## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

#### **DEPARTMENT OF EDUCATION**

#### **DEPARTMENT OF JUSTICE**

Office of Juvenile Justice and Delinquency Prevention

### Fiscal Year 1999 Funding Opportunity

**AGENCIES:** Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services,
Department of Education, Office of
Elementary and Secondary Education,
Department of Justice, Office of Juvenile
Justice and Delinquency Prevention.

ACTION: Notice of availability of funds
for a cooperative agreement for a
coordinating center for the development
of community partnerships and the
provision of technical assistance to
prevent school violence and enhance
resilience.

**SUMMARY:** The U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA) Center for

Mental Health Services (CMHS), and the Departments of Education and Justice (Agencies) announce the availability of FY 1999 funds for one cooperative agreement for the following activity. This activity is discussed in more detail under section 4 of this notice. This notice is not a complete description of the activity; potential applicants *must* obtain a copy of the Guidance for Applicants (GFA) before preparing an application.

**Note:** SAMHSA also published notices of available funding opportunities for FY 1999 in previous issues of the **Federal Register**.

Activity	Application deadline	Estimated funds available	Estimated number of awards	Project period
Violence Prevention Coordination	07/13/99	\$2.8 Million	1	Up to 3 yrs.

The actual amount available for awards and their allocation may vary, depending on unanticipated program requirements and the number and quality of applications received. FY 1999 funds for the activity discussed in this announcement were appropriated by the Congress under Public Law No. 105–277. 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, page 35962) 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

instructions for preparing and

(complete programmatic guidance 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 the 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 the activity (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: 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 deadline for receipt of applications is listed in the table above.

Competing applications must be received by the indicated receipt date to be accepted for review. An application received after the deadline may only be accepted 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 the 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 the activity covered by this notice (see section 4).

### 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 1999 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 1999 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 policyrelevant 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 activity 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 review process.

Other funding criteria will include:

• Availability of funds.

### 4. Special FY 1999 SAMHSA Activity

- 4.1. Coordinating Center for the Development of Community Partnerships and the Provision of Technical Assistance to Prevent School Violence and Enhance Resilience (Violence Prevention Coordination, SM 99-013)
  - Application Deadline: July 13, 1999
- Purpose: The U. S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) and the Departments of Education and Justice announce the availability of a cooperative agreement for a Coordinating Center for the **Development of Community** Partnerships and the Provision of Technical Assistance to Prevent School Violence and Enhance Resilience, hereinafter referred to as the Violence Prevention Coordinating Center (VPC), to provide technical assistance for

grantees in the Inter-Departmental Safe Schools/Healthy Students (SS/HS) Initiative, the CMHS School Action Grant Program, and other CMHS violence prevention-related activities. This Cooperative Agreement requires the grantee to develop a model for providing assistance designed to provide the highest quality of facilitation, training, and technical assistance to the Federal grantees in SS/ HS and School Action Grant programs and to other contractors involved in the **CMHS School Violence Prevention** program by creating an organized group of nationally known experts and established TA entities who have the knowledge and skills pertinent to the programmatic goals of the targeted grantees. Safe Schools/Healthy Students **Initiative and School Action grantees** are linked to expert consultants through individualized brokering based on local need. The VPC Consultant/Broker is responsible for matching a grantee's TA needs to an expert or experts who can be effective in offering consultation or facilitation in solving specific grantee problems or challenges. Over the course of this grant program, TA could increasingly be provided by peer grantees who have developed significant expertise. The VPC shall emphasize and encourage accountability through the creation and maintenance of continuous feedback mechanisms.

• Eligibility: Applications may be submitted by domestic public or private nonprofits such as incorporated volunteer organizations, units of State or local governments, community-based organizations, and public or private universities, colleges, and hospitals. The U.S. Department of Education is an essential partner in the Inter-Departmental Safe Schools/Healthy Students Initiative. The Department of Education is statutorily restricted to funding only nonprofit recipients. It is seen to be in the interest of the Departments and the Inter-Departmental grantees to provide technical assistance in a comprehensive and coordinated manner to the Inter-Departmental grantees, and to avoid the separation and fragmentation involved in awarding to two types of recipients, i.e., a profit maker and a nonprofit. The grantees will thus be able to obtain assistance from one source, a nonprofit, which will better ensure the success and effectiveness of the Initiative.

• Grants/Amounts: Approximately \$2.8 million will be available per year to support one grantee. This award covers both direct and indirect costs.

 Period of Support: Support may be requested for a period of up to 3 years.
 Annual awards will be made subject to continued availability of funds and progress achieved.

