

PS13-1308 Performance Achievement and Monitoring Work Plan (part of Continuation Application)
Strategy 3: Capacity Building Assistance for School-Based HIV/STD Prevention

Organization Name:

Cooperative Agreement Number: PS00XXXX

Grant Year: 4

Identify your Level: ☐ SEA ☐ LEA

Identify your Approach: ☐ ESHE ☐ SHS ☐ SSE

5 Year Goal 1: Provide effective CBA to support sustainable initiatives in districts and schools that contribute to reductions in HIV/STD infections among adolescents, and reductions in disparities in HIV/STD infections experienced by specific adolescent sub-populations.

Program Context: *(Insert narrative text here.)*

Required Activities								
1. Identify and disseminate research on approach and policies that have successfully addressed school-based HIV/STD prevention.								
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year				
				2	3	4	5	
	a.							
	b.							
	c.							
2. Create Web site content, slide shows, or written documents that identify policies and practices that are effective in improving school efforts to implement approach.								
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year				
				2	3	4	5	
	a.							
	b.							
	c.							
3. Provide CBA to awarded education agencies to implement required approach through professional development (PD), training, technical assistance (TA), follow-up support (FUS) (e.g., mentoring, coaching, site visits), financial or other incentives; tools/resources, policy assessment, and implementation support.								
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year				
				2	3	4	5	
	a.							
	b.							
	c.							
4. Disseminate modified or existing tools, resources, and materials to support education agencies to implement required approach.								

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				2	3	4	5
	a.						
	b.						
	c.						
5. As necessary, revise scope and degree of CBA to education agencies based on program monitoring.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						
6. Apply CDC PD Practices in planning and implementing PD, TA, and FUS.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						
7. Actively participate in a minimum of two CDC/DASH approved in-person trainings each year.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						
8. Comply with the "Requirements for Contents of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions in Centers for Disease Control and Prevention (CDC) Assistance Programs," and submit to a Program Review Panel to review and approve all applicable materials prior to their distribution and use in any activities funded in any part with CDC assistance funds.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5

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	a.						
	b.						
	c.						

From whom do you need additional TA to implement action steps? ☐ Not Needed ☐ Program Consultant ☐ CDC Surveillance Specialist
☐ CDC Content Specialist ☐ CDC Evaluation Specialist ☐ Professional Development Contractor ☐ Evaluation Contractor ☐ Policy ☐ Other:

Describe what specific type of TA is needed to accomplish this work:

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5 Year Goal 2: Improve the working relationships with strategic partners to achieve program impact and sustainability within the organization and with funded education agencies.

Program Context: *(Insert narrative text here.)*

FOA Required Activities

1. Collaborate with other NGO awarded under Strategy 3 to coordinate activities across education agencies to minimize duplication of efforts.

Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

2. Leverage membership/chapter/affiliate resources to provide support for the required activities.

Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

3. Maximize partnerships with other federally awarded organizations to avoid duplication of efforts and leverage funds.

Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

4. Expand working relationships between education agencies, national NGOs, and PD Contractor.

Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						

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	b.						
	c.						
5. Expand partnerships with health agencies and other agencies.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						
6. Identify potential options for long-term sustainability of implemented activities with awarded education agencies.							
Date to Complete	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						
From whom do you need additional TA to implement action steps? <input type="checkbox"/> Not Needed <input type="checkbox"/> Program Consultant <input type="checkbox"/> CDC surveillance specialist <input type="checkbox"/> CDC content specialist <input type="checkbox"/> CDC evaluation specialist <input type="checkbox"/> Professional Development Contractor <input type="checkbox"/> Evaluation Contractor <input type="checkbox"/> Policy <input type="checkbox"/> Other:							
Describe what specific type of TA is needed to accomplish this work:							

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5 Year Goal 3: Provide technical assistance to educate Decision Makers on Policy Implement and Track Policy (Policy) to education agencies for funded approach (ESHE SHS and SSE).

Program Context: *(Insert narrative text here.)*

FOA Required Activities

1. Support education agencies in assessing state policies and priority district policies related to approaches (ESHE, SHS, and SSE).

Completion Date	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

2. Support education agencies in assessing state policies and priority district policies related to approaches (ESHE, SHS, and SSE).

Completion Date	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

3. Deliver training and TA to support the implementation of science-based policy practices related to approaches (ESHE, SHS, and SSE).

Completion Date	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5
	a.						
	b.						
	c.						

4. Maintain existing strategic partnerships to support policy assessment and implementation monitoring and, if needed, developing new partnerships.

Completion Date	Action Steps <i>Describe how you will accomplish the required activity, ensuring that action steps are specific, measurable, achievable, and realistic.</i>	Person Responsible	Proof of Completion	Program Year			
				2	3	4	5

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	a.						
	b.						
	c.						

From whom do you need additional TA to implement action steps? ☐ Not Needed ☐ Program Consultant ☐ CDC surveillance specialist
☐ CDC content specialist ☐ CDC evaluation specialist ☐ Professional Development Contractor ☐ Evaluation Contractor ☐ Policy ☐ Other:

Describe what specific type of TA is needed to accomplish this work: