

# Assertive Community Treatment Grants

## Short Title: (ACT)

## Grant Funding Opportunity

## NOFO Number: SM-23-007

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**SAMHSA**  
Substance Abuse and Mental Health  
Services Administration

# OBJECTIVES

1. Key Information
2. Purpose of Program
3. Program Objectives
4. Eligibility
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6. Required Activities
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# Key Info

- Released on SAMHSA's Website on February 7<sup>th</sup>, 2023
- Applications due: April 10<sup>th</sup>, 2023
- Anticipated Number of Awards: Up to 7
- Anticipated Award Amount: Up to \$678,000 per year
- Length of Project: Up to 5 years
- Cost Sharing/Match Required?: No

# Purpose of Program

The purpose of this program is to establish or expand and maintain ACT programs for transition-aged youth and adults with a SMI or SED. Recipients are expected to implement an ACT program to fidelity and provide ACT services to the population of focus. With this program, SAMHSA aims to improve behavioral health outcomes for individuals by reducing rates of hospitalization, mortality, substance use, homelessness, and involvement with the criminal justice system.

ACT is an effective evidence-based programs designed to support community living for individuals with severe functional impairments associated with SMI/SED. Individuals with severe functional impairments tend to need services from multiple providers (e.g., physicians, social workers) and multiple systems (e.g., social services, housing services, health care).

# Program Objectives

SAMHSA expects this program will improve behavioral health outcomes for individuals by:

- reducing rates of hospitalization,
- mortality,
- substance use,
- homelessness, and
- involvement with the criminal justice system.

# Eligibility

Eligibility is statutorily limited to:

- states,
- political subdivisions of states (e.g., counties, cities),
- Indian tribes or tribal organizations (as defined in Section 4 of the Indian Self-Determination and Education Assistance Act),
- mental health systems,
- health care facilities (public/private not-for-profit facilities), and
- entities (public/private not-for-profit organizations), that serve individuals with SMI who experience homelessness or are justice-involved.

# Eligibility for Tribes or Tribal Organizations

This means:

- *The recognized body of any AI/AN tribe;*
- *Any legally established organization of AI/ANs which is controlled, sanctioned, or chartered by such governing body, or which is democratically elected by the adult members of the Indian community to be served by such organization, and which includes the maximum participation of AI/ANs in all phases of its activities.*
- *Consortia of tribes or tribal organizations are eligible to apply, but each participating entity must indicate its approval. A single tribe in the consortium must be the legal applicant, the recipient of the award, and the entity legally responsible for satisfying the grant requirements.*

# Required Activities

## Section 3, Required Activities

- Establish, or expand, and maintain recovery-oriented ACT programs for individuals with SMI/SED in accordance with a high-fidelity ACT tool (i.e., TMACT, DACTs, ACT EBP Toolkit), including standardized policies and procedures for program admission, service provision, and transitions to a less intensive level of care as appropriate.
- Provide all ACT services that are in accordance with organizational policies and procedures with a high-fidelity ACT tool (i.e., TMACT, DACTs, ACT EBP Toolkit). [NOTE: All ACT services must be provided by the award recipient]. Establish and maintain an ACT team of core multi-disciplinary staff in accordance to the scope and staffing ratio guidelines of a high-fidelity ACT tool (i.e., TMACT, DACTs, ACT EBP Toolkit). [Note: If you are expanding an existing and operational ACT program, include in Attachment 9 a fidelity review that has been conducted within the past two years.]



# Required Activities Continued

Implement the Core Services of an ACT Program.

This includes but is not limited to:

- Crisis Assessment and Intervention,
- Comprehensive assessment,
- Illness Management and Recovery Skills,
- Individual Supportive Therapy,
- Substance Use Disorder Treatment,
- Employment-Support Services,
- Side-by-side Assistance with Activities of Daily Living,
- Intervention with Support Networks (family, friends, landlords, neighbors, etc.),
- Support services, such as medical care, housing, benefits, transportation,
- Case management, and
- Medication prescription, administration, and monitoring.

# Required Activities Continued

Support implementation of the Core Services of an ACT Program with the following Characteristics of an ACT Program:

- An intensive team approach,
- Daily team review of every client,
- In-person services in the community and at an office,
- Small and shared caseloads,
- Time unlimited services,
- Flexible service delivery that can adjust to the client's needs,
- Care coordination with somatic health providers,
- Assistance with medication management for psychiatric and non-psychiatric medications,
- Coordination with other behavioral health resources as necessary (including higher levels of care such as inpatient hospitalization and transition planning to lower levels of care as appropriate), and
- Crisis management and 24/7 availability.

