apply, including where to submit applications and application deadline instructions, are included in the application kit.

Purpose: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) announces the availability of Fiscal Year 2002 funds for grants to support community-based planning, resulting in the development of a local substance abuse treatment system plan, for American Indian and Alaskan Native (AI/AN) and rural communities.

Eligibility: Eligible applicants are public and domestic private non-profit entities such as community based organizations, Tribes, Tribal governments, or other tribal authorities, colleges and universities (including Tribal colleges and universities), faithbased organizations, provider and consumer groups and health care organizations. Applicants must propose to serve Rural Communities or American Indian or Alaska Native communities (including urban tribal communities). In compliance with the legislative authority for this program (Sec. 509 of the Public Health Service Act), for-profit organizations are not eligible.

Availability of Funds: Approximately \$1,500,000 will be available to fund approximately 6 grants. Applicants may request up to but not more that \$250,000 in total project costs (direct and indirect) for the entire project period.

Period of Support: Grants will be awarded for a project period of up to 18 months.

Criteria for Review and Funding: General Review Criteria: Competing applications requesting funding under this activity will be reviewed for technical merit in accordance with established PHS/SAMHSA peer review procedures. Review criteria that will be used by the peer review groups are specified in the application guidance material.

Award 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. Availability of funds will also be an award criteria. Additional award criteria specific to the programmatic activity may be included in the application guidance materials.

Catalog of Federal Domestic Assistance Number: 93.243.

*Program Contact:* For questions concerning program issues, contact:

Maria Burns, CSAT/SAMHSA, Rockwall II, Suite 740, 5600 Fishers Lane, Rockville, MD 20857, (301) 443–7611, E-Mail: mburns@samhsa.gov.

For questions regarding grants management issues, contact:

Steve Hudak, Division of Grants Management, OPS/SAMHSA, Rockwall II, 6th floor, 5600 Fishers Lane, Rockville, MD 20857, (301) 443–9666, E-Mail: shudak@samhsa.gov

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 2002 activity is subject to the Public Health System Reporting Requirements.

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.

Executive Order 12372: Applications submitted in response to the FY 2002

activity 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: Division of Extramural Activities,

Policy, and 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, 2002.

#### Richard Kopanda,

Executive Officer, SAMHSA.
[FR Doc. 02–8494 Filed 4–8–02; 8:45 am]
BILLING CODE 4162–20–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Funding Opportunities Notice for the Community Action Grants for Service System Change, May 10, 2002 Application Date

**AGENCY:** Center for Mental Health Services (CMHS), Substance Abuse and Mental Health Services Administration (SAMHSA), DHHS.

**ACTION:** Modification/Clarification of a notice of funding availability regarding the Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Community Action Grants for Service System Change.

**SUMMARY:** This notice is to inform the public that the SAMHSA/CMHS announcement No. PA00–003, Community Action Grants for Service

System Change (Short Title: Community Action Grants) will have only one application receipt date on May 10, 2002. Awards will be made in September 2002. Consistent with SAMHSA policy for all grants and applications, scored applications that are not funded in September 2002 will be held for consideration for one year, should funding become available in FY 2003. Sponsors of exemplary practices who are considering applying for a grant through the standing announcement for one of the subsequent receipt dates should note that the President's FY03 Budget proposes no funds for new awards during FY03. Should Community Action Grant funding become available, a new announcement will be published. Check the Federal Register and/or the SAMHSA Web site for notice of the announcement at http:/ /www.samhsa.gov/.

Community Action Grants for Service Systems Change support the adoption and implementation of exemplary practices related to the delivery and organization of services for children with serious emotional disturbance or adults with serious mental illness, and those with co-occurring disorders. Awards range from a minimum of \$50,000 to a maximum of \$150,000 in total costs.

Program Contact: For questions concerning program issues, contact: David Morrissette, DSW, Community Support Program, Suite 11C–22, 5600 Fishers Lane, Rockville, MD 20857, 301–443–3653, Fax 301–443–0541, Email: dmorriss@samhsa.gov.

Dated: April 2, 2002.

### Chuck Novak,

Acting Executive Officer, SAMHSA.
[FR Doc. 02–8393 Filed 4–8–02; 8:45 am]
BILLING CODE 4162–20–P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

**Substance Abuse and Mental Health Services Administration** 

# Fiscal Year (FY) 2002 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 Substance Abuse Treatment (CSAT) announces the availability of FY 2002 funds for grants for the following activity. This notice is not a complete description of the activity; potential applicants must obtain a copy of the Guidance for Applicants (GFA), including Part I, Development of Comprehensive Drug/ Alcohol and Mental Health Treatment Systems for Persons Who Are Homeless, and Part II, General Policies and Procedures Applicable to all SAMHSA Applications for Discretionary Grants and Cooperative Agreements, before preparing and submitting an application.

Activity	Application deadline	Est. funds FY 2002	Est. No. of awards	Project pe- riod years
Grants Program to Develop, Comprehensive Drug/Alcohol and, Mental Health Treatment Systems for, Persons Who Are Homeless.	June 19, 2002	\$9,000,000	15–17	3

The actual amount available for the award may vary, depending on unanticipated program requirements and the number and quality of applications received. FY 2002 funds for the activity discussed in this announcement were appropriated by the Congress under Public Law No. 106–310. 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.

General Instructions: Applicants must use application form PHS 5161–1 (Rev. 7/00). The application kit contains the two-part application materials (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:

National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345,

Rockville, MD 20847–2345, Telephone: 1–800–729–6686. The PHS 5161–1 application form and the full text of the activity are also available electronically via SAMHSA's World Wide Web Home Page: http://www.samhsa.gov.

When requesting an application kit, the applicant must specify the particular activity for which detailed information is desired. All information necessary to apply, including where to submit applications and application deadline instructions, are included in the application kit.

Purpose: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) announces the availability of fiscal year 2002 funds for grants to enable communities to expand and strengthen their treatment services for homeless individuals with substance abuse disorders, mental illness, or with co-occurring substance abuse disorders and mental illness.

Eligibility: Pursuant to Section 506 of the Public Health Service Act, eligible entities are community-based public and private nonprofit entities. Community-based public entities are those public entities located in the community and would include tribal and local governments that provide community-based services. Private nonprofit entities include communitybased and faith-based organizations. States are not eligible to apply. The applicant agency and all direct providers of substance abuse and mental health services involved in the proposed system must be in compliance with all local, city, county and/or State requirements for licensing, accreditation, or certification. The applicant, if a direct provider of substance abuse treatment or mental health services, and any direct providers of substance abuse treatment or mental health services involved in the proposed system, must have been providing treatment services for a minimum of two years prior to the date of the application. If the applicant is not a direct provider of substance abuse treatment or mental health services, the applicant must document a commitment from a substance abuse treatment or mental health provider to participate in the proposed project.