Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth, and Families in American Indian/Alaska Native (AI/AN) Communities Circles of Care Cohort VII Grantees

SAMHSA's Center for Mental Health Services (CMHS) collects data from Circles of Care (COC) VII Grantees on their Infrastructure Development, Prevention, and Mental Health Promotion (IPP) activities. Every quarter, grantees must report on these *four* IPP indicators in SAMHSA's Performance Accountability and Reporting System (SPARS):

o **Workforce Development (WD2):** 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.

o **Partnerships/Collaborations (PC2):** The number of organizations collaborating/coordinating/sharing resources with other organizations as a result of the grant.

o **Organizational Change (OC1):** The number of organizational changes made to support the improvement of mental health-related practices or activities that are consistent with the goals of the grant.

o **Accountability (A6):** The number of youth/young adult consumers or family members who are involved in ongoing mental health-related evaluation oversight, data collection, and/or analysis activities as a result of the grant.

We created this program guidance document to help COC VII Grantees meet their IPP data reporting requirements in SPARS. The guide provides information on:

o IPP reporting requirements and deadlines
o IPP reporting tips and resources
o Program guidance and examples for each IPP indicator
o How to submit IPP results in SPARS

IPP Reporting Requirements and Deadlines

Grantees must report IPP data in SPARS during each quarter of the Federal fiscal year (FFY) calendar (October 1, 2017–September 30, 2018), even if there are no new IPP results to report for a given indicator. For new grantees, data submission starts in the second quarter after the beginning of the grant. Once a grantee submits its IPP data, its government project officer (GPO) will review each indicator and either approve the results or request revisions. Grantees have until midnight of the grantee revision deadline (see "Grantee Deadline to Revise Data" column in table 1) to submit revisions. After this deadline, the system does not allow data entry, GPO reviews, or grantee revisions.

Table 1. Quarterly Reporting Periods and Deadlines for Submitting IPP Results

Quarter	Quarterly Reporting Period	Grantee Deadline to Submit Data	GPO Review Deadline	Grantee Deadline to Revise Data	System Lock Date*
1st	October 1–December 31, 2017	January 31, 2018	February 28, 2018	March 31, 2018	April 1, 2018
2nd	January 1–March 31, 2018	April 30, 2018	May 31, 2018	June 30, 2018	July 1, 2018
3rd	April 1–June 30, 2018	July 31, 2018	August 30, 2018	September 30, 2018	October 1, 2018
4th	July 1–September 30, 2018	October 31, 2018	November 30, 2018	December 31, 2018	January 1, 2018

* System does not accept data entry, GPO reviews, or grantee revisions after this date.

IPP Reporting Tips and Resources

o Grantee must report each IPP result in the FFY quarter when it *completed* that activity. Do not enter information on activities that are in progress.

o CMHS understands that not every indicator will have a completed activity every quarter. If you have no activity to report for an indicator, however, you must enter a **No New Result** record in SPARS. To do so, select "If there were no new results, check this box" on the Result Record, then click the **Save – Add New** or **Save – Finish** button to complete the entry.

Result Record

(OMB Number: 0930-0285; Expiration Date: 03/31/2020)   [Save - Add New] [Save - Finish] ⬅
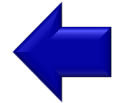
> **INSTRUCTIONS:** Enter one result per indicator on this data entry screen. Please do not use the same result name twice in one federal fiscal year quarter[1]. Note: Screen will refresh when you select the date range or indicator.
>
> Grant Number: SM000003 (CMHS Test Grant 3)
>
> Date Range Result Was Completed: [FFY 2017 Quarter 3 (Apr. 1 2017 – Jun. 30 2017) ▼]
>
> Indicator: [Policy Development - PD1 ▼]
>
> PD1 - The number of policy changes completed as a result of the grant.
>
> [1] FFY QUARTER 1 (10/1– 12/31); FFY QUARTER 2 (1/1– 3/31); FFY QUARTER 3 (4/1– 6/30); FFY QUARTER 4 (7/1– 9/30)
>
> If there were no new results, check this box: ☑
>
> Result Name: No New Result

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o For more information on how to submit IPP results, review the *CMHS IPP How to Enter Results Guide for Grantees.* This guide and other resources are in the CMHS section of the SPARS Resource Library.

o Register for upcoming IPP trainings or view recorded trainings by navigating to the SPARS Training page.

o Contact your GPO for additional guidance about your IPP indicators. The **SPARS Help Desk** is also available to provide technical support and answer questions about SPARS user accounts, passwords, or submitting data to SPARS. Call the SPARS Help Desk at 1 (855) 322-2746 (toll free) or email SPARS-Support@rti.org.

Workforce Development (WD2)

WD2 is the number of people in the mental health and related workforce trained in mental health-related practices or activities that are consistent with the goals of the grant.

The intent of WD2 is to capture information on workplace improvements in addressing mental health conditions that are consistent with the grant's goals.

