

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### Center for Substance Abuse Treatment; Notice of Meeting

Pursuant to Public Law 92-463, notice is hereby given that the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) National Advisory Council will meet on July 16, 2015, from 3:00 p.m.–4:00 p.m. (EDT). The meeting will be closed to the public.

The meeting will include discussion and evaluation of grant applications reviewed by Initial Review Groups, and involve an examination of confidential financial and business information as well as personal information concerning the applicants. Therefore, the meeting will be closed to the public, as determined by the SAMHSA Administrator, in accordance with Title 5 U.S.C. 552b(c)(4) and (6) and (c)(9)(B) and 5 U.S.C. App. 2, Section 10(d).

The meeting will be held virtually. Meeting information and a roster of Council members may be obtained either by accessing the SAMHSA Council Web site at: <http://www.samhsa.gov/about-us/advisory-councils/csat-national-advisory-council> or by contacting LCDR Holly Berilla.

*Council Name:* SAMHSA's Center for Substance Abuse Treatment; National Advisory Council.

*Date/Time/Type:* July 16, 2015, 3:00 p.m.–4:00 p.m. EDT, Closed.

*Place:* Virtual—Teleconference.

*Contact:* LCDR Holly Berilla, Designated Federal Official, CSAT National Advisory Council, 1 Choke Cherry Road, Rockville, Maryland 20857 (mail), Telephone: (240) 276-1252, Fax: (240) 276-2252, Email: [holly.berilla@samhsa.hhs.gov](mailto:holly.berilla@samhsa.hhs.gov).

**Summer King,**

*Statistician, SAMHSA.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Substance Abuse and Mental Health Services Administration

#### National Registry of Evidence-Based Programs and Practices

**AGENCY:** Substance Abuse and Mental Health Services Administration (SAMHSA), HHS.

**ACTION:** Notice regarding SAMHSA's NREPP: Redesign of NREPP.

**SUMMARY:** The mission of SAMHSA is to reduce the impact of substance abuse and mental illness on America's communities. Established in 1992, the agency was directed by Congress to target effective substance abuse and mental health services to the people most in need, and to translate research in these areas more effectively and more rapidly into the general health care system. NREPP is a key public resource SAMHSA has developed to help meet this directive. This notice announces the redesign of NREPP to better align the registry with the standards and processes of other evidence-based repositories. A re-launch of the Web site with revised content is anticipated in late fall/early winter 2015.

The notice explains the changes in how programs and practices will be identified for NREPP, how submissions will be screened and reviewed, and provides guidance on accessing updated information on the NREPP site. Potential applicants should be aware that this notice includes updated information relating to the eligibility of interventions for inclusion in NREPP and changes in the program and practice review process that supersedes guidance provided in earlier **Federal Register** notices.

#### FOR FURTHER INFORMATION CONTACT:

Carter Roeber, Ph.D., Social Science Analyst, Center for Behavioral Health Statistics and Quality, SAMHSA, 1 Choke Cherry Road, Room 2-1050, Rockville, MD 20857, telephone 240-276-1488.

#### SUPPLEMENTARY INFORMATION:

#### Advancing Evidence-Based Programs and Practices Through Improved Decision Support Tools: Reconceptualizing NREPP

##### Introduction

SAMHSA's NREPP is an evidence-based repository and review system designed to provide the public with reliable information about behavioral health interventions in the areas of mental health and substance abuse. Programs and practices that are accepted for inclusion in NREPP undergo a review process that provides information on the quality of research and the magnitude and direction of program or practice impact on individual outcomes. Materials for dissemination are reviewed to determine the type and extent of information available to support implementation. The results of these reviews are published on the NREPP Web site (<http://nrepp.samhsa.gov>).

It should be noted that inclusion in NREPP indicates that some, but not

necessarily all, of the evidence for a program or practice has been reviewed. In some cases, the quality of the research supporting the program or practice may have been determined to be poor or insufficient to earn a rating. Inclusion in NREPP does not constitute endorsement of an intervention as effective by SAMHSA. Moreover, since NREPP has not reviewed all behavioral health interventions, the use of NREPP as an exclusive or exhaustive list of interventions is not appropriate. Policymakers and funders in particular are discouraged from limiting providers and/or potential grantees to selecting exclusively from among NREPP interventions and from funding NREPP interventions regardless of the ratings the interventions receive.

This notice announces changes to (1) the process for identifying new programs and practices for NREPP review, (2) the process for announcing open submission periods, (3) the minimum requirements to be considered for NREPP review, and (4) the review process. This notice also announces the intent to re-review currently posted NREPP programs and practices to comport with new review criteria and ratings. The re-review of programs and practices currently posted will take place over the course of the next several years, depending on available resources. A re-launch of the NREPP Web site will take place in phases and the first phase is planned for late fall/early winter of 2015.

#### Identifying New Programs and Practices for NREPP

Open submissions periods, during which applicants may submit materials for review, will continue to be used to identify new programs and practices for review (see below). Programs and practices addressing specific SAMHSA priorities may also be identified by SAMHSA or through environmental scans (including literature reviews, focus groups, public input, and interviews), as time and resources permit. Programs and practices related to priority areas may be reviewed before programs and practices identified through the open submission period. SAMHSA will be consulting with subject matter experts and leadership in underserved groups and populations, including American Indian/Alaska Native Tribes, regarding ways to incorporate traditional and culturally-specific interventions into NREPP, in order to better meet the needs of groups whose efforts to promote behavioral health may not have been routinely evaluated. Innovative, but perhaps less rigorously tested, programs and