### PS13-1308 Work Plan Status Report #2 Template Instructions Strategy 2: School-Based HIV/STD Prevention (Local Education Agency Optional Template)

Funded partners must submit Work Plan Status Report #2 for the second six months of Year 3 (February 1, 2016 – July 31, 2016). The Work Plan Status Report #2 must address the following elements of each objective and activity:

- Successes: Indication of the completion status of the required activities of the Year 3 Work Plan (for example: met, in progress, or not met) through July 31, 2016;
- Challenges that hindered completion of the activities in the work plan through July 31, 2016;
- CDC program support to awardees (a description of how CDC could assist you in overcoming any challenges);
- Success Story for this budget period (August 1, 2015 July 31, 2016) in a separate Word document. See Success Story Development Tool;
- HIV Materials Review Panel (include a detailed list of reviewed items or other areas in which the Panel was involved in program implementation);
- Evaluation results through July 31, 2016.

This sample Work Plan Status Report template is available for use, but is not required. Should you choose not to use this template, you are still required to include all of the elements listed within the template as detailed in the Year 3 Notice of Award letter.

The Work Plan Status Report #2 is sent directly to your Project Officer via email. Nothing is uploaded to <a href="www.grants.gov">www.grants.gov</a>. Please name the Work Plan Status Report #2 as follows: "{Strategy} Work Plan Status Report #2 Year 3 {Agency}." Please provide a separate Work Plan Status Report #2 for each Strategy area for which you receive funding (Strategy 1: School-Based Surveillance; Strategy 2: School-Based HIV/STD Prevention; Strategy 3: Capacity Building Assistance for School-Based HIV/STD Prevention; and/or Strategy 4: School-Centered HIV/STD Prevention for Young Men Who Have Sex with Men).

Agency Name: Cooperative Agreement Number: PS00XXXX Grant Year: 3

	Required Activities	М	IP	NM	N/A
1. Assess t	ne program progress, capacity, and support of priority schools annually.				
	agreement (MOU/LOC) with each priority schools annually to confirm roles and responsibilities to implement required hes, making adjustments as needed.				
3. Work co	llaboratively with Strategy 3 NGO to build the LEA capacity to implement ESHE, SHS, and SSE.				
	th priority schools throughout the project period to provide on-going professional development (PD) and technical ce (TA) to implement required approaches and support youth at disproportionate risk (YDR) activities.				
engagin	th priority schools to engage the SHAC to adopt and implement required approaches and to reassess the process for g the SHAC in planning activities throughout the program period (revise as needed).				
6. Apply CI	OC PD Practices in planning and implementing PD, TA, and follow-up support				
	Success				
Required	If Met or In Progress was checked please provide a parrative (including some quantitative and qualitative information	on hasa	d on vo	ur actio	'n
Activity Number	If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative information steps in your work plan) regarding the completion of the activity.				
Activity Number					
Activity Number	steps in your work plan) regarding the completion of the activity.				
Activity	steps in your work plan) regarding the completion of the activity.  Example: 45 teachers in 12 priority school were trained on the new ESHE policy and 30 of them implemented the new plants.				
Activity Number  Example: 4  Required Activity	steps in your work plan) regarding the completion of the activity.  Example: 45 teachers in 12 priority school were trained on the new ESHE policy and 30 of them implemented the new policy.  Challenge				
Activity Number Example: 4  Required Activity	steps in your work plan) regarding the completion of the activity.  Example: 45 teachers in 12 priority school were trained on the new ESHE policy and 30 of them implemented the new policy.  Challenge				

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable 1 | P a g e

**Cooperative Agreement Number: PS00XXXX** 

**Grant Year: 3** 

Ple	ase descr	ibe how CDC could assist you in overcoming any challenges:				
		2: Strengthen the capacity of the local education agency (LEA) to provide leadership, guidance, and technical assistance prove the working relationships with strategic partners to achieve program impact and sustainability.	e to pri	ority di	stricts i	n an
		Required Activities	М	IP	NM	N/A
1.	Monitor	activities listed in the MOU/A between education and health agencies.				
2.	Educate	stakeholders and decision makers about the importance of each of the required approaches.				
3.	Maximiz funds.	e partnerships with other federally awarded agencies and organizations to avoid duplication of efforts and leverage				
4.	Expand v	working relationships between education agencies, Strategy 3 NGOs, and PD contractor.				
5.	Expand p	partnerships with health agencies and other organizations.				
6.	Actively CDC.	participate in virtual and in-person training events led by Strategy 3 NGO, professional development contractor, and				
7.	Actively	participate in a minimum of two CDC/DASH approved in-person trainings each year.				
8.	impleme	n a district-level SHAC to support the implementation of program strategies in schools, to engage the SHAC to adopt and ent required approaches, and to reassess the process for engaging SHAC in planning activities throughout the program and to revise as needed.				
9.	Impleme	ent a systematic process to engage the state-level SHAC in planning program activities.				
10.	Instrume	with the "Requirements for Contents of Aids-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey ents, and Educational Sessions in CDC Assistance Programs," and submit to a Program Review Panel to review and all applicable materials prior to their distribution and use in any activities funded in any part with CDC assistance funds.				
		Success				
Α	equired activity umber	If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative informatio steps in your work plan) regarding the completion of the activity.	n base	d on yo	our actio	on

