Center for Substance Abuse Prevention (CSAP)

Division of State Programs–Management Reporting Tool (DSP-MRT)

Question-by-Question Instruction Guide
for
Strategic Prevention Framework–Partnerships for Success (SPF-PFS)
and
Sober Truth on Preventing Underage Drinking (STOP Act) Grantees

Contents

Introduction

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) Division of State Programs (DSP) requires grantees to complete work plans, progress reports, and annual outcomes throughout the life of their grant. Grantees use SAMHSA's Performance Accountability and Reporting System—or SPARS—to complete the Division of State Programs–Management Reporting Tool (DSP-MRT). The DSP-MRT captures information about grantees' project planning and progress in implementing their projects. Work plans include your Disparity Impact Statement (DIS), Strategic Plan, and Evaluation Plan. Annual outcomes include Evidence-Based Practices, Programs, and Policies (EBPPPs) and community outcomes.

This *Question-by-Question Instruction Guide* provides guidance for successfully completing the DSP-MRT for Partnerships for Success (PFS) and Sober Truth on Preventing Underage Drinking Act (STOP Act) grantees. Please reference the "Guidance and Related Definitions" column throughout this document for information about what to report for each data item. **SAMHSA requires that grantees complete the items marked with an asterisk throughout this document.** In SPARS, use the tabs at the top of the screen to navigate to each section of the report. Select "View" to open each subsection of the report.

PFS Reporting Due Dates

Grantees must submit Progress Report data through SPARS 30 to 90 days after the end of each reporting period, depending on the cohort. The tables below list progress report due dates by PFS cohort. Check with your Project Officer for work plan due dates.

PFS Reporting Deadlines for grantees funded in 2016 and earlier

Quarterly Report	Reporting Period	Due Date
1	October 1–December 31	January 31
2	January 1–March 31 Disparities data required	April 30
3	April 1–June 30	July 31
4	July 1–September 30 Annual Outcomes and Disparities data required	October 31

PFS Reporting Deadlines for grantees funded in 2018 and later

Annual Report	Reporting Period	Due Date
1	October 1–September 30 Disparities data required	December 31
	Annual Outcomes required*	October 31*

* The EBPPP and Community-Level Outcome Data module in the Annual Outcomes tab of the Progress Report does not close. PFS grantees funded in 2018 and later can enter these data as they become available to meet the October 31 deadline. Grantees should enter annual outcomes data in SPARS by **October 31**, but not submit their data until they complete the full Progress report.

STOP Act Reporting Due Dates

Grantees must submit Progress Report data through SPARS 1 month after the end of each reporting period. The tables below list progress report due dates by STOP Act cohort. Check with your Project Officer for Work Plan due dates.

STOP Act Reporting Deadlines for grantees funded in 2017 or earlier

Biannual Report	Reporting Period	Due Date
1	February 1–July 31 Disparities data required EBPPPs required	August 31
2	August 1–January 31 Disparities data required EBPPPs required Community Outcomes*	February 28

STOP Act Reporting Deadlines for grantees funded in 2019 or later

Annual Report	Reporting Period	Due Date
1	February 1–January 31 Disparities data required EBPPPs required Community Outcomes*	February 28

Note: The first reporting period for STOP Act grantees funded in 2019 or later covers 16 months. For example, STOP Act 2019 grantees' first reporting period covers October 1, 2019, through January 31, 2021.

* The Community-Level Outcome Data module is in the Annual Outcomes tab of the Progress Report. STOP Act grantees can enter these data as they become available to meet their reporting requirements. Community outcomes are due at least every 2 years on February 28 per each grantee's set reporting schedule.

Work Plans

Your Dashboard in SPARS contains two sections: one labeled Progress Report and the other labeled Work Plans. Use the Work Plans section to view and submit Substitute Data Source Requests and Work Plan reports. Under the Actions menu, select the plus button (+) to create a new Substitute Data Source Request or Work Plan. Once created, select "Edit" to open a Substitute Data Source Request or Work Plan and enter information. Please check with your Project Officer for deadlines.

Disparity Impact Statement

Use this section to upload your Disparity Impact Statement, also known as DIS. Once you upload the DIS, you will only update this section when you identify new disparate population(s) or if you revise plans to improve the quality of programming to address the needs—access, use/reach, outcomes—of the disparate population. If you do not have an approved DIS, please work with your State Project Officer to finalize it as soon as possible. You should not enter any additional information in the Behavioral Health Disparities module until SAMHSA approves your DIS.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Click "View" to open the Disparity Impact Statement work plan section, then select "Add a Document." Use the "Browse" button to select a file from your computer, then click the "Upload" button to add your document. If your document has not changed since your previous upload, then you do not need to upload a new document.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the "Save" button. This field accepts up to 1,000 characters.

Strategic Plan (PFS Only)

PFS grantees, if specifically requested by a Project Officer, will use the Strategic Plan section to upload and provide a brief description of their strategic plan. Once you upload the strategic plan, you only need to update this section if you revise the plan.

The Strategic Plan section is only for uploading grantee-level—rather than community- or subrecipient-level documents—so do not load community- or subrecipient-level plans here.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Click "View" to open the Strategic Plan section, then select "Add a Document." Use the "Browse" button to select a file from your computer, then click the "Upload" button to add your document. If your plan has not changed since your previous upload, you do not need to upload a new document.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the "Save" button. This field accepts up to 1,000 characters.

Evaluation Plan (PFS Only)

If required as part of your grant, use this section to upload your Evaluation Plan. Contact your Project Officer if you are unsure if CSAP requires an Evaluation Plan for your grant. Your plan should include information about how your project will conduct, analyze, report on, and use the results of the outcome evaluation. **Outcome evaluation** involves collecting and analyzing information about whether the grantee achieves its intended goals and objectives. Evaluation results identify areas where you may need to modify prevention strategies, and you can also use the results to plan for sustaining the prevention effort as well as future endeavors.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Click "View" to open the Evaluation Plan section, then select "Add a Document." Use the "Browse" button to select a file from your computer, then select the "Upload" button to add your document. If your document has not changed since your previous upload, you do not need to upload a new document.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the "Save" button. This field accepts up to 1,000 characters.

