

Place: NIH, Rockledge 2, Room 4148, Telephone Conference.

Contact Person: Dr. Philip Perkins, Scientific Review Administrator, 6701 Rockledge Drive, Room 4148, Bethesda, Maryland 20892, (301) 435-1718.

The meetings will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy. (Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: March 30, 1998.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 98-9218 Filed 4-7-98; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Center for Scientific Review; Notice of Closed Meetings

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following Center for Scientific Review Special Emphasis Panel (SEP) meetings:

Purpose/Agenda: To review individual grant applications.

Name of SEP: Biological and Physiological Sciences.

Date: April 13, 1998.

Time: 1:00 p.m.

Place: NIH, Rockledge 2, Room 4206, Telephone Conference.

Contact Person: Dr. Betty Hayden, Scientific Review Administrator, 6701 Rockledge Drive, Room 4206, Bethesda, Maryland 20892, (301) 435-1223.

Name of SEP: Behavioral and Neurosciences.

Date: April 15, 1998.

Time: 8:30 a.m.

Place: Holiday Inn, Bethesda, Maryland.

Contact Person: Dr. Carl Banner, Scientific Review Administrator, 6701 Rockledge Drive, Room 5182, Bethesda, Maryland 20892, (301) 435-1251.

Name of SEP: Behavioral and Neurosciences.

Date: April 15, 1998.

Time: 12:00 p.m.

Place: NIH, Rockledge 2, Room 5192, Telephone Conference.

Contact Person: Dr. David Simpson, Scientific Review Administrator, 6701 Rockledge Drive, Room 5192, Bethesda, Maryland 20892, (301) 435-1278.

This notice is being published less than 15 days prior to the above meetings due to the urgent need to meet timing limitations imposed by the grant review and funding cycle.

Name of SEP: Clinical Sciences.

Date: April 27, 1998.

Time: 11:30 a.m.

Place: NIH, Rockledge 2, Room 4140, Telephone Conference.

Contact Person: Dr. Larry Pinkus, Scientific Review Administrator, 6701 Rockledge Drive, Room 4140, Bethesda, Maryland 20892, (301) 435-1214.

Name of SEP: Clinical Sciences.

Date: April 29, 1998.

Time: 10:00 a.m.

Place: NIH, Rockledge 2, Room 4106, Telephone Conference.

Contact Person: Ms. Josephine Pelham, Scientific Review Administrator, 6701 Rockledge Drive, Room 4106, Bethesda, Maryland 20892, (301) 435-1786.

Name of SEP: Biological and Physiological Sciences.

Date: April 30, 1998.

Time: 2:00 p.m.

Place: NIH, Rockledge 2, Room 4202, Telephone Conference.

Contact Person: Dr. Gene Zimmerman, Scientific Review Administrator, 6701 Rockledge Drive, Room 4202, Bethesda, Maryland 20892, (301) 435-1220.

Name of SEP: Microbiological and Immunological Sciences.

Date: May 12, 1998.

Time: 1:00 p.m.

Place: NIH, Rockledge 2, Room 4184, Telephone Conference.

Contact Person: Dr. Martin Slater, Scientific Review Administrator, 6701 Rockledge Drive, Room 4184, Bethesda, Maryland 20892, (301) 435-1149.

Name of SEP: Clinical Sciences.

Date: May 12, 1998.

Time: 2:00 p.m.

Place: NIH, Rockledge 2, Room 4106, Telephone Conference.

Contact Person: Ms. Josephine Pelham, Scientific Review Administrator, 6701 Rockledge Drive, Room 4106, Bethesda, Maryland 20892 (301) 435-1786.

Name of SEP: Clinical Sciences.

Date: May 15, 1998.

Time: 12:00 p.m.

Place: NIH, Rockledge 2, Room 4106, Telephone Conference.

Contact Person: Ms. Josephine Pelham, Scientific Review Administrator, 6701 Rockledge Drive, Room 4106, Bethesda, Maryland 20892, (301) 435-1786.

Name of SEP: Clinical Sciences.

Date: May 15, 1998.

Time: 3:00 p.m.

Place: NIH, Rockledge 2, Room 4106, Telephone Conference.

Contact Person: Ms. Josephine Pelham, Scientific Review Administrator, 6701 Rockledge Drive, Room 4106, Bethesda, Maryland 20892, (301) 435-1786.

Name of SEP: Behavioral and Neurosciences.

Date: June 24-26, 1998.

Time: 8:30 a.m.

Place: American Geophysical Union Building, Washington, DC.

