

Taking Pride in Prevention Minimum Program Requirements (MPRs)



The following requirements apply to all agencies funded under the Michigan Department of Health and Human Services' Taking Pride in Prevention Program (TPIP):

- Grantees must provide comprehensive (abstinence and contraception) pregnancy prevention education to youth, ages 12-19, in high need geographic areas. Providing programming to sub-populations of youth in those areas that are most high-risk or vulnerable for pregnancies or otherwise have special circumstances such as, culturally underrepresented youth populations (e.g., Hispanic, African American), systems-involved youth, foster care youth, and runaway/homeless youth is allowable.
- Grantees must implement, with fidelity a comprehensive, evidence-based or evidence-informed curriculum approved by MDHHS and address the following three adulthood preparation subjects: adolescent development, healthy relationships, and parent-child communication as part of program delivery.
 - Fidelity as it relates to TPIP programming is the delivery of at least 80% of the intended program - curriculum plus additional lessons.
 - **ALL** adaptations must be approved by MDHHS prior to program implementation. Significant adaptations, known as red light adaptations, must be discussed with MDHHS, and then approved by the curriculum developers, and documentation of such approval provided to MDHHS.
 - Refer to ETR's [Guide to Adapting Evidence-Based Sexual Health Curricula](#) for more information on green light, yellow light and red light adaptations.
- Grantees must meet or exceed the number of unduplicated youth who complete at least 75% of the intended program delivery (curriculum plus any supplemental lessons):

Eligible Curriculum	Intensity Level	Target Number	Minimum Target Number
	<i>Curriculum length/number of sessions</i>	<i>Unduplicated youth who complete at least 75% of the intended program</i>	<i>90% of the target number</i>
<u>Teen Outreach Program</u>	High	77	69
<u>Michigan Model-Healthy & Responsible Relationships</u>	Medium	168	151
<u>Reducing the Risk</u>	Medium	168	151
<u>Promoting Health Among Teens! (Comprehensive)</u>	Low	240	216
<u>Making Proud Choices!</u>	Low	240	216
<u>Cuidate!</u>	Low	240	216

- Grantees, if needed, must implement the following supplemental curriculum lessons/activities as part of the program delivery:

- Teen Outreach Program – “Abstinence & Expressing Affection” (LAM-HW-F6), “Basics of Contraception” (LAM-HW-I2), “Using Condoms Correctly” (LAM-HW-I3), “Understanding & Talking About STDs” (LAM-HW-A5), “Introduction to Reproductive Anatomy” (LAM-HW-F1), and “Introduction to Healthy Relationships” (CWO-REL-I3)
 - Promoting Health Among Teens! (Comprehensive) – “Healthy Relationships”
 - Making Proud Choices! – “Puberty and Adolescent Sexual Development” and “Healthy Relationships”
 - Cuidate! – “Understanding Reproductive Anatomy”
- Grantees must be trauma informed; strengths-based; promote positive youth development; target risk and protective factors; include primary prevention of pregnancy, STIs, and HIV; and provide programming that is medically accurate, age-appropriate, culturally relevant, and current.
 - Grantees must be welcoming, accessible, and inclusive. All youth must be eligible to participate without regard to race, ethnicity, sexual orientation, gender, gender identity (or expression), religion, and national origin. Within 30 days of grant award, grantee must have in place or plan to have in place, policies prohibiting harassment based on race, ethnicity, sexual orientation, gender, gender identity (or expression), religion, and national origin.
 - Grantees must develop and/or maintain a Youth Advisory Council (YAC), which is critical for ensuring that strategies for program implementation are relevant and a good fit for the needs of the community. The YAC provides opportunities for meaningful youth input, promotes positive youth development, and meets the following requirements:
 - YAC meets at least quarterly during each award period.
 - YAC membership is representative of the diversity of the target population, target area, and broader community.
 - YAC connects the project directly to the young people the project hopes to reach, links the project to other youth in the community who have the status and ability to influence even more youth to access the project’s programs and services, is the “eyes and ears” within the youth community, and provides valuable youth feedback to improve the quality and reach of project services and programs.
 - *Refer to the Office of Adolescent’s Health, [Overview of the Characteristics of the Community Advisory Group and Youth Leadership Council](#) for specific details on the expected roles and responsibilities of the YAC.*
 - Grantees must develop and/or maintain a Community Advisory Council (CAC), which functions as a “leadership team” to assist in the planning, design, implementation, and evaluation of the overall program and meets the following requirements:
 - CAC meets at least quarterly during each award period.
 - CAC membership is representative of the diversity of the target population, target area and broader community, and includes parents/guardians, clergy, healthcare professionals, school personnel, businesses, and others with influence in the community.
 - CAC members serve as project advisors and are influential in gaining program support, planning, and establishing the program, and providing input and guidance for program activities and operations.

