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**Department of Health & Human Services
Administration for Children and Families**

Program Office: Administration on Children, Youth, and Families Children's Bureau

Funding Opportunity Title: Family Connection Discretionary Grants

Announcement Type: Initial

Funding Opportunity Number: HHS-2009-ACF-ACYF-CF-0078

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Executive Summary:

The Administration for Children and Families (ACF), Children's Bureau, announces the

availability of competitive grant funds authorized by the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351). The purpose of this funding announcement is to help children who are in or are at-risk of entering into foster care reconnect with family members by 1) developing and implementing grant programs in the areas of kinship navigator programs; family-finding programs to locate biological family and reestablish relationships; family group decision-making meetings, or residential family treatment programs; 2) evaluating the implementation and outcomes of these programs; and (3) developing these programs as identifiable sites that other States/locales seeking to implement family connection services for this population can look to for guidance, insight, and possible replication.

Under this Program Announcement applicants will submit proposals for one, or any combination of, the aforementioned four inter-related grant program areas, which comprise elements of a strong system of services to support family connections. Applicants must clearly state for which of these four program areas, or which combination of program areas, they are applying, and must justify their selection of program area(s) in terms of documented needs associated with specified project goals and objectives.

Applicants should note that initial Federal awards levels will decline and non-Federal share match levels will increase in the third year of the three-year grant period.

I. FUNDING OPPORTUNITY DESCRIPTION

Statutory Authority

The legislative authority is the Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351).

Description

Definitions

For the purposes of this program announcement, the following alphabetical list of definitions of relevant terms is provided:

Caregiver: Relative, kin, or "fictive kin" serving in the parental role in a kinship care living arrangement, providing full-time care for the child.

Caregiver Family: Child caregiver(s), other immediate members of the family constellation; and "fictive-kin" in a kinship care living arrangement.

Comprehensive Treatment Services: The services offered will treat a complex array of issues for both parents and children that ultimately results in improved child and family outcomes. Such services must be coupled with access to primary health, mental health and social services for parents and their children. These systems of care must be designed to improve the overall treatment outcomes for the family unit as a whole.

Family: A family may include the child's birth or adoptive parents, extended family members and other relatives, as well as friends, neighbors and others, who may not be related by blood or marriage, but who play an important, positive role in the child's life and are considered to be part of the family.

Family-finding: Intensive use of technology and other means to identify, locate and contact family members; assess their suitability as potential permanency options for the child or youth and engage them with the child or youth in a process that can lead to a permanency placement or relationship.

Family Group Decision-Making (FGDM): An intervention approach in which family members and relevant service providers are brought together in a meeting or series of meetings to make decisions to ensure the safety, permanency and well-being of their children and to develop a plan for services. FGDM also refers to one of the various models of this approach. Other models or terms include: Family Team Meetings, Family Group Conferencing, Family Unity Meetings, Family Team Conferences, Family Group Conferences and Team Decision-Making.

"Fictive Kin": Persons not related by blood or marriage but who have a strong, positive emotional tie to the child, and have a positive role in the child's life such as, godparents, neighbors, family friends or a member of the child's Tribe.

Kin: May include extended family members and other relatives of the child by blood or

marriage as well as "fictive kin".

Kinship Care: An arrangement where a child lives full-time with and is being raised by a relative, without a parent being present. This may be a formal/legal arrangement with involvement of a child welfare agency and the court, or a voluntary/informal arrangement, sometimes known as "private kinship care" where placement is arranged by an agency or the family. The living arrangement may be subsidized or unsubsidized.

Permanency: A nurturing relationship between a child or youth and a caretaking adult which builds emotional ties that are sufficient to maintain the continuity of the relationship throughout the child's life. Permanency options encompass a range of living arrangements through reunification with biological family, adoption, long-term placement with a relative or another legal plan such as guardianship.

Residential Family Treatment Programs: Programs that offer organized treatment services for parents and their minor children that feature a planned regimen of care in a safe 24-hour residential setting with qualified staff supervision and proper licenses.

Background

The Department of Health and Human Services (HHS) is the Federal Government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves. Within HHS, the Administration for Children and Families (ACF) is the agency responsible for Federal programs that promote the economic and social well-being of families, children, individuals, and communities. The Administration on Children, Youth and Families (ACYF) administers national programs for children and youth; works with States, Tribes, and local communities to develop services that support and strengthen family life; seeks joint ventures with the private sector to enhance the lives of children and their families; and provides information and other assistance to parents. Many of the programs administered by ACYF focus on children from low-income families; abused and neglected children; children and youth in need of foster care, independent living, adoption or other child welfare services; preschool children; children with disabilities; runaway and homeless youth; and children from Native American and migrant families.

Within ACYF, the Children's Bureau (CB) plans, manages, coordinates, and supports child abuse and neglect prevention and child welfare services programs. The CB is the agency

within the Federal Government that is responsible for assisting child welfare systems by promoting continuous improvement in the delivery of child welfare services. CB programs are designed to promote the safety, permanency, and well-being of all children, including those in foster care, available for adoption, recently adopted, abused, neglected, dependent, disabled, or homeless, and to prevent the neglect, abuse, and exploitation of children.

The purpose of the CB's programs is to promote strengthening of the family unit in order to help prevent the unnecessary separation of children from their families and encourage reunifying families, when possible, if separation has occurred. State and Tribal child welfare systems are designed to deliver direct services that protect children who have suffered maltreatment, who are at risk for maltreatment, or who are under the care and placement responsibility of the State and/or Tribe because their families are unable to care for them. These systems also focus on securing permanent legal placement with families, such as reunification, guardianship, and adoption for children and youth who are unable to return home. (For more information about CB's programs, visit <http://www.acf.hhs.gov/programs/cb.>)

The Children's Bureau's approach to monitoring the performance of State child welfare systems by assessing outcomes for children and families is known as the Child and Family Services Reviews (CFSR). The CFSRs evaluate the effectiveness of the entire child welfare delivery system, including other systems such as mental health agencies, the court system, and substance abuse treatment providers to ensure positive outcomes for children and their families. The CFSRs ask whether the State child welfare agency made concerted efforts to provide or arrange for appropriate services, such as those needed to ensure the child's safety and enhance the parents' ability to provide care and supervision.

In October 2004, the Administration for Children and Families (ACF)/Children's Bureau released its report on findings from the initial round of reviews. The report discusses common challenges that States face in providing for the safety, permanency and well-being of children and their families. This report includes data from all 50 States, the District of Columbia, and Puerto Rico regarding States' conformity with Federal standards for child welfare, and applicants should be familiar with the CFSR process in their service area. <http://www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/genfindings04.pdf>

The Fostering Connections to Success and Increasing Adoptions Act of 2008 (Public Law

110-351) authorizes the Secretary to award competitive, matching grants to State, local, or Tribal child welfare agencies and private nonprofit organizations for the purposes of helping children who are in or are at-risk of entering foster care reconnect with family members. Grants may support the following program areas:

- Kinship navigator programs to assist kinship caregivers in learning about, finding, and using programs and services to meet the needs of the children they are raising and their own needs, and to promote effective partnerships among public and private agencies to ensure kinship caregiver families are served;
- Intensive family-finding efforts that utilize search technology to find biological family members for children in the child welfare system;
- Family group decision-making meetings for children in the child welfare system, and
- Residential family treatment programs

In this program announcement, these program areas are described in more detail.

Applicants may propose to implement one or any combination of the four program areas. Many child welfare agencies are already offering services in these areas and may propose to expand or bring the program to scale. Proposals should clearly describe the current state of the service delivery system, state the need for the proposed program and describe how the proposed program will meet that need. Grant funds should not supplant other State or local funds currently dedicated to these services. Further, applicants should present a vision for sustaining the proposed project after the period of Federal funding has ended. The grants will be awarded for three twelve-month budget periods. Applicants should note that the required match increases from 25% to 50% in the third year of the project.

Program Requirements

Applicants will submit proposals for one, or any combination of, the following four inter-related grant program areas, which comprise elements of a strong system of services to support family connections:

1. Kinship Navigator Programs
2. Intensive Family-finding Efforts

3. Family Group Decision-Making
4. Residential Family Treatment Programs

Applicants must state which grant program area(s) for which they are applying, must justify their selection of program area(s) in terms of documented needs associated with specified project goals and objectives, and must submit one budget (form 424A) and budget justification for the proposed program area(s).

PROGRAM AREA DESCRIPTIONS

GRANT PROGRAM AREA # 1: KINSHIP NAVIGATOR PROGRAMS

Purpose and Description

The purposes of Kinship Navigator Programs funded under this program announcement are twofold: 1) to assist kinship caregivers, through information and referral systems and other means, to learn about, find, and use existing programs and services to meet their own needs and the needs of the children they are raising; and 2) to promote effective partnerships between public and private, community and faith-based agencies to better serve the needs of kinship caregiver families.

Definitions

Kinship Care: An arrangement where a child lives full-time with and is being raised by a relative, without a parent being present. This may be a formal/legal arrangement with involvement of a child welfare agency and the court, or a voluntary/informal arrangement, sometimes known as "private kinship care" where placement is arranged by an agency or the family. The living arrangement may be subsidized or unsubsidized.

Kin: May include extended family members and other relatives of the child by blood or marriage as well as "fictive kin".

"Fictive Kin": Persons not related by blood or marriage but who have a strong, positive emotional tie to the child, and have a positive role in the child's life such as, godparents, neighbors, family friends or a member of the child's Tribe.

Caregiver: Relative, kin, or "fictive kin" serving in the parental role in a kinship care living arrangement, providing full-time care for the child.

Caregiver Family: Child caregiver(s), other immediate members of the family constellation; and "fictive-kin" in a kinship care living arrangement.

Need and Rationale

The National Survey of America's Families (Urban Institute) and the U.S. Census indicate substantial growth in the number of children living with relatives other than their parents. Growth is most dramatic among families with the least financial resources and the highest social service needs. According to the latest statistics available from the Urban Institute in 2002, approximately 2.3 million children lived in kinship care. Among these children and youth:

- Approximately 1.76 million were in "private kinship care" or "informal kinship care," a placement arranged by the family without the involvement of a child welfare agency.
- Approximately 140,000 were in "voluntary kinship care," where a social service agency helped place the child, but the court was not involved.
- Approximately 400,000 were in kinship foster care or other court-ordered kinship care (i.e., the social service agency helped place the child with the relative and a court made the relative responsible for the child's care).

Note: Further statistical documentation of numbers of children in kinship care is available at the web sites listed at the end of this program area description.

Kinship care, in its various forms, has become increasingly important in meeting the needs of children involved in the child welfare system or at risk of becoming involved in that system. Private kinship care and voluntary kinship care arrangements prevent large numbers of children and youth from entering the formal child welfare system. When the system does become involved and determines that children must be removed from the home of their birth parents, Federal and State law and policy encourage placement of those children with relatives where they can maintain their family and cultural ties.

The CFRs acknowledge the importance of kinship care to children who are in, or at risk of

entering, foster care by tracking achievement of permanency outcomes that include consideration of relatives and other family connections in ensuring that children have permanency and stability in their living situations and that the continuity of family relationships and connections is preserved for children.

Studies conducted by Children's Hospital of Philadelphia, the University of Illinois at Chicago, and others have concluded that children placed in kinship care:

- Have fewer mental health and behavioral problems than children and youth placed in general foster care;
- Experience greater placement stability and fewer placement changes than children and youth who are placed in general foster care;
- Have a greater sense of satisfaction with their living arrangement and feel less stigmatized than those living in general foster care; and
- Are less likely to re-enter the foster care system once reunified with birth parents.

Reference: Handout from Gleeson CWLA presentation (listed below in References) citing James, 2004; Terling-Watt, 2001; Testa, 2001; 2002; Wulczyn, Histop, & Goerge, 2000; Zinn, DeCoursey, George, & Courtney, 2006.

While playing such an important role in ensuring the safety and healthy development of children and youth, kinship caregivers often experience hardships and need services and supports. They face a variety of unnecessary barriers, including difficulties enrolling children in school, accessing and authorizing medical treatment, maintaining public housing leases, obtaining affordable legal service, and accessing a variety of Federal benefits and services.

According to an Urban Institute publication, *Kinship Foster Care: An Ongoing, Yet Largely Uninformed Debate*, by Rob Green (see References below), more than half of the children in kinship care live with families whose incomes are below 200 percent of the Federal poverty level. About 55 percent live with a single caregiver; 52 percent live with a caregiver over the age of 50; about 24 percent live with a caregiver without a high school degree. Because kinship foster homes often do not meet State foster care licensing standards, many kinship caregivers receive lower monthly benefits than licensed foster parents in the general population. Despite often having a greater need, kinship caregivers

request fewer services, are offered fewer services, and receive fewer services than licensed foster parents.

In many cases kinship caregivers could and would access services if they received greater assistance in navigating the complex array of programs and services available to them. The 2004 KinNET Final Report notes that in response to a Generations United survey of those attending support groups for grandparents raising grandchildren, respondents reported that what they need most is accurate information about the existing programs and services that are available to their families, such as health insurance and Medicaid, information on special education, child care, and services for children and youth with disabilities.

To help close this gap between need and services, since 2001 a number of States have set up Statewide kinship navigator programs to educate kinship care families about the resources available to them and to assist them in accessing those services. Ohio, New Jersey, and Washington State were the forerunners, followed in more recent years by Connecticut, Kentucky, Indiana, Minnesota, and New York. These programs, while varying in the type and number of services they provide, all recognize the importance of helping kinship caregivers obtain services, and most mandate the dissemination of information about services such as TANF and health, legal, judicial, and educational services.

This dissemination is accomplished through toll-free hotlines and employment of kinship navigators (people who provide kinship caregivers with information and referral services and assistance in identifying and accessing needed services and resources). Kinship navigators guide families toward and connect them to existing benefits programs, local support groups, child care and respite care programs, training related to caring for special needs children, legal services, and other helpful government and non-profit services. These programs also publish materials and offer helpful websites to share key information about services and resources. They offer a "one stop shop" for caregivers seeking accurate and up-to-date information about the benefits, services, supports, and programs available to kinship caregivers in their respective States.

Description of Effort

Applicants under this program area will present a well-documented plan for developing or expanding kinship navigator programs. The plan will:

- Clearly identify the service area, define the target population of kinship caregivers, and document the current needs of kinship caregivers for assistance in identifying and accessing needed information and services.
- Identify challenges in accessing services for kinship care families in the targeted service area and/or utilize existing documentation of these to specify an approach to address them;
- Develop a plan of activities to reach out to kinship caregivers, ensure they can access the kinship navigator program, and follow up to determine whether further Kinship Navigator assistance is needed for them to connect with services and supports
- Convene and consult with relevant government agencies (i.e., aging, mental health, mental retardation and developmental disabilities, substance abuse treatment, health, youth services, human services, education, child welfare, child support enforcement), non-profit, and faith-based partners, as well as kinship caregivers, youth raised by kinship caregivers and representatives of kinship care support groups and organizations, to assist in the development or expansion and the operation of the kinship navigator program;
- Provide for coordination with other State or local agencies and grant-funded programs that promote service coordination or provide information and referral services, including those that provide 2-1-1 or 3-1-1 information and referral systems where available, in order to avoid duplication or fragmentation of services to kinship care families;
- Ensure that the programs are being planned, developed, and operated in consultation with kinship caregivers and organizations representing them, youth raised by kinship caregivers, relevant government agencies, and relevant community-based or faith-based organizations;
- Provide or coordinate with a variety of means of outreach to kinship caregivers, which may include:
 - o Development and dissemination of relevant print guides or outreach materials
 - o Establishment of information and referral systems that provide toll-free

phone numbers to link kinship caregivers, kinship support group facilitators, and kinship service providers with:

- Each other
- Eligibility and enrollment information for Federal, State, and local benefits and services
- Relevant training to assist kinship caregivers in caregiving and in obtaining benefits and service
- Relevant legal assistance and help in obtaining legal services.
- o Establishment, promotion, and updating of a kinship care website, and activities as needed to improve access to technology and computer literacy skills for kinship caregivers
- o Utilization of volunteer or paid staff outreach workers
- o Addressing the needs of kinship caregivers who do not speak English or speak English as a second language.
- o Addressing particular needs of the community, such as rural challenges.
- Promote partnerships between public and private agencies, including schools, community based or faith-based organizations, and relevant government agencies, for the purpose of increasing knowledge/awareness of kinship needs, program development and service provision.
- Establish and support a kinship care ombudsman or liaison with authority to intervene, mentor and assist kinship caregivers in accessing services;
- Support any other activities designed to assist kinship caregivers in identifying and obtaining benefits and services to improve their caregiving.