Contact Person: Dr. David Simpson, Scientific Review Administrator, 6701 Rockledge Drive, Room 5192, Bethesda, Maryland 20892, (301) 435-1278.

The meetings will be closed in accordance with the provisions set forth in secs. 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy. (Catalog of Federal Domestic Assistance Program Nos. 93.306, 93.333, 93.337, 93.393-93.396, 93.837-93.844, 93.846-93.878, 93.892, 93.893, National Institutes of Health, HHS)

Dated: April 3, 1998.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 98-9238 Filed 4-7-98; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Fiscal Year (FY) 1998 Funding Opportunities

AGENCY: Substance Abuse and Mental Health Services Administration, HHS.

ACTION: Notice of funding availability.

SUMMARY: The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS), and Center for Substance Abuse Treatment (CSAT) announce the availability of FY 1998 funds for grants and cooperative agreements for the following activities. These activities are discussed in more detail under Section 4 of this notice. This notice is not a complete description of the activities; potential applicants *must* obtain a copy of the Guidance for Applicants (GFA) before preparing an application.

Activity	Application deadline	Estimated funds available	Estimated number of awards	Project period (years)
State Indicator Pilot	06/08/98	\$1.0M	10	3
National TA Centers	06/08/98	\$1.1M	3	3
State Network Grants	06/08/98	\$1.55M	31	3
Statewide Family Networks	06/08/98	\$1.55M	31	3
Adolescent Treatment Models	06/08/98	\$11.5	45-55	2.5
Addiction Technology Transfer Centers	06/08/98	\$7.5	15	3
Treatment Outcome & Performance Pilot	06/08/98	\$5.0	11-13	3

Note: SAMHSA also published notices of available funding opportunities for FY 1998 in the **Federal Register** on January 6, 1998, January 20, 1998, February 26, 1998, and on March 20, 1998.

The actual amount available for awards and their allocation may vary, depending on unanticipated program requirements and the volume and quality of applications. Awards are usually made for grant periods from one to three years in duration. FY 1998 funds for activities discussed in this announcement were appropriated by the Congress under Public Law 105-78. SAMHSA's policies and procedures for peer review and Advisory Council review of grant and cooperative agreement applications were published in the **Federal Register** (Vol. 58, No. 126) on July 2, 1993.

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a PHS-led national activity for setting priority areas. The SAMHSA Centers' substance abuse and mental health services activities address issues related to Healthy People 2000 objectives of Mental Health and Mental Disorders; Alcohol and Other Drugs; Clinical Preventive Services; HIV Infection; and Surveillance and Data Systems. Potential applicants may obtain a copy of Healthy People 2000 (Full Report: Stock No. 017-001-00474-0) or Summary Report: Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, DC 20402-9325 (Telephone: 202-512-1800).

GENERAL INSTRUCTIONS: Applicants must use application form PHS 5161-1 (Rev. 5/96; OMB No. 0937-0189). The application kit contains the GFA (complete programmatic guidance and instructions for preparing and submitting applications), the PHS 5161-1 which includes Standard Form 424 (Face Page), and other documentation and forms. Application kits may be obtained from the organization specified for each activity covered by this notice (see Section 4).

When requesting an application kit, the applicant must specify the particular activity for which detailed information is desired. This is to ensure receipt of all necessary forms and information, including any specific program review and award criteria.

The PHS 5161-1 application form and the full text of each of the activities (i.e., the GFA) described in Section 4 are available electronically via SAMHSA's World Wide Web Home Page (address: <http://www.samhsa.gov>).

APPLICATION SUBMISSION: Unless otherwise stated in the GFA, applications must be submitted to: SAMHSA Programs, Center for Scientific Review, National Institutes of Health, Suite 1040, 6701 Rockledge Drive MSC-7710, Bethesda, Maryland 20892-7710* (* Applicants who wish to use express mail or courier service should change the zip code to 20817.)

APPLICATION DEADLINES: The deadlines for receipt of applications are listed in the table above. Please note that the deadlines may differ for the individual activities.

Competing applications must be received by the indicated receipt dates to be accepted for review. An application received after the deadline may be acceptable if it carries a legible proof-of-mailing date assigned by the carrier and that date is not later than one week prior to the deadline date. Private metered postmarks are not acceptable as proof of timely mailing.

Applications received after the deadline date and those sent to an address other than the address specified above will be returned to the applicant without review.

FOR FURTHER INFORMATION CONTACT: Requests for activity-specific technical information should be directed to the program contact person identified for each activity covered by this notice (see Section 4).

Requests for information concerning business management issues should be directed to the grants management contact person identified for each activity covered by this notice (see Section 4).