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable **2** | P a g e

Revised: June 29, 2016

**Agency Name:** 

: Cooperative Agreement Number: PS00XXXX	Grant Year: 3
Challenge	
If Not Met or Not Applicable was checked, please explain why the activity was not met.	
CDC Program Support	
ribe how CDC could assist you in overcoming any challenges:	
	Challenge  If Not Met or Not Applicable was checked, please explain why the activity was not met.

5 \	Year Goal 3: Increase the implementation of Exemplary Sexual Health Education (ESHE).				
	Required Activities	М	IP	NM	N/A
1.	Develop and disseminate guidance to staff, decision makers, and other stakeholders about ESHE within your district and with priority schools.				
2.	Provide TA and PD on state-level guidance to district and priority schools to support ESHE policy implementation.				
3.	Provide TA, PD, and other educational opportunities for administrators, school board members, and community members to improve understanding and support for ESHE within your district and with priority schools.				
4.	Assist priority schools to establish a written MS/HS curriculum framework that reflects ESHE.				
5.	Assist priority schools to implement the selected MS/HS curriculum framework that reflects ESHE.				
6.	Assist priority schools in developing, selecting, or implementing curricula consistent with the district curricula framework that reflects ESHE and/or evidence-based intervention (EBI) with priority schools.				
7.	Establish and maintain a TA and PD system to assist priority schools in implementing ESHE.				

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable 3 | Page

### PS13-1308 Work Plan Status Report #2 Strategy 2: School-Based HIV/STD Prevention Grant Year 3: reporting timeframe February 1, 2016 – July 31, 2016

(Local Education Agency Optional template)

Agency Name	: Cooperative Agreement Number: PS00XXXX	Grant Year: 3
8. Identify a	and adopt requisite teacher competencies and skills to implement ESHE including the use of EBI when appropriate with	
in your d	istrict and with priority schools.	
	nat all teachers responsible for the delivery of sexual health education have the requisite competencies and skills to	
	nt ESHE with priority schools.	
10. Provide I	PD, TA, and FUS on the essential competencies and skills to implement ESHE including EBI when appropriate with chools.	
	able] Develop and foster the use of a systematic process for identifying, selecting, or adapting, and implementing ESHE and/or EBI with priority schools.	
	able] Implement all of the above activities to meet the HIV/STD prevention needs of the selected YDR group with	
13. Partner v	with Strategy 3 NGO and other agencies and organizations to leverage resources when working within priority schools to their capacity to implement ESHE and EBI when appropriate.	
nier case	Success	
Required Activity Number	If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative informatio steps in your work plan) regarding the completion of the activity.	n based on your action
	Challenge	
Required	If Not Met or Not Applicable was checked, please explain why the activity was not met.	
Activity Number		
	CDC Program Support	
Please descr	ibe how CDC could assist you in overcoming any challenges:	

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable 4 | P a g e

**Agency Name: Cooperative Agreement Number: PS00XXXX Grant Year: 3** 

5 Year Goal 4: Increase access to Sexual Health Services (SHS) for all youth.

	Required Activities	М	IP	NM	N/A
1. Identify	youth-friendly community health service providers for the delivery of key SHS in priority schools.				
2. Develop	informational materials about available SHS and disseminate to priority schools.				
3. Establish	n linkages with organizations that have experience in adolescent SHS in priority schools.				
4. Develop	written guidance for developing a referral system to youth-friendly sexual health services.				
5. Develop	a referral system to youth-friendly sexual health services with priority schools.				
	PD opportunities, TA, and follow-up support for teachers, administrators, counselors, nurses, and other appropriate oriority schools on the delivery of on-site SHS, and referral to youth-friendly, off-site key SHS.				
	cable] Facilitate linking students to health, mental health, and other community services including STD/HIV testing, ng, and treatment with providers that have experience in serving YDR with priority schools.				
8. Assess in	mplementation of SHS-related policies, (including laws, codes, or regulations).				
9. Monitor	the implementation of key SHS at priority schools.				
10. Monitor	the implementation of SHS related policies in priority schools.				
11. [If applied priority	cable] Implement all of the above activities to meet the HIV/STD prevention needs of the selected YDR group with schools.				
12. Maximiz	e funding to increase reimbursement for eligible health services with priority schools.				
	with Strategy 3 NGO and other agencies and organizations to leverage resources when working with priority schools to their capacity to implement SHS.				
	Success				
Required Activity Number	If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative informati steps in your work plan) regarding the completion of the activity.	on based	d on yo	ur actio	n
	Challenge				
KEY: M: Met	IP: In Progress NM: Not Met N/A: Not applicable	<b>5</b>   P a	a g e		

