEW APS Topic: _____</i> | <i>NEW APS Topic: _____</i> |
|---|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <p>Assess/reflect on fit across: population served, setting, engagement of stakeholders and partners.</p> <p>What stakeholders need to be engaged to determine fit?</p> | | | | |
| <p>How does this APS topic align to/support your program goals and objectives?</p> | | | | |
| <p>What training and supports are needed to adopt this APS?</p> <p>Resources, guest speakers, timeline?</p> | | | | |
| <p>What adaptations are needed to implement virtually if needed?</p> | | | | |
| <p>Other considerations needed to assess selection of NEW APS topics?</p> | | | | |

**APPENDIX E:
ADULT PREPARATION SUBJECTS GUIDE**

What does my program already cover?

| Name of Program | Adolescent Development | Education & Career Success | Financial Literacy | Healthy Life Skills | Healthy Relationships | Parent-Child Communication |
|---|-------------------------------|---------------------------------------|---------------------------|----------------------------|------------------------------|-----------------------------------|
| All4You | | | | ✓ | ✓ | |
| Be Proud, Be Responsible | | | | ✓ | ✓ | |
| Be Proud, Be Responsible, Be Protective | | | | ✓ | ✓ | |
| Families Talking Together | ✓ | | | ✓ | ✓ | ✓ |
| Get Real | ✓ | | | ✓ | ✓ | ✓ |
| Love Notes | | | | ✓ | ✓ | |

| | | | | | | |
|--|---|---|--|---|---|--|
| Making Proud Choices | | | | ✓ | ✓ | |
| Sexual Health & Adolescent Risk Prevention (SHARP) | | | | ✓ | ✓ | |
| Teen Outreach Program® (TOP®) | ✓ | ✓ | | ✓ | ✓ | |

What do I do if my program doesn't cover at least three adult preparation subjects?

Adolescent Development:

- ✓ Many current PREP sub-awardees are reporting that their program participants lack a basic understanding of their own bodies and development. However, most of the sexual health curricula are missing this crucial component. Adding a supplementary lesson about adolescent development for all youth would be ideal.
- ✓ Include select lessons from other curricula that cover Adolescent Development, such as Get Real or Teen Outreach Program® (TOP®).
- ✓ Invite a guest presenter with expertise in adolescent physical development, brain development, etc.
- ✓ Work with UDOH to develop a lesson on this topic.

Education & Career Success:

- ✓ Programs with a community service learning component help youth develop a good work ethic and expose participants to different types of services and employment in the community. Current grant sub-awardees are implementing an activity at the culmination of the program in which youth participants create a resume of the experiences and skills they've gained from their CSL activities.
- ✓ A current sub-awardee uses role play interviews to teach program participants the concept of appropriate assertiveness.
- ✓ Connect youth with adults in the community and allow them to learn about their careers through interviews or job shadowing.
- ✓ Allow youth participants opportunities for peer education.
- ✓ Invite a guest presenter to teach a lesson on an education and career success topic.
- ✓ Have older program participants (16-17 year old high school students or 18-19 year old college students) mentor younger participants and count their experience towards internships, resumes, class credit, etc.
- ✓ Include select lessons from other curricula that cover Education & Career Success.
- ✓ Work with UDOH to develop a lesson on this topic.

Financial Literacy:

- ✓ A current grant sub-awardee uses monopoly money to award participation and good behavior. Participants can use their money to purchase incentive items throughout the program, which gives them an opportunity to practice money management skills.
- ✓ A current grant sub-awardee includes a supplementary activity in which program participants learn how much having and raising a child would cost.
- ✓ Include lessons from other curricula that cover Financial Literacy, such as *Your Money, Your Goals* from the Bureau of Consumer Financial Protection.
- ✓ Utilize *The Real Cost of Caring for a Baby in Your Teen Years* quiz from the *We Think Twice* resource library at https://www.wethinktwice.acf.hhs.gov/real-cost-caring-baby-your-teen-years?utm_source=eblast&utm_medium=email&utm_campaign=financial_quizzes
- ✓ Invite a guest presenter to teach a lesson to youth participants on financial literacy.
- ✓ Work with UDOH to develop a lesson on this topic.