Substitute Data Source Request (PFS Only)

PFS grantees that are focusing on substances other than alcohol or prescription drugs must use this section to obtain approval for outcome measures. Additionally, grantees that are focusing on alcohol or prescription drugs and wish to use something other than the pre-approved outcome measures found in Appendix A, must use this section to obtain approval for substitute outcome measures.

Note: SAMHSA only requires grantees to submit a substitute data request for measures that they are using to meet annual reporting requirements; the table below lists these requirements. You do not need to submit a substitute data request if you wish to collect or submit data for any other or additional measures. See Appendix A for details on PFS Required Outcome Measures.

Annual Exact/Substitute Measure Requirement

PFS Cohort	Requirement
PFS 2016 and earlier	○ **One Annual Exact Measure for Underage Drinking**. Grantees must report one annual exact outcome measure for underage drinking. ○ **One Annual Exact Measure for Prescription Drugs**. Grantees must report one annual exact outcome measure for prescription drugs. ○ **One Annual Exact Measure for Each Additional Targeted Priority** (if applicable). Grantees must report one annual exact outcome measure for each additional targeted priority (such as marijuana, in addition to underage drinking and prescription drugs). Unless you have already received approval, you must submit a substitute data request because exact annual outcome measures do not exist. **Note:** Grantees must provide an annual exact outcome measure for both prescription drugs and underage drinking, even if the community is only targeting one or a different substance (e.g., marijuana).

PFS Cohort	Requirement
PFS 18 and PFS 19	○ **One Annual Exact Measure for Underage Drinking**. Grantees must report one annual exact outcome measure for underage drinking. ○ **One or Two Additional Measures.** Grantees that focus on additional substances, must report one or two additional measures. These measures should be data driven-substance abuse prevention priorities (marijuana, cocaine, methamphetamine, prescription drugs, e.g.) that align with the substances your program is targeting.
PFS 20 and later	○ Please check with your Project Officer for details on the required outcome measures.

To begin the substitute measure approval process for alcohol and prescription drugs, first decide whether your proposed substitute is likely to be approved. See Appendix A, Table A.2, to review the PFS Required Outcome Measures and Table A.3 for a comparison between PFS Required Outcome Measure survey items and items from commonly used surveys.

Note: If Table A.2 lists an item as being an acceptable PFS Required Outcome Measure substitute, you will not need to submit a substitute data request for the measure. If an item is listed, but is not an acceptable PFS Required Outcome Measure, that item will not be accepted as a substitute data source. For other substances, PFS does not have established exact outcome measures, but reviewing Tables A.2 and A.3 may be beneficial as you put together your substitute data request.

To submit a Substitute Data Request through SPARS, go to the SPARS Dashboard and select the plus sign (+) next to Substitute Data Request in the Work Plans section. Then select "View" to open the section.

Substitute Data Source Request Detail

To submit a Substitute Data Request for Survey Data, select the arrow next to Survey Data, then select "Add Data Source." To submit a request for Administrative Data, select the arrow next to Administrative Data, then select "Add Data Source."

- **Survey data** are data collected from individuals, usually a sample of the population, by asking questions either in person, on paper, by phone, or online. Examples of survey data include the National Survey of Drug Use and Health (NSDUH), Youth Risk Behavior Survey (YRBS), and Behavioral Risk Factor Surveillance System (BRFSS).

- **Administrative data** refers to information collected primarily for administrative—not research—purposes. Government departments and other organizations often collect this type of data for the purposes of registration, transaction, and record keeping, but the data may also include program outcome indicators. Examples of administrative data include educational records, client information from financial institutions, and hospital records of patient visits and health outcomes.

Data Item	Response Options	Content Guidance & Related Definitions
Label of the PFS Required Outcome Measure(s) indicator for which grantee is requesting a substituted proxy measure (e.g., 30-day use of alcohol)*	**Survey Data Response Options** ○ 30-day alcohol use ○ 30-day prescription drug misuse and abuse ○ Past-year prescription drug misuse and abuse ○ Binge drinking ○ Perception of parental disapproval/attitude ○ Perception of peer disapproval/attitude ○ Perceived risk/harm of use ○ Family communication around drug use ○ Other **Administrative Data Response Options** ○ School attendance and enrollment ○ Alcohol and/or drug-related car crashes and injuries ○ Alcohol and drug-related crime ○ Alcohol and prescription-drug related emergency room visits ○ Other	**Note:** Grantees can collect and report perceptions of parental or peer disapproval/attitude, perceived risk/harm of use, and family communication about drug use measures, however, you cannot use this information as annual exact outcome measures.