Applicants must also specify how they will maintain the involvement of those entities listed above on an ongoing basis in the planning and operation of the kinship navigator program, and how they will approach sustainability planning in order to continue the proposed program at the conclusion of Federal funding.

Evaluation Design

The Children's Bureau expects grantees to engage in a strong evaluation in order to improve its processes and services, and to demonstrate linkages between project activities and improved outcomes. Additionally, grantees must participate in any national cross-site evaluation effort. Grantees will also be expected to make project findings available, in forms that can readily be used by the Children's Bureau Training and Technical Assistance (T/TA) Network in its work with State and Tribal child welfare systems.

Applicants must:

- Allocate sufficient funds to support the site-specific evaluation of their projects, as well as any national cross-site evaluation effort. Funds for evaluation must appear in the budget, and applicants must state the percentage of the total budget that will be allocated to evaluation;
- Present a plan to evaluate the effectiveness of the proposed Kinship Navigator program in assisting kinship caregivers; and
- Specify how ongoing evaluation findings will be incorporated into the operation of the program to improve or enhance its effectiveness.

For further information regarding the Children's Bureau expectations of applicants' evaluation activities, refer to the Evaluation section of this program announcement, as well as the Application Review Criteria related to the proposed evaluation plan.

References

Administration for Children and Families (ACF) Region IV, *Grandparents Raising Grandchildren: A Call To Action* http://eclkc.ohs.acf.hhs.gov/hslc/Family%20and%20Community%20Partnerships/Parent%20Involvement/Advocacy/famcom_rep_00248_043007.html

Green, Rob, *Kinship Foster Care: An Ongoing, Yet Largely Uninformed Debate* <http://www.urban.org/pubs/KinshipCare/chapter1.html>

Gleeson, James P. *Kinship Care Research and Literature: Lessons Learned and Directions for Future Research*, summary of a presentation entitled *Advocating for Kinship Care as a Valuable Resource for Families* given at Child Welfare League of America's National Conference in Washington, DC, on February 28, 2007 <http://cwla.org/programs/kinship/kinshipsummer2007.pdf>

KinNET FINAL REPORT: Description of Project Activities, Process and Outcome

Evaluation; Generations United in collaboration with the Brookdale Foundation and Syracuse University School of Social Work; March 29, 2004.

Useful Links

The Grandfamilies State Law and Policy Resource Center (a collaboration between Casey Family Programs, the American Bar Association's Center on Children and the Law and Generations United)

www.Grandfamilies.org

National Center on Grandparents Raising Grandchildren, Georgia State University

<http://chhs.gsu.edu/nationalcenter/index.asp>

CWLA National Data Analysis System (NDAS) Data Reports. Report criteria: Number of Children Placed in Kinship Care

http://ndas.cwla.org/data_stats/access/predefined/Report.asp?ReportID=575

State Fact Sheets for Grandparents and Other Relatives Raising Children (site sponsored by AARP Foundation, Brookdale Foundation Group, Casey Family Programs, Child Welfare League of America, Children's Defense Fund, and Generations United)

www.Grandfactsheets.org

GRANT PROGRAM AREA # 2: INTENSIVE FAMILY-FINDING EFFORTS

Purpose

The purpose of intensive family-finding efforts is to help children and youth who are in, or at risk of entering, foster care to reconnect with family members through the implementation of intensive family-finding efforts. Family-finding programs utilize search technology, effective family engagement, and other means to locate biological family members for children in the child welfare system, and once identified, work to reestablish relationships and explore ways to establish a permanent family placement for the children.

Background

The CFRs acknowledge the importance of family resources to children who are in, or at risk of entering, foster care by tracking achievement of permanency outcomes that include consideration of relatives and other family connections in ensuring that children have permanency and stability in their living situations and that the continuity of family relationships and connections is preserved for children. The Children's Bureau (CB)

completed the initial round of 52 Child and Family Service Reviews (CFSRs) of all of the States in March 2004. Among the most notable findings was that no State achieved substantial conformity on the outcome that evaluates the timely achievement of permanency goals for children and youth in foster care. On the performance indicator that addresses the establishment of appropriate permanency goals (Item 7), only 5 States performed satisfactorily. (<http://www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/genfindings04.pdf>)

The CFSR findings are particularly significant regarding youth in foster care. The CFSRs revealed that long-term foster care, or Alternative Planned Permanent Living Arrangement (APPLA), are being over-used as plans for youth as well as large sibling groups containing youth due to the youth's interest in maintaining some level of contact with their birth family. Assumptions are frequently made that adoption precludes placement or contact with relatives. In the 35 States reviewed in the CFSR between 2002-2004, while the goal of reunification was the single goal most commonly recorded for youth in FC age 13 and older (39 percent), the combined goals of emancipation and long-term foster care represented 46 percent of the permanency goals for this age group. This suggests that the plan for nearly half the children reviewed, who were aged 13 and older, was for them to remain in foster care.

Foster care is meant to be a temporary, not permanent, living arrangement for children and youth until they are returned to their birth family or placed in another permanent family setting. Older children and youth may be initially resistant to the idea of adoption or placement into a new family, especially if they do not have an established a relationship with members of the potential family. Child welfare workers and other stakeholders, including attorneys, judges, and Court Appointed Special Advocates (CASAs), can help youth better understand and accept the benefits of adoption versus long term foster care/APPLA. Important strategies in supporting practice change in this area include the provision of improved training and education about family finding and permanency, successful engagement of youth in their own permanency planning, and procedures to better help youth transition into permanency.

Assumptions, service gaps, or training needs may exist that negatively impact permanency outcomes for children and youth. These may include beliefs that older youth are not adoptable, that children should not be placed out of state, or that adoption precludes ongoing contact with birth family relatives; a lack of awareness, knowledge, or skills in

how to effectively engage youth in permanency planning; a lack of adoption-competent support services before, during, and after placement; or a lack of systematic and formalized case review processes which periodically, thoroughly reassess cases for permanency options. This lack of permanency focus and activities may result in youth, and sometimes their siblings, aging out of the foster care system without the benefit of becoming part of a forever family.

Barriers to permanency may be rooted in the belief that older children and youth cannot be placed with family members and achieve successful permanency due to their age. These barriers are reflected in the data reported in AFCARS. The percent of children who are placed for adoption dramatically decreases as the children age. At the end of FY 2000, children nine and older with termination of parental rights had been waiting to be adopted three times longer than children under the age of nine. Preliminary analyses show that although children nine and older constitute 50 percent of the children in foster care, they are only 37 percent of the waiting population (including most children with a goal of adoption with or without a termination of parental rights), 39 percent of the children with termination of parental rights, but only 24 percent of the adoptions. Additional barriers to permanency include inappropriate placements, poorly selected and improperly trained foster parents, and caseworkers failing to address permanency issues early and often in their work with youth. Placements in group home settings often limit contact with a broad range of caring adults with whom the child or youth could establish and maintain a permanent lifelong connection.

There is a need to design models of family finding and engagement to facilitate permanency for children and youth in foster care. It is not unusual for youth to have reasons to prefer a continuing attachment to parents even though it is not safe for them to live with their own family. These reasons can include other siblings still in the home, parents with lower level cognitive skills whom the youth is concerned about, or the lack of attachments between the youth and the prospective family. Placements with relatives often yield a higher level of commitment than non-relative placements. In relative placements, there can be a higher likelihood that siblings will be allowed to continue to have contact with each other, even when adopted by separate families. There is a need to demonstrate and evaluate models which support relatives in processing the implications of adoption versus APPLA and in managing open adoption arrangements, while helping children and youth to address their attachment needs and any additional emotional/mental health issues, through individual

therapy, family counseling or youth group permanency support groups with adoption-competent service providers.

In contacting and engaging relatives, some of whom may not yet have connections with the child or youth, it is important to help them be aware of the issues implicit in permanent commitment to a child and youth in foster care. Education and support may be needed for relatives in order for them to support the child or youth in managing new role definition and other issues related to contact with family members.

Definitions

Family-finding: Intensive use of technology and other means to identify, locate and contact family members; assess their suitability as potential permanency options for the child or youth, and engage them with the child or youth in a process that can lead to a permanency placement or relationship.

Family: A family may include the child's birth or adoptive parents, extended family members and other relatives, as well as friends, neighbors and others, who may not be related by blood or marriage, but who play an important, positive role in the child's life and are considered to be part of the family.

Permanency: A nurturing relationship between a child or youth and a caretaking adult which builds emotional ties that are sufficient to maintain the continuity of the relationship throughout the child's life. Permanency options encompass a range of living arrangements through reunification with biological family, adoption, long term placement with a relative, or another legal plan such as guardianship.

Need and Rationale

Children are best brought up in families. Relatives, both maternal and paternal, are a valuable resource for children in foster care, who may offer a permanent placement for a child in care if contacted and informed of the need. Families are the best experts on what they can offer in terms of placement and supportive resources. When relatives are competently informed and engaged, they can provide insight about persons within the family system who can be relied upon and trusted with the care of children. Child welfare agencies are exploring multiple avenues in an effort to effectively tap in to this resource.

Family-finding in terms of relative search has yet to be fully utilized in a consistent manner by the child welfare community. It is estimated that approximately one-third of States have some level of family-finding, at least in their policies and procedures. However, family-finding initiatives are not necessarily comprehensive and frequently suffer from the lack of consistent, statewide implementation. The need to interview available family members for relative names and contact information when the possibility of foster care placement is identified is not consistently recognized. Diligent documentation of relatives is lacking from case management procedures. While there is a clear expectation that child support data bases, including the Federal Parent Locator Service, be accessed to find parents, other technology search mechanisms are not a part of standard search protocol in locating relatives. Courts can play a role in assuring that information is obtained from the parents to locate relatives who may be a resource to the child.

Although search engines have been used in parent search for 15 years or more, the use of similar technology to locate relatives has lagged behind. The search engines are now readily available either by a set fee per search or via an access fee. Trained specialists can frequently find individuals by using available tools on the internet.

Some preliminary results appear to be very promising. In one large county, devoting an entire unit to parent and relative search and notification efforts has led to much higher relative placement rates and higher adoption rates by relatives than the National or State average.

Permanency should not be viewed as a secondary issue but rather should be sought beginning when the child initially enters care. This is consistent with concurrent planning as defined in the Adoption and Safe Families Act (ASFA) of 1997. Seeking family as a resource early in a child's placement in foster care can reduce the time to permanency as well as the number of placement moves for children.

Family-finding needs to be integrated into the agency's child welfare service model. Courts and attorneys should be aware of family finding and engagement activities and assist in ensuring that these efforts are being carried out at review hearings every six months.

Family finding efforts and permanency assessment should be ongoing throughout the family's involvement with the agency, not just at one or two points in time during the life of that case. Over time, older siblings may become old enough to provide a home and relatives

may become more/less suitable as placement options. In some cases, especially with older youth in care for long periods of time, situations in the birth family which brought about the original need for custody may have been ameliorated to the degree that reunification is now possible, whereas it was not earlier.

Elements of Effective Family-Finding Programs

There is still a lot to learn about family-finding practice issues, but there are a number of elements that appear to produce good results. At a minimum, a family-finding program should include these elements:

- Information gathering
- Documentation
- Search
- Identification
- Contact
- Assessment
- Engagement
- Permanent family placement/relationships.

Information Gathering, Documentation, Search and Identification

The family-finding process must begin with information gathering and notification of relatives within 30 days after removal of the child (Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.I. 110-351)), enabling relatives to be involved in the early planning stages. Documentation of family member information and family-finding activities should continue for every child after entering care. For children already in care, annual or semi-annual systematic case reviews each year should explore efforts to locate permanency for each child in care, including family finding efforts.

Special attention and efforts should be paid to family-finding activities for older children and youth with a plan of long term foster care and/or alternative permanent planned living arrangement. Youth can be empowered to play a role in achieving permanency. Contacts youth may have independently initiated with relatives may yield connections to family

members interested providing a home.

Support for family-finding programs and effective utilization of these depends upon the child welfare system having an understanding of the value of these timely activities in achieving permanency. Training for all staff, courts, attorneys, foster parents, and related partners on effective interviewing, concurrent planning, understanding permanency, and family-finding philosophy and methods helps ensure success.

The search for family members should not be limited to within the State. Out of State family members may be best potential caregiver or may know someone else to contact.

Contact, Assessment and Engagement

Early family contacts and engagement of parents and known relatives in family-finding efforts is also important. To ensure that these conversations take place, some agencies provide a script for staff to use during removal and initial interviews, such as, "Reunification is the goal and we will do everything possible to assist you in successfully reunifying with your child. Should reunification not occur, who in your family could provide a safe and stable long term home to your child?" Another example of a script can be found in *Six Steps to Find a Family: A Practice Guide to Family Search and Engagement (FSE)*, available at <http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/SixSteps.pdf> .

Efforts to identify family members and search efforts may be aided and accompanied by case specific meetings, either through Team Decision Making (TDM), Family Group Conferencing (FGC), or other models of family engagement meetings.

Some programs have had success using the strategy of assigning to the court social workers who focus on family-finding. When families come into court, they are interviewed by these "Family Tree" workers. Any information gathered is sent on the family's social worker and to the search unit. Because they are not the social workers who have investigated/removed the children, there is not an adversarial nature to the interviewing. It may also be possible to train contract staff, interns, CASA's, or others in this role if social work staff is not available.

An assessment tool should be used to determine risk, safety, and best placement for the child. Having a committee to review assessment results and make recommendations can

reduce bias and be of assistance to staff. Specific checklists may be helpful tools.

Mechanisms and infrastructure to ensure timely interjurisdictional placements between states should be put in place to make these types of placements accessible and timely.

Once a family placement is identified child welfare staff should assist with developing and implementing transition plans, especially with older children. A planned transition period with gradually increased frequency and length of visits is integral to the success of placement for all children, especially older children. They need a period of visitation where they and the people in their new home gradually adjust to each other and the environment. Services and supports need to be in place before, during, and after placement.

Permanent Family Placement/Relationships

The dual goals of family-finding are to enhance permanency options and to maintain continuity of relationships, to the optimal degree possible, throughout the child's life. Permanency options include reunification with biological family, adoption, long term placement with a relative, or another legal plan such as guardianship. The most important element is "emotional permanency", meaning that a child has a family to belong to, up to age 18 and beyond. If a permanent family living arrangement cannot be achieved, the next goal should be developing permanent connections for the child to age 18 and beyond, including connections to siblings, birth family extended family members, and/or fictive kin or other significant people in the child's life. This will benefit the child through positive relationship(s) and increased self esteem, as a result of having someone to turn to and rely upon, as a point of consistency as the child matures into young adulthood. If relatives are located who are not able to be a placement resource to a child, visitation and other forms of support to the child should still be explored and supported by the agency.

Description of Effort

Applicants under this program area will present a well-documented plan for developing or expanding family-finding programs. The plan will:

- Clearly identify the service area, define the target population of children/youth and families to be served, and document the current needs for intensive family-finding service;
- Identify challenges in accessing implementing family-finding activities for the target

population and/or utilize existing documentation of these to specify an approach to address them;

- Support the development and implementation of family-finding models which expedite safety, permanency and well-being for children and youth in foster care, or children and youth at risk of coming into foster care by expanding and building on the natural network of supports within the extended biological family;
- Describe the role that search technology will play in the proposed family finding program;
- Integrate the implementation of family-finding models into child welfare agency practice on an ongoing basis, incorporating family-finding into policies and procedures so that it will be a part of their permanent operation;
- Integrate family finding activities into concurrent planning efforts to expand the availability of permanent placement options for children and youth and expedite the achievement of permanency;
- Provide sufficient training to casework staff, supervisors, and the legal system to develop a coherent understanding of the role and components of family finding in achieving permanency;
- Expand replication of effective existing models or develop new models, including testing various models for effectiveness with different populations and in different settings;
- Set forth an approach to sustainability planning in order to continue the proposed program at the conclusion of Federal funding.
- Build knowledge about implementing a family-finding program by disseminating information and resources regarding successes, challenges and strategies for overcoming challenges.

Expectations

In preparing their proposals, applicants should address the following questions:

- How "intensive" is the proposed family-finding approach for each of the following program elements?