Healthy Life Skills:

- ✓ All approved PREP curricula include material on healthy life skills (i.e. communication, goal setting, etc.)
- ✓ If a sub-awardee wishes to include material on other aspects of healthy life skills, such as nutrition and physical activity or other aspects of health, they may:
 - Include select lessons from other curricula.
 - Invite a guest presenter to teach a lesson on a specific healthy life skill topic.
 - Work with UDOH to develop a lesson on this topic.

Healthy Relationships:

- ✓ All approved PREP curricula include material on healthy relationships (i.e. communication, negotiation skills, etc.)
- ✓ If a sub-awardee wishes to have a greater focus on healthy relationships, they may:
 - Include supplemental lessons from the Love Notes curriculum, which is focused primarily on healthy relationships with only a few lessons specific to sexual health.
 - Include select lessons from other curricula.
 - Invite a guest presenter to teach a lesson on healthy relationships.
 - Work with UDOH to develop a lesson on this topic.

- ✓ Several recipients of PREP and Rape Prevention Education funding integrate the Safe Dates curriculum to cover healthy relationships and meet requirements of both grants. This is acceptable.
- ✓ Utilize resources and activities from www.loveirepect.org
- ✓ Utilize the *Healthy Relationships: Assess, Improve, Take Action* infographic produced by FYSB, available at <https://teenpregnancy.acf.hhs.gov/sites/default/files/resource-files/Healthy%20Relationships%20Infographic.pdf>
- ✓ Utilize the *Perfect Person* quiz from the *We Think Twice* resource library at <https://www.wethinktwice.acf.hhs.gov/perfect-person-quiz>

Parent-Child Communication:

- ✓ Implement the Families Talking Together curriculum concurrently with parents of youth participating in a sexual health or youth development program.
- ✓ The Get Real curriculum incorporates take home assignments and discussions for participants to complete with their parents or another trusted adult. Create similar take home assignments and discussion guides for other program models.
- ✓ Include select lessons from other curricula that cover Parent-Child Communication.
- ✓ Invite a guest presenter to teach a lesson to youth and parents on co-communication.
- ✓ Work with UDOH to develop a lesson on this topic.

**APPENDIX F:
COST ESTIMATES SHEET**

| Program Model | Curriculum | Facilitator Training | Staff Time | Incentives for Participants |
|---|--|---|-------------------|------------------------------------|
| All4You | \$500/each | \$0 Local trainers available | \$\$ | \$\$ |
| All4You2 | | \$0 Local trainers available | \$\$ | \$\$ |
| Be Proud, Be Responsible | \$0 UDOH and Urban Indian Center will provide copies | \$0 Local trainers available | \$\$ | \$ |
| Be Proud, Be Responsible, Be Protective | \$645/each | \$2,000/person | \$\$ | \$ |
| Families Talking Together | Provided by UDOH for Year 1 Printing costs vary from \$20-\$30/participant workbook | Initial training provided by UDOH Free | \$ | \$\$ |
| Get Real | \$300/each | \$2,000/person | \$\$ | \$ |
| Love Notes | Print: \$425/each Digital: \$225/1 yr subscription \$425/3 yr subscription | Initial training provided by UDOH \$2,000/person | \$\$ | \$\$ |
| Making Proud Choices | \$648/each | \$0 Local trainers available | \$\$ | \$\$ |

| | | | | |
|--|--|-------------------------------------|--------|--------|
| Sexual Health & Adolescent Risk Prevention (SHARP) | Print: \$205/each Digital: \$20/month | \$2,000/person | \$ | \$ |
| Teen Outreach Program (TOP) | \$0 UDOH will provide copies | \$0 Local trainers available | \$\$\$ | \$\$\$ |