Data Item	Response Options	Content Guidance & Related Definitions
Data source name*	Free text	Insert the specific name of the survey (e.g., "YRBS") in the Data Source Name field. The field accepts up to 500 characters.
Exact wording of the proxy item and response options the grantee is requesting to substitute for the PFS Required Outcome Measure*	Free text	If entering survey data, enter the survey item used for this measure, followed by the response options. Type the survey item and the response options *verbatim,* exactly as they appear on the survey. For example, "On how many occasions (if any) have you had alcoholic beverages (beer, wine, or hard liquor) to drink—more than just a few sips—during the past 30 days: 0 occasions, 1 or 2 occasions, 3 to 5 occasions, 6 to 9 occasions, 10 to 19 occasions, 20 to 39 occasions." The field accepts up to 1,000 characters.
Exact wording of the outcome that will be reported to SAMHSA/CSAP*	Free text	The **outcome** is the actual result and related statistic that you are reporting for this measure. For example, the reported outcome could be "Percentage Who Used Alcohol in the Past 30 Days." The field accepts up to 1,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Formulae for calculating or deriving the prevalence estimate (reported outcomes)*	Free text	Provide any additional information about the calculations you will make. For example, "Recode any response indicating use on at least one occasion as having used during the past 30 days." The field accepts up to 1,000 characters.
Summarize how the collection and reporting of community-level PFS Required Outcome Measure was written in your approved PFS Strategic Plan*	Free text	The field accepts up to 3,000 characters.
Does the requested substitution differ from what was written in your approved PFS Strategic Plan?*	○ Yes ○ No	If you did not complete a strategic plan, select "No."
If yes, why? (If "Yes" is selected)	Free text	This item only appears if you select "Yes" for whether the requested substitution differs from what you wrote in the PFS strategic plan. The field accepts up to 3,000 characters.
Reason for the substitution request*	Free text	Justification for the request could include evidence that new data collection or the modification of an existing data collection effort is necessary for reporting, or that you investigated a standard PFS Required Outcome Measure and deemed the measure unviable. The field accepts up to 3,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Agency/organization responsible for data collection*	Free text	The field accepts up to 1,000 characters.
Were there validity and reliability tests of the survey items constituting the substitute measure?* [SURVEY DATA ONLY]	○ Yes ○ No	Were validity and reliability tests conducted for the relevant survey item(s), either in previous studies/evaluations or for the purpose of SPF-PFS?
Description of the reliability/ validity study(ies) (If "Yes" is chosen) [SURVEY DATA ONLY]	Free text	The field accepts up to 1,000 characters.
Are there any published validity/reliability studies for this instrument?* [SURVEY DATA ONLY]	○ Yes ○ No	Were validity and reliability tests conducted for the survey instrument as a whole, either in previous studies/evaluations or for the purpose of SPF-PFS?
Bibliographic Information (If "Yes" is chosen) [SURVEY DATA ONLY]	Free text	The field accepts up to 2,000 characters.
Substitute Data Source Request Supporting Document	Upload feature	Use the upload function to include any documents that support your request. Include any reliability and/or validity data, if possible.
For each data file, describe the contents of the data record(s) field that will be displayed*	Free text	This item only appears if you uploaded a supporting document. The field accepts up to 4,000 characters.

Remember: Select "Save" to add your data source. Your outcome measure will then appear in the list of data sources. Select "Add Response Data Collection Detail" to complete additional items for the Substitute Data Request.

Response Data Collection Detail

Data Item	Response Options	Content Guidance & Related Definitions
Subrecipient* [Item only appears if applicable.]	Drop-down menu	Select the subrecipient name from the drop-down menu. You must first enter subrecipient information in the Administrative tab for the subrecipient name to appear in the drop-down menu. **Note:** Grantees that do not fund subrecipients will not see this item and will enter data at the grantee level.
Does the data approximate the community (e.g., county, city, town, school) where SPF-PFS grant funded interventions are delivered?*	○ Yes ○ No	Report whether the boundaries of the area where you collected data approximately match the PFS community target area. For example, if the PFS community is a town within a larger county and the data are county-level data, select "No."
If no, indicate how it differs (If "No" is selected)	Free text	The field accepts up to 3,000 characters.
Most recent month and year for which data are available*	Date field	Report the month and year when you conducted the survey. If the data collection took multiple months, report the month at the middle of the period. If the survey took an even number of months, report the middle month closer to the survey's end date. If you combined multiple years of data into a single estimate due to a small sample size, report the month and year of the most recent survey.

Data Item	Response Options	Content Guidance & Related Definitions
Is there a data point collected at least 6 months prior to the implementation of SPF-PFS grant funded interventions in the community?* (i.e., a baseline prevalence estimate)	○ Yes ○ No	
Is the data collection repeated every year?*	○ Yes ○ No	
Frequency of data collection* (If "No" is selected)	Free text	The field accepts up to 100 characters.
Are trend data available?*	○ Yes ○ No	Select "Yes" if data are available for two or more time points prior to the baseline data point.
Start year of trend data* (If "Yes" is selected)	Numeric field	Indicate the year in which trend data starts.

Additional Fields for Survey Data Sources Only

Data Item	Response Options	Content Guidance & Related Definitions
Date of Data Collection*	Date field	Report the month and year when you conducted the survey. If the data collection took multiple months, report the month at the middle of the period. If the survey took an even number of months, report the middle month closer to the end date. If you combined multiple years of data into a single estimate due to a small sample size, report the month and year of the most recent survey.

Data Item	Response Options	Content Guidance & Related Definitions
Sample Size*	Numerical	**Sample size** is how many respondents completed the survey. If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result. The field accepts up to 100 characters.
Sampling Ratio*	Free text	**Sampling ratio** is the proportion of individuals selected to complete the survey to individuals in the overall target population. For example, if the survey sampled 300 individuals in a population of 60,000, the sampling ratio is 0.005 (300/60,000). If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result. The field accepts up to 100 characters.

Data Item	Response Options	Content Guidance & Related Definitions
What type of sampling strategy was used to select respondents?*	○ Census ○ Convenience sample ○ Random sample ○ Stratified random sample	**Census**: You asked all members of the target population to participate. **Convenience sample**: The survey used any members of the target population who were available or volunteered to participate (e.g., intercept surveys at malls or schools, surveys on Facebook). **Random sample**: You randomly selected individuals to complete the survey. **Stratified random sample**: You divided members of the population into subgroups or strata, then applied random sampling within each stratum.
If "Random sample" or "Stratified random sample" is selected:		
Stratified Sampling—Identify each stratum	Free text	Each field accepts up to 1,000 characters.
Cluster Sampling—Identify the clustering unit	Free text	Each field accepts up to 1,000 characters.
Multistage design—Identify the unit sampled at each stage	Free text	Each field accepts up to 1,000 characters.
Potential sources of bias in the sample design	Free text	Each field accepts up to 1,000 characters. *Describe potential bias that could result from the selected sampling strategy.*

Data Item	Response Options	Content Guidance & Related Definitions
Method of Administration*	○ Mail-in ○ Telephone ○ Face-to-face ○ Self-administered school-based ○ Self-administered survey site other than school ○ Other	
Other Method (Specify) (If "Other" is selected)	Free text	The field accepts up to 1,000 characters.
Was this a computer-assisted interview?*	○ Yes ○ No	
What was the survey response rate?*	Numeric field	Report the percentage of individuals completing the survey out of the number of individuals targeted to complete the survey. For example, if 700 students completed the survey out of 1,000 students sampled to complete the survey, record the percentage "70." If the survey was a convenience sample, use the overall targeted population as the denominator. For example, if 200 college students on a campus of 1,000 completed an online survey, record the percentage "20." If data needed to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result.