# Required Activities Continued

- Required Activities (See Section 3. Required Activities. Project Narrative B1):
  - Evaluation Plan
    - By the fourth month of Year 1, develop and submit an evaluation plan that includes adherence to high fidelity of the ACT tool (i.e., TMACT, DACTs, ACT EBP Toolkit). The evaluation must occur at least annually and address standardized training, fidelity assessments conducted at least annually<sup>1</sup>, adherence to established program standards, and how data has been reviewed on a regular basis to ensure continuous quality improvement.

# Required Activities Continued

- By the fourth month of Year 1, develop and submit a training plan for ACT implementation to include:
  - Basic training for all agency staff (e.g., leadership, program leads, intake coordinators, therapists) and key community stakeholders (e.g., clients living with SMI/SED, families, mental health authorities, staff from key community organizations) to ensure fundamental understanding of the ACT model. This training should include a focus on providing culturally responsive ACT services, planning for recovery, and the role of peers.
- Intensive ACT model training for ACT staff, including training on complementary evidence-based practices (e.g., psychiatric nursing, supported employment, housing support, substance use, peer support, and mental health services for those experiencing SMI/SED).
- Provide training on trauma-informed care approaches to all agency staff, including members of the ACT team.

# Required Activities Continued

## Advisory Group:

Form an ACT stakeholder advisory group of key community stakeholders (per the ACT toolkit) to serve as a liaison between community and mental health agencies. Consumers and family members are a critical component of the ACT stakeholder advisory group. [NOTE: Letters of Commitment (LOC) from each community stakeholder must be submitted in Attachment 1 of the application. Each LOC should attest that the stakeholder is willing and has the capacity to support the ACT program.]

# Required Activities Continued

Required Activities (See Section 3. Required Activities. Project Narrative B1):

## Sustainability Plan

- By the end of the first year, develop and submit a continuity of operations and sustainability plan that includes: o
  - Staff positions within the multidisciplinary ACT team that are difficult to fill.
  - Strategies for cross training core ACT functions within the team if a team member(s) leave,
  - Funding sources outside of the award to support ACT services, and
  - A strategy for leveraging resources to sustain the ACT program.

# Allowable Activities

Allowable activities are an allowable use of funds but are not required. Allowable activities may include:

- Respond to the needs of individuals and families served by the program who are at risk for or experiencing homelessness. This could include an assessment of homelessness risk, housing status, and eligibility for federal housing programs, and collaboration with homeless services organizations and housing providers, including referral partnerships with public housing agencies and coordination with local homeless Coordinated Entry systems.

## Specialized Training

- Train staff in evidence-based or evidence-informed topics relevant to the population(s) served to strengthen the program (e.g., criminal justice-involved individuals; transition-aged youth; Cognitive Behavioral Therapy for Psychosis (CBTP)).



# Allowable Activities Continued

Assess the needs of subpopulations in the community and the need for associated adaptations to the ACT model. Examples of subpopulations could include:

- Older adults;
- Individuals involved in the criminal justice system;
- Racial, ethnic, sexual or gender minorities;
- Individuals with co-occurring developmental disabilities;
- Individuals living in geographically underserved areas;
- Individuals experiencing homelessness.

# Data Collection/Performance Measurement

All SAMHSA recipients are required to collect and report certain data so that SAMHSA can meet its obligations under the Government Performance and Results (GPRA) Modernization Act of 2010. You must document your plan for data collection and reporting in your Project Narrative in response to Section E: Data Collection and Performance Measurement in Section V of this NOFO. Recipients are required to report performance on National Client Level Outcomes (NOMS) and Infrastructure Development, Prevention, and Mental Health Promotion (IPP) Indicators.

- Collection of NOMS data will address the following:
  - Behavioral Health Diagnosis(es)
  - Demographic data
  - Functioning in everyday life
  - Stability in Housing
  - Education and Employment
  - Criminal and Criminal Justice Status
  - Perception of Care
  - Social Connectedness
  - Program-specific questions (i.e., Section G of the NOMS tool)

# Data Collection/Performance Measurement Continued

Recipients will also be required to collect and report IPP data quarterly. Data will be collected for the following IPP indicators:

- The number of people in the mental health and related workforce trained in mental health-related practices/activities that are consistent with the goals of the grant.
- The number of people receiving evidence-based mental health practices (i.e., treatments and supports) as a result of the grant.
- The number of individuals who died by suicide.
- The number of individuals who attempted suicide.

