7. Coordination and cooperation

(a) Within NIMH.—In reviewing State plans for use of formula grant funds NIMH regional office staff will be concerned with the extent to which the plan is consistent with the State's plan for comprehensive mental health services. Regulations also require that the State plan for the construction of comprehensive mental health centers be consistent with the comprehensive State planning. The use of funds for initial support for staff of mental health centers must be described in the State's plan for community mental health

services.

(b) With other units in the department or agency.—The centralized administrative responsibility of the Office of Grants Management in the Bureau of State Services (CH), PHS, integrates the administrative aspect of the program. The responsibility of the regional health directors for approval of all State plans for use of Public Health Service grant-in-aid programs provides a substantial coordinating effect. The accessibility of staff of other component agencies of the Department in the regional office facilitates collaboration and cooperation in the administration of this grant program and other programs of the Department of Health, Education, and Welfare.

(c) With other Federal departments or agencies.—Coordination with other Federal departments is accomplished through representation of the Veterans' Administration and the Department of Defense on the

National Advisory Mental Health Council.

(d) With State agencies.—Staff of NIMH works directly with State mental health authorities to give professional and technical assistance in the development of comprehensive State community mental health

programs.

(e) With local governments or communities.—Institute staff also works with local governments and local communities, usually with the collaboration or knowledge of State agency staff, in the development of community mental health programs.

(f) With foreign governments.—This program has no contact with

foreign governments.

(g) With nonprofit organizations.—NIMH personnel offer professional and technical assistance to both public and voluntary agencies with respect to program development.

(h) With business enterprises.—In the administration of this program

there is no contact with business enterprises.

(i) Not applicable.

8. Laws and regulations

Public Health Service Act, section 314, as amended. Department of Health, Education, and Welfare Appropriations Act of 1966. The National Mental Health Act, Public Law 487, 79th Congress, approved July 3, 1946, amended section 314(c) of the Public Health Service Act to provide for grants to States. Section 314(d) of the Public Health Service Act as amended (42 U.S.C. 246(d)) cites the basic allotment factors of population, financial need, and extent of the mental health problems. Section 18, Public Law 896, 84th Congress, approved August 1, 1956, extended the mental health grant to Guam. Sections 51.1(c), 51.1(i), and 51.2(d) of the Public Health Service Regulations (42 CFR) define these factors and section 51.3(d) prescribes the range