- information gathering
 - documentation
 - search
 - identification
 - contact
 - assessment
 - engagement
 - permanent family placement/relationships
- For each child or youth in or entering care, how many relatives would be contacted?
 - What is the description, rationale and cost-effectiveness/benefit for the proposed "search technology"? Will applicants contract with a company to do searches on relatives? Will they use the internet? Will they use subscriptions to closed sites to conduct a more comprehensive search? Will they contract with one company or multiple for different aspects of search process? Will they develop their own search technology?
 - In addition to the recommended program elements, what other family-finding components would be implemented? Examples of these are staff training, follow-up support to permanent placements.
 - How would they define "biological family members", citing their State statutes as appropriate? For example, what level of certainty is expected in cases where paternity is not obvious/has not been legally established?
 - How would the proposed family-finding program comply with their State statutes regarding placement of children with relatives?
 - How would the proposed family-finding initiative serve children of all ages, including youth?
 - As defined in the Family Connections Act, "family finding" refers to placement with biological family members. What approach would be used in cases where another option might be in the child or youth's best interest?
 - At what point would the proposed family-finding efforts begin?
 - How would the proposed project re-establish family relationships? What assessment processes would be utilized in exploring the potential resource of identified relatives? Would they arrange a meeting/series of meetings? Provide skilled on-going support to ensure strong relationships? Seek to establish as many

relationships as possible or just a few good ones?

- How would the plan for permanent family placement be established? Would adoption be preferred? Would open adoption be a consideration? Would other types of placement be acceptable options? How would they address permanent relationships that have no legal standing (e.g., mentor, big brother/sister, pen pal)? Guardianships? Kinship care? Kin foster care?

Evaluation Design

The Children's Bureau expects grantees to engage in a strong evaluation in order to improve its processes and services, and to demonstrate linkages between project activities and improved outcomes. Additionally, grantees must participate in any national cross-site evaluation effort. Grantees will also be expected to make project findings available, in forms that can readily be used by the Children's Bureau Training and Technical Assistance (T/TA) Network in its work with State and Tribal child welfare systems.

Applicants must:

- Allocate sufficient funds to support the site-specific evaluation of their projects, as well as any national cross-site evaluation effort. Funds for evaluation must appear in the budget, and applicants must state the percentage of the total budget that will be allocated to evaluation;
- Present a plan to evaluate the effectiveness of the proposed family-finding program in identifying, locating, engaging and assessing family members; and
- Specify how ongoing evaluation findings will be incorporated into the operation of the program to improve or enhance its effectiveness.

For further information regarding the Children's Bureau expectations of applicants' evaluation activities, refer to the Evaluation section of this program announcement, as well as the Application Review Criteria related to the proposed evaluation plan.

In developing the evaluation plan, the types of questions which applicants may want to consider include:

- How can family-finding reduce the length of time in care while reducing the recurrence of maltreatment and re-entry?

- What is the cost-benefit/effectiveness of the family-finding program? What does a family-finding system cost to develop? To operate? What are the benefits of a family-finding system?
- What is the financial value of the benefits of a family-finding system in terms of agency cost savings?
- What do evaluation findings demonstrate regarding key components of a family-finding system and the factors that are critical to the success of a family-finding program? Success is measured as reduction in length of time in care, reduction of the recurrence of maltreatment and re-entry, increased engagement of extended families in case planning, and increased permanent placement of children with extended family members or other permanent arrangements.
- Are there unique factors in finding and engaging families for children of various ages? For children with various special needs or disabilities? For children with various racial/ethnic backgrounds? Examples of family engagement are inclusion of families in case planning activities, in visitation with children in foster care, and in fulfillment of case plan activities.
- Are there unique factors in finding and engaging non-custodial fathers and paternal family members and non-custodial mothers and maternal family members? What are these and how can they be effectively addressed? (Additional information about locating and engaging non-custodial fathers can be found at <http://www.abanet.org/child/fathers/research.html>.)
- What training, resources, support, etc. are needed at each step of the family-finding process- search, identification, contact, engagement, permanent family placement?
- What safety issues exist (e.g., domestic violence, child maltreatment) and how can/should these be addressed?
- Are there certain children/circumstances for which family-finding is particularly recommended or for which family-finding is not possible, recommended, helpful or safe?
- How can Federal and State timeframes for notifying all adult kin be effectively addressed?

- How do staffing models for family-finding programs compare?
 - Use of case workers within existing caseloads, as opposed to a dedicated in-house, family-finding unit
 - Contracting out for services
 - Use of student interns, volunteers, retirees as family-finders
 - Other models

For further information regarding the Children's Bureau expectations for applicants in this area, refer to the Evaluation section of this program announcement, as well as the Application Review Criteria related to the proposed evaluation plan.

References

General Findings from the Federal Child and Family Services Review
<http://www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/genfindings04.pdf>

Six Steps to Find a Family: A Practice Guide to Family Search and Engagement (FSE)
 Developed by the National Resource Center for Family Centered Practice and Permanency Planning and the California Permanency for Youth Project
<http://www.hunter.cuny.edu/socwork/nrcfcpp/downloads/SixSteps.pdf>

GRANT PROGRAM AREA # 3: FAMILY GROUP DECISION-MAKING MEETINGS

Purpose and Description

Under the provisions of Fostering Connections to Success and Increasing Adoptions Act of 2008, Public Law 110-351, Sec. 427(a)(3), grants are authorized for Family Group Decision-Making meetings for children in the child welfare system that: (1) enable families to make decisions and develop plans that nurture children and protect them from abuse and neglect; and (2) when appropriate, shall address domestic violence issues in a safe manner and facilitate connecting children exposed to domestic violence to appropriate services, including reconnection with the abused parent when appropriate.

Family group decision-making (FGDM) is an approach used to develop permanency plans for children in foster care or diversionary plans for children at risk of entering foster care. It engages and empowers families who are involved in the child welfare system to take an

active and sometimes leadership role in developing plans and making decisions that support the safety, permanency and well-being of their children. In addition, it promotes family-centered, family strength-oriented, culturally-based and community-based practice.

Definitions

Family Group Decision-Making (FGDM): An intervention approach in which family members and relevant service providers are brought together in a meeting or series of meetings to make decisions to ensure the safety, permanency and well-being of their children and to develop a plan for services. FGDM also refers to one of the various models of this approach. Other models or terms include: Family Team Meetings, Family Team Decision Making, Family Group Conferencing, Family Unity Meetings, Family Team Conferences, Family Group Conferences, Team Decision Making.

Family: A family may include the child's birth or adoptive parents, extended family members and other relatives, as well as friends, neighbors and others, who may not be related by blood or marriage, but who play an important, positive role in the child's life and are considered to be a part of the family.

Need and Rationale

FGDM models provide a respectful forum for family members to work together to identify needs and potential solutions that will support the safety, permanency and well-being of their children.

A common component of FGDM models is a framework consisting of the following four main phases: (1) request to hold the FGDM meeting; (2) preparation and planning for the FGDM meeting; (3) family's participation in the actual meeting; and (4) any further planning after the FGDM meeting. Further elements of each phase may vary depending on the complexity of the case. Most of the models utilize a trained facilitator or coordinator.

During the FGDM meeting, participants identify and discuss issues related to the safety, permanency and well-being of the child, and the strengths and needs of the family.

Together, participants identify resource options to assist in the development and implementation of case plans:

- Formal resources: service options from child welfare agencies, community-based

organizations and other professional service providers; and

- Informal resources: options from family, friends and any other community members.

Another component of several FGDM models is "private family time", which refers to the time during the meeting in which only family members, without input from the various service providers present, discuss the options available to them. This time can be used to discuss formal and informal resources, make decisions about the use of these resources and develop a plan which provides for the child's overall well-being. Some FGDM models use "private family time" with the presence of the case worker and additional services providers, while others do not.

FGDM is considered an important strategy for child welfare systems across the country to improve safety, permanency, and well-being outcomes and services for children and families. Since 2001, outcomes-focused Child and Family Services Reviews (CFSRs) have been held in every State, and the District of Columbia, and Puerto Rico. The States and Territories have been required to submit Program Improvement Plans (PIPs) to address areas that are found out of conformance. FGDM with its various models has become increasingly important as a strategy in meeting the needs of agencies to improve engagement and/or planning with family members. In fact, in some States, FGDM is mandatory in cases when the child is removed from the home or when a change of placement will occur. Some states are also writing this specific strategy into their new PIPs.

After the first round of CFSRs 47 States planned to develop new practices or processes to engage and plan with families during a child protective services investigation. FGDM can be a strategy for working with families with the goal of developing safety plans to enable the child to remain safely within the family instead of entering the foster care system. When children must be removed from the home, FGDM can be used to develop a plan for the temporary care of the child to prevent foster care placement, as federal and state law and policy encourage placement of those children with relatives where they can maintain their family and cultural ties. In addition, 35 States identified FGDM as a PIP strategy in developing service plans for reunification as a way to improve the area of permanency. Further, 38 States are addressing the needs for improvement in children's well being, for which FGDM could be an effective approach. Common concerns for children's well-being, as reported in initial CFSRs, address the inconsistent match of services to needs, parents

and children not involved in case planning and the failure to engage fathers.

Successes in the aforementioned uses of FGDM have been found to result from proper preparation, planning and facilitation of the meeting, as well as ongoing family engagement during the family's involvement with the agency. The American Humane Association studied the Family Group Conference model and found that it is effective when linked to:

- Comprehensive preparation of participants, which results in consistently high numbers of family attendance and participation;
- Sharing of information to a wider group of decision makers and supporters, which results in a family's development of plans that create child safety;
- Combination of formal services and family supports, which results in improving the fit between case plans and family needs and encourages a family's commitment to each other; and
- Private family time, which promotes the family's leadership and role as a decision maker (Merkel-Holguin, Nixon and Burford, 2003).

In child welfare agencies, the traditional role and responsibility of the professional worker is to assess children's safety and the family's ability to provide children with a safe and stable environment, as well as to develop a case plan for children and their families during a child protective services investigation or while the child is in foster care. Families are not always considered integral participants in the case planning stages but rather they are simply expected to agree with and execute the plan. This can lead to social work practice that is inflexible and seen as uncooperative by families. The traditional approach can also fail to consider or use the larger family system, which can provide a broader network to support the family's well-being, because families, more so than the worker, are familiar with their own needs and informal resource options.

The components of FGDM encourage child welfare agency efforts in engaging families in the case planning process. Families that are empowered to actively participate with the child welfare system in matters concerning their children, such as with FGDM meetings, increase their sense of ownership and commitment to case plans, which will more likely result in their follow through with decisions that enhance the lives of their children and themselves. A review of the research articles in 2003's *Protecting Children: Promising Results, Potential New Directions: International FGDM Research and Evaluation in Child*

Welfare found that in numerous FGDM studies across the United States at least 89% families are satisfied with most aspects of the FGDM process. The families reported feeling a sense of respect from the child welfare agencies and an appreciation for the family's influence on decision-making. The FGDM experience can also empower families to make decisions that support their children's well-being in the future without the involvement of the child welfare system. Although more evaluative research is needed to assess long-term impacts, at least 73% of families who participated in FGDM do not experience subsequent reports of abuse or neglect and of the families that are re-reported, at least 87% have unsubstantiated allegations (*Protecting Children*, 2003).

Where domestic violence issues present a concern for the safety of the family, FGDM can be an effective strategy, with certain considerations. A thorough safety and risk assessment must be completed prior to a meeting. A vital aspect of the assessment involves working with the adult survivor. It is important to give the survivor some authority in decisions surrounding the planning and preparation of the meeting, including the option to invite a domestic violence advocate to be present. In addition, when holding the meeting, it may not be appropriate for the survivor and the perpetrator to be present in the same room, in which case, the coordinator can plan for separate meetings. However, if the survivor decides not to follow through with the meeting, she/he should be assured of encountering no penalties from the agency. While domestic violence does not counteract the use of FGDM, it is critical that the agency proceeds cautiously, adequately and sensitively in the preparation and planning prior to the meeting. If safety cannot be insured a meeting should not be held. Guidance on how to implement FGDM under the context of domestic violence has been prepared by the Family Violence Prevention Fund and the Child Welfare Policy and Practice Group and can be found at:

http://www.dhs.state.ia.us/cppc/docs/FTC_Guidelines4Practice.pdf

In 1990, Oregon was the first State to begin using the FGDM process. Since that time, various counties in at least 20 States have implemented a model of FGDM to engage families in the decision making process for ensuring the safety, permanency and well-being of their children. Many studies have included the various benefits of the FGDM process. For example, according to a study by Baumann, et al (2005) and review of the program evaluations included in 2003's *Protecting Children: Promising Results, Potential New Directions: International FGDM Research and Evaluation in Child Welfare* the use of FGDM in several States has shown an approximate decrease between 10% and 17% of

children in foster care, an approximate increase between 15% and 28% of children being placed with relatives, and an approximation of between 70% and 97% of children maintaining placements. However, more evaluative research is needed to assess long term outcomes.

Description of Efforts

Applicants under this program area will present a well-documented plan for implementing or expanding a model of FGDM which:

- Engages and involves the family, including the child if appropriate, in the planning and development of diversionary or case plans, and/or as a cooperative relationship between the biological and foster families to encourage permanency.
- Provides a strong plan of collaboration with and commitment from various community organizations, including the building of community partnerships, in order to:
 - offer an array of services that meet the family's needs;
 - identify community-based agencies that are in close proximity to where the family resides that can provide meeting space for FGDM meetings
 - adequately address safety needs when working with families where there is a co-occurrence of domestic violence, including engaging and collaborating with a domestic violence community agency and/or batterer intervention programs.

Applicants must also describe the steps they will take to:

- Identify the service area, define the target population and anticipated numbers to be served and describe the use of the proposed FGDM program;
- Ensure that the agency, or collaborating agency has the capacity to support the proposed FGDM program;
- Develop a criteria for referring a case to FGDM, while keeping in mind the unique needs and circumstances of the target population and community;
- Create a plan for the recruitment and engagement of family members, including fathers, to participate in FGDM and identify solutions to any barriers and obstacles

to the involvement of family members;

- Ensure safety of participants during FGDM meetings especially in the context of domestic violence, including:
 - Methods used to conduct a thorough safety and risk assessment prior to a meeting;
 - Methods used to ensure safety of all participants during the meeting, while still involving all necessary family members, including the use of separate meetings if necessary; and
 - Methods to access expertise in domestic violence intervention, i.e. whether FGDM coordinators will obtain thorough domestic violence training prior to implementation, or the agency will employ the services of an individual with specialized knowledge, skills and expertise in domestic violence, or both;
- Identify how the agency or collaborating agencies will maintain and respect confidentiality during the planning, preparation and implementation of meetings. This may include the development of a Memoranda of Understanding among agencies to share appropriate family information in order to improve the case plan;
- Address workload issues to balance regular workload and FGDM workload, which can be time consuming, by utilizing caseworkers as the coordinators/facilitators of FGDM, using external coordinators who do not handle regular agency caseloads; or other strategies;
- Identify agency barriers and obstacles to the implementation or the expansion of the proposed FGDM program, including identifying the necessary supports for participating agency staff;

Applicants must document organizational capacity to plan and implement an effective FDGM program, providing assurances and/or Memoranda of Understanding with public or private child welfare agencies and other key agencies and organizations, including domestic violence programs. Applicants must also specify how they will maintain the involvement of family, community organization/partners and other professional agencies and organizations on an ongoing basis in the planning, preparation and implementation or expansion of the proposed FGDM program.

Further, applicants must specify how they will approach sustainability planning in order to continue the proposed program at the conclusion of Federal funding.

Evaluation Design

The Children's Bureau expects grantees to engage in a strong evaluation in order to improve its processes and services, and to demonstrate linkages between project activities and improved outcomes. Additionally, grantees must participate in any national cross-site evaluation effort. Grantees will also be expected to make project findings available, in forms that can readily be used by the Children's Bureau Training and Technical Assistance (T/TA) Network in its work with State and Tribal child welfare systems.

Applicants must:

- Allocate sufficient funds to support the site-specific evaluation of their projects, as well as any national cross-site evaluation effort. Funds for evaluation must appear in the budget, and applicants must state the percentage of the total budget that will be allocated to evaluation;
- Present a plan to evaluate the effectiveness of the proposed Family Group Decision-Making program; and
- Specify how ongoing evaluation findings will be incorporated into the operation of the program to improve or enhance its effectiveness.