Once your Substitute Data Request data entry is complete, return to the Dashboard in SPARS, select the gear icon under "Actions" next to Substitute Data Request, and select "Submit to Project Officer." Enter your information in the submission form that appears and select "Submit."

Action Plan and Logic Model (STOP Act Only)

STOP Act grantees, if specifically requested by a Project Officer, use this section to upload and provide a brief description of their action plan and, if available, their logic model. Once you upload the action plan and, if available, logic model, you only need to update this section if you revise the plan.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Click "View" to open the Action Plan and Logic Model section, then select "Add a Document." Use the "Browse" button to select a file from your computer, then click the "Upload" button to add your document. If your plan has not changed since your previous upload, you do not need to upload a new document.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the "Save" button. This field accepts up to 1,000 characters.

Data Request (STOP Act Only)

STOP Act grantees funded in FY2018 and later must use the Data Request section to obtain approval for all four of the required outcome measures. STOP Act grantees funded in 2017 and earlier only need to use this section if SAMHSA did not approve their outcome measures in the prior reporting system.

Note that CSAP only requires grantees to submit a data request for measures that you use to meet the outcome measure requirements. You do not need to submit a data request if you wish to collect or submit data for any other or additional measures.

Annual Outcome Measure Requirement

CSAP requires grantees to report performance on four alcohol measures. These measures are due at least every 2 years, and reporting must include data for at least three grade levels (grades 6–12).

CSAP requires STOP Act grantees to report the following:

- Past 30-day alcohol use

- Perception of risk or harm from alcohol

- Perception of parental disapproval of alcohol use

- Perception of peer disapproval of alcohol use

To submit a Data Request through SPARS, go to your SPARS Dashboard and select the plus sign (+) next to Data Request in the Work Plans section. Then select "View" to open the section. See Appendix B for more information on community outcome reporting requirements.

Data Request Detail

To submit a Data Request for Survey Data, select the arrow next to Survey Data, then select "Add Data Source." To submit a request for Administrative Data, select the arrow next to Administrative Data, then select "Add Data Source."

○ **Survey data** are data collected from individuals, usually a sample of the population, by asking questions either in person, on paper, by phone, or online. Examples of survey data include the National Survey of Drug Use and Health (NSDUH), Youth Risk Behavior Survey (YRBS), and Behavioral Risk Factor Surveillance System (BRFSS).

○ **Administrative data** refers to information collected primarily for administrative—not research—purposes. Government departments and other organizations often collect this type of data for the purposes of registration, transaction, and record keeping, but the data may also include program outcome indicators. Examples of administrative data include educational records, client information from financial institutions, and hospital records of patient visits and health outcomes.

Data Item	Response Options	Content Guidance & Related Definitions
Label of the Outcome Measure(s) indicator for which a STOP Act grantee is requesting approval* [Note that this module is used by other grant programs and may contain options that are not relevant for STOP-Act]	**Survey Data Response Options** ○ 30-day alcohol use ○ 30-day prescription drug misuse and abuse ○ Past-year prescription drug misuse and abuse ○ Binge drinking ○ Perception of parental disapproval/attitude ○ Perception of peer disapproval/attitude ○ Perceived risk/harm of use ○ Family communication around drug use ○ Other **Administrative Data Response Options** ○ School attendance and enrollment ○ Alcohol and/or drug-related car crashes and injuries ○ Alcohol and drug-related crime ○ Alcohol and prescription-drug related emergency room visits ○ Other	**Note:** STOP Act grantees can collect and report outcome data on measures other than the four required alcohol measures, however, you cannot use this information in place of the required measures.

Data Item	Response Options	Content Guidance & Related Definitions
Data source name*	Free text	Insert the specific name of the survey (e.g., "YRBS") in the Data Source Name field. The field accepts up to 500 characters.
Exact wording of the item and response options	Free text	If entering survey data, enter the survey item used for this measure, followed by the response options. Type the survey item and the response options *verbatim,* exactly as they appear on the survey. For example: "On how many occasions (if any) have you had alcoholic beverages (beer, wine, or hard liquor) to drink—more than just a few sips—during the past 30 days: 0 occasions, 1 or 2 occasions, 3 to 5 occasions, 6 to 9 occasions, 10 to 19 occasions, 20 to 39 occasions." The field accepts up to 1,000 characters.
Exact wording of the outcome that will be reported to SAMHSA/CSAP*	Free text	The **outcome** is the actual result and related statistic that you are reporting for this measure. For example, the reported outcome could be "Percentage Who Used Alcohol in the Past 30 Days." The field accepts up to 1,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Formulae for calculating or deriving the prevalence estimate (reported outcomes)*	Free text	Provide any additional information about the calculations you will make. For example, "Recode any response indicating use on at least one occasion as having used during the past 30 days." The field accepts up to 1,000 characters.
Agency/Organization responsible for Data Collection*	Free text	The field accepts up to 1,000 characters.
Were there validity and reliability tests of the survey items constituting the measure?* [SURVEY DATA ONLY]	○ Yes ○ No	Were validity and reliability tests conducted for the relevant survey item(s), either in previous studies/evaluations or for the purpose of STOP Act?
Description of the validity/reliability study(ies)*	Free text	The field accepts up to 1,000 characters.
Are there any published validity/reliability studies for this instrument?* [SURVEY DATA ONLY]	○ Yes ○ No	Were validity and reliability tests conducted for the survey instrument as a whole, either in previous studies/evaluations or for the purpose of STOP Act?
Bibliographic Information (If "Yes" is chosen) [SURVEY DATA ONLY]	Free text	The field accepts up to 2,000 characters.
Data Source Request Supporting Document	Upload feature	Use the upload function to include any documents that support your request. Include any reliability and/or validity data, if possible.
For each data file, describe the contents of the data record(s) field that will be displayed*	Free text	This item only appears if you uploaded a supporting document. The field accepts up to 4,000 characters.

Remember: Select "Save" to add your data source. Your outcome measure will then appear in the list of data sources. Select "Add Response Data Collection Detail" to complete additional items for the Data Request.

