TPP20 Tier 1 – Materials Review FAQs

On September 16, 2020, OPA hosted a webinar which explained the Materials Review expectation and the four main categories grantees are expected to review their materials for and ensure they are compliant with: age-appropriateness, medical accuracy, cultural and linguistic appropriateness, and trauma-informed. The following are frequently asked questions regarding the materials review process and expectations.

Q: What recommendations do you have for who should review the materials for each component?

A: The <u>Materials Review Guidance</u> provides suggestions for who should be reviewing for each category. In general, it is recommended that more than one person review for each category since two pairs of eyes often catch more things than one. Some examples of individuals you could enlist to be part of your review committee include teachers, social workers, medical professionals, youth, parents, facilitators, education/curricula specialists, public health specialists, and individuals who are familiar with the population being served.

Q: Can we partner with other grantees utilizing the same curriculum to complete the review?

A: Yes, you may partner with other grantees utilizing the same curriculum, however, it is important to note that the responsibility to ensure that your materials are compliant still falls on you. Each grantee is required to certify that their materials have been reviewed for medical accuracy and that necessary corrections have been made.

Q: Do we have to review supplemental curricula and materials as well or only the effective program(s) that we selected?

A: All materials used in your TPP20 Tier 1 program should be reviewed. This includes supplemental curricula, videos, brochures, etc. However, you only need to submit an adaptation form in the MAX dashboard for adaptations made to the effective program you will be implementing.

Q: What if our materials do not contain medical information? Do we still need to review them for all four categories?

A: If your materials do not contain any medical information, you can note that in the review form that you upload to MAX. If there is no medical information then there will be no need for a medical review, however you should still read through the materials and ensure there are not statistics or other facts and information that can become outdated. If the materials do contain such information, you will be responsible for ensuring that information is kept current.

Q: What resources are available to help us conduct a materials review?

A: The <u>Materials Review Guidance</u> on MAX provides tips, checklists, a sample review template, and other tools to help you conduct a materials review. Another helpful resource is the <u>CDC's Promoting Science-Based Approaches to Teen Pregnancy Prevention Using Getting to Outcomes (PSBA-GTO) which contains helpful tips for ensuring your program is culturally appropriate and a good fit for your community context.</u>

Q: If the developer of a curriculum has conducted a review of their curriculum, can we use their findings in place of conducting our own review?

A: If a developer has conducted a review within the past year, you may use their review findings, however it is important to note that the responsibility to ensure that your materials are compliant still falls on you, the grantee. That said, it could be helpful to request the review findings (if available) from the developer, and to also have a review team read through the materials to ensure there are no additional issues. You may also want to consider including local statistics and resources to the program materials and ensuring those are kept current. Lastly, keep in mind that reviews should be conducted at least annually.

Q: If changes are required to make materials compliant, but we are using copyrighted materials, how do we make the necessary changes?

A: One option would be to create insert pages or handouts for the facilitators and/or students. Also, it could be a good practice to share review findings with the developers so that they can make updates to their materials as needed.

Q: If changes are required to make materials compliant, what information do we need to provide to OPA?

A: If changes are required, make a list of all the changes and discuss them with your project officer to determine whether they would be considered major or minor adaptations. You'll then need to submit an adaptation form in the MAX Dashboard detailing all the changes. You may submit one adaptation form per curriculum, assuming all the adaptations fall under the same type category (e.g., revising program materials).

Q: If changes are required to make materials compliant, what is considered a minor vs. major adaptation and do those changes impact program fidelity?

A: Minor adaptations are those that do not significantly affect the program core components and major adaptations are those that may significantly change the core components, can compromise fidelity, and may reduce the impact of the program. Major adaptations require approval from OPA prior to being implemented. In most cases, adaptations made to make a program medically accurate and age appropriate are considered minor adaptations. Nevertheless, it is a good practice to discuss all adaptations with your project officer prior to completing the adaptation form in the MAX dashboard.

Q: Can we pilot the curriculum as part of the materials review process?

A: Materials are required to be medically accurate and age appropriate prior to implementation. Therefore the materials review process must be conducted prior to piloting. OPA recommends materials be initially reviewed for all 4 categories prior to piloting. Piloting can then be used as an opportunity to further refine the materials to ensure they are trauma-informed and culturally and linguistically appropriate.