# Project Performance Assessment

In addition, recipients are required to report their progress addressing the goals and objectives identified in your Project Narrative.

Recipients must:

- Periodically review the performance data they report to SAMHSA (as required above),
- Assess their progress, and use this information to improve the management of their project.

Performance assessments should be used to determine whether your project is having/will have the intended impact on behavioral health disparities.

Recipients should also review the behavioral health Disparities Impact Statement (DIS) submitted within the 60 days after award.

# Application Requirements

## Section 3, Eligibility Requirements, subsection 3 Other requirements

The Project Narrative must not exceed **10 pages**. If the Project Narrative is over 10 pages, the application will not be considered for review.

- Evidence of Experience and Credentials
  - SAMHSA believes that only existing, experienced, and appropriately credentialed organizations with demonstrated infrastructure and expertise will be able to provide the required services quickly and effectively. Applicants must submit evidence under Attachment 1 of their application meeting three additional requirements related to the provision of services.
  - The three requirements are:
    - A provider organization for direct client behavioral health (which includes both mental health and substance use) services appropriate to the award must be involved in the proposed project. The provider may be the applicant, or another organization committed to the project. More than one provider organization may be involved.
    - Each mental health provider organization must have at least three to five years of experience (as of the due date of the application) providing relevant services (official documents must establish that the organization has provided relevant services for the last three to five years.
    - Each mental health provider organization must comply with all applicable local (city, county) and state licensing, accreditation, and certification requirements, as of the due date of the application.

# **Grants Management Overview**

**Division of Grants Management**

**Substance Abuse and Mental Health Services Administration**

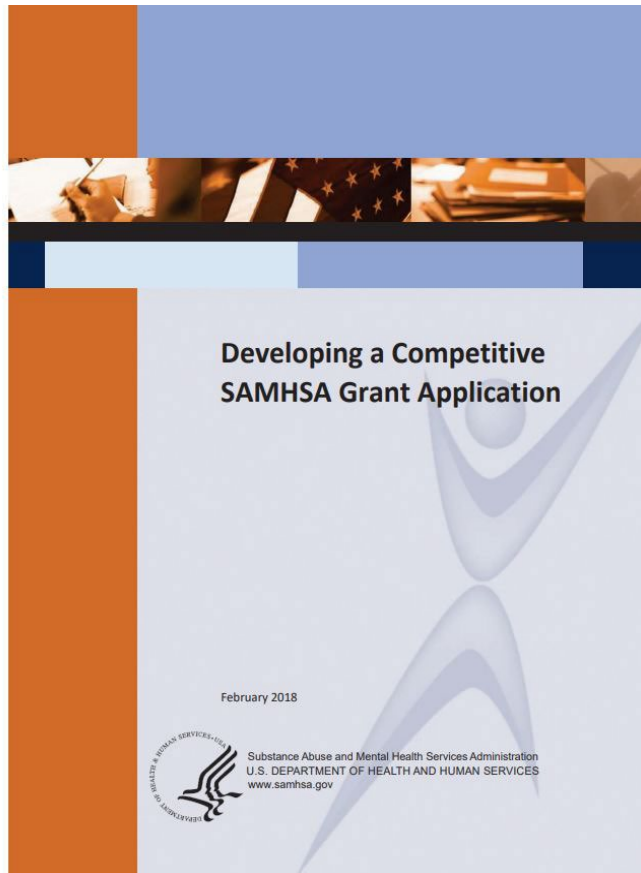
**U.S. Department of Health and Human Services**

**Presented by: Salvador Ortiz, GMS**

# OBJECTIVES

1. Applying for a Grant - Available Resources
2. Applicable Policies & Regulations
3. Factors Affecting Allowability of Costs
4. Budget Narrative & Justification
5. Sample Budget Template
6. Funding Limitations/Restrictions
7. SF-424A
8. Key Personnel
9. Indirect Cost Rate
10. Questions/Technical Support

# APPLYING FOR A GRANT - AVAILABLE RESOURCES



- A manual is available for applicants: [Developing a Competitive SAMHSA Grant Application \(PDF | 1 MB\)](#).
- This manual will provide applicants with valuable information about how to prepare a strong grant application.
- Additional information can be found on: <https://www.samhsa.gov/grants/grants-training-materials>



# APPLYING FOR A NEW SAMHSA GRANT - AVAILABLE RESOURCES (CONT'D.)

## Introduction to Grants.gov Video Series

The [Introduction to Grants.gov Video Series](#) covers the complete Grants.gov application process, from registering and creating a Grants.gov account to finding funding opportunities and completing an application package.