- *Refer to the Office of Adolescent's Health, [Overview of the Characteristics of the Community Advisory Group and Youth Leadership Council](#) for specific details on the expected roles and responsibilities of the CAC.*
- Grantees must participate in the following parent, family, and community engagement activities provided by Parent Action for Healthy Kids (PAFHK):
 - Minimum of two key program staff participate in a series of parent, family, and community engagement workshops.
 - Minimum of two key program staff participate in periodic check-in calls with PAFHK to receive support and technical assistance with their parent, family, and community engagement efforts.
- Grantees must establish a mechanism for linking/referring program participants to youth-friendly sexual health services, as well as other health and social services, such as primary care, substance abuse, mental health, violence prevention, etc., however, such services may not be paid for with grant funds.
- Grantees must establish a quality assurance mechanism that uses program data and results to make improvements to the program with an emphasis on improving future results. In addition to the required TPIP evaluation methods, grantees may use satisfaction surveys, focus groups, or other methodologies to evaluate the effectiveness and appropriateness of programming and services to the target population and refine programming as needed for continuous quality improvement (CQI).
- Grantees must collect required participant, cohort, and parent program data, as well as administer required entry/exit surveys following the approved TPIP implementation protocol.
 - For those using the Teen Outreach Program (TOP), TOP required entry/exit surveys must be administered following the approved TOP implementation protocol.
- Grantees must have dedicated staff/consultant support (either as sole responsibility or as part of responsibilities) for program and evaluation related data management, accuracy, and entry into REDCap.
 - For those using the Teen Outreach Program (TOP), TOP required data must be entered into Wyman Connect.
- Grantees must monitor fidelity of program delivery, including any adaptations and/or additional lessons/activities using fidelity logs for all program sessions per cohort and facilitator observations for each facilitator at least twice a year.
- Grantees must provide programming and services either directly or through subcontractors. If subcontractors will be used, grantee must have a signed Letter of Understanding (LOU) or Memorandum of Understanding (MOU) that details each parties' roles and responsibilities. The grantee is responsible for monitoring all subcontractor activities and must retain authority and control over all services provided to ensure state requirements are followed.

- Grantees must submit all required program, evaluation, and financial reports according to the due dates in the TPIP Report Fact Sheet.
 - For those using the Teen Outreach Program (TOP), TOP specific reporting must be submitted by the same due dates.
- Grantees must provide at least 25% matching funds, either cash or in-kind, to support the program. Typical match is related to staffing, volunteers, space, supplies/materials, consultants, and administration costs. Federal funds cannot be used as a source of matching funds. Grantees must include match each month on the FSR, keep support documentation of match, and provide such documentation when, and if, requested.
- Grantees must provide ongoing professional development and training opportunities for key program staff.
 - At a minimum, two key staff must attend the annual TPIP Institute (grantee meetings). If the annual institute is for program youth, three to five youth must attend, along with program staff.
 - At a minimum, two key staff must attend the annual Child, Adolescent and School Health (CASH) Conference.
 - All key staff and volunteers must complete MDHHS' Division of Child and Adolescent Health's e-learning modules within their first six months and every three years as a refresher.
- Grantees, if providing services on school property and during school hours, must receive curriculum approval from each school district's school board, including all lessons, activities, videos, surveys, etc., before programming can begin.
 - Approval must be submitted to MDHHS as either a copy of the school board meeting minutes at which the curriculum was approved or a letter from school district administration (e.g., superintendent, deputy superintendent, curriculum director, sex education supervisor) on district letterhead detailing what curriculum was approved and when.
 - *Refer to the [Summary of Michigan HIV and Sex Education Laws](#) for more information regarding sex education in Michigan schools, which can be found on the Michigan Department of Education's [HIV/STD and Sexuality Education webpage](#).*
- Grantees must have secure storage for supplies, equipment, paper/electronic records, and participant surveys. All records must be retained in accordance with the TPIP Record Retention Schedule.