For further information regarding the Children's Bureau expectations of applicants' evaluation activities, refer to the Evaluation section of this program announcement, as well as the Application Review Criteria related to the proposed evaluation plan.

References

Baumann, D.J., Tecci, M., Ritter, J., Sheets, J., Wittenstrom, K. (2005). *Family Group Decision-Making: State Two: Preliminary Evaluation*. Texas. Texas Department of Family and Protective Services.

Merkel-Holguin, L., Nixon, P., and Burford, G. (2003). Learning with Families: A Synopsis of FGDM Research and Evaluation in Child Welfare. *Protecting Children*, 18, (1&2).

A Professional Publication of American Humane Association. (2003). *Protecting Children*, 18(1&2).

Useful Links

Family Team Conferences/FGDM in DV cases

http://www.dhs.state.ia.us/cppc/docs/FTC_Guidelines4Practice.pdf

Child Welfare Information Gateway

<http://www.childwelfare.gov/systemwide/assessment/approaches/family.cfm>

American Humane Protecting Children - FGDM

<http://www.americanhumane.org/protecting-children/programs/family-group-decision-making/>

National Resource Center for Family-Centered Practice and Permanency Planning at the Hunter College School of Social Work - Family Group Conferencing

http://www.hunter.cuny.edu/socwork/nrcfcpp/info_services/family-group-conferencing.html

General Findings From the Federal Child and Family Services Review

<http://www.acf.hhs.gov/programs/cb/cwmonitoring/results/genfindings04/genfindings04.pdf>

GRANT PROGRAM AREA # 4: RESIDENTIAL FAMILY TREATMENT PROGRAMS

Purpose and Description

The residential family treatment grant program specifications of the Fostering Connections to Success and Increasing Adoptions Act of 2008, Public Law 110-351, Sec. 427(a)(4) are twofold:

- Enable parents and their children to live in a safe environment for a period of not less than 6 months,
- Provide, on site or by referral, substance abuse treatment services, children's early intervention services, family counseling, medical, and mental health services, nursery and pre-school, and other services that are designed to provide comprehensive treatment that supports the family.

Projects supported under this funding opportunity are expected to serve as models of cost effective, comprehensive residential family treatment services for primary caretakers and

their minor children and services for other family members who make up the household that ultimately result in improved child and family outcomes. A project funded under this initiative must address the individual needs of the target population, preserve and support the family unit, and provide a safe and healthy environment for family members.

As part of this grant effort, applicants should demonstrate an understanding of the Children's Bureau's approach to monitoring the performance of State child welfare systems by assessing outcomes for children and families, known as the Child and Family Services Reviews (CFSR). All of the child and family outcomes stated above are part of the ultimate goals of the CFSR process. The purpose of the family residential treatment grants is the same as the CFSR and that is:

- Children are, first and foremost, protected from abuse and neglect.
- Children have permanency and stability in their living situations.
- The continuity of family relationships and connections is preserved for families.
- Families have enhanced capacity to provide for their children's needs.
- Children receive appropriate services to meet their educational needs.
- Children receive adequate services to meet their physical and mental health needs.

In particular, applicants in this program area should demonstrate an understanding of issues related to the CFSR Safety Outcome #2, "Children are safely maintained in their homes whenever possible and appropriate" in their proposals.

Definitions

Residential Family Treatment Programs: For purposes of this program announcement, these are programs that offer organized treatment services for parents and their minor children that feature a planned regimen of care in a safe 24-hour residential setting with qualified staff supervision.

Comprehensive Treatment Services: The services offered will treat a complex array of issues for both parents and children that ultimately results in improved child and family outcomes. Such services must be coupled with access to primary health, mental health and social services for parents and their children. These systems of care must be designed to

improve the overall treatment outcomes for the family unit as a whole.

If any treatment services are provided off-site, they must be well-coordinated and integrated to ensure that specific aspects of the individual treatment plan and services for the children can be addressed in both facilities. When minor children cannot reside in the treatment facility, and there are no other current living arrangements available, alternative safe and appropriate accommodations for the children must be arranged in consultation with the caretakers. For those minor children who do not reside in the treatment facility, it is important that they are housed in a safe place and receive required interventions and services and are actively engaged in the treatment process with their caretakers.

http://www.samhsa.gov/Grants/2008/ti_08_009.aspx

Need and Rationale

Our nation's child welfare systems are faced with the challenge of producing positive outcomes for the children and families they serve. As a group, families of children who come in contact with the child welfare system often present complex problems that include mental health, substance abuse, family violence and often come from low-income families where poverty is a significant risk factor for other negative outcomes. Effective comprehensive treatment that supports families will need to target the multiple needs of infants, young children and their families.

Quality residential family treatment programs designed for parents involved with the child welfare system, and especially treatment programs that provide for parents as well as their children, are not widely available in many communities. Accessing adequate treatment for families with substance abuse problems, for example, tends to be a difficult task, regardless of whether residential treatment options exist. A 1999 HHS report noted that only 37 percent of problem drug users with children under age 18 reported receiving some form of substance abuse treatment. The report also noted a recent decline in the delivery of services often needed in conjunction with substance abuse treatment such as parenting skills training, medical services, mental health services, legal aid, and vocational training. More recent data suggest that accessing adequate treatment remains difficult. In 2005, 23.2 million persons ages 12 or older needed treatment for an illicit drug or alcohol use problem. Of these, only 2.3 million or about 10 percent received treatment (U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, 2005 National Survey on Drug Use and Health: National Findings;

<http://www.oas.samhsa.gov/nsduh/2k5nsduh/2k5results.htm#7.3>).

There are many reasons why residential family treatment programs are in limited supply. This model of care is among the most costly and complex to deliver. It also requires a disruption in the lives of families that is sometimes resisted by family members themselves. However, for parents diagnosed as substance dependent, often struggling with co-occurring mental and physical health disorders; as well as other problems such as inadequate housing, poverty, or disabilities, long term, comprehensive, residential treatment for parents and their children offer the best opportunity for recovery, child safety, and family reunification and permanency.

Family-Centered Treatment and Young Children

It is important that projects funded under this initiative build on the capabilities and strength of high quality models and strategies that have been developed to provide comprehensive treatment of children and their families. Applicants are encouraged to consider, for example, the role of family as presented in a document from the Substance Abuse and Mental Health Services Administration (SAMHSA) entitled *Family Centered Substance Abuse Treatment for Women with Substance Use Disorders: History, Key Elements, and Challenges* available at:

http://womenandchildren.treatment.org/documents/Family_Treatment_Paper508V.pdf .

This paper looks at the role of family in the context of treatment for women with substance use disorders and presents a continuum of family-based services. This continuum offers a framework for defining and discussing different ways of approaching family involvement in treatment services and explores a comprehensive model of treatment.

The document also includes as Attachment Three a copy of the Center on Substance Abuse Treatment (CSAT)'s "Comprehensive Substance Abuse Treatment Model for Woman and Their Children." This model discusses the clinical treatment, clinical support and community support services for women and their children. The most effective way to meet the challenge of preventing child abuse and neglect and improving safety, permanency and well-being of children and families is for prevention and treatment programs, public and private, to work together in partnership with families and other disciplines such as social services, health and mental health, child care, early childhood, education, delinquency prevention, law enforcement and other advocacy groups in the community to achieve their

common goals. These partnerships are an essential part of the CSAT Comprehensive model.

Description of Effort

Applicants are required to demonstrate the target area's lack of capacity for, or access to, or a need to improve/expand comprehensive family treatment and services. Applicants under this program area will present documentation of the needs for developing or expanding comprehensive residential treatment programs for families. Applicants will present a well-developed plan that describes:

- How the grant will be used to implement one or more activities to provide for residential family treatment programs that will enable parents and their children to live in a safe environment and to implement comprehensive treatment that supports the safety, permanency and well-being for children and their families.
- The types of children and families to be served, including how the children and families will be identified and recruited and initial projection of the number of children and families to be served should be included.
- How the services and activities provided will be culturally competent and appropriate to the population being served.
- How area service providers will be involved in the planning and will coordinate efforts in the delivery of comprehensive services to families in the residential program.
- How sustainability planning will be approached in order to continue the proposed program at the conclusion of Federal funding.

Applicants may consider several methods of addressing service barriers. For example, a community may only have adult-only residential or intensive outpatient programs and lack the capacity to serve family members. Alternatively, a community may have residential or intensive outpatient family programs, but may not be able to meet demand for such services, provide for adequate length of stay, coordinate treatment with child welfare referring agencies, or provide services that can accommodate the linguistic and cultural experience of the family. To address these issues, applicants may consider proposing to expand the region's capacity for comprehensive family treatment by: (1) adding an array of

services for children and other family members; (2) increasing capacity to serve more families referred from child welfare and/or the family drug or dependency courts; (3) extending treatment services to the family for longer periods of time; (4) providing for treatment linkage programs to increase the number of successful referrals to treatment once parents are identified as having a substance use disorder in need of intervention; or (5) enhancing existing treatment services to hire staff with the needed language skills and tailor services to the cultural background of clients.

The applicant is required as part of its program to develop comprehensive individualized and family service plans to meet the needs of each family member and the family unit as a whole. These plans must be developed in consultation with the children and their family, as appropriate. Service plans must include individual, group, and family counseling, as appropriate, as well as follow-up relapse prevention, and supplemental treatment and recovery support services, as required.

Examples of services and activities that applicants might propose to engage in or integrate into existing service delivery systems include:

1. Services for Parents

- Parenting skills training to provide evidenced-based strategies to promote the parenting abilities of parents who are receiving in-home child welfare services, or whose children have been removed with goals of reunification.
- Family counseling to strengthen family functioning and assist with reunification of families when children have been in out of home placements.
- Continuing care and recovery support services to support the ongoing recovery of parents after residential or intensive outpatient treatment, through ongoing connections to treatment and community support services such as Alcoholics Anonymous or Narcotics Anonymous and ongoing case management.
- Ancillary services for families to provide assistance in securing needed services such as safe and drug-free housing, transportation and child care.

2. Services for Children and Youth

- Developmental assessments and services to provide access to screening and

assessment, and intervention with children identified as needing services to address developmental delays across a spectrum of childhood development indicators, such as linguistic, motor, and cognitive processing skills.

- Mental health and child counseling to enhance access to appropriate mental health and counseling services for children involved in the child welfare system.
- Early intervention and preventive services for children and adolescents to provide access to participation in evidence-based programs and services for children and adolescents to address the increased risk for intergenerational abuse.

3. Coordination of Services

- Support for inter-agency and inter-organization collaboration to support management activities that will provide oversight and make ongoing improvements to the activities carried out through the grant.
- Improvements in cross-system information sharing mechanisms to ensure consistent data collection across systems, comprehensive methods to monitor outcomes are in place, and sharing of information, with appropriate releases of confidential information, across systems. While applicants must observe confidentiality requirements, family treatment program providers and child welfare agencies are strongly encouraged to specify a mechanism or draft a memorandum of understanding to obtain informed consent to ensure that protected client information can be shared when necessary.

General Agreements for Providing Services

In the project narrative, applicants must demonstrate their capacity for the following:

- Services will be provided in a residential setting, in the language and cultural context that is most appropriate, and the program will be operated at a location that is accessible to the population served;
- The minor children will reside with the parent in such facilities, if the parents so requests. Efforts will be made to include as many children of the parents as is possible in the residential facility; and
- The grantee will provide the services directly or through formal agreements with

other public or non-profit private entities.

Applicants are encouraged to demonstrate partnership through memoranda of understanding/memoranda of agreement (MOU/MOA) signed by the authorizing official in all partnership agencies and organizations critical to the success of the proposed project. If an organization is a comprehensive service provider and does not require any partnering with other service providers, and has clearly justified this in the description of how the services are provided, a statement to this effect must be provided in an Appendix. Letters of commitment/support from community organizations supporting the project can also be included in an Appendix. Applicants are also encouraged to develop MOUs with other key agencies and organizations, such as local public housing authorities (for permanent housing for families), health, mental health, and child serving agencies, family court, criminal justice, employment and education programs as appropriate.

Supplemental/Recovery Support Services

Applicants must describe comprehensive services as appropriate to the identified target population. These services must be provided either by the applicant organization or through a network of provider organizations in partnership with the applicant.

Parents

- Outreach, engagement, pre-treatment, screening, and assessment by the case worker;
- Substance abuse education, treatment, and relapse prevention;
- Medical, dental, other physical health care services, including diabetes, hypertension, and referrals for necessary hospital services;
- Training in parenting and life skills;
- Education, screening, counseling, and treatment of hepatitis, HIV/AIDS, other STDs, and related issues;
- Mental health assessment and treatment;
- Trauma-informed services, including assessment and interventions for domestic violence, emotional, sexual, and physical abuse;
- Employment readiness, training, and placement;

- Education and tutoring assistance for obtaining a GED and higher education;
- Child care during periods in which the parent is engaged in therapy or in other necessary health or rehabilitative activities;
- Transportation and other wraparound services; and
- Peer-to-peer recovery support activities such as groups, mentoring, and coaching.

Children

- Screenings and developmental diagnostic assessments regarding the social, emotional, cognitive, and physical status of the infants and children;
- Therapeutic interventions as appropriate, such as child care, counseling, play and art therapy, occupational, speech and physical therapies;
- Pediatric health care, including immunizations, and treatment for asthma, diabetes, hypertension, and any perinatal effects of maternal substance abuse, e.g., HIV;
- Social services and financial supports;
- Education and recreational services;
- Mental health and trauma services; and
- Age-specific substance abuse education and prevention.

Family

- Engagement of the family in the treatment process including individual and family counseling/therapy;
- Alcohol and drug education for the user and the affected family members;
- Parenting training;
- Family strengthening and reunification; and
- Referral services for substance abuse, social, psychological, vocational and medical services as appropriate.

Case Management

- Coordination of administrative and case services;
- Assessment and monitoring of the extent to which required services are appropriate for parents and children;
- Assistance with community reintegration, before and after discharge, including referrals to appropriate resources; and
- Assistance in accessing resources from Federal, State, and local programs that provide a range of treatment services, including substance abuse, health, mental health, housing, employment, education and training.

Residential Treatment Phase and Length of Stay

Ultimately, a parent's length of stay in the residential treatment phase should be guided by the individual service plan. The selected treatment phase should be consistent with the applicant's experience with, and knowledge of, the target population and what is reflected in the literature for comprehensive family centered treatment. The project may propose a residential treatment phase for a time frame not less than 6 months. Applicants should use information about length of stay for the identified target population to more accurately estimate the number of families to be served by the project.

Applicants must meet these additional requirements related to the provision of services:

- A child welfare agency, public or private, must be involved in the proposed project. The provider may be the applicant or another organization committed to the project. More than one provider organization may be involved; and
- Each direct service provider organization must comply with all applicable local (city, county) and State/tribal licensing, accreditation, and certification requirements, as of the due date of the application.

[Note: The above requirements apply to all service provider organizations. A license from an individual clinician will not be accepted in lieu of a provider organization's license.]

Other Award Requirements

Facility Licensing: The residential treatment facility must meet all State and local

building, housing, health, safety and fire code regulations, as well as other applicable State and local child-care and residential facility licensing requirements. Licensing requirements for facilities offering group residential care for infants and children are sometimes stringent, and may extend to staffing patterns with implications for the number and characteristics of the project staff. If the applicant does not have control of a currently operating facility and plans to lease a space/facility, then the applicant must have a written agreement with the owner of the space/facility to lease this space to the applicant upon award (**Letter of Agreement must be provided in an Appendix**). If the applicant intends to lease a space/facility upon award, the space/facility must already have been inspected and meet the requirements for a residential program as certified by the appropriate State agency.

In identifying a facility, the applicant must be particularly sensitive to the public health needs of the target population, including vulnerability for TB, hepatitis, asthma, and environmental issues related to lead, asbestos, and mold and provide the necessary interventions.

Documentation of compliance with residential facility licensure requirements must be provided in an Appendix.

Collaboration: Accessing housing suitable for project activities may be facilitated by advance collaborations, memoranda of understanding (MOUs)/agreements (MOAs) with local Public Housing Authorities (PHAs). The Housing and Urban Development (HUD) Handbook 7465.1 REV 2, dated August 1987 (CH. 6) permits a PHA to designate select units for occupancy by members of a specific target population, and/or contract with a social service provider to manage certain dwelling units, if it so chooses. A PHA may also submit a request for authorization from HUD to lease/modify dwelling space for non-dwelling purposes such as a substance abuse treatment center. PHAs and providers considering such approaches should discuss their proposals with the local HUD Field Office prior to the development of an application, and obtain any relevant assurances.