Response Data Collection Detail

Data Item	Response Options	Content Guidance & Related Definitions
Do the data approximate the community (e.g., county, city, town, school) where grant funded interventions are delivered?*	○ Yes ○ No	Report whether the boundaries of the area where you collected data approximately match the STOP Act community target area. For example, if the community is a town within a larger county and the data are county-level data, select "No."
If no, indicate how it differs (If "No" is selected)	Free text	The field accepts up to 3,000 characters.
Most recent month and year for which data are available*	Date field	Report the month and year when you conducted the survey. If the data collection took multiple months, report the month at the middle of the period. If the survey took an even number of months, report the middle month closer to the survey's end date. If you combined multiple years of data into a single estimate due to a small sample size, report the month and year of the most recent survey.
Is there a data point collected at least 6 months prior to the implementation of grant funded interventions in the community?* (i.e., a baseline prevalence estimate)	○ Yes ○ No	

Data Item	Response Options	Content Guidance & Related Definitions
Is the data collection repeated every year?*	○ Yes ○ No	
Frequency of data collection* (If "No" is selected)	Free text	The field accepts up to 100 characters.
Are trend data available?*	○ Yes ○ No	Please select "Yes" if data are available for two or more time points prior to the baseline data point.
Start year of trend data* (If "Yes" is selected)	Numeric field	Indicate the year in which trend data starts.

Additional Fields for Survey Data Sources Only

Data Item	Response Options	Content Guidance & Related Definitions
Date of Data Collection*	Date field	Report the month and year when you conducted the survey. If the data collection took multiple months, report the month at the middle of the period. If the survey took an even number of months, report the middle month closer to the end date. If you combined multiple years of data into a single estimate due to a small sample size, report the month and year of the most recent survey.

Data Item	Response Options	Content Guidance & Related Definitions
Sample Size	Numerical	How many respondents completed the survey? If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result. The field accepts up to 100 characters.
Sampling Ratio	Free text	**Sampling ratio** is the proportion of individuals selected to complete the survey to individuals in the overall target population. For example, if the survey sampled 300 individuals in a population of 60,000, the sampling ratio is 0.005 (300/60,000). If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, please return to this field and enter the correct result. The field accepts up to 100 characters.

Data Item	Response Options	Content Guidance & Related Definitions
What type of sampling strategy was used to select respondents?*	○ Census ○ Convenience sample ○ Random sample ○ Stratified random sample	**Census**: You asked all members of the target population to participate. **Convenience sample**: The survey uses any members of the target population who are available or volunteer to participate (e.g., intercept surveys at malls or schools, surveys on Facebook). **Random sample**: You randomly selected individuals to complete the survey. **Stratified random sample**: You divided members of the population into subgroups or strata, then applied random sampling within each stratum.
If "Random sample" or "Stratified random sample" is selected:		
Stratified Sampling—Identify each stratum	Free text	Each field accepts up to 1,000 characters.
Cluster Sampling—Identify the clustering unit	Free text	Each field accepts up to 1,000 characters.
Multistage design—Identify the unit sampled at each stage	Free text	Each field accepts up to 1,000 characters.
Potential sources of bias in the sample design	Free text	Each field accepts up to 1,000 characters. *Describe potential bias that could result from the selected sampling strategy.*

Data Item	Response Options	Content Guidance & Related Definitions
Method of Administration*	○ Mail-in ○ Telephone ○ Face-to-face ○ Self-administered school-based ○ Self-administered survey site other than school ○ Other	
Other Method (Specify) (If "Other" is selected)	Free text	The field accepts up to 1,000 characters.
Was this a computer-assisted interview?*	○ Yes ○ No	

Data Item	Response Options	Content Guidance & Related Definitions
What was the survey response rate?*	Numeric field	Report the percentage of individuals completing the survey out of the number of individuals targeted to complete the survey. For example, if 700 students completed the survey out of 1,000 students sampled to complete the survey, record the percentage "70." If the survey was a convenience sample, use the overall targeted population as the denominator. For example, if 200 college students on a campus of 1,000 completed an online survey, record the percentage "20." If data needed to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result.

Remember: Once your Data Request data entry is complete, return to the Dashboard in SPARS, select the gear icon under "Actions" next to Data Request, then select "Submit to Project Officer." Enter your information in the submission form that appears and select "Submit."

DSP-MRT Progress Report

Administration

Throughout the DSP-MRT, **grantee** refers to the state/tribe/jurisdiction receiving the grant award from SAMHSA and **community** refers to the grantee's selected high-need communities. For PFS grantees only, **subrecipient** indicates the grantee's sub-awardees funded to lead the grant in the selected communities. Some PFS grantees refer to their subrecipients as sub-grantees. Some PFS grantees may not have a subrecipient responsible for leading the grant in each of the selected communities. The information you enter in the Administration section will drive how you report data in the other DSP-MRT sections, so please ensure that you correctly define subrecipients and high-need communities.

Grantee Information

Select "Edit Grantee Information" to begin entering data. SPARS will pre-fill the Project Officer information (which grantees cannot edit).

Data Item	Response Options	Content Guidance & Related Definitions
Do you fund subrecipients for this grant?*	○ Yes ○ No	**Subrecipients** are the grantee's sub-awardees funded to lead the grant in the selected communities.
Do you use sub-states?*	○ Yes ○ No	The term **sub-state** refers to a regional, county level, or other entity that serves as an intermediary between the grantee and the subrecipients.
Address*	Free text	The field accepts up to 100 characters.
City*	Free text	The field accepts up to 100 characters.
State/Territory*	Drop-down menu	Select the state or territory from the list.
ZIP*	Numerical	The field only accepts 5 numerical characters.