Definitions of Key Terms

o   **Mental health-related:** Mental health or the population of people with or at risk of mental health condition(s); also includes people with co-occurring mental health and substance use disorders
o   **Mental health-related practices:** Topics related to the broad range of services and supports aimed at reducing the impact of mental illness and promoting wellness for children and families
o   **Mental health workforce:** People providing mental health prevention, treatment, rehabilitation, or recovery services
o   **Related workforce:** People providing ancillary support services to people who have—or are at risk for developing—mental health condition(s)
o   **Training:** Process, event, or activity guided by a curriculum (such as a syllabus, agenda, training manual), within a structured timeframe, and with an identified trainer or training method

Examples of Trainings

o   Wraparound facilitation
o   Mental Health First Aid
o   Cognitive behavioral therapy

o   Trauma-informed care
o   Case management or care coordination
o   Peer support service

Guidelines for Entering WD2 Results

On the Result Form, enter the following information in the quarter when the workforce received and completed training.

o   **Result Name:** Enter the name or title of the training provided.
o   **Result Description:** Enter a two- to three-sentence description of those trained, the type of training provided, and the type of skills learned.
o   **Result Number:** Enter the total number of mental health workforce members trained.

If you have no activity to report for WD2, you must record this by checking "If there were no new results, check this box" on the Result Form.

Examples of WD2 Results

Scenario 1.

o   **Result Name:** Systems of Care 101 Training
o   **Result Description:** Twenty people, including tribal mental health counselors, case workers, chemical dependence counselors, child welfare workers, and peer support workers, attended a 3-hour training on Systems of Care 101 provided by John Doe.
o   **Result Number:** 20

Scenario 2.

o   **Result Name:** Wraparound Conference
o   **Result Description:** Five tribal case managers on the COC coordinating committee attended a 3-day Wraparound Conference provided by the National Wraparound Initiative. Each case manager received 24 hours of continuing education credit.
o   **Result Number:** 5

Who to Count

o   **Count** people who are mental health personnel or involved in the mental health-related workforce who attended workforce development trainings conducted because of the COC grant. Include people who are in training to become part of the workforce.
o   **Do not count** people who are not part of the mental health workforce. For example, **do not count:**
   –   Landlords
   –   Bus drivers
   –   Friends
   –   Employers
   –   Roommates
   –   Family members
o   **Do not count** the number of trainings.

Partnerships/Collaborations (PC2)

PC2 is the number of organizations collaborating, coordinating, or sharing resources with other organizations because of the grant.

The intent of PC2 is to report information on new relationships and partnerships developed because of the grant.

Definitions of Key Terms

o **Organizations:** Federal, state, local, and tribal agencies; programs; departments; nonprofit agencies, grassroots organizations, or other entities providing mental health and related services
o **Collaborating or coordinating:** A process where two or more organizations work together toward common goals
o **Sharing resources:** Allowing others to use available resources for improving outcomes or reaching goals. Resources include funding, personnel time, facilities, equipment, and information.

Examples of Organizations

o Young adult- or family member-run organizations
o Schools
o Local Indian Health Service clinics
o Committees

o Coalitions
o Advisory boards
o Task forces
o State Department of Mental Health
o Tribal child welfare program

Guidelines for Entering PC2 Results

On the Result Form, enter the following information in the quarter when the collaboration(s) took place.

o **Result Name:** Enter the name or type of collaboration.
o **Result Description:** Enter the names of the organizations and a description of the work or activities they collaborated on.
o **Result Number:** Enter the total number of organizations that participated in the collaboration (as the grantee, do not include yourself).

If you have no activity to report for PC2, you must record this by checking "If there were no new results, check this box" on the Result Form.

Example of PC2 Result

o **Result Name:** Collaboration between Tribal Health Department and Tribal Education Department
o **Result Description:** The Tribal Education Department provided space in the Tribal School for Tribal Health Department staff to hold monthly community meetings and focus group discussions.
o **Result Number:** 2

What to Count

o **Ask:** What new relationships did you create because of the grant?
o **Count** the number of organizations in the collaboration, not the number of resources shared.
o Only **count** new collaborations developed because of the grant, not collaborations existing before the grant award.
o If you add a new organization to an existing collaboration, only **count** the new organization.
o **Count** the number of organizations that came together because of the grant, even if the grantee is not involved in the collaboration.
o If one organization shares several resources, **count** the organization only once.
o If one organization collaborates in several different partnerships, **count** that organization once.
o **Count** formal interagency agreements—memoranda of understanding (MOU) and memoranda of agreements (MOA)—as well as informal agreements intended to share resources.
o **Do not count** organizations reported in previous quarters.

Organizational Change (OC1)

OC1 is the number of organizational changes made to support improvement of mental health-related practices or activities that are consistent with the goals of the grant.

The intent of OC1 is to capture information on organizational changes made to support improvement of mental health-related practices or activities consistent with the grant's goals.