Continued Funding Considerations: Grantees will be responsible for ensuring that all direct providers of services involved in compliance with local, city, county, and State licensing, certification and accreditation requirements, and that all MOUs/MOAs and subcontracts within the system of care remain current and active.

Evaluation Design

The Children's Bureau expects grantees to engage in a strong evaluation in order to improve its processes and services, and to demonstrate linkages between project activities and improved outcomes. Additionally, grantees must participate in any national cross-site evaluation effort. Grantees will also be expected to make project findings available, in forms that can readily be used by the Children's Bureau Training and Technical Assistance (T/TA) Network in its work with State and Tribal child welfare systems.

Applicants must:

- Allocate sufficient funds to support the site-specific evaluation of their projects, as well as any national cross-site evaluation effort. Funds for evaluation must appear in the budget, and applicants must state the percentage of the total budget that will be allocated to evaluation;
- Present a plan to evaluate the effectiveness of the proposed residential family treatment program; and
- Specify how ongoing evaluation findings will be incorporated into the operation of the program to improve or enhance its effectiveness.

For further information regarding the Children's Bureau expectations of applicants' evaluation activities, refer to the Evaluation section of this program announcement, as well as the Application Review Criteria related to the proposed evaluation plan.

Selected Resources from the Substance Abuse and Mental Health Services Administration (SAMHSA):

Family Centered Substance Abuse Treatment for Women with Substance Use Disorders: History, Key elements, and Challenges

http://womenandchildren.treatment.org/documents/Family_Treatment_Paper508V.pdf

Guidance to States: Treatment Standards for Women With Substance Use Disorders

Prepared by The National Association of State Alcohol and Drug Abuse Directors (NASADAD) http://www.nasadad.org/resource.php?base_id=1482

SAMHSA Center for Substance Abuse Treatment (CSAT) Request for Applications (RFA):

Services Grant Program for Residential Treatment for Pregnant and Postpartum Women (PPW) http://www.samhsa.gov/Grants/2008/ti_08_009.aspx

Evaluation

The Children's Bureau expects the evaluation of this initiative to be informative and rigorous. Grantees will, therefore, evaluate their ability to reconnect children who are in, or at risk of entering, foster care with family members. CB is also interested in determining the impact of kinship navigator programs, intensive family-finding efforts, family group decision-making meetings, and residential family treatment programs on improving children's outcomes in the areas of safety, permanency, and well-being.

The Children's Bureau expects grantees to engage in a strong site-specific evaluation in order to improve its processes and services, and to demonstrate linkages between project activities and improved outcomes. Additionally, grantees will participate fully in any applicable national evaluation effort that relates to this program announcement.

Applicants should propose a rigorous evaluation plan. Experimental designs involving random assignment to treatment and control groups are the preferred method for determining the intervention impacts. An applicant may propose another type of evaluation research design but must include an adequate description and justification that the proposed design is the most rigorous design possible for addressing the questions of interest.

CB is interested in building knowledge about programs that most effectively and efficiently help children who are in, or at risk of entering into, foster care or kinship care arrangements to reconnect with family members. In particular, CB is interested in determining the impact of these programs on improving children's outcomes in key areas of safety, permanency, and well-being. Toward that end, grantees will be required to address the following areas in their evaluation plan:

- Level of coordination between the proposed project and other programs with similar systems/services, or that serve the same clients;
- Access to and use of needed services and programs as defined by CFSR Safety Outcome 2, Item 3; and Well-Being Outcome 1, Item 17; and
- Foster care re-entry rates of children served by the program as defined by CFSR Permanency Outcome 1, Item 5;
- Permanency rates of children served by the program as defined by CFSR

Permanency Outcome 1, Items 8 and 10;

- Level of engagement of family members in case planning as defined by CFSR Well-Being Outcome 1, Item 18.

The applicant may identify additional CFSR outcomes that may yield substantive and useful information specific to its program area.

For access to the CFSR On-Site Review Instrument and definitions of terms therein, applicants are directed to

http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/onsitefinal.htm)

While evaluation plans must include these common components, they will also be site-specific and reflect the diversity of the grantees' approaches. Grantees may also choose to develop additional common evaluation components (i.e., methods, collection tools, processes, outputs, and/or outcomes). Grantees will also be expected to make project findings available, in forms that can readily be used by the Children's Bureau Training and Technical Assistance (T/TA) Network in its work with State and Tribal child welfare systems.

Grantees will regularly update their Federal project officer about ongoing evaluation activities and findings in required progress reporting and provide CB with a written report at the end of the project. Grantees in collaboration with each other, their State and Tribal partners, CB, and any applicable national evaluation contractor(s) may produce a comprehensive evaluation report at the conclusion of the project period and present findings to CB and other stakeholders.

Demonstration Projects

Activities funded under this funding announcement are demonstration projects. At CB a demonstration project is one that puts into place and tests new, unique, or distinctive approaches for delivering services to a specific population.

Demonstration projects may test whether a program or service that has proven successful in one location or setting can work in a different context. Demonstration projects may test a theory, idea, or method that reflects a new and different way of thinking about service delivery. Demonstration projects may be designed to address the needs of a very specific group of clients or focus on one service component available to all clients. The scope of

these projects may be broad and comprehensive or narrow and targeted to specific populations. A demonstration project must:

- Develop and implement an evidence-based model with specific components or strategies that are based on theory, research, or evaluation data; or replicate or test the transferability of successfully evaluated program models;
- Determine the effectiveness of the model and its components or strategies using a rigorous evaluation approach; and
- Produce detailed procedures and materials based on the evaluation that will contribute to and promote evidence-based strategies, practices, and programs that may be used to guide replication or testing in other settings.

ACF will expect grantees to engage in an evaluation of sufficient rigor to demonstrate potential linkages between project activities and improved outcomes. Guided by a logic model for the project, this evaluation will include both process and outcomes evaluation components. The process evaluation will assess the implementation of the project, as well as the linkages between the collaborative partners that will help ensure that identified needs of children and families are met. The outcomes component will use a sufficiently rigorous approach to examine how the approaches used in this demonstration project affect key outcomes of interest. The evidence from the evaluation will support evidence-based practice and provide States with examples of strategies that are tied to positive outcomes for children and families.

Additional Project Requirements

The applicant's signature on the application constitutes its assurance that it will comply with the following requirements:

1. Have the project fully functioning within 90 days following the notification of the grant award.
2. Participate if CB chooses to do a national evaluation or a technical assistance contract that relates to this funding announcement.
3. Submit all performance indicator data, program, evaluation, and financial reports in a timely manner (see Section VI.3), in the recommended formats (to be provided). CB

prefers and will accept the interim and final reports on disk or electronically using a standard word-processing program, however grantees are required to provide the original and two copies of performance progress and final reports.

4. Submit an original and two copies of the final report, the evaluation report, and any program products to CB within 90 days of project end date.
5. Allocate sufficient funds in the budget to:
 - Provide for the project director, the evaluator and other key partners to attend an early kickoff meeting for grantees funded under this priority area to be held within the first three months of the project (**first year only**) in Washington, D.C.; and
 - Provide for the project director, the evaluator and other key partners to attend an annual 3-day grantees' meeting in Washington, D.C.
6. Use the funds provided under this announcement only for the purposes specified in the application submitted to and approved by the Secretary.
7. Establish fiscal control and accounting procedures to ensure proper disbursement and accounting of Federal funds.
8. Submit reports on the utilization, cost, and outcome of activities conducted, and services furnished, as described in part VI.3. of this announcement (Award Administration Information).

II. AWARD INFORMATION

Funding Instrument Type:	Grant
Estimated Total Program Funding:	\$14,250,000
Expected Number of Awards:	30

Ceiling on Amount of Individual Awards: \$1,000,000 per budget period

Floor on Amount of Individual Awards: \$450,000 per budget period

Average Projected Award Amount: \$450,000 per budget period

Length of Project Periods: 36-month project with three 12-month budget periods

Awards under this announcement are subject to the availability of funds.

Additional Information on Awards:

The maximum Federal share of each project is not to exceed: 1) 75 percent if the payment is for the first or second year of the grant period, 2) 50 percent if the payment is for the third year of the grant period.

The projects awarded will be for a project period of 36 months. The initial grant award will be for a 12-month budget period. The award of continuation beyond each 12-month budget period will be subject to the availability of funds, satisfactory progress on the part of the grantee, and a determination that continued funding would be in the best interest of the government.

Please see *Section IV.5* for any restrictions on the use of funds for awards made under this announcement.

III. ELIGIBILITY INFORMATION

1. Eligible Applicants

Foreign entities are not eligible under this announcement.

Faith-based and community organizations are eligible to apply under this announcement.

2. Cost Sharing or Matching: Yes

Grantees are required to meet a non-Federal share of the project costs, in accordance with Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351).

Grantees must provide at least 25 percent of the total approved cost of the project for the first two years of the project period, and 50 percent of the total approved cost of the project in the third year of the project period. The total approved cost of the project is the sum of the ACF share and the non-Federal share. The non-Federal share may be met by cash or in-kind contributions. Therefore, a project requesting \$450,000 in Federal funds (based on an award of \$450,000 per budget period) must provide a match of at least \$150,000 (25 percent of the total approved project costs) for a total approved budget of \$600,000 per budget period in the first two years of the project period. In the third budget period of the project period, a project's non-Federal funds will increase to 50% of the total approved budget period. Therefore a project with a total approved budget of \$600,000 per budget period will be required to provide a 50% match or \$300,000 in non-Federal funds in the third budget period. Grantees will be held accountable for commitments of non-Federal resources even if over the amount of the required match. Failure to provide the amount will result in disallowance of Federal dollars.

Cost-sharing will not be used as a preference and/or evaluation criterion in the review of applications.

3. Other:

Disqualification Factors

Applications with requests that exceed the ceiling on the amount of individual awards referenced in *Section II. Award Information* will be deemed non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.3.*, Submission Dates and Times, will be deemed non-responsive and will not be considered for funding under this announcement.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package:

ACYF Operations Center
c/o The Dixon Group, Inc.
ATTN: Children's Bureau
118 Q St., NE
Washington , DC 20002-2132
Phone: 866-796-1591
Phone 2: TTY 711
Email: cb@dixongroup.com

For hearing or speech impaired callers, contact the Federal Relay Service at 1-800-877-8339 (TTY (Text Telephone) / ASCII (American Standard Code For Information Interchange)).

2. Content and Form of Application Submission:

This section provides information on the required form and content of application submissions. Applicants are required to submit one original and two copies of all application materials if applying in hard-copy. The original signature of the Authorized Organization Representative (AOR) is required only on the original. Information on the required format, Standard Forms (SFs) and other forms, D-U-N-S Requirement, Project Description, Certifications, Assurances, Electronic Submission of applications, and Hard Copy submission of applications is available in this section. A Checklist of required application elements is available for applicants' use in *Section VIII* of this announcement.

[Each application must contain the following items in the order listed:](#)

Application for Federal Assistance. (Standard Form (SF) 424, SF-424A and SF-424-B). Follow the instructions that accompany the forms and those in *Section V*, Application

Review Information. Note that Federal funds and services or other resources purchased with Federal funds may not be used to match project awards.

Certifications/Assurances. See *Forms, Assurances, and Certifications*, below.

Table of Contents. List the major sections of the application, and show the page that each section begins on.

Project Summary/Abstract (one page maximum, double spaced). Clearly mark this page with the applicant name as shown on SF-424, identify the program announcement and the title of the proposed project as shown on SF-424 and the service area as shown on SF-424. The summary description should not exceed 300 words.

Care should be taken to produce a summary/abstract that accurately and concisely reflects the proposed project. It should describe the objectives of the project, the approach to be used, and the results or benefits expected.

The Project Description. Applicants should organize their project description in this sequence: 1) Objectives and Need for Assistance; 2) Approach; 3) Evaluation; 4) Organizational Profiles; and 5) Budget and Budget Justification.

Non-Federal Resources (if applicable). Provide a letter of commitment verifying the actual amount of the non-Federal share of project costs (see *Sections III.2 and V*).

Budget and Budget Justification. Include information on the required cost item of Travel for Meetings and Presentations (see Section I).

Indirect Charges. If claiming indirect costs, provide documentation that the applicant currently has an indirect cost-rate approved by the U.S. Department of Health and Human Services (HHS) or another cognizant Federal agency.

Third-Party Agreements. If applicable, include a letter of commitment or Memorandum of Understanding from each partner and/or contractor describing their role, detailing specific project tasks to be performed, and expressing commitment to participate if the proposed project is funded. Note: General letters of support not expressing specific commitments are not required and will not be considered by reviewers under the evaluation criteria.

Staff and Position Data. Include job descriptions and curriculum vitae/ resumes for proposed project staff.

Page Limit. The length of the entire application package must not exceed 100 pages. This includes the required Federal Standard Forms and certifications (SF-424, SF-424A, SF-424B, and Certification Regarding Lobbying) table of contents, project summary, project description, logic model, , budget/budget justification, supplemental documentation, proof of non-profit status, summaries of sub-grants and contracts, letters of agreement, and any other pages included in the application package. All pages of the application package must be sequentially numbered, beginning with page one. All pages of each application will be counted to determine total length. All pages exceeding the 100 page limit will be removed and will not be considered in the reviewing process. A cover letter and general letters of support are not required. Applicants are reminded that if a cover letter and general letters of support are submitted, they will count towards the 100-page limit.

Each applicant must organize its application in the order listed in this section and number all application pages. Pages will be counted in the order they are submitted in hard copy and numbered when received electronically. All pages that exceed the page limit will be removed and will not be reviewed.

General Content and Form Information. To be considered for funding, each application must be submitted with the Standard Federal Forms and must follow the guidance provided. The application must be signed by an individual authorized to act for the applicant agency and to assume responsibility for the obligations imposed by the terms and conditions of the award.

The project description must be typed and double-spaced on a single side of 8 1/2 x 11 inch plain white paper with at least one inch margins on all sides, using black print with 12-point size Times New Roman font.

For charts, budget tables, supplemental letters and documents, applicants may use a different point size and font, but no less than 10-point size and single spaced.

All copies of an application must be submitted in a single package. A separate package must be submitted for each funding opportunity. The package must be clearly labeled for the specific funding opportunity it is addressing.

Because each application will be duplicated, do not use or include separate covers, binders, clips, tabs, plastic inserts, maps, brochures, or any other items that cannot be processed easily on a photocopy machine with an automatic feed. Do not bind, clip, staple, or fasten in any way separate subsections of the application, including supporting documentation. Use a clip (not a staple) to securely bind the application together. Applicants are advised that the copies of the application submitted, not the original, will be reproduced by the Federal Government for review.

Tips for Preparing a Competitive Application. It is essential that applicants read the entire announcement package carefully before preparing an application and include all of the required application forms and attachments. The application must reflect a thorough understanding of and support the purpose and objectives of the applicable legislation. Reviewers expect applicants to understand the goals of the legislation and the Children's Bureau's interest in each topic. A "responsive application" is one that addresses and follows all of the evaluation criteria in ways that demonstrate this understanding. Applications that are considered to be "unresponsive" or do not clearly address the evaluation criteria or program requirements generally receive very low scores and are rarely funded.

CB's website <http://www.acf.dhhs.gov/programs/cb> provides a wide range of information and links to other relevant websites. Before preparing an application, applicants can learn more about CB's mission and programs by exploring the website.

Organizing the Application. Reviewers will use the specific evaluation criteria in *Section V* of this funding announcement to review and evaluate each application. The applicant should address each of these specific evaluation criteria in the project description. Applicants should organize their project description in this sequence: 1) Objectives and Need for Assistance; 2) Approach; 3) Evaluation; 4) Organizational Profiles; and 5) Budget and Budget Justification. The applicant must use the same headings as these criteria, so that reviewers can readily find information that directly addresses each of the specific review criteria.

