

Certified Community Behavioral Health Clinic– Expansion (Cohort 3)

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) collects data from Certified Community Behavioral Health Clinic–Expansion (CCBHC-E) Grantees, Adult and Child (Cohort 3), 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):

1. **Workforce Development Training (WD2):** The number of people in the mental health and related workforce trained in mental health–related practices and activities consistent with the goals of the grant.
2. **Partnerships/Collaborations (PC2):** The number of organizations collaborating, coordinating, and sharing resources with other organizations because of the grant.
3. **Accountability (A4):** The number and percentage of work group, advisory group, or council members who are consumers or family members.
4. **Screening (S1):** The number of individuals screened for mental health or related interventions.

This program guidance helps CCBHC-E grantees meet their IPP data reporting requirements in SPARS. The guide provides information on

- IPP reporting requirements and deadlines,
- IPP reporting tips and resources,
- Program guidance and examples for each IPP indicator, and
- 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–September 30), 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	January 31	February 28	March 31	April 1
2nd	January 1–March 31	April 30	May 31	June 30	July 1
3rd	April 1–June 30	July 31	August 30	September 30	October 1
4th	July 1–September 30	October 31	November 30	December 31	January 1

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

IPP Reporting Tips and Resources

Every quarter, grantees are required to do the following for each indicator by the due date:

1. Go to SPARS online data entry/reporting system at <https://spars.samhsa.gov/> to enter your data on the Result Record form.
2. Submit data only on *completed* activities *in the quarter* it was completed. You can access SPARS at any time to enter your quarterly IPP results by the due date listed above.
3. DO NOT enter data on activities that are *in progress*, *in planning phase*, or *pending*.
4. CMHS understands that not every indicator will have a completed activity every quarter. If you have no activity to report for an indicator, 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 form, then click the **Save - Add New** or **Save - Finish** button to complete the entry. The system will not accept a zero (0) result.
5. After you submit your data, your GPO will review and either approve, disapprove, or request revisions.
 - Contact your GPO for additional guidance about your IPP indicators.
 - For additional guidance on IPP indicators, refer to these practical resources accessible from either the SPARS Resource Library or Training Page:
 - CMHS IPP Overview of Indicators Guide,
 - CMHS IPP How to Enter Results Guide for Grantees,
 - CMHS Overview for New Grantees: Annual Goals, IPPs, and Services Overview, and
 - IPP Data Entry Clinic Recording.
 - 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 (855) 322-2746 (toll free) or email SPARS-Support@rti.org.

Workforce Development Training (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.

Definitions of Key Terms

- Mental health–related workforce: People who provide mental health prevention and treatment services and people in the related workforce who provide ancillary primary care services, mental health and behavioral health support services, and emergency care and crisis response.
- Training: A process guided by a curriculum—syllabus, agenda, training manual—within a structured time frame and with an identified trainer or training method. The goal of the training is to improve skills, knowledge, behaviors, and public awareness of mental health and substance use disorders. Workshops and educational seminars that meet this intention and definition also qualify.

Examples of Trainings

- Gatekeeper training
- Policy/crisis response protocol
- Screen procedures/protocol
- Suicide risk assessment and management
- Assessment and referral
- Suicide intervention training
- Peer educator training
- Postvention training
- General awareness training

Examples of Mental Health and Related Workforce

- Students and staff with mental health, psychological, or health education affiliation
 - School of social work
 - Nursing school
 - Medical school
 - School of public safety or emergency management
 - Athletic trainers in health department
- Campus center counselors and clinicians
- Hotline/helpline crisis line staff
- Emergency care and crisis response workers
- Peer counselors
- Student health workers
- Mental health and substance abuse providers and counselors
- Other health professionals
- Primary care (physical/student health) providers
- Policy or public safety workers
- Campus policy/safety
- Clergy/religious advisor

Guidelines for Entering WD2 Results

On the Result Record form, enter the following information in the quarter when the workforce received and completed training:

- **Result Name:** Enter the name or title of the training provided.
- **Result Description:** Enter a two- to three-sentence description of those trained, the type of training provided, and the type of skills learned.
- **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.

- **Result Name:** Suicide Awareness Training
- **Result Description:** Thirty people, including school psychologists, health technicians, student peer-support staff, and program administrators attended a 2-hour training on recognizing suicide warning signs and referral points for students at risk of suicide.
- **Result Number:** 30

Scenario 2.