### [How to Register with Grants.gov](#)

Updated on March 21, 2020

Learn how to create a Grants.gov account so you can subscribe to funding opportunity notifications and apply for federal grants using Grants.gov Workspace. This video also explains how to associate a DUNS number with an applicant account. (Note: This is an optional step).



### [Intro to Grants.gov User Roles](#)

Updated on April 20, 2018

Learn about applicant user roles within the Grants.gov system and how these roles impact the application process.



### [How to Search for a Federal Grant on Grants.gov](#)

Updated on Nov 20, 2017

Learn about Grants.gov's powerful search engine, which allows users to find and apply for federal grants in a variety of ways. This video also shows how registered users can subscribe to opportunity notifications generated from saved search criteria.



### [What's in a Grant Opportunity on Grants.gov?](#)

Updated on April 27, 2018

Learn about the information that is included with every posting of a federal grant opportunity on Grants.gov.



### [Intro to Applying on Grants.gov](#)

Updated on April 27, 2018

Learn how easy it is to apply for a federal grant using Grants.gov Workspace. This video serves as an introduction to the apply process.

- Learn more about registering, searching, and applying for federal grant opportunities.
- [Recording of the SAMHSA Applicant Webinar \(39 minutes\)](#)
- [NOFO Applicant Webinar Presentation \(PDF | 7 MB\)](#)
- [Grants.gov Video Series](#)
- For more information refer to: <https://www.samhsa.gov/grants/applying>
- **Note:** Effective April 4, 2022, the Data Universal Numbering System (DUNS) Number will be replaced by a Unique Entity Identifier (UEI) assigned by the System for Award Management (SAM.gov). For more information, please refer to <https://sam.gov/content/duns-uei>.

# APPLICABLE POLICIES & REGULATIONS

- **45 CFR Part 75 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards** - <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-A/part-75>
- **HHS Grants Policy Statement**  
<https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>- the HHS Grants Policy Statement document contains important information on the general terms and conditions for discretionary grants and cooperative agreement awards.
- **Financial Management Requirements** - the financial management control areas provide recipients with guidance for ensuring their existing accounting and personnel policies and procedures (P&P) include the necessary controls. ***The guidance is also used by SAMHSA to complete Financial Capability Reviews (FCRs) of new and prospective grantees.*** Learn more about [grantee financial management requirements](#).
- **The Notice of Funding Opportunity (NOFO)** [SM-23-007](#)

# APPLICABLE POLICIES & REGULATIONS (CONT'D.)

- 45 CFR PART 75—UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR HHS AWARDS**

Recipient Type	Uniform Admin Requirements	Cost Principles	Audit Requirements
State & Local Governments	45 CFR Part 75, Subpart C and D	45 CFR Part 75, Subpart E	45 CFR Part 75, Subpart F
College & Universities	45 CFR Part 75, Subpart C and D	45 CFR Part 75, Subpart E	
Non-Profits		45 CFR Part 75, Subpart E	

# FACTORS AFFECTING ALLOWABILITY OF COSTS

Proposed budgets must contain allowable, reasonable, and allocable costs, as defined under [45 CFR 75.403](#), [75.404](#), and [75.405](#).

- **Allowable** costs, unless otherwise authorized by program statute are necessary and reasonable for award performance and allowable under the cost principles.
- **Reasonable** costs are not in excess of what would normally be incurred by a prudent person under the circumstances prevailing at the time the decision was made, given market rates, effort and the organization's documented policies.
- **Allocable** costs can be charged to a federal award if the goods or services are chargeable in accordance with relative benefits received.

# BUDGET NARRATIVE & JUSTIFICATION

- All applications must include a detailed budget and narrative justification that explains the federal and the non-federal expenditures.
- The detailed budget and narrative justification must be consistent with and support the Project Narrative.
- You must provide a description of existing resources and other support you expect to receive for the proposed project.
  - Other support is defined as funds or resources, whether federal, non-federal, or institutional, in direct support of activities through fellowships, gifts, prizes, in-kind contributions, or non-federal means.
- The Budget Narrative and justification must be concrete and specific. It must provide a justification for the basis of each proposed cost in the budget and how that cost was calculated. Examples to consider when justifying the basis of your estimates can be ongoing activities, market rates, quotations received from vendors, or historical records.

