

## Health Promotion and Disease Prevention Initial Review Group

Study section/contact person	Mar. 1998 meeting	Time	Location
Epidemiology & Disease Control-1, Dr. Scott Osborne, 301-435-1782.	Mar. 23-25 .....	8:30 a.m. ....	Ramada Inn, Bethesda, MD.

The meeting will be closed in accordance with the provisions set forth in sections 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: February 19, 1998.

**LaVeen Ponds,**

*Acting Committee Management Officer,  
National Institutes of Health.*

[FR Doc. 98-4873 Filed 2-25-98; 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), Center for Substance Abuse Prevention (CSAP) 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 (millions)	Estimated number of awards	Project period (years)
SAMHSA Conference Grants .....	05/11/98	\$1.25	25	1
HIV/AIDS Cost Study .....	05/11/98	6.0	8	5

**Note:** SAMHSA also published notices of available funding opportunities in FY 1998 in the **Federal Register** (Vol. 63, No. 3) on January 6, 1998 and (Vol. 63, No. 12) on January 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 No. 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.

**Table of Contents**

1. Program Background and Objectives
2. Special Concerns
3. Criteria for Review and Funding
  - 3.1 General Review Criteria
  - 3.2 Funding Criteria for Scored Applications
4. Special FY 1998 Substance Abuse and Mental Health Services Activities
  - 4.1 Grants
    - 4.1.1 Substance Abuse and Mental Health Services Administration Knowledge Dissemination Conference Grants (Short Title: SAMHSA Conferences Grants—PA No. PA 98–090)
  - 4.2 Cooperative Agreements
    - 4.2.1 Cooperative Agreements for an HIV/AIDS Treatment Adherence, Health Outcomes, and Cost Study (Short Title: HIV/AIDS Cost Study—GFA No. SM 98–007)
5. Public Health System Reporting Requirements
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 Mental Health Activities

##### 4.1 Grants

4.1.1 Substance Abuse and Mental Health Services Administration Knowledge Dissemination Conference Grants (SAMHSA Conference Grants—PA No. PA 98-090)

- **Initial Application Deadline:** May 11, 1998 (and depending on the availability of funds, annual receipts dates of September 10, January 10, and May 10 thereafter).
- **Purpose:** SAMHSA's Center for Mental Health Services (CMHS), Center for Substance Abuse Prevention (CSAP), and Center for Substance Abuse Treatment (CSAT) will provide support for up to 75 percent (to a maximum of \$50,000) of the total direct costs of domestic conferences for the purpose of knowledge synthesis and dissemination. The goal of SAMHSA's knowledge synthesis and dissemination activities is to improve the quality of the Nation's substance abuse and mental health treatment and prevention services and systems. Conferences supported will involve coordinating, exchanging and dissemination knowledge to improve the provision of effective treatment, recovery, early intervention, and prevention services for individuals who suffer from, or are at risk for, problems related to mental illness and/or substance abuse.

Each of the SAMHSA Centers maintains responsibility for its respective areas of expertise—substance abuse prevention, substance abuse treatment, and treatment and prevention of mental illness. However, many of the topics that the Conference Grant Program solicits are of a cross-cutting nature, such as HIV/AIDS, workplace issues, managed care, co-occurring disorders and special populations. Accordingly, each of the Centers is interested in synthesizing and disseminating conference findings with the broadest application for these fields. To ensure against duplication of effort or funding, when the subject of an application is of interest to more than one Center, SAMHSA program staff will communicate to determine which Center will take lead authority for the grant.

Each conference is expected to yield a product (report or publication) of specific relevance to the particular Center's mission at the national, State or community level. Since the purpose is knowledge synthesis and dissemination, applying for support under this program

requires both disseminating treatment/prevention knowledge to conference participants and, once the conference is over, sharing that knowledge with wider audiences.

- **Priorities:** None.
- **Eligible Applicants:** Applications may be submitted by public and domestic private nonprofit and for-profit entities. An individual is not eligible to receive grant support for a conference.

- **Grants/Amounts:** It is estimated that approximately \$250,000 from CMHS, \$500,000 from CSAP, and \$500,000 from CSAT will be available to support awards under this program in FY 1998. Actual funding levels for future years will depend upon annual appropriations.

- **Catalog of Federal Domestic Assistance Number:** 93.218.

- **Program Contact:** For programmatic or technical assistance contact:

Teddi Fine, M.A., Office of the Director, Center for Mental Health Services, Parklawn Building, Room 15-99, Tele: (301) 443-0553; Fax: (301) 443-1563; E-mail: tfine@samhsa.gov

Terri Stover, Division of Prevention Application and Education, Center for Substance Abuse Prevention, Rockwall II Building, Suite 800, Tele: (301) 443-0378; Fax: (301) 443-5592; E-mail: tstover@samhsa.gov

Roberta Messalle, Office of Scientific Evaluation, Analysis, and Synthesis Center for Substance Abuse Treatment, Rockwall II Building, Room 8A123, Tele: (301) 443-4080; Fax (301) 480-3144; E-mail: rmessall@ngmsmtp.samhsa.gov

- For grants management assistance, contact: Peggy Jones, Grants Management Specialist, Division of Grants Management, OPS, Rockwall II Building, Suite 630, (301) 443-9666.