SUPPLEMENTARY INFORMATION: To facilitate the use of this Notice of Funding Availability, information has been organized as outlined in the Table of Contents below. For each activity, the following information is provided:

- Application Deadline
- Purpose
- Priorities
- Eligible Applicants
- Grants/Cooperative Agreements/Amounts
- Catalog of Federal Domestic Assistance Number
- Contacts
- Application Kits

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 - 4.1.1 State Indicator Pilot Grants
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6. PHS Non-use of Tobacco Policy Statement
7. Executive Order 12372

1. Program Background and Objectives

SAMHSA's mission within the Nation's health system is to improve the quality and availability of prevention, early intervention, treatment, and rehabilitation services for substance

abuse and mental illnesses, including co-occurring disorders, in order to improve health and reduce illness, death, disability, and cost to society.

Reinventing government, with its emphases on redefining the role of Federal agencies and on improving customer service, has provided SAMHSA with a welcome opportunity to examine carefully its programs and activities. As a result of that process, SAMHSA moved assertively to create a renewed and strategic emphasis on using its resources to generate knowledge about ways to improve the prevention and treatment of substance abuse and mental illness and to work with State and local governments as well as providers, families, and consumers to effectively use that knowledge in everyday practice.

SAMHSA's FY 1998 Knowledge Development and Application (KD&A) agenda is the outcome of a process whereby providers, services researchers, consumers, National Advisory Council members and other interested persons participated in special meetings or responded to calls for suggestions and reactions. From this input, each SAMHSA Center developed a "menu" of suggested topics. The topics were discussed jointly and an agency agenda of critical topics was agreed to. The selection of topics depended heavily on policy importance and on the existence of adequate research and practitioner experience on which to base studies. While SAMHSA's FY 1998 KD&A programs will sometimes involve the evaluation of some delivery of services, they are services studies and application activities, not merely evaluation, since they are aimed at answering policy-relevant questions and putting that knowledge to use.

SAMHSA differs from other agencies in focusing on needed information at the services delivery level, and in its question-focus. Dissemination and application are integral, major features of the programs. SAMHSA believes that it is important to get the information into the hands of the public, providers, and systems administrators as effectively as possible. Technical assistance, training, preparation of special materials will be used, in addition to normal communications means.

SAMHSA also continues to fund legislatively-mandated services programs for which funds are appropriated.

2. Special Concerns

SAMHSA's legislatively-mandated services programs do provide funds for mental health and/or substance abuse

treatment and prevention services. However, SAMHSA's KD&A activities do not provide funds for mental health and/or substance abuse treatment and prevention services except sometimes for costs required by the particular activity's study design. Applicants are required to propose true knowledge application or knowledge development and application projects. Applications seeking funding for services projects under a KD&A activity will be considered nonresponsive.

Applications that are incomplete or nonresponsive to the GFA will be returned to the applicant without further consideration.

3. Criteria for Review and Funding

Consistent with the statutory mandate for SAMHSA to support activities that will improve the provision of treatment, prevention and related services, including the development of national mental health and substance abuse goals and model programs, competing applications requesting funding under the specific project activities in Section 4 will be reviewed for technical merit in accordance with established PHS/SAMHSA peer review procedures.

3.1 General Review Criteria

As published in the **Federal Register** on July 2, 1993 (Vol. 58, No. 126), SAMHSA's "Peer Review and Advisory Council Review of Grant and Cooperative Agreement Applications and Contract Proposals," peer review groups will take into account, among other factors as may be specified in the application guidance materials, the following general criteria:

- Potential significance of the proposed project;
- Appropriateness of the applicant's proposed objectives to the goals of the specific program;
- Adequacy and appropriateness of the proposed approach and activities;
- Adequacy of available resources, such as facilities and equipment;
- Qualifications and experience of the applicant organization, the project director, and other key personnel; and
- Reasonableness of the proposed budget.

3.2 Funding Criteria for Scored Applications

Applications will be considered for funding on the basis of their overall technical merit as determined through the peer review group and the appropriate National Advisory Council (if applicable) review process.

- Other funding criteria will include:
- Availability of funds.

Additional funding criteria specific to the programmatic activity may be

included in the application guidance materials.