Data Item	Response Options	Content Guidance & Related Definitions
Project Director Name	Free text	The field accepts up to 100 characters.
Project Director E-mail Address	Free text	The field accepts up to 100 characters.
Project Director Phone Number	Numerical	The field accepts up to 25 characters.
Project Coordinator Name	Free text	The field accepts up to 100 characters.
Project Coordinator E-mail Address	Free text	The field accepts up to 100 characters.
Project Coordinator Phone Number	Numerical	The field accepts up to 25 characters.
Lead Evaluator Name	Free text	The field accepts up to 100 characters.
Lead Evaluator E-mail Address	Free text	The field accepts up to 100 characters.
Lead Evaluator Phone Number	Numerical	The field accepts up to 25 characters.
Epidemiological Lead Name	Free text	The field accepts up to 100 characters.
Epidemiological Lead E-mail Address	Free text	The field accepts up to 100 characters.
Epidemiological Lead Phone Number	Numerical	The field accepts up to 25 characters.

Sub-State (PFS Only)

The Sub-State section only appears in SPARS if you selected "Yes" under "Do you use sub-states?" in the Grantee Information section. If you are using sub-states, select "Add a Sub-State" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Sub-State Name*	Free text	The term **sub-state** refers to a regional, county level, or other entity that serves as an intermediary between the grantee and the subrecipients.
Sub-State Type*	○ Region ○ County ○ City ○ Tribe/Tribal Organization ○ Coalition ○ Provider Agency ○ Other	Select from drop-down menu. If you select "Other" enter a description of the Sub-State Type. The field accepts up to 100 characters.
Total Funding*	Numerical	Enter total numerical dollar amount awarded to the sub-state.
Briefly describe how subrecipients are being funded.*	Free text	The field accepts up to 1,000 characters.

Subrecipient (PFS Only)

The Subrecipient section of SPARS is accessible only if you selected "Yes" for "Do you fund subrecipients for this grant?" in the Grantee Information section. Use this section to add or update subrecipient information. **Subrecipient** indicates the grantee's sub-awardees funded to lead the grant in the selected communities. Some grantees refer to their subrecipients as sub-grantees or funded entities. To enter information, select "Add a Subrecipient."

Data Item	Response Options	Content Guidance & Related Definitions
Subrecipient Name*	Free text	The field accepts up to 100 characters.
Subrecipient Type*	○ Behavioral health department (government entity) ○ Behavioral health service organization ○ City ○ Coalition ○ College/University ○ Community-based health services organization ○ Community-based recovery organization ○ County ○ Harm reduction agency ○ Law enforcement agency ○ Provider Agency/Organization ○ Public health department (government entity) ○ Region ○ Syringe exchange program ○ Tribe/Tribal Organization ○ Other	If you select "Other," enter a brief description of the Subrecipient Type.

Data Item	Response Options	Content Guidance & Related Definitions
Street Address*	Free text	The field accepts up to 100 characters.
City*	Free text	The field accepts up to 100 characters.
State/Territory*	Drop-down menu	Select the state or territory from the list.
ZIP Code*	Numerical	The field accepts only 5 numerals.
Subrecipient Status*	○ Selected but not yet active or funded ○ Planning grant only: Not (yet) selected to implement all steps ○ Active: Has begun implementation and/or funding ○ Deactivated: No longer funded	Indicate your subrecipient's present status. You will need to update the status to reflect the subrecipient's status if it ever changes.
Has this subrecipient been funded?*	○ Yes ○ No	
Date Funded*	Date (mm/dd/yyyy)	If you selected "Yes" for "Has this subrecipient been funded," complete this item. Report the date when the subrecipient began receiving funding through the grant. The Date Funded should not change over the course of the grant.
Funding End Date*	Date (mm/dd/yyyy)	If you select "Yes" for "Has this subrecipient been funded," complete this item.
Amount Awarded Per Year*	Numerical	If you select "Yes" for "Has this subrecipient been funded," complete this item.

High-Need Community

Through the Disparity Impact Statement and Needs Assessment (if applicable), SAMHSA expects every grantee to identify one or more high-need/low-capacity community(ies). Use this section to add or update information about your selected high-need community(ies). For Single-Community grantees, if you identify your tribe or territory as your high-need community, enter that here. Select "Add a High-Need Community" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Selected High-Need Community Name*	Free text	
Selected High-Need Community ZIP Code(s)	Numerical	This item refers to the community that the subrecipient or the grantee targets its program efforts. Selecting "Add Target ZIP Code" will add the entered value to the list of ZIP codes. You can also use the USPS Look Up a ZIP Code tool to search for a ZIP code.
Alternative: If this subrecipient or you target an entire county (or counties) as the selected High-Need Community, indicate the county name(s) here.	Free text	The field accepts up to 100 characters.
Subrecipients	Check boxes with subrecipients that were entered in the "Subrecipient" section	Select subrecipient(s) connected to this High-Need Community. If you selected "No" under "Do you fund subrecipients for this grant" in the Grantee Information section, the system will indicate "No subrecipients added."

Data Item	Response Options	Content Guidance & Related Definitions
Briefly describe how you are defining this community as a High-Need Community. This description should summarize in 2 or 3 sentences what you reported in detail in your Disparity Impact Statement.*	Free text	The field accepts up to 3,000 characters.
Start Date for High-Need Community	Date (mm/dd/yyyy)	