- **Result Name:** Mental Health First Aid Training
- **Result Description:** Twenty people, including classroom instructors, student peer-support staff, and social workers learned more about helping a young adult experiencing a mental health or addiction challenge or crisis. The course covered typical young adult development, common mental health challenges, and an action plan for how to help.
- **Result Number:** 20

Who to Count

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

Definitions of Key Terms

- **Collaborating/Coordinating:** Process where two or more organizations work in partnership together toward a common goal.
- **Organizations:** State/local/tribal agencies, bureaus, counties, or other major subdivisions that provide behavioral health, mental health, and related services. Organizations may include consumer-, youth-, or family member–run organizations; private providers and nongovernmental organizations; schools, educational institutions, juvenile justice and foster care systems, and other child/youth serving organizations; and committees, coalitions, advisory boards, and task forces.
- **Sharing Resources:** Allowing others to use the means available to an organization to increase outcomes or attain goals. Resources may include personnel time, facilities, equipment, and information.

Guidelines for Entering PC2 Results

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

- **Result Name:** Enter the name/type of partnership.
- **Result Description:** Enter a description of the names of the organizations and on what they are collaborating.
- **Result Number:** Enter the total number of organizations that participated in the collaboration.

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.

Examples of PC2 Results

Scenario 1.

- **Result Name:** Faith-Based Taskforce
- **Result Description:** Because of the grant and during this quarter, our project met with five local area faith organizations to establish a new taskforce on suicide prevention awareness.
- **Result Number:** 5

Scenario 2.

- **Result Name:** Suicide Response Protocol Memorandum of Understanding (MOU)
- **Result Description:** Because of the grant and during this quarter, we entered an MOU with one area hospital and one local community mental health provider to conduct risk assessments and interventions for at-risk students.
- **Result Number:** 2

Who to Count

- **Ask the question** “What are the new relationships that have been created because of the grant?”
- **Count** the number of organizations in the collaboration (but do not count yourself, the grant project).
- **Count** new collaborations that only developed because of the grant. If you add a new organization to an existing collaboration, **count** only the new organization.
- **Count** the number of organizations that come together because of the grant, even if the grantee is not involved in the collaboration.
- If one organization shares several resources, **count** the organization once.
- If one organization collaborates on several different partnerships, **count** that organization once.
- **Count** formal interagency agreements, MOUs, and so on.
- **Do not count** yourself, the grant project.
- **Do not count** the number of resources exchanged or the number of meetings held.
- **Do not count** the collaborations that existed *before* the grant award.
- **Do not count** organizations that you reported in previous quarters.

Accountability (A4)

A4 is the number and percentage of work group, advisory group, or council members who are consumers or family members.

Definitions of Key Terms

- **Work groups, advisory groups, councils:** a group of individuals working toward a common goal.
- **Consumers:** Adults, older adults, children, or youth 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 do so. SAMHSA understands and respects the fact that many people who meet one or more of these criteria may choose to identify with a term other than *consumer*.
- **Family members:** Members of a consumer's immediate or extended family, family networks, or "adopted" family members (e.g., *familismo* in Hispanic culture). Family members also may be friends, coworkers, or neighbors of an adult or child/youth, or non-family caregivers of a child/youth.

Guidelines for Entering A4 Results

On the Result Form, enter the following information.

- **Result Name:** Enter the name of the work group, advisory group, or council.
- **Result Description:** Enter a two- or three-sentence description of the work group, advisory group or council, including its general purpose and membership.
- **Numerator:** Enter the total number of people who are *both* a member of a work group, advisory group, or council *and* a consumer or family member.
- **Denominator:** Enter the total number of people who are work group, advisory group, or council members.
- **Percentage:** The percentage is automatically calculated in SPARS after entering the numerator and denominator and saving the record.

If you have no activity to report for A4, you must record this by checking "If there were no new results, check this box" on the Result Form.

Example of A4 Result

- **Result Name:** Advisory Work Group Established
- **Result Description:** We have an Advisory Work Group to ensure that behavioral health services being provided locally are person-centered and sensitive to the needs of people being served. The committee consists of representatives from various service providers, with some being consumers or family members. During this quarter, 8 (numerator) of the members were consumers or family members; the total membership was 20 (denominator).
- **Numerator:** 8
- **Denominator:** 20
- **Percentage:** 40% (calculated by system)

Who to Count

- **Count** the numerator and denominator. The numerator should be *less than* or *equal to* the denominator.
- The **numerator** is the number of people who are *both* a member of a work group, advisory group, or council *and* a consumer or family member.
- The **denominator** is the total number of people who are work group, advisory group, or council members.
- **Count** the number of consumers who serve in a mental health–related position per quarter because of the grant. The consumer can be a paid worker or an unpaid volunteer.
- If the group is sustaining or ongoing, **report** the numbers each quarter while the group is in existence.
- Enter **No New Result** if you have work groups, advisory groups, or councils that do not have consumers or family members participating.

Screening (S1)

S1 is the number of people screened for mental health or related interventions.