Personal Responsibility Education Budget TEMPLATE AGENCY

October 1, 2020 - September 30, 2021

| 1. PERSONNEL | | | | | |
|----------------------|-----------------------|---|---|--------------------|---------------|
| <u>Name/Position</u> | <u>Hours per year</u> | - | - | <u>Hourly Wage</u> | - |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| TOTAL | | | | | \$0.00 |

| 2. FRINGE BENEFITS -Fringe benefits applicable to direct salaries and wages are treated as direct costs. | | | | | |
|---|----------------------------|---|---|----------------------|---------------|
| <u>Name, Position</u> | <u>Fringe Benefit Rate</u> | - | - | <u>Yearly Salary</u> | - |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| TOTAL | | | | | \$0.00 |

| 3. TRAVEL | | | | | |
|-----------------------------------|--------------------|---|---|------------------------------|---------------|
| <u>Local Travel</u> | | | | | |
| <u>Travel Destination/Purpose</u> | <u>Total Miles</u> | - | - | <u>Per-Mile Rate</u> | - |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| TOTAL | | | | | \$0.00 |
| <u>Over Night Travel</u> | | | | | |
| <u>Travel Destination/Purpose</u> | <u>Lodging</u> | - | - | <u>Number of Individuals</u> | - |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| | x | | | \$0.00 | = \$0.00 |
| TOTAL | | | | | \$0.00 |

Detail and Justification:

4. EQUIPMENT - For state and local governments (under 45 CFR Part 92), equipment is defined as "an article of tangible, nonexpendable, personal property having a useful life of more than 1 year and an acquisition cost of \$5,000 or more per unit. List each item of equipment separately and provide cost of each item. Give justification for each item of equipment by relating it to program objectives.

| <u>Item</u> | <u>Quantity</u> | x | <u>Unit Price</u> | = | |
|--------------|-----------------|---|-------------------|---|---------------|
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| TOTAL | | | | | \$0.00 |

Detail and Justification:

5. SUPPLIES - List types of supplies (General office, printing, promotional, etc.). Provide unit cost and number needed (whenever possible). Provide totals for the types of supplies. Give as much detail and justification for the supply items by relating them to specific program objectives whenever possible.

| <u>Item</u> | <u>Quantity</u> | x | <u>Unit Price</u> | = | |
|--------------|-----------------|---|-------------------|---|---------------|
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| | | x | \$0.00 | = | \$0.00 |
| TOTAL | | | | | \$0.00 |

Detail and Justification:

6. CONTRACTUAL - A consultant is an individual hired to give professional advice or services for a fee but not as an employee of the hiring party.

| Name, Organizational Affiliation, Service Provided | Hourly Rate | | Provided Hours | = | |
|--|-------------|---|----------------|---|---------------|
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| Travel, Per Diem, and Other Related Expenses | | | | | |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| TOTAL | | | | | \$0.00 |

Detail and Justification:

7. OTHER (Examples)

| Name of Item | Cost | | Quantity | = | |
|--------------|--------|---|----------|---|---------------|
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| | \$0.00 | x | | = | \$0.00 |
| TOTAL | | | | | \$0.00 |

Detail and Justification:

APPENDIX G:
PREP GRANT APPLICATION REVIEWER SCORE SHEET AND CRITERIA
Please be aware that this criteria may be changed or modified at any time.

| Name of Agency: _____ Geographic Area: _____ | Total Points Possible | Total Points Awarded |
|---|--------------------------------------|-------------------------------------|
| SECTION 1: COVERSHEET | | |
| Question #1 – Are all sections of the coversheet completed? | | |
| 0 Points = The coversheet is incomplete. 1 Points = All sections of the coversheet are complete and the form is signed by an authorized official. | 1 Point | |
| SECTION 2: PRIORITY POPULATION | | |
| Question #1 – Does the applicant’s proposal include work with populations that have been identified as high priority for Utah PREP? | | |
| 0 Points = The applicant did not complete the section or does not plan to work with any priority populations. 1 Point = The applicant plans to work with one priority population. 2 Points = The applicant plans to work with MORE than one priority population AND/OR an area with rates higher than the Utah average. 3 Points = The applicant plans to work in an area with rates higher than the U.S. average. | 3 Points | |
| Question #2 – Did the applicant clearly describe their rationale for the selection of their priority population? | | |
| 0 Points = The applicant did not provide a rationale for the selection of their priority population. 1 Point = The applicant provided a rationale for the selection of their priority population, but it was unclear. 2 Points = The applicant provided a clear rationale for the selection of their priority population. | 2 Points | |
| Question #3 – Is the applicant qualified to reach their proposed priority population? | | |
| 0 Points = The applicant has no experience or qualifications to reach their priority population. 1 Point = The applicant has some experience or qualifications to reach their priority population. 2 Points = The applicant has extensive experience and is well qualified to reach their priority population. | 2 Points | |
| Question #4- Does the applicant have a clear and reasonable plan to reach their selected priority population? | | |