4. Special FY 1998 SAMHSA Activities

4.1 Grants

4.1.1 State Indicator Pilot Grants (GFA No. SM 98-010)

- Application Deadline: June 8, 1998.
- Purpose: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), announces technical assistance grants to the State Mental Health Agencies (SMHAs) or the equivalent in the District of Columbia and United States Territories eligible for CMHS block grants, to support performance indicator pilots which will facilitate appropriate implementation of selected, comparable performance measures within and among States. Piloting of additional State specific performance measures will also be supported for State grantees that complete successful piloting of the initial framework of selected indicators. This Program effort emanates from the current environment of the State and national need for effective accountability systems which can identify the effects of mental health services within and among States. Accommodation is made to assist States to pilot refinements and modifications in performance indicator systems for individual State data system needs once the primary goal is successfully met. Needs supporting accountability in mental health systems are supported in the enactment of the Federal Government Performance and Results Act of 1993 (GPRA) and in existing reform mandates and activities among States experiencing system wide and managed care reform.

The primary purpose of this technical assistance grant Program is to facilitate the development and implementation of State performance indicator pilots that reflect the performance indicators selected in the 1997/98 Five State Feasibility Assessment Project funded by CMHS. The Five State Feasibility Assessment Project addressed the existing need for accountability and comparability in terms of mental health services performance within and among States. Selected States participated in the Five State project to identify performance indicators, specify their range of applicability, and determine potential feasibility. The objective was to select a set of performance indicators that can be applied by all States. The primary effort in this new Program will be the design, implementation, assessment, and refinement of the pilot experience in a sample of States. The

expected overall result is a completed pilot which can be implemented statewide at the conclusion of the grant period and potentially implemented by other States.

- Priorities: None.

• Eligible Applicants: Applicants must be SMHAs or the equivalent in the District of Columbia and U.S. Territories that receive CMHS block grant funds. Eligibility is restricted to SMHAs as the only appropriate entities for piloting performance indicators for national and interstate State comparability.

• Grants/Amounts: It is estimated that approximately \$1,000,000 will be available to support approximately 10 awards under this GFA in FY 1998. The maximum award per grantee will be \$100,000 total direct and indirect costs per year for a maximum of 3 years.

- Catalog of Federal Domestic

Assistance Number: 93.119

• Application kits are being mailed to eligible entities. For programmatic or technical information regarding this grant, contact:

Olinda González, Ph.D., Public Health Advisor, Survey and Analysis Branch or

Ronald W. Manderscheid, Ph.D., Chief, Survey and Analysis Branch, Division of State and Community Systems Development, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, Parklawn Building, Room 15C-04, 5600 Fishers Lane, Rockville, MD 20857, Tel.(301) 443-3343 Fax 301-443-7926

E-mail addresses: ogonzale@samhsa.gov; rmanders@samhsa.gov

For grants management assistance, contact: Stephen Hudak, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, Parklawn Building, Room 15C-05, 5600 Fishers Lane, Rockville, MD 20857, Tel. (301) 443-4456, shudak@samhsa.gov

4.1.2 Grants to Support Consumer and Consumer Supporter National Technical Assistance Centers (Short Title: National TA Centers—GFA No. SM 98-012)

- Application Deadline: June 8, 1998
- Purpose: The Substance Abuse and Mental Health Services Administration Center for Mental Health Services announces the availability of funds to support three technical assistance centers, two to promote consumer self-help activities and one technical assistance center for supporters of consumers. The Program is intended to create technical assistance centers that act as resource centers for materials development and dissemination,

training, skill development, interactive communication opportunities, networking and other technical assistance activities directed at facilitating self-help approaches, recovery concepts, and empowerment.

Specific objectives include:

(1) Strengthening of relationships among stakeholders and advocates in the mental health system through the use of innovative approaches, i.e., dispute resolution, networking, coalition building and modern information processing technology for the purpose of achieving their common goal.

(2) Facilitating the improvement and enhancement of skill development with an emphasis on business and management skills for self-help programs in the field to ensure success and growth.

(3) Supporting the Program: "Grants to Promote Statewide Consumer and Consumer Supporter Networking."

- Priorities: None

• Eligible Applicants: Applications for the Consumer National Technical Assistance Centers may only be submitted by consumer operated organizations. Applications for the Consumer Supporter National Technical Assistance Center may only be submitted by organizations of consumer supporters.

Eligibility is being restricted to these organizations because of Program Goal No. 4 which is to improve the capacity of both consumer and consumer supporter organizations to provide technical assistance to their respective communities.

• Grants/Amounts: It is estimated that approximately \$1.1 million will be available to support three awards under this program in Fiscal Year 1998. The average award to support the two Consumer Technical Assistance Centers will be \$400,000 in total costs (direct+indirect) per year. The average award for the Supporter Technical Assistance Center is expected to be \$300,000 in total costs (direct+indirect).

- Catalog of Federal Domestic

Assistance Number: 93.230.

