

ACTION: Notice of Funding Availability for Competitive Cooperative Agreements for the Mental Health and Community Safety Initiative for American Indian and Alaska Native (AI/AN) Children, Youth, and Families.

SUMMARY: The Indian Health Service (IHS) has developed the Mental Health and Community Safety Initiative (MHCSI) for American Indian/Alaska Native (AI/AN) Children, Youth, and Families. The IHS announces the availability of Fiscal Year (FY) 2003 funds for cooperative agreements to develop innovative strategies that focus on the mental health, behavioral, substance abuse, and community safety needs of AI/AN young people and their families who are involved or at risk of involvement with the juvenile justice system. This effort was first initiated through the White House Domestic Policy Council to provide federally recognized Tribes and eligible Tribal organizations with assistance to plan, design, and assess the feasibility of implementing a culturally appropriate system of care for AI/ANs. The MHCSI planning phase cooperative agreement program will not fund actual services. An important focus will be to integrate traditional healing methods indigenous to the communities with conventional treatment methodologies. These cooperative agreements are established under the authority of 25 U.S.C. 1621h(m). There will be only one funding cycle during Fiscal Year (FY) 2003. This program is described at 93.230 in the *Catalog of Federal Domestic Assistance*. These cooperative agreements will be awarded and administered in accordance with:

- (a) This announcement;
- (b) IHS regulations governing P.L. 94-437 grants and cooperative agreements at 42 CFR 36.101, *et seq.* and 25 U.S.C. 1621h(m);
- (c) 45 CFR Part 92, "Department of Health and Human Services, Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments," or 45 CFR Part 74, "Administration of Grants to Non-profit Recipients";
- (d) The Public Health Service (PHS) Grants Policy Statement; and
- (e) Applicable Office of Management and Budget (OMB) Circulars. Executive Order 12372 requiring inter-governmental review is not applicable to this program.

The PHS urges applicants submitting strategic health plans to address specific objectives of *Healthy People 2010*. Potential applicants may obtain a printed copy of *Healthy People 2010* (Summary Report 017-001-00473-1) or

CD-ROM, Stock No. 107-001-00549-5 through the Superintendent of Documents, Government Printing Office, P.O. Box 371954, Pittsburgh, PA 15250-7945, (202) 512-1800 or you may access this information at the following Web site: www.healthypeople.gov.

Smoke Free Workplace

The PHS strongly encourages all cooperative agreement recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the AI/AN people.

Fund Availability of and Period of Support

Approximately \$400,000 is available in Fiscal Year 2003. Approximately 3-4 new awards will be granted. Applicants are not required to match or share in project costs if an award is made. The anticipated start date is September 1, 2003.

Planning Phase

Awards may be requested for up to three years. This announcement is a planning cooperative agreement and will not fund actual services. In the third year of the planning phase, the planning phase cooperative agreement recipients must submit an implementation phase application. Implementation phase funding will be awarded based on a limited competition among the eligible planning phase recipients. Awardees who demonstrate successful planning will be eligible for the five-year implementation cooperative agreement. Annual non-competitive continuation awards depend on the availability of funds and progress achieved.

Note: Successful completion of Phase 1 (the planning phase) is required to be considered for an implementation award.

Awards are to be used to develop or strengthen local infrastructures, capabilities, and collaborations that can lead to improved mental health and family service facilities and/or programs.

In this initial phase, MHSCI cooperative agreement applicants are required to address how they plan to:

- (a) Support the development of wrap-around process program, or systems of care models that are designed by AI/AN community members to achieve their selected emotional, behavioral, educational, vocational, and spiritual outcomes for their children;
- (b) Pub Tribes as well as eligible urban Indian organizations in a good

position to secure funding to implement service systems, secure permanent sources of funding, and/or to enhance self-governance efforts;

(c) Develop a logic model for the system of care that will serve as the basis for developing the strategic plan for the project. The logic model should be least describe the context in which the system of care will be developed, the resources available for the systems of care, the activities that will support the development of the system of care, and the individual services and system outcomes expected from the system of care;

(d) Develop a strategic plan for implementation of the system of care throughout the three year federal funding period. The strategic plan should include a technical assistance plan that shows how training and technical assistance activities will be targeted to areas requiring further development within the systems of care;

(e) Hire key planning phase personnel;

(f) Establish the administrative team;

(g) Organize the governance body;

(h) Develop the approach for services integration and coordination that is appropriate for the target population; and

(i) Create the format for the individualized service plan that incorporates a full array of mental health and support services.

Due Dates

All applicants must submit one signed original and two complete copies of the final proposal with all required documentation. Mark the original application with a cover sheet that states, "Original Cooperative Agreement Application." Mail the application to the Division of Acquisitions and Grants Management, Grants Management Branch, Indian Health Service, Twinbrook Metro Plaza, Suite 100, 12300 Twinbrook Parkway, Rockville, Maryland 20852, by 5 p.m., Eastern Standard Time, on July 11, 2003. Submissions must be made in hard copy format. Applicants are responsible for determining whether an application has been received by the Grants Management Branch. Applications are not available electronically.

Applications will be considered as meeting the deadline if they are either:

- (1) Received on or before the deadline, with hand carried applications received by close of business 5 p.m.; or
- (2) Postmarked on or before the deadline and all materials received in time to be reviewed along with all other timely applications. A legibly dated receipt from a commercial