| | | |
|--|----------|--|
| <p>0 Points = The applicant did not describe how they plan to reach their selected priority population.</p> <p>1 Points = The applicant provided a plan to reach their priority population, but it was unclear or unreasonable.</p> <p>2 Points = The applicant provided a clear and reasonable plan to reach their selected priority population.</p> | 2 Points | |
| SECTION 3: NEED STATEMENT | | |
| Question #1 – Did the applicant demonstrate a strong need for the program in their area and/or with their selected priority population(s)? | | |
| <p>0 Points = The applicant did not describe the need in their area and/or with their selected priority population.</p> <p>1 Point = The applicant provided a description of the need in their area and/or with their selected priority population, but did not use data or show a strong need.</p> <p>2 Points = The applicant demonstrated a strong need in their area and/or with their selected priority population through the use of data.</p> | 2 Points | |
| SECTION 4: EVIDENCE-BASED INTERVENTIONS | | |
| Question #1 – Will the applicant implement only evidence-based interventions? | | |
| <p>0 Point = No</p> <p>1 Point = Yes</p> | 1 Point | |
| Question #2 – Is it clear why the applicant selected the intervention(s)? | | |
| <p>0 Points = The applicant did not provide an explanation for the selection of their intervention(s).</p> <p>1 Point = The applicant provided an explanation for the selection of their intervention(s), but it was unclear.</p> <p>2 Points = The applicant provide a clear explanation for the selection of their intervention(s).</p> | 2 Points | |
| Question #3 – Is the intervention selected appropriate for the applicant’s priority population? | | |
| <p>0 Points = The applicant did not explain how the intervention is appropriate for their priority population.</p> <p>1 Point = The applicant provided an explanation, but considering the information found in Appendix C of the RFP, the intervention is not an appropriate fit for the priority population.</p> <p>2 Points = The applicant provided an explanation, and considering the information found in Appendix C of the RFP, the intervention appears to be an appropriate fit for the priority population.</p> | 2 Points | |
| Question #4 – Are the applicant’s proposed adaptations minimal and reasonable, and will they maintain the fidelity of the evidence-based intervention? | | |

| | | |
|--|----------|--|
| <p>0 Points = The applicant did not provide any information on adaptations. It is unclear whether adaptations will be made.</p> <p>1 Point = The applicant proposed specific adaptations, but they were not based on developmental/cultural needs of the priority population, appear to be excessive and/or unreasonable and may compromise the fidelity of the evidence-based intervention.</p> <p>2 Points = The applicant will not make any adaptations OR the applicant proposed specific adaptations based on development/cultural needs of the priority population, which appear to be minimal, reasonable, and will maintain fidelity to the evidence-based intervention.</p> | 2 Points | |
| SECTION 5: ADULT PREPARATION SUBJECTS | | |
| Question #1- Did the applicant select at least three adult preparation subjects to incorporate into their program? | | |
| <p>0 Points = The applicant did not select at least three adult preparation subjects.</p> <p>1 Point = The applicant selected at least three adult preparation subjects.</p> | 1 Point | |
| Question #2 – Will the applicant incorporate the selected adult preparation subjects into their program in a logical manner? | | |
| <p>0 Points = The applicant did not show how they will incorporate the selected adult preparation subjects into their program.</p> <p>1 Point = The applicant showed how they will incorporate the selected adult preparation subjects into their program, but their description was unclear or illogical.</p> <p>2 Points = The applicant showed how they will incorporate the selected adult preparation subjects into their program in a clear and logical manner.</p> | 2 Points | |
| SECTION 6: NUMBERS SERVED | | |
| Question #1 – Do the applicant’s projected numbers served meet grant expectations as outlined in the RFP? | | |
| <p>0 Points = The applicant did not complete this section.</p> <p>1 Point = The applicant completed the section, but their projected numbers served do not meet grant expectations.</p> <p>2 Points = The applicant completed the section AND their projected numbers served meet grant expectations.</p> | 2 Points | |
| SECTION 7: INNOVATION | | |
| Question #1 – Does the applicant’s proposed program demonstrate an innovative approach to this work in their area or with their priority population? | | |
| 0 Points = The applicant did not provide a description of how their proposed program will demonstrate innovation. | 2 Points | |