## BUDGET NARRATIVE & JUSTIFICATION (CONT'D.)

- Detailed Breakdowns must be provided of the materials, quantities, number of persons, cost per unit/hour, number of hours/levels of effort, or other relevant basis to show how costs will be utilized towards achieving the grant's goals and objectives. This is to facilitate the determination of whether the proposed costs are allowable, reasonable, and allocable.
- The total for each budget category in your detailed budget with narrative justification must match the corresponding total of each Object Class Category on your SF-424A in Section B Budget Categories.
- Your detailed budget with narrative justification should reflect the project costs for the first year ONLY. In your budget summary table, you will show the amounts requested for future years and justify/explain any change in amounts requested for future years from what was requested in year 1.
- An illustration of a budget and narrative justification is included in Appendix L of the NOFO.

# SAMPLE BUDGET TEMPLATE

**To reduce errors and expedite the review of your budget, it is highly recommended you use the SAMHSA Budget Template** to complete the Detailed Budget and Narrative Justification required for submission with your application.

- Over the years, numerous recipients requested a template to present budget information. We heard you!!
- The budget template was created with extensive recipient consultation and input and designed to avoid all the common budget preparation pitfalls.
- The SAMHSA Budget Template includes a wealth of helpful tooltips and resources to assist and guide you with preparation of your budget.
- The budget template is available at: <https://www.samhsa.gov/grants/applying/forms-resources>

**Note:** For SAMHSA to view all your budget data, you must flatten/convert the PDF to a non-editable format by **PRINTING TO PDF** before submission.

The following resources provide guidance on use of the budget template:

- [Key Features of the Budget Template](#)
- [Budget Template Users Guide](#)
- [Budget Review Checklist](#) (For review of your Detailed Budget before submission)

# AVOIDING COMMON ISSUES WITH THE SF-424A

- **“SECTION D - FORECASTED CASH NEEDS”** column **“Total for 1st year”** line **“15. TOTAL”** **MUST EQUAL** **“SECTION A - BUDGET SUMMARY”** subsection **“New or Revised Budget”** column **“Total (g)”** line **“5. Totals”** amount.
- **“SECTION B – BUDGET CATEGORIES”** column **“Total (5)”** line **“K. TOTALS”** **MUST EQUAL** **“SECTION A -BUDGET SUMMARY”** subsection **“New or Revised Budget”** column **“Total (g)”** line **“5. Totals”** amount.
- The number of years indicated in **“SECTION E – BUDGET ESTIMATES OF FEDERAL FUNDS....”** subsection **“FUTURE FUNDING PERIODS (YEARS)”** **MUST** correlate with the number of years based on the **“Start Date”** and **“End Date”** in section **“17. Proposed Project”** on the SF 424. Enter data for the first budget period in Section D and enter future budget periods in Section E. Please refer to the Notice of Funding Opportunity (NOFO) for additional guidance.



# SAMPLE SF-424A (MATCH NOT REQUIRED)

Section	Direction for Completion
Section A – Budget Summary	On Row 1 input: “ <b>NOFO#-Federal</b> ” (e.g. XX-19-000-Federal)
	Under Catalog of Federal Domestic Assistance Number (b), Enter the <b>CFDA#</b> from the 1 <sup>st</sup> page of the NOFO
	Use the “ <b>New or Revised Budget</b> ” section for New Applications
	Complete only Column “ <b>Federal (e)</b> ” under the “ <b>New or Revised Budget</b> ” Header
	Totals in Section A: Column Total for Federal (e) and Total (g) <b>must match</b>
Section B – Budget Categories	Section A totals [Federal (e) and Total (g)] <b>must match</b> Section B total.

# SAMPLE SF-424A (MATCH NOT REQUIRED)

Section	Direction for Completion
Section C – Non-Federal Resources	<b>Section C is not applicable</b> (match not required)
Section D - Forecasted Cash Needs	Section D is for the <b>1<sup>st</sup> Federal</b> year of funding only (match not required). Show funds allocation <b>PER Quarter</b>
	All totals for Row 13 (Federal) and Row 15 [Total (sum of lines 13 and 14)] should match (this should also match sections <b>A, B &amp; D</b> ).
	Section D – Forecasted Cash Needs. Federal (line 13) amount must equal Section A Budget Summary and Section B Budget categories federal funding. Ensure that Section D “Total” amount = Section A and Section B Totals.
Section E - Budget Estimates of Federal Funds Needed For Balance of the Project	Section E is for the future budget period (year 2)
	Federal funds needed for 2 <sup>nd</sup> s budget period in column (b) First
	Federal funds needed for 3 <sup>rd</sup> budget period (c) Second
	Federal funds needed for 4 <sup>th</sup> budget period (d) Third
	Federal funds needed for 5 <sup>th</sup> budget period (e) Fourth