• For programmatic or technical information contact: Risa S. Fox, Community Support Programs Branch, Division of Knowledge Development and Systems Change Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 11C-22, Rockville, MD 20857, (301) 443-3653.

Questions regarding Grants Management issues may be directed to: Stephen J. Hudak, Division of Grants Management, OPS, Substance Abuse and Mental Health Services

Administration, 5600 Fishers Lane, Room 15C-05, Rockville, MD 20857, (301) 443-4456.

For application kits, contact: Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, DC 20015, Voice: (800) 789-2647, TTY: (301) 443-9006, FAX: (301) 984-8796.

4.1.3 Statewide Consumer and Consumer Supporter Networking Grants (Short Title: State Network Grants—GFA No. SM 98-013)

- Application Deadline: June 8, 1998.
- Purpose: The Substance Abuse and Mental Health Services Administration Center for Mental Health Services announces the availability of grants to increase the capacity of statewide consumer and/or consumer supporter networks to participate in the development of policies, programs, and quality assurance activities related to mental health.

Specific objectives include:

(1) Strengthening of organizational relationships among consumers, families, advocates, networks, and coalitions that are dedicated to empowering consumers and promoting their ability to participate in State and local mental health service-planning and health care reform policy activities;

(2) Fostering of leadership and management skills with an emphasis on leadership, business and management and fostering financial self-sufficiency of consumer and/or consumer supporter organizations (transition from Federal funding to other public and private resources) over the term of the Federal grant;

(3) Identification of technical assistance needs for consumer and/or consumer supporter organizations and the implementation of a strategy that meets those needs.

- Priorities: None.

• Eligible Applicants: Applications for the Statewide Consumer and Consumer Supporter Networking Grants may be submitted by units of State or local government and by domestic private nonprofit and for-profit organizations such as community-based organizations, universities, colleges, and hospitals, family and/or consumer operated organizations and volunteer mental health organizations.

Applicants must provide a brief history of the organization and documentation of activities, within the last year, that show that they are dedicated to the improvement of mental health services at the local and statewide levels (e.g., State-level policies).

• Grants/Amounts: It is estimated that approximately \$1,550,000 will be

available to support approximately 31 awards in FY 1998. The average award is expected to range from \$40,000 to \$60,000, in total costs (direct+indirect) for statewide consumer organizations and statewide consumer supporter organizations. Within a State, a maximum of two awards can be made—one award may be for a consumer organization and one award may be for a consumer supporter organization.

- Catalog of Federal Domestic Assistance Number: 93.230.
- For programmatic or technical assistance contact: William McKinnon, Ph.D. or Santo J. (Buddy) Ruiz, Community Support Programs Branch, Division of Knowledge Development and Systems Change, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 11C-22, Rockville, MD 20857, (301) 443-3653.
- Questions regarding Grants Management issues may be directed to: Stephen J. Hudak, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 15C-05, Rockville, MD 20857, (301) 443-4456.
- For application kits, contact: Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, DC 20015, Voice: (800) 789-2647, TTY: (301) 443-9006, FAX: (301) 984-8796.

4.1.4 Statewide Family Network Grants (Short Title: Statewide Family Networks—GFA No. SM 98.014)

- Application Deadline: June 8, 1998.
- Purpose: The Substance Abuse and Mental Health Services Administration Center for Mental Health Services (CMHS) announces the availability of grants to increase the capacity of statewide family networks to participate in the development of policies, programs, and quality assurance activities related to the mental health of children and adolescents with serious emotional disturbances and their families.

The goals of the Statewide Family Network Grant program are to:

1. Strengthen Organizational Relationships—Improve collaboration among families, advocates, networks, and coalitions that are dedicated to empowering families and strengthening their ability to participate in State and local mental health service-planning and health care reform policy activities on behalf of their children; and, to maintain effective working relationships with other State child-serving agencies including, health, education, child welfare, substance abuse, and juvenile justice.

2. Foster Leadership and Management Skills—Promote skills development with an emphasis on leadership, business and management and foster financial self-sufficiency of family-controlled organizations (transition from Federal funding to other public and private resources) over the term of the Federal grant;

3. Identify Technical Assistance Needs—Identify technical assistance needs for family-controlled organizations and implement a strategy that meets those needs.

- Priorities: None.
- Eligible Applicants: Only nonprofit private entities that have a board of directors or other controlling body comprised of no less than 51 percent family members of children with serious emotional, behavioral, or mental disorders, or other nonprofit entities which have provided written assurance that the project will be under the control of an autonomous subunit which is family-controlled, may apply. If the application is on behalf of the autonomous subunit, the charter granting full project autonomy to the family-controlled subunit, and the minutes of the meeting of the applicant's Board of Directors showing approval of full project autonomy must accompany the application.