- Catalog of Federal Domestic Assistance Number: 93.230
- Program Contact: For programmatic or technical assistance contact:

Gail F. Ritchie, M.S.W., Special Programs Development Branch, Division of Program Development, Special Populations and Projects, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 18C–07, Rockville, MD 20857, (301) 443–7790, 301–443–7912 (Fax).

Gwendolyn G. Bennett, Public Health Advisor, Special Programs Development Branch, Division of Program Development, Special Populations and Projects, Center for Mental Health Services, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 18C–07, Rockville, MD 20857, (301) 443–7790, (301) 443–7912 (Fax).

- Questions Regarding Grants Management Issues may be directed to Stephen J. Hudak, Division of Grants Management, OAPS, Substance Abuse and Mental Health Services Administration, 5600 Fishers Lane, Room 15C–05, Rockville, Maryland 20857; (301) 443–4456, E-Mail: shudak@samhsa.gov.
- For application kits, contact:
   Knowledge Exchange Network (KEN).
   PO Box 42490, Washington, DC 20015.
   Voice (800) 789–2647, TTY: (301) 443–9006, FAX (301) 984–8796

# 5. 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, Pub. L. 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.

Dated: May 11, 1999.

#### Nelba Chavez,

Administrator, Substance Abuse and Mental Health Services Administration.

Dated: May 13, 1999.

#### Judith Johnson,

Acting Assistant Secretary, Office of Elementary and Secondary Education.

Dated: May 14, 1999.

#### Shay Bilchik,

Administrator, Office of Juvenile Justice and Delinquency Prevention.

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## DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-4444-N-07]

Notice of Proposed Information Collection: Training Materials and Guidance on Interpreting Lead-Based Paint Inspection and Risk Assessment Reports

**AGENCY:** Office of Lead Hazard Control, HUD.

**ACTION:** Notice.

SUMMARY: The proposed information collection requirement described below will be submitted to the Office of Management and Budget (OMB) for review, as required by the Paperwork Reduction Act. The Department is soliciting public comments on the subject proposal.

**DATES:** Comments Due Date: July 19, 1999.

ADDRESSES: Interested persons are invited to submit comments regarding this proposal. Comments should refer to the proposal by name and/or OMB Control Number and should be sent to: Gail N. Ward, Reports Liaison Officer, Department of Housing and Urban Development, 451 7th Street, SW, Room P3206, Washington, DC 20410.

FOR FURTHER INFORMATION CONTACT: David K. Levitt, 202–755–1785 ext. 156 (this is not a toll-free number) for available documents regarding this proposal.

SUPPLEMENTARY INFORMATION: The Department is submitting the proposed information collection to OMB for review, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35, as amended).

This Notice is soliciting comments from members of the public and affecting agencies concerning the proposed collection of information to: (1) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (2) Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information; (3) Enhance the quality, utility, and clarity of the information to be collected; and (4) Minimize the burden of the collection of information on those who are to respond; including through the use of appropriate automated collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

This Notice also lists the following information:

Title of Proposal: Develop training materials and guidance on interpreting lead-based paint inspection and risk assessment reports.

OMB Control Number: To be assigned. Need for the Information and Proposed Use: Lead-based paint inspections and risk assessments are often performed in accordance with the HUD Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing ("Guidelines") issued under section 1017 of the Presidential Lead-Based Paint Hazard Reduction Act of 1992 (42 U.S.C. 4851-4856), known as "Title X." To allow for situational flexibility, such reports do not have to follow a standardized format. Information recommended to be included in these reports is described in the Guidelines, for inspections in chapter 7, and risk assessments in chapter 5. Anecdotal and other evaluations of inspection and risk assessment reports (e.g., Field **Evaluation of Lead-Based Paint** Inspections, Final Technical Report, **HUD Office of Lead Hazard Control**, September 30, 1998) indicate that many reports are missing important information, organized poorly, and/or difficult to understand. An inspection or risk assessment report should be easily understood by readers familiar with basic quantitative and qualitative descriptive information on buildings and environmental measurements. This information collection is designed to provide the basis for developing materials to help lead-based paint inspectors and risk assessors prepare clear and complete reports, and to help readers use inspection and risk assessment reports. HUD plans to identify and recruit a review panel of lead-based paint inspectors, risk assessors, trainers, and other lead-based paint professionals to review and summarize pertinent documents, such as the HUD Guidelines for the **Evaluation and Control of Lead-Based** Paint Hazards in Housing, the EPA