Definitions of Key Terms

- **Screening:** The initial identification of individuals who may need a specific intervention and the screening is not for monitoring or assessment.
- **Mental health–related:** Pertaining to mental health or the population of people with or at risk of mental illness, including people with co-occurring substance use disorders. When people with or at risk of mental illness are the population of focus, a wide array of subject areas may be considered to be mental health–related by virtue of the connection with this population. Under such circumstances, mental health–related areas may include, but are not limited to, those pertaining to physical health, co-occurring disorders (mental illness and substance abuse disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, and financial well-being.
- **Interventions:** Treatment, rehabilitation, prevention, mental health–related promotion, and supportive services.

Examples of Screenings

- Patient Health Questionnaire 2, 3, or 9
- Columbia Suicide Severity Rating Scale – *Screeener Version*
- Ages & Stages Questionnaire (ASQ)
- Behavioral Health Screen

Examples of Interventions

- Evidence-based practices
- Consumer-operated services (such as family-driven or youth-guided services)
- Culturally specific practices
- Suicide prevention programs
- Rural telehealth programs

Guidelines for Entering S1 Results

On the Result Form, enter the following information in the quarter in which you screened the individual.

- **Result Name:** Enter the name/title of the screening provided.
- **Result Description:** Enter a brief description of the individuals who received the screening and the type of screening provided.
- **Result Number:** Enter the total number of individuals screened.

If you have no activity to report for S1, you must record this by checking “If there were no new results, check this box” on the Result Form.

Example of S1 Result

- **Result Name:** Patient Health Questionnaire–9 (PHQ-9)
- **Result Description:** As a result of the grant, during this quarter we administered the PHQ-9 to 116 individuals at participating primary care practices.
- **Result Number:** 116

Who to Count

- **Count** the number of individuals screened for initial identification of a need for intervention.
- **Do not count** the number of interventions.
- **Do not count** ongoing monitoring to assess individuals’ progress and status.

SPARS Program Guidance on Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis (CHR-P) Grantees

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>.

Welcome to SPARS!
SAMHSA's Performance Accountability and Reporting System

The Substance Abuse and Mental Health Services Administration (SAMHSA) is proud to launch the SPARS website. SPARS is a new online data entry, reporting, technical assistance request, and training system to support grantees in reporting timely and accurate data to SAMHSA.

[Learn More](#)

Announcements

- No Help Desk Services on January 17, 2018 Due to Inclement Weather
- No Help Desk Services on January 17, 2018 Due to Inclement Weather
- New SPARS CSAP Features and Programs Released on January 8, 2018
- On January 8, 2018, SPARS released new CSAP features to help grantees and POs enter and review data.
- New SPARS CSAP Features Released on December 11, 2017

Quick Links

- SPARS-CSAT
Enter data for Center for Substance Abuse Treatment grants.
- SPARS-CMHS**
Enter data for Center for Mental Health Services grants.
- SPARS-CSAP
Enter data for Center for Substance Abuse Prevention grants.

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**.

SPARS Center for Mental Health Services
[Home](#)

IPP

Home > Data Entry > IPP Print

My Grants

Admin

Data Entry

- Annual Goals
- Services
- IPP**
- Required Indicators
- Results List**

Data Download

IPP
(OMB Number: 0930-0285; Expiration Date: 02/28/2022)

CMHS has developed indicators to collect performance data about grantees' Infrastructure Development, Prevention & Mental Health Promotion (IPP) activities. All grantees conducting IPP activities are required to collect data and submit data to the SPARS CMHS system on a quarterly basis. Data collection requirements are program-specific based on the Request for Application and the activities conducted within each program.

SPARS Program Guidance on Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis (CHR-P) Grantees

To submit an IPP result in SPARS, click the **Add New Result** button to access the **Result Record**. The fields you need to complete for each indicator are shaded in yellow.

SPARS Center for Mental Health Services
Home

Results List

Home > Data Entry > IPP > Results List

Print | Cancel Save Previous Next

View Glossary

ADD/FIND RESULTS
(OMB Number: 0930-0285; Expiration Date: 02/28/2022)

ADD NEW RESULT
To enter a new result, select the Program and Grant (if applicable) and then click on the Add New Result button.

Program: IPP Test

Grant: IPPTTEST2016 - Westat Test **Add New Result**

FIND RESULTS
To search results that need an action by you or to review previously entered results, complete the selection criteria below and click on the Find Results button.

If you have no activity to report for an indicator, 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: 02/28/2022)

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 quarter¹. Note: Screen will refresh when you select the date range or indicator.

Grant Number: IPPTTEST2016 (IPP TEST 2016)

Date Range Result Was Completed: FFY 2020 Quarter 3 (Apr. 1 2020 – Jun. 30 2020)

Indicator: Workforce Development - WD3

WD3 - The number of people credentialed/certified to provide mental health-related practices/activities that are consistent with the goals 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