Assessment

Assessment involves the systematic gathering and examination of data about alcohol and drug problems, related conditions, and consequences in the area of concern in your community(ies). Assessing the issues means pinpointing where the problems are in the community and the populations affected. It also means examining the conditions within the community that put its populations at risk for the problems and identifying conditions that—now or in the future—could protect the population against the problems.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you had this reporting period while performing activities related to your Needs Assessment. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Assessing community assets and resources ○ Assessment of community capacity ○ Assessment of community readiness to act ○ Assessment of community risk and protective/causal factors ○ Assessment of State/Tribe/Jurisdiction capacity ○ Assessment of State/Tribe/Jurisdiction readiness to act ○ Assessment of the magnitude of substance abuse-related problems (consumption/ consequences) ○ Functioning of the State/Tribal/Jurisdiction Epidemiology Outcome Workgroup ○ Identification of community gaps in services ○ Identification of State/Tribe/Jurisdiction high-need priorities ○ Identification of target communities ○ Monitoring community needs assessment activities ○ Specification of baseline data ○ Use of needs assessment data collected prior to award ○ Use of the Epidemiological Outcomes Workgroup to enhance and supplement the current process ○ Other	Select an option from the drop-down menu to report any accomplishments you experienced related to Assessment during the reporting period. If you select "Other," enter a brief description of the accomplishment. The "Other" field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ Difficulty sampling target populations ○ Identification of State/Tribe/Jurisdiction gaps in services and capacity ○ Inadequate time for project staff and members to devote to the project ○ Lack of available data for specific age group populations (e.g., 18- to 25-year-olds) ○ Lack of available data to address NOMs ○ Lack of available data to assess differences for racial/ethnic minorities, LGBTQ, or other special populations ○ Lack of collaboration between stakeholders (e.g., between agencies, between coalitions, between jurisdictions and funded community levels) ○ Lack of data analysis or evaluation expertise ○ Limited staff capacity to conduct assessments ○ Limited time to implement this Strategic Prevention Framework step ○ Low survey response rates	Select an option from the drop-down menu to report any barriers/challenges you experienced related to Assessment during the reporting period. If you select "Other," enter a brief description of the barrier/challenge. The "Other" field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ Major external community events like weather disasters ○ Mismatch between level of disaggregation of available data (e.g., county) and communities being funded (e.g., towns within counties) ○ Need for new data collection instruments ○ State/Tribal/Jurisdictional contract or other delays getting subrecipient or high-need communities on board ○ Other	
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect assessment for more than one reporting period). The field accepts up to 3,000 characters.
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, please report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/challenge.

Data Item	Response Options	Content Guidance & Related Definitions
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Capacity

Capacity refers to the various types and levels of resources available to establish and maintain a community overdose prevention system. This prevention system can identify and leverage resources that will support an effective strategy aimed at the priority problems and identified risk factors in the community at the appropriate population level. Capacity to carry out strategies depends not only upon the resources of the community organizations and their function as a cohesive problem-solving group, but also upon the readiness and ability of the larger community to commit its resources to addressing the identified problems.

Membership

Use this section to add any organizational and/or individual members to your Advisory Council, Epidemiological Outcome Workgroup (EOW), or other Workgroup. To edit or mark previously added members as inactive, use the table headings to sort Members, then click "Edit" for the Member you wish to revise. These members will carry over from one reporting period to the next, so only revise as new members join or old members become inactive. Select "Add Membership" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Date Joined*	Date (mm/dd/yyyy)	
Member Type*	○ Project Advisory Council ○ Epidemiological Outcomes Workgroup ○ Evidence-Based Practices Workgroup ○ Other	If a member is involved in more than one workgroup, add this person as many times as necessary. If you select "Other," enter a brief description of the member type. The field accepts up to 100 characters.
Member Name*	Free text	The field accepts up to 100 characters.
Title*	Free text	The field accepts up to 100 characters.
Organization*	Free text	The field accepts up to 100 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Sector*	○ Advocacy volunteers ○ Affected family members ○ Behavioral health department/division ○ Business community ○ Civic or volunteer organizations ○ Corrections ○ Courts/judiciary ○ Emergency medical system ○ Faith-based organizations ○ Healthcare professionals ○ Law enforcement agency ○ LGBTQ supportive organization ○ Media (radio/TV stations, newspaper) ○ Mental health professionals/agencies ○ Military/veteran organization ○ Parent/family/caregiver groups ○ Pharmacy ○ Public health department ○ Recovery community ○ Research/evaluation ○ School(s)/school districts ○ State/Tribe/Jurisdiction agency ○ Substance use disorder treatment	Use the drop-down menu to select the **primary** sector that the member represents.
Status*	○ Active ○ Inactive	Indicate the member's present status. Update this field if the member's status changes.
Date Exited*	○ Date (mm/dd/yyyy)	If you select "Inactive" for Status, enter the date when the member became inactive.

Advisory Council and Other Workgroup Meetings

Use this section to report Advisory Council, Epidemiological Outcome Workgroup (EOW), or other workgroup meetings conducted during this reporting period and upload meeting minutes. Please ensure that the minutes include meeting attendees. If you held no Advisory Council, EOW, or other workgroup meetings during the reporting period related to your activities, please skip this section. Select "Add Meeting" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Meeting Date*	Date (mm/dd/yyyy)	
Meeting Type*	○ Project Advisory Council ○ Epidemiological Outcomes Workgroup ○ Evidence-Based Practices Workgroup ○ Other	If you select "Other," enter a brief description of the meeting type. The field accepts up to 200 characters.
Meeting Name/Topic*	Free text	The field accepts up to 200 characters.
Upload Document	Document upload function	List meeting attendees in the minutes

Grantee Funding Resources

Use this section to enter funding resources information for your grant. Unless the information changes from one reporting period to another, you only need to enter this information once per fiscal year.

Which of the following funding sources did your organization receive during this fiscal year? Which of those sources did your organization use to fund program priorities in your communities?

Data Item	Response Options	Content Guidance & Related Definitions
Source of Funding/Resources	- SAMHSA Partnerships for Success (PFS) - SAMHSA Strategic Prevention Framework for Prescription Drugs (SPF Rx) - SAMHSA Medication-Assisted Treatment–Prescription Drug and Opioid Addiction (MAT-PDOA) - SAMHSA Minority HIV/AIDS Initiative (MAI) - SAMHSA State Targeted Response to the Opioid Crisis Grants (Opioid STR) - SAMHSA Grants to Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO) - CDC Prescription Drug Overdose: Prevention for States (PfS) - CDC Data-Driven Prevention Initiative (DDPI) - CDC Expanded Overdose Surveillance - BJA Harold Rogers Prescription Drug Monitoring Program (PDMP) Grant	Use the checkboxes to select all the funding sources that your organization received this fiscal year. Some funding sources not awarded to states (such as SAMHSA MAI, Drug-Free Communities, HRSA ROOR) appear in the list. SPARS lists these here because several CSAP grant programs fund tribal grantees that may receive these community-level funds. Use the "Other" option to indicate a funding source not listed. Specify the source, then select "Add Other." The field accepts up to 250 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Source of Funding/Resources (continued)	○ Health Resources and Services Administration (HRSA) Rural Opioid Overdose Reversal (ROOR) ○ Drug-Free Communities Grants ○ STOP Act Funding ○ Substance Abuse Prevention and Treatment Block Grant ○ Medicaid (Federal, State, and Local) ○ Other Federal Funds ○ State/Territory Funds (excluding State Medicaid) ○ Municipal Government Funds (excluding State Medicaid) ○ Local Funds (excluding State Medicaid) ○ Foundation/Non-Profit Organization Funding ○ Private/Corporate Entities ○ Individual Donations/Funding from Fundraising Events ○ Other	
Did the grantee use the funding stream for program priorities in your communities?	○ Yes ○ No	For each funding source selected, indicate whether your organization used the source to fund program priorities in your communities.