Logic Model. A logic model is a tool that presents the conceptual framework for a proposed project and explains the linkages among program elements. While there are many versions of the logic model, they generally summarize the logical connections among the needs that are the focus of the project, project goals and objectives, the target population, project inputs (resources), the proposed activities/processes/outputs directed toward the

target population, the expected short- and long-term outcomes the initiative is designed to achieve, and the evaluation plan for measuring the extent to which proposed processes and outcomes actually occur. Information on the development of logic models is available on the Internet at <http://childwelfare.gov/preventing/developing/toolkit/>.

Evaluation.

The Evaluation portion of the Evaluation Criteria section of this announcement provides specific information about what reviewers will be measuring when they read applications for funding under this program announcement. Assistance may be found in a document titled "Program Manager's Guide to Evaluation." A copy of this document can be accessed http://www.acf.hhs.gov/programs/opre/other_resrch/pm_guide_eval/reports/pmguide/pmguide_toc.html.

Provide a narrative addressing how the conduct of the project and the results of the project will be evaluated. In addressing the evaluation of results, state how you will determine the extent to which the project has achieved its stated objectives and the extent to which the accomplishment of objectives can be attributed to the project. Discuss the criteria to be used to evaluate results, and explain the methodology that will be used to determine if the needs identified and discussed are being met and if the project results and benefits are being achieved. With respect to the conduct of the project, define the procedures to be employed to determine whether the project is being conducted in a manner consistent with the work plan presented and discuss the impact of the project's various activities that address the project's effectiveness.

Protection of Human Subjects.

General information about the HHS Protection of Human Subjects regulations can be obtained at <http://www.hhs.gov/ohrp/>. Applicants may also contact OHRP by email (ohrp@csophs.dhhs.gov) or by phone (240-453-6900).

Electronic Submission

Applicants that submit their application electronically are advised to be sure that they receive a ticket either confirming the receipt of their application, or documenting that there was a problem. They are also encouraged to submit a hard copy.

Non-Federal Reviewers

Since ACF will be using non-Federal reviewers in the review process, applicants have the option of omitting from the application copies (not the original) specific salary rates or amounts for individuals specified in the application budget as well as Social Security Numbers, if otherwise required for individuals. The copies may include summary salary information.

If applicants are submitting their application electronically, ACF will omit the same specific salary rate information from copies made for use during the review and selection process.

Forms

Applicants seeking financial assistance under this announcement must file the appropriate Standard Forms (SFs) as described in this section. All applicants must submit an SF-424, Application for Federal Assistance. For non-construction programs, applicants must also submit an SF-424A, Budget Information and an SF-424B, Assurances. For construction programs, applicants must also submit SF-424C, Budget Information and SF-424D, Assurances. All required Standard Forms are available at:

http://www.acf.hhs.gov/grants/grants_resources.html.

Non-profit private organizations (not including private universities) are encouraged to submit the "Survey on Ensuring Equal Opportunity for Applicants" with their applications. Applicants using a hard copy application, place the completed survey in an envelope labeled "Applicant Survey." Seal the envelope and include it along with your application package. Applicants applying electronically, please submit this survey along with your application. The Survey may be found at

http://www.acf.hhs.gov/grants/grants_resources.html.

D-U-N-S Requirement

All applicants must have a D&B Data Universal Numbering System (D-U-N-S) number. A D-U-N-S number is required whether an applicant is submitting a paper application or using the government-wide electronic portal, [Grants.gov](http://www.Grants.gov). A D-U-N-S number is required for every application for a new award or renewal/continuation of an award, including applications or plans under formula, entitlement, and block grant programs. A D-U-N-S number may be acquired at no cost by calling the dedicated toll-free D-U-N-S number

request line at 1-866-705-5711 or you may request a number online at <http://www.dnb.com>.

PROJECT DESCRIPTION

Part I THE PROJECT DESCRIPTION OVERVIEW

PURPOSE

The project description provides the majority of information by which an application is evaluated and ranked in competition with other applications for available assistance. The project description should be concise and complete. It should address the activity for which Federal funds are being requested. Supporting documents should be included where they can present information clearly and succinctly. In preparing the project description, information that is responsive to each of the requested evaluation criteria must be provided. Awarding offices use this and other information in making their funding recommendations. It is important, therefore, that this information be included in the application in a manner that is clear and complete.

GENERAL EXPECTATIONS AND INSTRUCTIONS

ACF is particularly interested in specific project descriptions that focus on outcomes and convey strategies for achieving intended performance. Project descriptions are evaluated on the basis of substance and measurable outcomes, not length. Extensive exhibits are not required. Cross-referencing should be used rather than repetition. Supporting information concerning activities that will not be directly funded by the grant or information that does not directly pertain to an integral part of the grant-funded activity should be placed in an appendix.

Part II GENERAL INSTRUCTIONS FOR PREPARING A FULL PROJECT DESCRIPTION

INTRODUCTION

Applicants that are required to submit a full project description shall prepare the project description statement in accordance with the following instructions while being aware of the specified evaluation criteria. The text options give a broad overview of what the project description should include while the evaluation criteria identify the measures that will be used to evaluate applications.

TABLE OF CONTENTS

List the contents of the application including corresponding page numbers.

PROJECT SUMMARY/ABSTRACT

Provide a summary of the project description (one page or less) with reference to the funding request.

OBJECTIVES AND NEED FOR ASSISTANCE

Clearly identify the physical, economic, social, financial, institutional, and/or other problem(s) requiring a solution. The need for assistance must be demonstrated and the principal and subordinate objectives of the project must be clearly stated; supporting documentation, such as letters of support and testimonials from concerned interests other than the applicant, may be included. Any relevant data based on planning studies should be included or referred to in the endnotes/footnotes. Incorporate demographic data and participant/beneficiary information, as needed. In developing the project description, the applicant may volunteer or be requested to provide information on the total range of projects currently being conducted and supported (or to be initiated), some of which may be outside the scope of the program announcement.

APPROACH

Outline a plan of action that describes the scope and detail of how the proposed work will be accomplished. Account for all functions or activities identified in the application. Cite factors that might accelerate or decelerate the work and state your reason for taking the proposed approach rather than others. Describe any unusual features of the project such as design or technological innovations, reductions in cost or time, or extraordinary social and community involvement.

Provide quantitative monthly or quarterly projections of the accomplishments to be

achieved for each function or activity in such terms as the number of people to be served and the number of activities accomplished.

When accomplishments cannot be quantified by activity or function, list them in chronological order to show the schedule of accomplishments and their target dates.

If any data is to be collected, maintained, and/or disseminated, clearance may be required from OMB. This clearance pertains to any "collection of information that is conducted or sponsored by ACF."

Provide a list of organizations, cooperating entities, consultants, or other key individuals who will work on the project along with a short description of the nature of their effort or contribution.

EVALUATION

Provide a narrative addressing how the conduct of the project and the results of the project will be evaluated. In addressing the evaluation of results, state how you will determine the extent to which the project has achieved its stated objectives and the extent to which the accomplishment of objectives can be attributed to the project. Discuss the criteria to be used to evaluate results, and explain the methodology that will be used to determine if the needs identified and discussed are being met and if the project results and benefits are being achieved. With respect to the conduct of the project, define the procedures to be employed to determine whether the project is being conducted in a manner consistent with the work plan presented and discuss the impact of the project's various activities that address the project's effectiveness.

ADDITIONAL INFORMATION

The following are requests for additional information that must be included in the application:

ELIGIBILITY CERTIFICATION

Applicants must provide the following as certification of their eligibility under this program announcement. Please provide:

Proof of Non-Profit Status

Non-profit organizations applying for funding are required to submit proof of their non-profit status. Proof of non-profit status is any one of the following:

- A reference to the applicant organization's listing in the IRS's most recent list of tax-exempt organizations described in the IRS Code.
- A copy of a currently valid IRS tax-exemption certificate.
- A statement from a State taxing body, State attorney general, or other appropriate State official certifying that the applicant organization has non-profit status and that none of the net earnings accrue to any private shareholders or individuals.
- A certified copy of the organization's certificate of incorporation or similar document that clearly establishes non-profit status.
- Any of the items in the subparagraphs immediately above for a State or national parent organization and a statement signed by the parent organization that the applicant organization is a local non-profit affiliate.

When applying electronically, proof of non-profit status may be submitted as an attachment; however, proof of non-profit status must be submitted prior to award.

LOGIC MODEL

Applicants are expected to use a model for designing and managing their project. A logic model is a tool that presents the conceptual framework for a proposed project and explains the linkages among program elements. While there are many versions of the logic model, they generally summarize the logical connections among the needs that are the focus of the project, project goals and objectives, the target population, project inputs (resources), the proposed activities/processes/outputs directed toward the target population, the expected short- and long-term outcomes the initiative is designed to achieve, and the evaluation plan for measuring the extent to which proposed processes and outcomes actually occur.

STAFF AND POSITION DATA

Provide a biographical sketch and job description for each key person appointed.

Job descriptions for each vacant key position should be included as well. As new key staff is appointed, biographical sketches will also be required.

PLAN FOR PROJECT CONTINUANCE BEYOND GRANT SUPPORT

Provide a plan for securing resources and continuing project activities after Federal assistance has ended.

ORGANIZATIONAL PROFILES

Provide information on the applicant organization(s) and cooperating partners, such as: organizational charts; financial statements; audit reports or statements from Certified Public Accountants/Licensed Public Accountants; Employer Identification Number(s); contact persons and telephone numbers; names of bond carriers; child care licenses and other documentation of professional accreditation; information on compliance with Federal/State/local government standards; documentation of experience in the program area; and, other pertinent information.

DISSEMINATION PLAN

Provide a plan for distributing reports and other project outputs to colleagues and to the public. Applicants must provide a description of the method, volume, and timing of distribution.

THIRD-PARTY AGREEMENTS

Provide written and signed agreements between grantees and subgrantees, or subcontractors, or other cooperating entities. These agreements must detail the scope of work to be performed, work schedules, remuneration, and other terms and conditions that structure or define the relationship.

BUDGET AND BUDGET JUSTIFICATION

Provide a budget with line-item detail and detailed calculations for each budget object class identified on the Budget Information Form (SF-424A or SF-424C). Detailed calculations

must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient for the calculation to be duplicated. If matching is a requirement, include a breakout by the funding sources identified in Block 15 of the SF-424.

Provide a narrative budget justification that describes how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs.

GENERAL

Use the following guidelines for preparing the budget and budget justification. Both Federal and non-Federal resources (when required) shall be detailed and justified in the budget and budget narrative justification. "Federal resources" refers only to the ACF grant funds for which you are applying. "Non-Federal resources" are all other non-ACF Federal and non-Federal resources. It is suggested that budget amounts and computations be presented in a columnar format: first column, object class categories; second column, Federal budget; next column(s), non-Federal budget(s); and last column, total budget. The budget justification should be in a narrative form.

PERSONNEL

Description: Costs of employee salaries and wages.

Justification: Identify the project director or principal investigator, if known at the time of application. For each staff person, provide: the title; time commitment to the project in months; time commitment to the project as a percentage or full-time equivalent; annual salary; grant salary; wage rates; etc. Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant.

FRINGE BENEFITS

Description: Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

Justification: Provide a breakdown of the amounts and percentages that comprise

fringe benefit costs such as health insurance, FICA, retirement insurance, taxes, etc.

TRAVEL

Description: Costs of project-related travel by employees of the applicant organization. (This item does not include costs of consultant travel).

Justification: For each trip show: the total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances. If appropriate for this project, travel costs for key staff to attend ACF-sponsored workshops should be detailed in the budget.

EQUIPMENT

Description: "Equipment" means an article of nonexpendable, tangible personal property having a useful life of more than one year and an acquisition cost that equals or exceeds the lesser of: (a) the capitalization level established by the organization for the financial statement purposes, or (b) \$5,000. (Note: Acquisition cost means the net invoice unit price of an item of equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired. Ancillary charges, such as taxes, duty, protective in-transit insurance, freight, and installation, shall be included in or excluded from acquisition cost in accordance with the organization's regular written accounting practices.)

Justification: For each type of equipment requested provide: a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use on the project; as well as use and/or disposal of the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition.

SUPPLIES

Description: Costs of all tangible personal property other than that included under

the Equipment category.

Justification: Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

CONTRACTUAL

Description: Costs of all contracts for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts with secondary recipient organizations, including delegate agencies and specific project(s) and/or businesses to be financed by the applicant.

Justification: Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open and free competition. Recipients and subrecipients, other than States that are required to use 45 CFR Part 92 procedures, must justify any anticipated procurement action that is expected to be awarded without competition and exceeds the simplified acquisition threshold fixed at 41 USC 403(11), currently set at \$100,000.

Recipients might be required to make available to ACF pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc.

Note: Whenever the applicant intends to delegate part of the project to another agency, the applicant must provide a detailed budget and budget narrative for each delegate agency, by agency title, along with the required supporting information referred to in these instructions.

OTHER

Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: insurance; food; medical and dental costs (noncontractual); professional services costs; space and equipment rentals; printing and publication; computer use; training costs, such as tuition and stipends; staff

development costs; and administrative costs.

Justification: Provide computations, a narrative description and a justification for each cost under this category.

INDIRECT CHARGES

Description: Total amount of indirect costs. This category should be used only when the applicant currently has an indirect cost rate approved by the Department of Health and Human Services (HHS) or another cognizant Federal agency.

Justification: An applicant that will charge indirect costs to the grant must enclose a copy of the current rate agreement. If the applicant organization is in the process of initially developing or renegotiating a rate, upon notification that an award will be made, it should immediately develop a tentative indirect cost rate proposal based on its most recently completed fiscal year, in accordance with the cognizant agency's guidelines for establishing indirect cost rates, and submit it to the cognizant agency. Applicants awaiting approval of their indirect cost proposals may also request indirect costs. When an indirect cost rate is requested, those costs included in the indirect cost pool should not be charged as direct costs to the grant. Also, if the applicant is requesting a rate that is less than what is allowed under the program, the authorized representative of the applicant organization must submit a signed acknowledgement that the applicant is accepting a lower rate than allowed.

PROGRAM INCOME

Description: The estimated amount of income, if any, expected to be generated from this project.

Justification: Describe the nature, source and anticipated use of program income in the budget or refer to the pages in the application that contain this information.

NON-FEDERAL RESOURCES

Description: Amounts of non-Federal resources that will be used to support the project as identified in Block 18 of the SF-424.

Justification: The firm commitment of these resources must be documented and submitted with the application so that the applicant is given credit in the review process. A detailed budget must be prepared for each funding source.

(As required by the **Paperwork Reduction Act of 1995, P.L. 104-13**, the public reporting burden for the Project Description is estimated to average 40 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection information. The Project Description information collection is approved under OMB control number 0970-0139, which expires 4/30/2010. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.)

Certifications

Applicants must furnish, prior to award, an executed copy of the Certification Regarding Lobbying. Applicants must sign and return the certification with their application. If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the applicant shall complete and submit Standard Form (SF)-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. The Certification Regarding Lobbying may be found at: http://www.acf.hhs.gov/grants/grants_resources.html.

When required for programs that involve human subjects, the Protection of Human Subjects Assurance Identification/IRB Certification/Declaration of Exemption form must be submitted. All forms may be reproduced for use in submitting applications. Applicants must sign and return the appropriate standard forms with their application. The Protection of Human Subjects Assurance Identification/IRB Certification/Declaration of Exemption (Common Rule) form may be found at:

http://www.acf.hhs.gov/grants/grants_resources.html.

Assurances

By signing and submitting the application, applicants are making the appropriate

certification of their compliance with all Federal statutes relating to nondiscrimination.

The Pro-Children Act of 1994, 20 U.S.C. 7183, imposes restrictions on smoking in facilities where federally funded children's services are provided. HHS grants are subject to these requirements only if they meet the Act's specified coverage. The Act specifies that smoking is prohibited in any indoor facility (owned, leased, or contracted for) used for the routine or regular provision of kindergarten, elementary, or secondary education or library services to children under the age of 18. In addition, smoking is prohibited in any indoor facility or portion of a facility (owned, leased, or contracted for) used for the routine or regular provision of federally funded health care, day care, or early childhood development, including Head Start services to children under the age of 18. The statutory prohibition also applies if such facilities are constructed, operated, or maintained with Federal funds. The statute does not apply to children's services provided in private residences, facilities funded solely by Medicare or Medicaid funds, portions of facilities used for inpatient drug or alcohol treatment, or facilities where WIC coupons are redeemed. Failure to comply with the provisions of the law may result in the imposition of a civil monetary penalty of up to \$1,000 per violation and/or the imposition of an administrative compliance order on the responsible entity. Additional information may be found in the HHS Grants Policy Statement at: http://www.acf.hhs.gov/grants/grants_related.html.