# KEY PERSONNEL

1. The Key Personnel are the Project Director (PD) at 100% level of effort (LOE)/1.0 FTE and the Evaluator with at least a 50% LOE (0.5 FTE).
  - a) List both positions in your detailed budget (even if funded in-kind).
  - b) Provide the PD & Evaluator resumes and job/position descriptions.
2. List the Principal Investigator (PI) or PD to be designated as “Contact” in section 8f and reflect their commons ID in Field #4 of the SF-424. Either the PI or the PD can be designated as “Contact” in eRA to take actions and receive notifications **but not both**.
3. If the PD position is being filled by a contractor/consultant, you must provide a copy of the formal written agreement tor that specifies the official relationship and addresses performance of all the required duties and responsibilities.

# INDIRECT COST RATE AGREEMENT OR COST ALLOCATION PLAN

- Ensure that you submit your organization's current negotiated Indirect Cost (IDC) rate agreement or cost allocation plan with HHS or any other federal agency which required to support the charge of indirect costs.
- If your organization is opting to use 10% of Modified Total Direct Costs (MTDC), then a clear statement must be made in your IDC narrative as follows: "XYZ Organization elects to use the de minimis rate of 10 percent of modified total direct costs (MTDC)".
- Ensure that you accurately calculate the MTDC base to which your IDC rate is applicable.
- Include calculations to show how you arrived at your IDC base and IDC total.

# FUNDING LIMITATIONS/RESTRICTIONS

Refer to the program specific Funding Restrictions/Limitations in section IV and the Standard Funding Restrictions in Appendix I of NOFO, as well as to [45 CFR Part 75](#), for applicable administrative requirements and cost principles.

**The funding restrictions for this project are as follows:**

- No more than 20 percent of the total award for the budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in any required data collection follow-up.

Your proposed budget must adhere to the funding limitations/restrictions specified in Section IV-5 of your NOFO. Include a narrative and separate budget for each year of the grant that shows the dollar amount and the percent of the total grant award that will be used in the area where there is a limitation. Refer to the sample in Appendix L (SAMHSA Budget Template -> Sample Budget – NON-MATCH) of your NOFO for an example of how this should be presented.

Recipients should maintain adequate documentation of which expenses correspond to the funding limitations/restrictions and the percent of the total grant award that will be used in each area where there is a limitation.

# Questions?

## **Program/eligibility questions?**

Center for Mental Health Services (CMHS),  
SAMHSA, Dawnielle Tillman  
(240) 276-1572

[ACTMonitoringTeam@samhsa.hhs.gov](mailto:ACTMonitoringTeam@samhsa.hhs.gov)

## **Fiscal/budget related questions?**

Office of Financial Resources, Division of Grants  
Management, SAMHSA  
(240) 276-1400

Email: [FOACMHS@samhsa.hhs.gov](mailto:FOACMHS@samhsa.hhs.gov)

## **Review process/application status questions?**

Office of Financial Resources, Division of Grant  
Review, SAMHSA  
(240) 276-0135

Email: [Catherine.naeger@samhsa.hhs.gov](mailto:Catherine.naeger@samhsa.hhs.gov)

## **Problems submitting your application on Grants.gov?**

Contact the Grants.gov Helpdesk:

Email: [support@grants.gov](mailto:support@grants.gov)

Phone: 1-800-518-4726 (1-800-518-GRANTS)

## **eRA Commons Technical Questions?**

Contact the eRA Service Desk

[Web Support](#)

[Submit a Web Ticket](#) (preferred method of contact)

Toll-Free: 1-866-504-9552

Phone: 301-402-7469 (Press 4 for SAMHSA Grantees)

Hours: Mon-Fri, 7 a.m. to 8 p.m. EST  
(closed on federal holidays)

# Thank you.

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

If you have any questions, please contact:

Dawnielle Tillman, Public Health Advisor

Center for Mental Health Services

Substance Abuse and Mental Health Services Administration

(240) 276-1572

Email: [ACTMonitoringTeam@samhsa.hhs.gov](mailto:ACTMonitoringTeam@samhsa.hhs.gov)

[www.samhsa.gov](http://www.samhsa.gov)

1-877-SAMHSA-7 (1-877-726-4727) • 1-800-487-4889 (TDD)