

However, because the evidence base is limited in some areas, SAMHSA may fund some practices for which the evidence of effectiveness is based on formal consensus among recognized experts in the field and/or evaluation studies that have not been published in the peer reviewed literature.

SAMHSA also funds grants under three other standard grant announcements:

- *Services Grants* provide funding to implement substance abuse and mental health services.

- *Infrastructure Grants* support identification and implement systems changes but are not designed to fund services.

- *Service to Science Grants* document and evaluate innovative practices that address critical substance abuse and mental health service gaps but that have not yet been formally evaluated.

This announcement describes the general program design and provides application instructions for all SAMHSA BPPI Grants. The availability of funds for specific BPPI Grants will be announced in supplementary Notices of Funding Availability (NOFAs) in the **Federal Register** and at <http://www.grants.gov>—the Federal grant announcement Web page.

Typically, funding for BPPI Grants will be targeted to specific populations and/or issue areas, which will be specified in the NOFAs. The NOFAs will also:

- Specify total funding available for the first year of the grants and the expected size and number of awards;
- Provide the application deadline;
- Note any specific program requirements for each funding opportunity; and
- Include any limitations or exceptions to the general provisions in this announcement (e.g., eligibility, award size, allowable activities).

It is, therefore, critical that you consult the NOFA as well as this announcement in developing your grant application.

B. Expectations

SAMHSA's BPPI program promotes the use of practices that incorporate the best objective information available from recognized experts regarding effectiveness and acceptability. SAMHSA refers to these as "best practices." BPPI grants may address needs in the areas of substance abuse prevention, substance abuse treatment and/or mental health services. SAMHSA understands that the "best practices" proposed for BPPI grants may need to be adapted to certain populations. Therefore, SAMHSA's BPPI grants

support adaptation and evaluation of best practices in addition to planning and implementation.

1. Documenting the Evidence-Base for Selected Practices

Applicants must show that their proposed practices meet the standard for effectiveness. The practices proposed by applicants for SAMHSA's BPPI grants must incorporate the best objective information available from recognized experts regarding effectiveness and acceptability. Often, these practices will have strong evidence of effectiveness. However, applicants may propose practices with a sound, but limited, evidence base.

Applicants proposing to implement practices included in the following sources meet the standard of effectiveness for SAMHSA's BPPI Grants, and will not be required to provide further documentation of the practice's effectiveness:

- SAMHSA's National Registry of Effective Programs (NREP) (see Appendix D);
- Center for Mental Health Services (CMHS) Evidence Based Practice Tool Kits (see Appendix E);
- List of Evidence-Based Substance Abuse Treatment Practices (see Appendix F); and
- Additional practices identified in the NOFA for a specific funding opportunity.

Applicants for Phase II awards that have already received Phase I awards also have met the standard for effectiveness.

Applicants proposing practices that have *not* been identified by SAMHSA as meeting the required effectiveness standard must show that their proposed practice incorporates the best objective information available from recognized experts regarding effectiveness and acceptability. Such applicants must provide a narrative justification that describes the evidence base for the practice and summarizes the evidence for effectiveness. The evidence may come from a variety of sources, including the published research literature, formal consensus among recognized experts, and other studies that have not been published in the peer-reviewed research literature.

2. Program Design

SAMHSA will fund BPPI grants in two phases. Phase I is a planning and consensus-building phase that supports grantees for up to 18 months. Phase II is a pilot, adaptation, implementation, and evaluation phase that supports grantees for up to 3 years.

Phase I: Planning and Consensus Building

The goal of Phase I is to achieve consensus among community stakeholders to adopt a best practice and engage in strategic planning for its implementation. Phase I grants may include, but are not limited to, the following types of activities:

- Build and maintain a coalition of stakeholders to fund, oversee, use, and provide a sustainable best practice.
- Train and educate key stakeholders about the best practice.
- Consult experts about the practice.
- Consult leaders from other communities about their experiences in implementing the practice.
- Reimburse stakeholders for their transportation or child care costs.
- Engage professionals to help build consensus and plan strategy.
- Adapt the best practice to community needs without sacrificing its effectiveness.
- Identify and obtain the commitment of permanent sources to fund the best practice.
- Design the evaluation of the best practice.
- Evaluate the process of consensus building among stakeholders (required).

Phase II: Pilot Test, Adaptation, Implementation, and Evaluation

The goals of Phase II grants are to pilot test and evaluate the best practices before full implementation, modify strategic/financial plans, and prepare for full-scale implementation. The following are examples of activities that can be funded during Phase II:

- Pilot test the practice on a sample of service recipients and evaluate the pilot test.
- Modify the best practice based on consultation with stakeholders and practice experts, other community experiences, and pilot test results.
- Revise the manual or documentation that describes in detail how the best practice was modified.
- Maintain the coalition of stakeholders to oversee Phase II activities.
- Secure consultants to make changes required to implement and finance the best practice.
- Make organizational changes (e.g., hiring staff) necessary to implement the best practice.
- Provide necessary education, training, and technical assistance for staff.

Up to 25% of the Phase II grant award may be used to evaluate the pilot test of the best practice. During the course of a Phase II award, SAMHSA will provide