Electronic Submission

Applicants to ACF may submit their applications in either electronic or paper (hard copy) format. To submit an application electronically, applicants must use the <http://www.Grants.gov> site. ACF will not accept applications via facsimile or email.

IMPORTANT NOTE: Before submitting an application electronically, applicants must complete the organization registration process as well as obtain and register "electronic signature credentials" for the Authorized Organization Representative (AOR). Applicants also must be registered in the Central Contractor Registry (CCR). **CCR registration must be updated annually. Applicants will not be able to upload an application to Grants.gov without current CCR registration and electronic signature credentials for the AOR. This process may take more than five business days, so it is important to start this process early, well in advance of the application deadline.**

Be sure to complete all Grants.gov registration processes listed on the Organization

Registration Checklist at http://www.acf.hhs.gov/grants/registration_checklist.html.

Applicants will be able to download a copy of the application package, complete it off-line, and then upload and submit the application via the Grants.gov site.

If planning to submit an application electronically via <http://www.Grants.gov>:

- **It is strongly recommended that applicants do not wait until the application due date to begin the application process through Grants.gov.** Applicants are encouraged to submit their applications well before the closing date and time so that, if difficulties are encountered, there will still be sufficient time to submit a hard copy via express mail.
- **In order to address any difficulties that may be encountered during the submission process, it may be to an applicant's advantage to submit their applications 24 hours ahead of the closing date and time.**
- Applicants are encouraged to check the Grants.gov webpage for announcements concerning system issues and updates that may affect the submission of applications.
- Checklists and registration brochures are maintained at the Grants.gov website to assist applicants in the registration process and may be found at: http://www.grants.gov/applicants/get_registered.jsp
- If any difficulties are encountered in using Grants.gov, contact the Grants.gov Contact Center at: 1-800-518-4726, or by email at support@grants.gov, to report the problem and obtain assistance. **Remember to retain your service ticket number for reference whenever you have any interaction with the Grants.gov Contact Center.**
- Electronic submission is voluntary, but strongly encouraged. Applicants will not receive additional point value for submitting an application in electronic format, nor will ACF penalize any applicant that submits an application in hard copy.
- Applicants may access the electronic application and downloadable application package for this program announcement by using the FIND function at <http://www.Grants.gov>.
- Applicants may submit all required documents electronically, including all

information typically included on the SF-424s, narratives, charts, etc.

- Electronic formats for the application attachments, such as narratives, charts, etc., should use standard software formats, e.g., Microsoft (Word and Excel), Word Perfect, Adobe PDF, JPEG, and GIF, etc..
- Though applying electronically, the application must still comply with any page limitation requirements described in this program announcement.
- When submitting an application via Grants.gov, applicants must comply with all due dates **AND** times referenced in *Section IV.3. Submission Dates and Times* of this program announcement.
- Applicants that must demonstrate proof of non-profit status may submit proof at the time of application by attaching the documentation to the electronic application, if they wish to do so. Proof of non-profit status, and any other required documentation, may be scanned and attached as an "Other Attachment." Assurances, certifications, and/or proof of non-profit status that are not submitted electronically at the time of application, are required to be submitted to ACF by the time of award and in hard copy. Acceptable types of proof of non-profit status are stated earlier in this section of the program announcement under "Eligibility Certification."
- It is **strongly recommended** that the applicant retain a printed hard copy of the application in case a hard copy must be submitted to ACF.

After the application is submitted electronically, the applicant will receive two emails from Grants.gov:

- An automatic acknowledgement of the application's submission that will provide a Grants.gov tracking number.
- An acknowledgement that the submitted application package has passed or failed a series of checks and validations.

ACF will retrieve the electronically submitted application from Grants.gov. Applicants will receive an email notification from ACF acknowledging that ACF has received the application.

ACF may request that the applicant provide original signatures on forms at a later date.

The Grants.gov website complies with Section 508 of the Rehabilitation Act of 1973. Grants.gov webpages are designed to work with assistive technologies such as screen readers. If an applicant uses assistive technology and is unable to access any material on the site, contact the Grants.gov Contact Center at support@grants.gov for assistance.

Hard Copy Submission of Applications

Applicants that are submitting their application in paper format should submit one original and two copies of the complete application with all attachments, unless directed otherwise. The original and each of the two copies must include all required forms, certifications, assurances, and appendices, be signed by the Authorized Organization Representative (AOR), and be unbound. The original copy of the application must have original signature(s). See Section IV.6 of this announcement for address information for application submissions.

Please refer to *Section VIII* for a checklist of application requirements, their location and due dates that applicants may use in developing and organizing application materials.

Please refer to *Section IV.3* for details concerning acknowledgement of received applications.

3. Submission Dates and Times:

Due Date for Applications: [Insert 90 days from date of publication].

Explanation of Due Dates

The due date for receipt of applications is referenced above. Applications received after 4:30 p.m., eastern time, on the due date will be classified as late and will not be considered in the current competition.

Applicants are responsible for ensuring that applications are mailed or hand-delivered or submitted electronically well in advance of the application due date and time.

Mail

Applications that are submitted by mail must be received no later than 4:30 p.m., eastern

time, on the due date referenced above at the address listed in *Section IV.6.*

Hand Delivery

Applications hand carried by applicants, applicant couriers, other representatives of the applicant, or by overnight/express mail couriers must be received on or before the due date referenced above, between the hours of 8:00 a.m. and 4:30 p.m., eastern time, at the address referenced in *Section IV.6.*, between Monday and Friday (excluding Federal holidays).

Electronic Submission

Applications submitted electronically via Grants.gov must be submitted no later than 4:30 p.m., eastern time, on the due date referenced above.

ACF cannot accommodate transmission of applications by facsimile or email.

Late Applications

Applications that do not meet the requirements above are considered late applications. ACF shall notify each late applicant that its application will not be considered in the current competition.

ANY APPLICATION RECEIVED AFTER 4:30 P.M., EASTERN TIME, ON THE DUE DATE WILL NOT BE CONSIDERED FOR COMPETITION.

Extension of Deadlines

ACF may extend application deadlines when circumstances such as acts of God (floods, hurricanes, etc.) occur; when there are widespread disruptions of mail service; or in other rare cases. A determination to extend or waive deadline requirements rests with the Chief Grants Management Officer.

Acknowledgement of Received Application

ACF will not provide acknowledgement of receipt of hard copy application packages submitted via mail, courier services, or by hand delivery. Applicants who submit their application packages electronically via <http://www.Grants.gov> will receive two email acknowledgements from that website:

- An automatic acknowledgement of the application's submission that will provide a Grants.gov tracking number.
- An acknowledgement that the submitted application package has passed or failed a series of checks and validations.

4. Intergovernmental Review of Federal Programs:

State Single Point of Contact (SPOC)

This program is covered under Executive Order (E.O.) 12372, "Intergovernmental Review of Federal Programs," and 45 CFR Part 100, "Intergovernmental Review of Department of Health and Human Services Programs and Activities". Under the Executive Order, States may design their own processes for reviewing and commenting on proposed Federal assistance under covered programs.

Applicants should go to the following URL for the official list of the jurisdictions that have elected to participate in E.O. 12372 <http://www.whitehouse.gov/omb/grants/spoc.html>.

Applicants from participating jurisdictions should contact their SPOC, as soon as possible, to alert them of their prospective applications and to receive instructions on their jurisdiction's procedures. Applicants must submit all required application materials to the SPOC and indicate the date of submission on the Standard Form (SF) 424 at item 19.

Under 45 CFR 100.8(a)(2), a SPOC has 60 days from the application due date to comment on proposed new awards.

SPOC comments may be submitted directly to ACF to: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Grants Management, Division of Discretionary Grants, 370 L'Enfant Promenade SW., 6th Floor East, Washington, DC 20447.

Entities that meet the eligibility requirements of this announcement are still eligible to apply for a grant even if a State, Territory or Commonwealth, etc., does not have a SPOC or has chosen not to participate in the process. Applicants from non-participating jurisdictions need take no action with regard to E.O. 12372. Applications from Federally-recognized Indian Tribal governments are not subject to E.O. 12372.

5. Funding Restrictions:

Costs of organized fund raising, including financial campaigns, endowment drives, solicitation of gifts and bequests, and similar expenses incurred solely to raise capital or obtain contributions, are unallowable under this grant award.

Grant awards will not allow reimbursement of pre-award costs.

Construction is not an allowable activity or expenditure under this grant award.

Purchase of real property is not an allowable activity or expenditure under this grant award.

6. Other Submission Requirements:

Submit applications to one of the following addresses:

Submission by Mail

ACYF Operations Center
c/o The Dixon Group, Inc.
ATTN: Children's Bureau
118 Q St., NE.
Washington, DE 20002-2132

Hand Delivery

ACYF Operations Center
c/o The Dixon Group, Inc.
ATTN: Children's Bureau
118 Q St., NE.
Washington, DC 20002-2132

Electronic Submission

See *Section IV.2* for application requirements and for guidance when submitting applications electronically via <http://www.Grants.gov>.

For all submissions, see *Section IV.3* for information on due dates.

V. APPLICATION REVIEW INFORMATION

1. CRITERIA:

In considering how applicants will carry out the responsibilities addressed under this announcement, competing applications for financial assistance will be reviewed and evaluated against the following criteria:

OBJECTIVES AND NEED FOR ASSISTANCE - 20 points

In reviewing the objectives and need for assistance, reviewers will consider the extent to which:

- (1) The applicant demonstrates an understanding of the requirements of the Fostering Connections legislation and the extent to which the proposed project will contribute to meeting those requirements.
- (2) The application identifies and demonstrates a clear understanding of key issues related to the grant program area(s) selected, including kinship care; family identification, location, engagement and assessment; youth adoption; family group decision-making; domestic violence; residential family treatment, and comprehensive service delivery.
- (3) The applicant demonstrates an understanding of the purposes of the Child and Family Services Reviews (CFSRs) and the relationship of the proposed grant program to the achievement of safety, permanency and well-being outcomes for children.
- (4) The application presents a thorough review of the relevant literature that reflects a clear understanding of the research on best practices and promising approaches as it relates to the proposed project; and:
 - a) Sets a sound context and rationale for the project.
 - b) Provides evidence that the proposed project is innovative and, if successfully implemented and evaluated, likely to contribute to the knowledge base of the selected program area(s).
- (5) The application presents a clear vision for the proposed project to be developed and implemented.

- a) The applicant makes a clear statement of the goals (end products of an effective project) and objectives (measurable steps for reaching these goals) of the proposed project; and
 - b) These goals and objectives closely relate to the purposes of this funding announcement.
- (6) The lessons learned through the proposed project would benefit policy, practice and theory development in addressing the needs of the target populations as described in this funding announcement.
- (7) The proposed project would develop strong partnerships to meet the goals described in this funding announcement.
- (8) The applicant clearly identifies the population to be served by the project and thoroughly describes the needs of the target population.
- a) The proposed project responds appropriately to the needs of this target population.
 - b) The estimated number of children and families to be served by the project is reasonable and appropriate.
- (9) The geographic location to be served by the project is clearly defined and justified based on factors such as the key socioeconomic and demographic characteristics of the targeted community as they relate to the selected program area(s).
- (10) The application describes significant results or benefits that can be expected for children, families and kin.

Additional Criteria

Reviewers of applications in the Intensive Family-finding Efforts program area will consider the extent to which:

- The applicant demonstrates a thorough understanding of the need for knowledge in the field about what works in family search, family engagement and permanency achievement.

Reviewers of applications in the Family Group Decision-Making program area will consider the extent to which:

- The applicant demonstrates a thorough understanding of the need for knowledge in the field about what works in family engagement, and considerations in working with families with domestic violence issues

Reviewers of applications in the Residential Family Treatment program area will consider the extent to which:

- The applicant describes existing services to family members that support the goals and objectives of this announcement, such as number and type of current substance abuse and mental health treatment services; family and children's treatment, intervention, and prevention services; staff training, parent and foster parent training; and any other existing service in place to address the needs of families and how the propose project fits into the existing services.
- The applicant describes the availability of family treatment services in the geographic area, as well as the number and type of current treatment services, slots, or beds available and the number of people currently being served in the target area. The applicant states the average wait time for treatment, if any.

APPROACH - 35 points

In reviewing the approach, reviewers will consider the extent to which:

- (1) The applicant provides a clear and reasonable timeline (including a timeline chart) and narrative for implementing the proposed project, including major milestones and target dates.
- (2) The timeline is comprehensive and reasonable and includes a description of factors that could speed or hinder the implementation and explain how these factors would be managed.
- (3) The proposed project would complete its activities in a timely manner and conduct a thorough evaluation of its effectiveness within the project time frame.
- (4) The proposed project would enhance capacity to meet the needs of the target

population.

- a) Specific measurable outcomes will occur as a result of the proposed project activities.
 - b) There will be a strong relationship between the proposed project activities and improved outcomes for children and youth who are in, or at risk of entering, foster care.
- (5) There will be an effective administrative and organizational interface between the applicant and the appropriate partner organizations.
- a) The applicant describes the roles and responsibilities of any collaborating agencies, and includes letters of commitment.
 - b) There are appropriate letters of commitment from these partner organizations.
- (6) The application demonstrates a thorough understanding of the challenges of implementing the proposed project.
- a) The applicant provides a sound plan explaining how the project would successfully overcome these challenges.
 - b) The applicant describes how truthful feedback will be provided to the field on the challenges and strategies.
- (7) The proposed project will provide culturally competent services to the target population.
- (8) The design of the proposed project reflects up-to-date knowledge from research and literature. The proposed project is innovative and involves strategies that build on, or are an alternative to, existing strategies.
- (9) There is a sound plan for developing useful products during the proposed project and a reasonable schedule for developing these products.
- a) The intended audience (e.g., researchers, policymakers, and practitioners) for product dissemination is comprehensive and appropriate.

b) The dissemination plan includes appropriate mechanisms and forums that would effectively convey the information and support successful replication by other interested agencies.

(10) There is a sound plan for continuing this project beyond the period of Federal funding.

Additional Criteria

Reviewers of applications in the Kinship Navigator program area will consider the extent to which the applicant:

- Identifies and provides for coordination with other relevant agencies and grant-funded programs that promote service coordination or provide information and referral services for the target population;
- Ensures that the proposed program is planned, developed and operated in consultation with kinship caregivers and organizations representing them, and youth raised by kinship caregivers;
- Promotes partnerships between public and private agencies for the purposes of increasing knowledge/awareness of kinship needs, program development, and service provision.

Reviewers of applications in the program area of Intensive Family-finding will consider the extent to which:

- Existing resources will be leveraged in collaboration with this effort;
- The proposed activities or project will help the agency permanently incorporate family-finding into their practice model.

Reviewers of applications in the Family Group Decision-Making program area will consider the extent to which:

- The application demonstrates how it will engage and involve the family, including the child if appropriate, in the planning and development of diversionary or case plans, and/or as a cooperative relationship between the biological and foster

families to encourage permanency.

- The application demonstrates how it will effectively address the safety needs of children and families when working with families where there is a co-occurrence of domestic violence, including methods used to conduct a thorough safety and risk assessment, methods used to ensure the safety of all participants during the meeting and a plan to access expertise in domestic violence intervention for both training and on-going implementation of the program.
- The application demonstrates how the applicant will effectively engage and collaborate with a domestic violence community agency and/or batterer intervention program.
- The application demonstrates a strong plan of collaboration with and commitment from various community organizations, partners and professional organizations, in order to:
 - plan, prepare and implement or expand the proposed FGDM program;
 - offer an array of services that meet the family's needs;
 - identify community-based agencies that are in close proximity to where the family resides that can provide meeting space for FGDM meetings.

This plan should include, where appropriate, Letters of Commitment and/or MOUs from identified community partners.

- The application demonstrates a strong plan for how the agency or collaborating agencies will maintain and respect confidentiality during the planning, preparation and implementation of meetings. This may include the development of a Memoranda of Understanding among agencies to share appropriate family information in order to improve the case plan.
- The application clearly describes the criteria the applicant will use for referring a case to FGDM, while addressing the unique needs and circumstances for the target population and community.