CMHS is limiting eligibility to family-controlled organizations because the goals of this grant program are to: (1) Strengthen the capacity of family members to participate in State and local mental health service-planning and health care reform policy activities on behalf of their children; (2) promote leadership and management skills among family members which will foster self-sufficiency; and, (3) identify and implement technical assistance strategies to successfully meet program goals.

Evidence gathered over the past 14 years suggests that Statewide family networks are critical to achieving full participation of families in planning, implementing and evaluating systems of care for their children with serious emotional disturbances. The engagement of trained and empowered family members appears to be an essential component of the system of care and can lead to greater rates of family satisfaction and better health and related outcomes for the target population.

- Grants/Amounts: It is estimated that approximately \$1,550,000 will be available to support approximately 31 awards in FY 1998. The average award is expected to range from \$40,000 to \$60,000 in total costs. CMHS will make no more than one award in any State.

- Catalog of Federal Domestic Assistance Number: 93.230.

- For programmatic or technical assistance contact: Gary De Carolis, M.Ed., Chief, Child, Adolescent, and Family Branch, Division of Knowledge Development and Systems Change, Center for Mental Health Services, Substance Abuse and Mental Health Service Administration, 5600 Fishers Lane, Room 18-49, Rockville, MD 20857, (301) 443-1333.

- Questions regarding Grants Management issues may be directed to: Steve Hudak, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 15C-05, Rockville, MD 20857, (301) 443-4456.

- Grant application kits may be obtained from: Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, DC 20015, Voice: (800) 789-2647, TTY: (301) 443-9006, FAX: (301) 984-8796.

The full text of the GFA is available via the KEN Electronic Bulletin Board 800-790-2647).

4.1.5 Grants for Identification of Exemplary Treatment Models for Adolescents (Short Title: Adolescent Treatment Models—GFA No. TI 98-007)

- Application Deadline: June 8, 1998.
- Purpose: The Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment (CSAT) announces a grant program designed to identify currently existing models of adolescent treatment that, when evaluated for client outcomes and cost, demonstrate effectiveness in treating adolescents. CSAT intends to make funds available for the documentation and evaluation of programs that appear to demonstrate sustained levels of effectiveness and that could be considered exemplary, but, heretofore, have not had the means to fully undertake these tasks. Funds are available for further evaluation and documentation; funds may not be expended for treatment by "exemplary", CSAT means programs which have been validated as exemplary through formal evaluation or research as evidenced by the availability of peer-reviewed empirical findings; have significant consensus among experts, including evaluators, policy-makers, providers, consumers and families that they are exemplary; have been or can be reasonably expected to be generalizable with adaptation to local circumstances; and are documented.

CSAT designed this program to stimulate States, local governments and private organizations to: (1) Identify

potentially exemplary treatment models for adolescents that currently exist, (2) develop an evaluation plan and produce short-term evaluation of outcome measures, (3) develop documentation for these models, and (4) offer these documented and evaluated treatment programs for possible replication. Programs identified for replication will be invited to exhibit at a conference to disseminate their findings and showcase their models.

- **Priorities:** The target population is adolescents who have a substance abuse problem, with priority being given to those programs that provide treatment for adolescent heroin abusers.

- **Eligible Applicants:** Applications may be submitted by units of State or local government and by domestic private nonprofit and for-profit organizations such as community-based organizations, universities, colleges, and hospitals.

- **Grant/Amounts:** It is estimated that approximately \$11.5 million will be available to support approximately 45–55 awards under this GFA in FY 98. The average award is expected to range from \$200,000 to \$250,000 in total costs (direct+indirect).

- **Catalog of Federal Domestic Assistance Number:** 93.230

- **For Programmatic Assistance**
Contact: Mr. Randolph Muck, M.Ed., Division of Practice and Systems Development, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, Rockwall II, Room 614, 5600 Fishers Lane, Rockville, MD 20857, (301) 443–6574.

- **For grants management assistance**
contact: Ms. Peggy Jones, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, Rockwall II, Room 614, 5600 Fishers Lane, Rockville, Maryland 20857, (301) 443–9666.

- **Application Kits** are available from: National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20847–2345, 1–800–729–6686, 1–800–487–4889.

4.2 Cooperative Agreements

Major activities for SAMHSA cooperative agreement programs are discussed below. Substantive Federal programmatic involvement is required in cooperative agreement programs. Federal involvement will include planning, guidance, coordination, and participating in programmatic activities (e.g., participation in publication of findings and on steering committees). Periodic meetings, conferences and/or communications with the award recipients may be held to review

mutually agreed-upon goals and objectives and to assess progress. Additional details on the degree of Federal programmatic involvement will be included in the application guidance materials.