IP: In Progress KEY: M: Met NM: Not Met N/A: Not applicable 5 Page

Agency Name: Cooperative Agreement Number: PS00XXXX Grant Year: 3

Required	If Not Met or Not Applicable was checked, please explain why the activity was not met.
Activity	
Number	
	CDC Program Support
Please descr	ribe how CDC could assist you in overcoming any challenges:

5 Year Goal 5: Improve the Safe and Supportive Environments (SSE) for all students and staff.					
Required Activities			NM	N/A	
1. Facilitate linking students to community-based mentorship and service learning opportunities in priority schools.					
2. Provide PD opportunities, TA, and follow-up support for teachers, administrators, counselors, nurses, and other appropriate staff on activities to promote school connectedness and parent engagement in priority schools.					
3. Provide PD opportunities, TA, and follow-up support for teachers, administrators, counselors, nurses, and other professionals on implementing anti-bullying and anti-sexual harassment policies in priority schools.					
4. [If applicable] Implement all of the above activities to meet the HIV/STD prevention needs of the selected YDR group with priority schools.					
5. Assess implementation of SSE-related policies, (including laws, codes, and regulations).					
6. Monitor the implementation of SSE-related policies in priority schools.					
7. Partner with Strategy 3 NGO and other agencies and organizations to leverage resources when working with priority districts to increase their capacity to implement SSE.					
Success					

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable 6 | Page

### PS13-1308 Work Plan Status Report #2

#### **Strategy 2: School-Based HIV/STD Prevention**

### Grant Year 3: reporting timeframe February 1, 2016 – July 31, 2016

(Local Education Agency Optional template)

Required Activity Number

| Required Activity Number | If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative information based on your action steps in your work plan) regarding the completion of the activity.

| Challenge | Required Activity Number | If Not Met or Not Applicable was checked, please explain why the activity was not met.

**CDC Program Support** 

5 Y	5 Year Goal 6: Educate decision makers on policy; implement and track policies related to ESHE, SHS and SSE.				
	Required Activities	М	IP	NM	N/A
1.	Assess state, district, and priority schools policies related to required approaches (ESHE, SHS, and SSE).				
2.	Track policy adoption and monitor policy implementation within district and priority schools.				
3.	Develop and disseminate guidance to support the implementation of science-based policy practices within your district and with priority schools.				
4.	Deliver training and TA to support the implementation of science-based policy practices related to the program approaches.				

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable 7 | Page

Revised: June 29, 2016

Please describe how CDC could assist you in overcoming any challenges:

**Grant Year: 3 Agency Name: Cooperative Agreement Number: PS00XXXX** 5. Educate stakeholders, including administrators and school board members within your district and with priority schools, on potential policy solutions regarding school health issues. 6. Maintain existing strategic partnerships within your district and with priority schools, to support policy assessment and implementation monitoring and, if needed, develop new partnerships. Success Required If Met or In Progress was checked, please provide a narrative (including some quantitative and qualitative information based on your action **Activity** steps in your work plan) regarding the completion of the activity. Number Challenge Required If Not Met or Not Applicable was checked, please explain why the activity was not met. **Activity** Number **CDC Program Support** Please describe how CDC could assist you in overcoming any challenges:

#### **Success Story for this Funding Period:**

Please submit one written Success Story in a separate Word document. See Success Story template and guidance: http://www.cdc.gov/healthyyouth/stories/index.htm

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable **8** | P a g e

Agency Name: Cooperative Agreement Number: PS00XXXX Grant Year: 3

#### **HIV Materials Review Panel Requirements:**

HIV Material Review Panel Chair Summary Sheet. Include a signed and dated statement(s) of the chairperson of the HIV Materials Review Panel specifying the vote for approval or disapproval for each reviewed item that is subject to this guidance. http://www.cdc.gov/healthyvouth/fundedpartners/1308/pdf/hivprpform.pdf

#### **Evaluation Results through July 31, 2016:**

Please provide a summary of any evaluation activities undertaken during the second six-month of Year 3 in narrative format below. Describe all activities resulting from the evaluation requirement of the FOA.

#### **Summary of Action Planning with Priority Sites through July 31, 2016:**

Please provide a summary of action planning efforts that were held in conjunction with priority sites during the second six-month period of Year 3 in narrative form below:

KEY: M: Met IP: In Progress NM: Not Met N/A: Not applicable **9** | P a g e