

January 13, 2025

Substance Abuse and Mental Health Services Administration
Department of Health and Human Services
Attention: 2024-29359

Submitted online via www.reginfo.gov/public/do/PRAMain

RE: Agency Information Collection Activities: Submission for OMB Review; Comment Request (2024-18316)

On behalf of National Council for Mental Wellbeing (National Council), thank you for the opportunity to comment on the Substance Abuse and Mental Health Services Administration (SAMHSA) Proposed Project: SAMHSA Certified Community Behavioral Health Clinic—Expansion (CCBHC-E) Grant Program Evaluation, at 89 *Federal Register* (“FR”) 101021 (December 13, 2024). National Council is a membership organization that drives policy and social change on behalf of nearly 3,400 mental health and substance use treatment organizations and the more than 10 million children, adults, and families they serve. We are committed to all Americans having access to comprehensive, high-quality care that affords every opportunity for recovery and we advocate policies to ensure equitable access to high-quality services, build the capacity of mental health and substance use treatment organizations and promote a greater understanding of mental wellbeing as a core component of comprehensive health and health care.

As shared in our August 2024 comments on this project (2024-18253 at 89 FR 66427), National Council appreciates SAMHSA’s efforts in the development of CCBHC-E program data collection instruments. SAMHSA’s notice informs the public of its intent to develop and implement eleven data collection instruments and forms related to the implementation and evaluation of CCBHC E-grantees to assess how activities at the clinic level and system level affect the development and sustainability of CCBHCs and the impact of the CCBHC model on client outcomes. The proposed eleven data instruments include: a grantee survey for all grant project directors, annual interviews with all 26 grantee Government Project Officers, interviews with representatives from 50 organizations that support individuals with lived experience, interviews with a sample of 120 grantee project directors during option years one and three, interviews with 50 selected clinic leadership, interviews with 50 frontline staff during site visits, interviews with representatives of CCBHC partners (including opioid treatment programs and designated collaborating organizations), focus groups with people 18 and older who receive CCBHC services, focus groups with eight to ten youth who receive CCBHC services, focus groups with parents and caregivers of youth who receive CCBHC services, and in-person interviews with a sample of clients who receive CCBHC services.

National Council generally affirms support for the proposed data collection tools for the CCBHC E-grantee program as such information on CCBHC services will provide valuable context for the evaluation

of the expansion grant program. Simultaneously, we also urge the importance of reducing the administrative burden among the CCBHC leadership, staff, and clients. National Council recommends that participants are able to leave the survey tools and come back later to complete them and we suggest that to ensure all data that is required to be answered in the tools is essential for the benefit of the program and participants served. Moreover, in engaging clients, clients should have the opportunity to opt-out of data collection if it is not directly needed for diagnosis, management, and treatment of the problem they're requesting services and treatment for. We have also gotten feedback from our members that understanding specifically how data will be used for continuous improvement can be helpful when completing the data collection.

Additionally, providing these interviews in other languages will help the evaluation of the CCBHC program's cultural and linguistic competencies, which is a requirement of the CCBHC criteria, for individuals whose primary language is not English. Furthermore, during interviews with frontline CCBHC staff, National Council recommends interviewing staff members working in medical services, peer-delivered services, and continuous quality improvement, and population health. These areas often see the most change when CCBHC funding is implemented.

Finally, for data collection with relevant partners of CCBHCs, National Council recommends interviews with local hospitals and Veterans Affairs offices or other relevant providers in their service area, as these are often the most challenging partnerships for CCBHCs. Such interviews can provide helpful insights into partnership strategies in moving the CCBHC model forward.

National Council appreciates the opportunity to provide these comments. We welcome any questions or further discussion about the recommendations described here. Please contact Reyna Taylor at ReynaT@thenationalcouncil.org. Thank you for your time and consideration.

Sincerely,



Reyna Taylor
Senior Vice President, Public Policy & Advocacy
National Council for Mental Wellbeing