The complete mailing address for the four individuals listed above is: Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Rockville, Maryland 20857.

- **Application Kits:** Application kits are available from: Center for Mental Health Services, Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, D.C. 20015, Tele: (800) 789-2647

- **National Clearinghouse for Alcohol and Drug Information (NCADI),** P.O. Box 2345, Rockville, MD 20847-2345, Tele: (800) 729-6686; TDD: (800) 487-4889.

##### 4.2 Cooperative Agreements

A major activity for a SAMHSA cooperative agreement program is

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 an HIV/AIDS Treatment Adherence, Health Outcomes, and Cost Study (Short Title: HIV/AIDS Cost Study—GFA No. SM 98-007)

- **Application Deadline:** May 11, 1998.

- **Purpose:** This is a collaborative program among the following components of the Department of Health and Human Services (DHHS): the Center for Mental Health Services (CMHS) within the Substance Abuse and Mental Health Services Administration (SAMHSA), the HIV/AIDS Bureau (HAB) within the Health Resources and Services Administration (HRSA), the National Institute of Mental Health (NIMH) and the National Institute on Drug Abuse (NIDA) within the National Institutes of Health (NIH).

The purpose of this program is to determine the effectiveness of treatment adherence models, health outcomes, and costs associated with the provision of integrated mental health, substance abuse, and HIV/AIDS primary care services for individuals 14 years and older living with HIV/AIDS who have both a mental and a substance abuse disorder. It is also the intent of this cooperative agreement program to advance scientific knowledge about the effectiveness of mental health, substance abuse, and HIV/AIDS primary care treatment for individuals with HIV/AIDS as it is typically practiced by conducting analyses addressing a wide range of questions of scientific and policy relevance.

Each study site applicant will be expected to implement an intervention model that integrates mental health, substance abuse, and HIV/AIDS primary care treatment, not outreach or engagement, for their target population of individuals living with HIV/AIDS who have both a mental and a substance abuse disorder. Study site applicants should propose studies to investigate well-conceptualized questions. It is

expected that these studies will utilize the most rigorous methodology consistent with the purposes of these studies.

Applications are being solicited for up to seven study sites and a Coordinating Center to provide programmatic and evaluation technical assistance to the study sites.

- **Priorities:** None.

- **Eligible Applicants:** The study sites and Coordinating Center applicants should be public or domestic private non-profit entities, including community-based organizations, units of State or local governments, tribes, universities or for-profit organizations. While not required in order to submit an application, it is expected that applicants will have expertise in large-scale multisite demonstration studies.

**Note:** Separate applications are being solicited for study sites and a Coordinating Center to participate in this collaborative study. If an institution chooses to apply for multiple awards, there should be no overlap in research/evaluation and support personnel.

- **Cooperative Agreement/Amounts:** It is estimated that up to \$6 million (total costs, i.e., direct and indirect costs) will be available to support up to seven study site awards and one Coordinating Center under this GFA in FY 1998. The amount of grant funds used by study sites for mental health and/or substance abuse services cannot exceed one third of the total budget (direct and indirect costs).

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

- **Program Contact:** For programmatic or technical assistance (not for application kits), contact: Elaine Dennis, Senior Health Policy Analyst, Office of the Associate Director for Medical Affairs, Center for Mental Health Services, Substance Abuse and Mental Health Services, Administration, Parklawn Building, Room 15-81, 5600 Fishers Lane, Rockville, MD 20857, (301) 443-7817.

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

- **Application Kits:** Application kits are available from: Center for Mental Health Services, Knowledge Exchange Network (KEN), P.O. Box 42490, Washington, D.C. 20015, Voice: (800) 789-2647, TTY: (301) 443-9006, FAX: (301) 984-8796.

The full text of the GFA is available electronically via the Center for Mental

Health Services Knowledge Exchange Network (KEN) on [www.mentalhealth.org](http://www.mentalhealth.org), voice line 800-789-2647, or Electronic Bulletin Board 800-790-2647 (please reference GFA No. SM 98-007).

### 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: February 22, 1998.

**Richard Kopanda,**

*Executive Officer, SAMHSA.*

[FR Doc. 98-4965 Filed 2-25-98; 8:45 am]

BILLING CODE 4162-20-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration (SAMHSA); Notice of Meeting

Pursuant to Pub. L. 92-463, notice is hereby given of the following meeting of the SAMHSA Special Emphasis Panel II in March 1998.

A summary of the meeting may be obtained from: Ms. Dee Herman, Committee Management Liaison, SAMHSA, Office of Program Planning and Coordination (OPPC), Division of Extramural Activities, Policy, and Review, 5600 Fishers Lane, Room 17-89, Rockville, Maryland 20857. Telephone: (301) 443-7390.

Substantive program information may be obtained from the individual named as Contact for the meeting listed below.

The meeting will include the review, discussion and evaluation of individual contract proposals. These discussions could reveal personal information concerning individuals associated with