Definitions of Key Terms

o **Organizations:** State, local, and tribal agencies; bureaus; departments; or other major entities providing mental health and related services
o **Organizational change:** Something created, eliminated, or altered within or between organizations
o **Improvement:** To bring into a more desirable condition consistent with grant program goals
o **Mental health-related:** Mental health or the population of people with or at risk of mental health condition(s); also includes people with co-occurring mental health and substance use disorders
o **Practices and activities:** Treatment, rehabilitation, prevention, mental health-related promotion, and supportive services

Examples of Organizational Changes

o Creation, expansion, integration, or elimination of programs, offices, divisions, or departments
o Creation or elimination of one or more position(s)
o Creation of a new reporting structure or major policy to promote the goals of the grant
o Permanent changes in staff composition (for example, substantial hiring of young adults or family members, or substantial increases in racial/ethnic/cultural diversity of staff)

Guidelines for Entering OC1 Results

On the Result Form, enter the following information in the quarter when you completed the organizational change.

o **Result Name:** Enter the name or type of organizational change.
o **Result Description:** Enter a description of the organizational change and how the change will improve practices or activities.
o **Result Number:** Enter the number "1" for each organizational change.

If you have no activity to report for OC1, you must record this by checking "If there were no new results, check this box" on the Result Form.

Examples of OC1 Results

Scenario 1.

o **Result Name:** Creation of new policy for youth-driven care standards
o **Result Description:** Agency adopted a new policy for youth-driven care standards that outlines procedures for involving youth and young adults in making decisions and setting goals for their own treatment plan.
o **Result Number:** 1

Scenario 2.

o **Result Name:** Tribal resolution to create a permanent tribal youth wellness advisory board
o **Result Description:** On October 15, 2017, the tribal council passed a resolution creating a permanent tribal youth wellness advisory committee, which COC staff will facilitate. The resolution is consistent with goal number 2 in our COC grant application.
o **Result Number:** 1

What to Count

o **Count** the number of organizational changes completed during the quarter.
o **Count** one organizational change per result record.
o **Do not count** changes that are in the planning stages.

Accountability (A6)

A6 is the number of youth/young adult consumers or family members who are involved in ongoing mental health-related evaluation oversight, data collection, and/or analysis activities because of the grant.

The intent of A6 is to capture information on young adult consumers or family members who are involved in mental health-related evaluation oversight, data collection, and/or analysis activities because of the grant.

Definitions of Key Terms

o **Evaluation oversight:** Process and methodologies used in the assessment of programs, policies, personnel, products, and organizations to improve their overall effectiveness and meet the grant's goals
o **Data collection:** Methods and procedures of collecting, recording, and preparing information that may be either quantitative or qualitative
o **Analysis:** Process of gathering, modeling, and transforming data with the goal of highlighting useful information, suggesting conclusions, and supporting decision making
o **Consumers:** Individuals who currently receive mental health services, have received mental health services in the past, or are eligible to receive mental health services but choose not to
o **Family members:** The immediate or extended family, tribal clan, or other adults who have caregiver responsibility for a youth/young adult consumer
o **Mental health-related:** Mental health or the population of people with or at risk of mental health condition(s); also includes people with co-occurring substance use disorders

Guidelines for Entering A6 Results

On the Result Form, enter the following information in the quarter when you provided and completed the evaluation activity.

o **Result Name:** Enter the program for which you are evaluating, collecting, or analyzing data.
o **Result Description:** Identify the number of youth/young adults or family members involved and provide a description of their role and the type of involvement the individuals engaged in (for example, oversight, data collection, analysis).
o **Result Number:** Enter the total number of young adults or family members, not the number of activities.

If you have no activity to report for A6, you must record this by checking "If there were no new results, check this box" on the Result Form.

Examples of A6 Results

Scenario 1.

o **Result Name:** Analysis of needs assessment data
o **Result Description:** Six young adults who are part of the advisory board helped analyze the needs assessment data by providing feedback and a youth-centered interpretation to the evaluation team's data review.
o **Result Number:** 6

Scenario 2.

o **Result Name:** Youth-conducted peer interviews
o **Result Description:** The evaluation team trained two young adults to conduct data collection using a structured key-informant interview. Each young adult interviewed four youth/peers and submitted the interview data to the evaluation team.
o **Result Number:** 2

What to Count

o **Count** the number of youth/young adult consumers or family members involved in the process of evaluation oversight, data collection, and analysis activities.
o If one youth/young adult or family member is involved in several activities, **count** that person only once.
o **Do not count** the number of youth/young adults and family members who are involved as subjects of the evaluation.
o **Do not count** the number of youth/young adults who completed a survey or questionnaire.
o **Do not count** the number of family members who participated in a focus group discussion.

How to Submit IPP Results in SPARS

To submit IPP results in SPARS, select **SPARS–CMHS** from the Quick Links section of the SPARS home page at https://spars.samhsa.gov.

After logging in, you will see a menu bar on the left side of the home screen. Select the dropdown menu **Data Entry** > IPP > Results List.

To submit an IPP result in SPARS, click the **Add New Result** button.