4.2.1 Cooperative Agreements for Addiction Technology Transfer Centers (Short Title: ATTCs—GFA No. TI 98–009)

- **Application Deadline:** June 8, 1998
- **Purpose:** The Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment (CSAT) announces the availability of cooperative agreements to support the creation, expansion, and/or enhancement of Addiction Technology Transfer Centers (ATTCs). This program is designed to: (1) Develop a network of ATTCs responsible for cultivating an interdisciplinary consortium of health care and related professionals, educators, organizations, and State and local governments knowledgeable about research-based, effective approaches to substance abuse treatment and recovery; (2) shape systems of care by replicating and testing science and translating substance abuse treatment research into clinical practice; (3) develop competent health care and related professionals reflective of the treatment population and who are prepared to function in managed care settings; and, (4) upgrade standards of professional practice for additions workers in various settings.

This announcement is a modified reissuance of a prior announcement entitled "Addiction Training Centers (ATCs)," GFA No. TI 93–02. Applications are solicited for two types of awards: (1) ATTCs and (2) an ATTC Coordinating Center. An organization may submit an application for an ATTC and/or the ATTC Coordinating Center. A separate application is required for each function. The ATTC Coordinating Center must be set up as a separate entity with dedicated staff, a separate and independent project director, a separate budget, audit, and specific responsibilities.

- **Priorities:** None.
- **Eligible Applicants:** Applications may be submitted by units of State or local government and by domestic private nonprofit and for-profit organizations such as community-based organizations, universities, colleges, and hospitals.

Current CSAT ATTC grantees with a project period that ends on or before September 30, 1998, excluding extensions in time without additional funds, are also eligible applicants.

- **Cooperative Agreement/Amounts:** It is estimated that approximately \$7.5

million will be available to support approximately 15 awards (including one Coordinating Center) under this GFA in FY 1998. The average award is expected to range from \$200,000 to \$500,000 for the ATTCs in total costs (direct + indirect). The award for the ATTC Coordinating Center is expected to be in the area of \$300,000 in total costs (direct + indirect).

- **Catalog of Domestic Federal Assistance Number:** 93.230

- **For programmatic or technical assistance contact:** Susanne R. Rohrer, Office of Evaluation, Scientific Analysis, and Synthesis, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, Rockwall II, Suite 840, 5600 Fishers Lane, Rockville, MD 20857, (301) 443–8521.

- **For grants management assistance,** contact: Peggy Jones, Division of Grants Management, OPS, Substance Abuse and Mental Health Services Administration, Rockwall II, Suite 630, 5600 Fishers Lane, Rockville, MD 20857, (301) 443–9666.

- **Application Kits** are available from: National Clearinghouse for Alcohol and Drug Information, PO Box 2345, Rockville, Maryland 20847–2345, 1–800–729–6686, 1–800–487–4889, Via Internet: <http://www.samhsa.gov>

4.2.2 Cooperative Agreements for State Treatment Outcomes and Performance Pilot Studies Enhancement (Short Title: TOPPS II—GFA No. TI 98–005)

- **Application Deadline:** June 8, 1998.
- **Purpose:** The Substance Abuse and Mental Health Services Administration Center for Substance Abuse Treatment (CSAT) announces the availability of cooperative agreements for States to develop a standardized approach that systematically measures the performance of Substance Abuse Prevention and Treatment Block Grant (SAPT BG) funded programs/providers and the treatment outcomes of clients as they progress through the State substance abuse treatment system. This program will support States to develop Outcomes Monitoring Systems (OMS) or to refine Management Information Systems (MIS) that measure performance and outcomes for substance abuse treatment. All States are eligible to apply. Awards will be granted to States who demonstrate that this program will assist in the State system development of outcomes measurements and for eventual development of a statewide MIS/OMS system.

This program is designed to support inter-State consensus based decision making regarding the development of

standardized AOD treatment performance and outcome measures. The program will support the development and evaluation of strategies for monitoring the impact and effectiveness of alcohol and other drug (AOD) treatment. To fulfill this objective, there are four phases: A planning/coordination phase, a developmental phase, an implementation phase, and an analysis/dissemination phase.

A Technical Assistance Center will be funded to provide overall coordination and support of the program, management of common data collected across Project States, and assumption of primary responsibility, in collaboration with CSAT and the States, for analyzing the consistency of the data across the States and producing inter-State findings.

- Priorities: None.