| | | |
|---|----------|--|
| 1 Point = The applicant completed the section, but their proposed plan is not feasible, unclear, or will not serve to sustain their project. 2 Points = The applicant's proposed plan is a clear, innovative approach to this work in their area/with their priority population and will offer sustainability. | | |
| SECTION 8: PROGRAM STRUCTURE & MANAGEMENT | | |
| Question #1 – Did the applicant indicate how their program would be structured? | | |
| 0 Points = No 1 Point = Yes | 1 Point | |
| Question #2 – Is each program role clearly designated? | | |
| 0 Points = No 1 Points = Yes | 1 Points | |
| Question #3 – Are there adequate FTEs allocated to support each individual in carrying out the role successfully? | | |
| 0 Points = No 1 Point = Yes | 1 Points | |
| Question #4 – Were training needs of staff clearly identified? | | |
| 0 Points = No 1 Point = Yes | 1 Points | |
| SECTION 9: GOALS & OBJECTIVES | | |
| Question #1 – Did the applicant include the correct number of goals, objectives, activities, and outcomes? | | |
| 0 Points = No 1 Point = Yes | 1 Point | |
| Question #2 – Are the goals/objectives/activities/outcomes clearly written? | | |
| 0 Points = None are clear 1 Point = Some are clear 2 Points = All are clear | 2 Points | |
| Question #3 – Are the objectives SMART? | | |
| 0 Points = None are SMART 1 Point = Some are SMART 2 Points = All are SMART | 2 Points | |
| SECTION 10: BUDGET | | |
| Question #1- Is the budget complete? | | |
| 0 Points = No 1 Point = Yes | 1 Point | |
| Question #2 – Is the budget accurate? (i.e. all numbers add) | | |
| 0 Points = No 1 Point = Yes | 1 Point | |
| Question #3 – Is the budget justification clear? | | |

| | | |
|--|-----------|--|
| 0 Points = No budget justification was provided 1 Point = A budget justification was provided, but is unclear 2 Points = A clear budget justification was provided | 2 Points | |
| Question #4 – Is the personnel time allocated adequate for the project proposed? (At least a 0.5 FTE for each program model selected in Section 4; at least a 0.5 FTE for management of sub-awards.) | | |
| 0 Points = No 1 Point = Yes | 1 Point | |
| SECTION 11: GENERAL CONSIDERATIONS | | |
| Question #1 – Has the applicant been identified by SLCoHD as high risk, through audit findings or other risk assessment? | | |
| 0 Points = No -3 Points = Yes | -3 Points | |
| Question #2 – If a previous funding recipient, has the applicant ever received a formal warning for a failure to meet grant requirements? | | |
| 0 Points = No -3 Points = Yes | -3 Points | |
| Question #3—The proposal is high quality and writing is clear. | | |
| 0 Points = Poor 1 Point = Fair 2 Points = Good 3 Points = Excellent | 3 Points | |
| The proposal illustrates that the agency has the capacity to carry out the project. | | |
| 0 Points = No capacity 1 Point = Low capacity 2 Points = Average capacity 3 Points = High capacity | 3 Points | |