- The application outlines a sound plan for the recruitment and engagement of family members, including fathers, to participate in FGDM and identifies solutions to any barriers and obstacles to the involvement of family members.
- The application provides a clear description on the strategies they will implement to address workload issues to balance regular workload and FGDM workload.
- The application identifies agency barriers and obstacles to the implementation or the expansion of the proposed FGDM program and provides a clear plan to provide the necessary supports for participating agency staff in implementing the proposed program.

Reviewers of applications in the Residential Family Treatment program area will consider the extent to which:

- The applicant describes the strategies selected to support the overall goal to reconnect families, including specific family interventions and approaches that will stabilize and strengthen family relationships.
- The applicant describes the development of a comprehensive and individualized array of activities or services tailored to the needs of parents and their children. The applicant demonstrates the extent to which individualized family case plans include individual, group, and family counseling, follow-up relapse prevention, and supplemental treatment services for all family members, as necessary.
- The applicant describes how the proposed services or practices, including strategies to preserve and reunite families, will be implemented for the parents and their children.
- The applicant identifies the services that will be provided at the residential treatment site, and those that will be provided in the community by partners, and whether an appendix includes a list of the service provider organizations.
- The applicant states agreement to coordinate and integrate services to accomplish your comprehensive service system, and describes the process used to achieve service coordination and integration among the network of providers;
- The applicant describes how off-site providers will participate in treatment

planning, service delivery, quality assurance, monitoring, and evaluating effectiveness, and whether MOUs and MOAs are included in an appendix.

- The applicant shows that the necessary groundwork (e.g., planning, consensus development, development of MOUs/MOAs, identification of potential facilities) has been completed or is near completion so that the project can be implemented and service delivery can begin as soon as possible and no later than 4 months after grant award.
- The applicant describes the treatment planning process for developing comprehensive individualized and family service plans to meet the needs children and their parents, and the family unit as a whole.
 - Strategies for including the appropriate family members in the treatment planning process while ensuring a safe and healthy environment.
 - Service plans must include individual, group, and family counseling, as appropriate, as well as follow-up relapse prevention, and supplemental treatment and recovery support services, as required.

EVALUATION - 20 points

In reviewing the evaluation, reviewers will consider the extent to which:

- (1) The applicant presents a reasonable preliminary site-specific evaluation plan that can be expected to provide regular, meaningful feedback for project improvement. The applicant identifies specific evaluation questions for investigation, including the areas required in this program announcement; appropriate methods (e.g., written surveys, questionnaires, conference calls, focus groups, and unstructured telephone or in-person interviews); and realistic timeframes. If not utilizing a randomized control approach, the applicant provides an adequate description and justification that the proposed evaluation design is the most rigorous design possible for addressing the questions of interest.
- (2) The site-specific evaluation plan is likely to yield substantive and useful information on the level of coordination between the proposed project and other programs with similar systems/services, or that serve the same clients.
- (3) The site-specific evaluation plan is likely to yield substantive and useful information

on the Child and Family Services Review outcomes listed below:

Safety Outcome 2	Children are safely maintained in their homes whenever possible and appropriate.
- Item 3	Services to family to protect child(ren) in the home and prevent removal or re-entry into foster care
Permanency Outcome 1	Children have permanency and stability in their living situations.
- Item 5	Foster care re-entries
- Item 8	Reunification, guardianship, or permanent placement with relatives
- Item 10	Other planned permanent living arrangement
Permanency Outcome 2	The continuity of family relationships and connections is preserved for children.
Well-Being Outcome 1	Families have enhanced capacity to provide for their children's needs.
- Item 17	Needs and services of child, parents, and foster parents
- Item 18	Child and family involvement in case planning

ORGANIZATIONAL PROFILES - 20 points

In reviewing the organizational profiles, reviewers will consider the extent to which:

(1) The application evidences sufficient experience and expertise in the program areas of this announcement, in collaboration with partner organizations; in culturally competent service delivery; and in administration, development, implementation, management, and evaluation of similar projects.

a) Each participating organization (including partners and/or subcontractors) possesses the organizational capability to fulfill their assigned roles and functions effectively (if the application involves partnering and/or subcontracting with other agencies/organizations) in serving the target populations.

(2) The proposed project director and key project staff possess sufficient relevant knowledge, experience and capabilities to implement and manage a project of this size, scope and complexity effectively (e.g. resume).

a) The role, responsibilities and time commitments of each proposed project staff position, including consultants, subcontractors and/or partners, are clearly defined and appropriate to the successful implementation of the proposed project with respect to the target population.

(3) There is a sound management plan for achieving the objectives of the proposed project on time and within budget, including clearly defined responsibilities, for accomplishing project tasks and ensuring quality.

a) The plan clearly describes the effective management and coordination of activities carried out by any partners, subcontractors and consultants (if appropriate).

b) There would be a mutually beneficial relationship between the proposed project and other work planned, anticipated or underway with Federal assistance by the applicant.

Additional Criteria

Reviewers of applications in the Residential Family Treatment program area will consider

the extent to which:

- The applicant describes the resources available for the proposed project (e.g., facilities, equipment), and provide evidence that services will be provided in a location that is adequate, accessible, compliant with the Americans with Disabilities Act (ADA), and amenable to the target population; or explains why the ADA does not apply to this organization.

BUDGET AND BUDGET JUSTIFICATION - 5 points

In reviewing the budget and budget justification, reviewers will consider the extent to which:

- (1) The costs of the proposed project are reasonable and appropriate, in view of the activities to be conducted and expected results and benefits.
- (2) The applicant's fiscal controls and accounting procedures would ensure prudent use, proper and timely disbursement and accurate accounting of funds received under this program announcement.
- (3) The proposed budget allows for sufficient resources to be allocated for the site-specific evaluation and any national cross-site evaluation effort, and can support the necessary evaluation activities that adequately address the evaluation questions described in this announcement.

2. Review and Selection Process:

No grant award will be made under this announcement on the basis of an incomplete application.

Initial ACF Screening: Each application will be screened to determine whether it was received by the closing date and time and whether the requested amount exceeds the stated ceiling. Late applications or those exceeding the funding limit will be returned to the applicants with a notation that they were unacceptable and will not be reviewed.

A panel of at least three reviewers (primarily experts from outside the Federal Government) will use the evaluation criteria described in this announcement to evaluate each application. The reviewers will determine the strengths and weaknesses of each application, provide comments about the strengths and weaknesses, and give each application a numerical score.

The results of the competitive review are a primary factor in making funding decisions. In addition, Federal staff conducts administrative reviews of the applications and, in light of the results of the competitive review, will recommend applications for funding to the ACYF Commissioner. ACYF may also solicit and consider comments from ACF Regional Office staff in making funding decisions. ACYF may take into consideration the involvement (financial and/or programmatic) of the private sector, national, or State or community foundations; a favorable balance between Federal and non-Federal funds for the proposed project; or the potential for high benefit from low Federal investment. ACYF may elect not to fund any applicants having known management, fiscal, reporting, programmatic, or other problems that make it unlikely that they would be able to provide effective services or effectively complete the proposed activity.

With the results of the peer review and the information from Federal staff, the Commissioner of ACYF makes the final funding decisions. The Commissioner may give special consideration to applications proposing services of special interest to the Government and to achieve geographic distributions of grant awards. Applications of special interest may include, but are not limited to, applications focusing on underserved or inadequately served clients or service areas and programs addressing diverse ethnic populations.

Since ACF will be using non-Federal reviewers in the process, applicants have the option of omitting from the application copies (not the original) specific salary rates or amounts for individuals specified in the application budget and Social Security Numbers, if otherwise required for individuals. The copies may include summary salary information.

Approved but Unfunded Applications

Applications that are approved but unfunded may be held over for funding in the next funding cycle, pending the availability of funds, for a period not to exceed one year.

3. Anticipated Announcement and Award Dates:

Applications will be reviewed during the Summer 2009. Grant awards will have a start date no later than September 29, 2009.

VI. AWARD ADMINISTRATION INFORMATION

1. Award Notices:

Successful applicants will be notified through the issuance of a Notice of Award (NoA) document that sets forth the amount of funds granted, the terms and conditions of the grant, the effective date of the grant, the budget period for which initial support will be given, the non-Federal share to be provided (if applicable), and the total project period for which support is contemplated. The NoA will be signed by the Grants Officer and transmitted via postal mail.

Following the finalization of funding decisions, organizations whose applications will not be funded will be notified by letter, signed by the Program Office head.

2. Administrative and National Policy Requirements:

Grantees are subject to the administrative requirements in 45 CFR Part 74 (for non-governmental entities) or 45 CFR Part 92 (for governmental entities).

Direct Federal grants, sub-award funds, or contracts under this ACF program shall not be used to support inherently religious activities such as religious instruction, worship, or proselytization. Therefore, organizations must take steps to separate, in time or location, their inherently religious activities from the services funded under this program. Regulations pertaining to the Equal Treatment for Faith-Based Organizations, which includes the prohibition against Federal funding of inherently religious activities, can be found at the HHS web site at: <http://www.hhs.gov/fbci/waisgate21.pdf>.

A faith-based organization receiving HHS funds retains its independence from Federal, State, and local governments, and may continue to carry out its mission, including the definition, practice, and expression of its religious beliefs. For example, a faith-based

organization may use space in its facilities to provide secular programs or services funded with Federal funds without removing religious art, icons, scriptures, or other religious symbols. In addition, a faith-based organization that receives Federal funds retains its authority over its internal governance, and it may retain religious terms in its organization's name, select its board members on a religious basis, and include religious references in its organization's mission statements and other governing documents in accordance with all program requirements, statutes, and other applicable requirements governing the conduct of HHS funded activities.

Faith-based and community organizations may reference the "Guidance to Faith-Based and Community Organizations on Partnering with the Federal Government" at:

<http://www.whitehouse.gov/government/fbci/guidance/index.html>.

HHS Grants Policy Statement

The HHS Grants Policy Statement (GPS) is the Department of Health and Human Services new single policy guide for discretionary grants and cooperative agreements. Unlike previous HHS policy documents, the GPS is intended to be shared with and used by grantees. It became effective October 1, 2006 and is applicable to all Operating Divisions (OPDIVS), such as the Administration for Children and Families (ACF), except the National Institutes of Health (NIH). The GPS covers basic grants processes, standard terms and conditions, and points of contact, as well as important OPDIV-specific requirements. Appendices include a glossary of terms and a list of standard abbreviations for ease of reference. The GPS may be accessed at http://www.acf.hhs.gov/grants/grants_related.html.

3. Reporting Requirements:

Grantees will be required to submit performance progress and financial reports periodically throughout the project period. Frequency of reporting is listed later in this section.

Beginning with FY 2009 awards, most ACF grantees will begin using the a Standard Form (SF) for required performance progress reporting (PPR). The SF-PPR is a standard government-wide performance progress reporting format consisting of a series of forms implemented by Federal agencies to collect performance information from award recipients. Most ACF grantees will begin using the standard format implemented through ACF's Office of Grants Management (OGM), entitled the "ACF-OGM-SF-PPR." Use of the ACF-OGM-SF-PPR will begin for new awards and continuation awards made by ACF in FY

2009. At a minimum, grantees will be required to submit the ACF-OGM-SF-PPR, which consists of the ACF-OGM-SF-PPR Coversheet and the ACF-OGM-SF-PPR Appendix B Program Indicators.

ACF Programs that utilize other SF-PPR reporting formats, or other reporting forms or formats that differ from the new ACF-OGM-SF-PPR, have listed those forms or formats below. Grant award documents will inform grantees of the appropriate performance progress report form or format to use beginning in FY 2009.

Grantees will continue to use the Financial Status Report (FSR) SF-269 (long form) for required financial reporting.

The SF-269 (long form) and the ACF-OGM-SF-PPR may be found at http://www.acf.hhs.gov/grants/grants_resources.html. Grantees should consult their award documents to determine the appropriate performance progress report format required under their award.

Performance progress and financial reports are due 30 days after the end of the reporting period. Final program performance and financial reports are due 90 days after the close of the project period.

Final reports may be submitted in hard copy to the Grants Management Office Contact listed in Section VII. of this announcement.

Program Progress Reports: Semi-Annually
Financial Reports: Semi-Annually

VII. AGENCY CONTACTS

Program Office Contact:

Cathy Overbaugh or Pat Campiglia
Children's Bureau
Portals Office Building, 8th Floor
1250 Maryland Avenue, SW

Washington, DC 20024

Phone: 202-205-7273

Phone 2: 202-205-2629

Email: cathy.overbaugh@acf.hhs.gov

For hearing or speech impaired callers, contact the Federal Relay Service at 1-800-877-8339 (TTY (Text Telephone) / ASCII (American Standard Code For Information Interchange)).

Grants Management Office Contact:

Ben Sharp, Grants Officer

Division of Discretionary Grants

ACYF/ Operations Center

c/o Dixon Group, Inc. ATTN: Children's Bureau

118 Q St., NE

Washington, DC 20002-2132

Phone: 866-796-1591

Phone 2: TTY 711

For hearing or speech impaired callers, contact the Federal Relay Service at 1-800-877-8339 (TTY (Text Telephone) / ASCII (American Standard Code For Information Interchange)).

VIII. OTHER INFORMATION

Checklist

You may use the checklist below as a guide when preparing your application package.

	What to Submit	Where Found	When to Submit
<input type="checkbox"/>	SF-424	Referenced in Section IV.2 under "Forms"	By

		and found at http://www.acf.hhs.gov/grants/grants_resources.html	applicatio n due date found in Overview and Section IV.3.
<input type="checkbox"/>	SF-424A	Referenced in Section IV.2 under "Forms" and found at http://www.acf.hhs.gov/grants/grants_resources.html	By applicatio n due date found in Overview and Section IV.3.
<input type="checkbox"/>	SF-424B	Referenced in Section IV.2 under "Forms" and found at http://www.acf.hhs.gov/grants/grants_resources.html	By applicatio n due date found in Overview and Section IV.3.
<input type="checkbox"/>	SF-LLL	"Disclosure Form to Report Lobbying" is referenced in Section IV.2 under "Certifications" and found at	By applicatio n due

		http://www.acf.hhs.gov/grants/grants_resources.html Submission of this form is required if any funds have been paid, or will be paid, to any person for influencing, or attempting to influence, an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan.	date found in Overview and Section IV.3.
<input type="checkbox"/>	Certification Regarding Lobbying	Referenced in Section IV.2 of the announcement under "Certifications" and found at http://www.acf.hhs.gov/grants/grants_resources.html	By date of award.
<input type="checkbox"/>	Table of Contents	Referenced in Section IV.2 of the announcement.	By application due date found in Overview and Section IV.3.
<input type="checkbox"/>	Project Summary/Abstract	Referenced in Section IV.2 of the announcement.	By application due date

			found in Overview and Section IV.3.
<input type="checkbox"/>	Project Description	Referenced in Section IV.2 of the announcement.	By application due date found in Overview and Section IV.3.
<input type="checkbox"/>	Budget and Budget Justification	Referenced in Section IV.2 of the announcement.	By application due date found in Overview and Section IV.3.
<input type="checkbox"/>	Third-Party Agreements	Referenced in Section IV.2 of the announcement under "Project Description."	By application due date found in Overview

			and Section IV.3.
<input type="checkbox"/>	Documentation of Non-Federal Resources	Referenced in Section IV.2 of the announcement under "Project Description."	By application due date found in Overview and Section IV.3.
<input type="checkbox"/>	Proof of Non-Profit Status	Referenced in Section IV.2 of the announcement under "Eligibility Certification."	By date of award.
<input type="checkbox"/>	Protection of Human Subjects Assurance Identification/IRB Certification/Declaration of Exemption Form	Referenced in Section IV.2 of the announcement under "Certifications" and found at http://www.acf.hhs.gov/grants/grants_resources.html	By date of award.
<input type="checkbox"/>	This program is covered under E.O. 12372, "Intergovernmental Review of Federal Programs," and 45	Applicants should go to the following URL for the official list of the jurisdictions that have elected to participate in E.O. 12372 http://www.whitehouse.gov/omb/grants/spoc.html as indicated in Section IV.4 of this announcement.	By application due date found in Overview

	<p>CFR Part 100, "Intergovernmental Review of Department of Health and Human Services Programs and activities". Applicants must submit all required application materials to the State Single Point of Contact (SPOC) and indicate the date of submission on the Standard Form (SF) 424 at item 19.</p>		<p>and Section IV.3.</p>
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Date:

Commissioner
Administration on Children, Youth and Families