- Eligible Applicants: Applications will be accepted for two types of awards: Project States and a Technical Assistance Center. Project State applications may be submitted by State AOD Single State Authorities (SSAs). Eligibility is limited to the SSAs because this cooperative agreement program is designed to collect information on the treatment services funded by the SAPT Block Grant. The SSAs are the recipients of the SAPT Block Grants and they are the only parties that have access to MIS programs with the ability to collect necessary data. Technical Assistance Center applications may be submitted by units of State or local government and by domestic private nonprofit and for-profit organizations such as community-based organizations, universities, colleges, and hospitals.

- Cooperative Agreement/Amounts: It is estimated that approximately \$5 million will be available to support 10 to 12 State awards and 1 Technical Assistance Center under this program in FY 98. Each project State award is estimated to be in the range of \$300,000 to \$500,000 per year in total costs (direct and indirect). The Technical Assistance Center is estimated to be \$250,000 per year in total costs (direct and indirect).

- Catalog of Domestic Federal Assistance Number: 93.238

- Program Contact: For programmatic or technical assistance contact: Sheila Harmison, D.S.W., Division of State and Community Assistance, Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, Rockwall II, Suite 880, (301) 443-7524.

- For grants management assistance, contact: Ms. Peggy Jones, Division of

Grants Management, OPS, Substance Abuse and Mental Health Services Administration, Rockwall II, Suite 360, (301) 443-9666.

The mailing address for the individuals listed above is: 5600 Fishers Lane, Rockville, MD 20857.

- Application Kits are available from: National Clearinghouse for Alcohol and Drug Information, PO Box 2345, Rockville, Maryland 20847-2345, 1-800-729-6686, 1-800-487-4889, Via Internet: <http://www.samhsa.gov>

5. Public Health System Reporting Requirements

The Public Health System Impact Statement (PHSIS) is intended to keep State and local health officials apprised of proposed health services grant and cooperative agreement applications submitted by community-based nongovernmental organizations within their jurisdictions.

Community-based nongovernmental service providers who are not transmitting their applications through the State must submit a PHSIS to the head(s) of the appropriate State and local health agencies in the area(s) to be affected not later than the pertinent receipt date for applications. This PHSIS consists of the following information:

- a. A copy of the face page of the application (Standard form 424).

- b. A summary of the project (PHSIS), not to exceed one page, which provides:

- (1) A description of the population to be served.

- (2) A summary of the services to be provided.

- (3) A description of the coordination planned with the appropriate State or local health agencies.

State and local governments and Indian Tribal Authority applicants are not subject to the Public Health System Reporting Requirements.

Application guidance materials will specify if a particular FY 1998 activity described above is/is not subject to the Public Health System Reporting Requirements.

6. PHS Non-use of Tobacco Policy Statement

The PHS strongly encourages all grant and contract recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. In addition, Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities (or in some cases, any portion of a facility) in which regular or routine education, library, day care, health care, or early childhood development services are provided to children. This is consistent with the

PHS mission to protect and advance the physical and mental health of the American people.

7. Executive Order 12372

Applications submitted in response to all FY 1998 activities listed above are subject to the intergovernmental review requirements of Executive Order 12372, as implemented through DHHS regulations at 45 CFR Part 100. E.O. 12372 sets up a system for State and local government review of applications for Federal financial assistance. Applicants (other than Federally recognized Indian tribal governments) should contact the State's Single Point of Contact (SPOC) as early as possible to alert them to the prospective application(s) and to receive any necessary instructions on the State's review process. For proposed projects serving more than one State, the applicant is advised to contact the SPOC of each affected State. A current listing of SPOCs is included in the application guidance materials. The SPOC should send any State review process recommendations directly to: Office of Extramural Activities Review, Substance Abuse and Mental Health Services Administration, Parklawn Building, Room 17-89, 5600 Fishers Lane, Rockville, Maryland 20857.

The due date for State review process recommendations is no later than 60 days after the specified deadline date for the receipt of applications. SAMHSA does not guarantee to accommodate or explain SPOC comments that are received after the 60-day cut-off.

Dated: April 3, 1998.

Richard Kopanda,

Executive Officer, SAMHSA.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration (SAMHSA)

Notice of Meeting

Pursuant to Public Law 92-463, notice is hereby given of the following teleconference meeting of the SAMHSA Special Emphasis Panel II in April.

A summary of the meeting and a roster of the members may be obtained from: Ms. Dee Herman, Committee Management Liaison, SAMHSA Office of Extramural Activities Review, 5600 Fishers Lane, Room 17-89, Rockville, Maryland 20857. Telephone: 301-443-7390.