Training and Technical Assistance (TA)

Use this section to record any Training and TA provided to the grantee or subrecipients and communities to build capacity. This includes training and TA provided by grantees or by other contractors and consultants.

Training refers to the delivery of structured events focused on topics such as data collection protocols and systems, building community partnerships, or implementing media campaigns.

Technical assistance (TA) refers to substantial services provided by professional prevention staff to give technical guidance to grantees and individuals to effectively implement their grant. It does not include simple clarifying assistance (such as sending someone to a website). Count training and TA as one unit per issue.

Grantee refers to the state, tribe, or jurisdiction receiving the award from SAMHSA. **Community** refers to the grantee's selected High-Need Communities. For PFS grantees only, **subrecipient** indicates the grantee's sub-awardees funded to lead the grant in the selected communities.

Select "Add Training/Technical Assistance Received by the Grantee" or "Add Training/Technical Assistance Provided to Subrecipients" to open the appropriate section.

Data Item	Response Options	Content Guidance & Related Definitions
Status*	○ Received ○ Closed	A **Received Training or TA** status means that the grantee received training or TA. A **Closed Training or TA** status means that the grantee reported the need for training or TA in the DSP-MRT, but the issue resolved without the grantee receiving training or TA.
Date Began Receiving this Training or TA*	Date (mm/dd/yyyy)	
Name of Training/TA*	Free text	The field accepts up to 100 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Training/TA Topic*	○ Behavioral Health Disparities ○ CAPT Information ○ Collaboration ○ Community Data Collection ○ Community Development ○ Cultural Competence/Diversity ○ Data Entry ○ Developing Prevention Systems ○ Development of Overdose Prevention System ○ Environmental Strategies ○ Grant Writing/Funding/Resource Development ○ Grantee Data Collection ○ Identifying/Selecting/ Implementing Evidence-Based Programs ○ Information Technology ○ Infrastructure Development ○ Marketing/Communications ○ National Outcomes Measures (NOMs) ○ Needs Assessment ○ Organization Development ○ Overdose Outcome Measures ○ Overdose Prevention in Specific Settings (e.g., shelter, correction facility) ○ Prevention Fundamentals ○ Prevention in Specific Settings (e.g., workplace, correctional facilities)	Indicate the specific training or TA topic that you received. Select all items that apply. Use the "Other" option to indicate a Training/TA Topic not listed. The field accepts up to 250 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Training/TA Topic* (continued)	○ Readiness Assessment ○ Risk and Protective Factors ○ SAMHSA's Strategic Prevention Framework (SPF) ○ State/Territory Data Collection ○ Strategic Planning ○ Substance Use/Abuse ○ Sustainability ○ Utilizing Epidemiological Data ○ Violence Prevention ○ Youth Involvement ○ Other	
Brief Description of the Need for the Training/TA*	Free text	The field accepts up to 500 characters.
Source of Assistance*	○ CAPT ○ CSAP ○ My Project Officer ○ Other Grantee ○ This Grantee ○ PEP-C ○ SPARS ○ CDC ○ Battelle/Cloudburst ○ Other	Indicate the source of assistance from the drop-down menu. If you select "Other," specify in the Other field that appears. The field accepts up to 250 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Delivery Mechanism*	○ Face-to-Face ○ Video conference ○ Telephone Conference ○ Web Conference ○ Moderated Distance Learning Course ○ Self-Paced Distance Learned Course/Tool ○ Other	Select the delivery mechanism from the drop-down menu. If you select "Other," specify the delivery mechanism in the Other field that appears. The field accepts up to 250 characters.
Was this training or TA timely?*	○ Yes ○ No	Indicate whether or not the training or TA was timely.
Explain why you believe the training or TA was not timely.*	Free text	This item only appears if you select "No" for "Was this training or TA timely?" The field accepts up to 500 characters.
Was this training or TA effective?*	○ Yes ○ No	Indicate whether or not the training or TA was effective.
Explain why you believe the training or TA was not effective.*	Free text	This item only appears if you selected "No" for "Was this training or TA effective." The field accepts up to 500 characters.
Provide any additional description of this training/ TA experience here.	Free text	The field accepts up to 1,000 characters.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to capacity building, such as building your advisory council or workgroups, leveraging resources, and training staff or subrecipients and communities. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you conducted capacity-related activities or faced new capacity-related Barriers/Challenges during this reporting period.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Building coalitions ○ Contributing to decisions to allocate resources ○ Convening leaders and stakeholders ○ Coordination with Advisory Board/Council ○ Description of necessary infrastructure development ○ Developing a set of Alcohol Tobacco or Other Drug intervening variables, consequences, and consumption indicators ○ Developing relationships among stakeholders ○ Engagement of State/Tribe/Jurisdiction level stakeholders ○ Engaging stakeholders to help sustain outcomes ○ Leveraging funding and other resources ○ Organizing agency networks	Select an option from the drop-down menu to report any accomplishments you experienced related to capacity during the reporting period. If you select "Other," enter a brief description of the accomplishment. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name* (continued)	○ Other infrastructure development ○ Planning for sustaining the infrastructure ○ Tracking substance use and consequences indicators over time ○ Training and technical assistance to enhance the capacity of community stakeholders, coalitions, partner organizations, and service providers ○ Training and technical assistance to enhance the capacity of State/Tribe/Jurisdiction stakeholders ○ Using data to monitor changes in Alcohol Tobacco or Other Drug intervening variables, consequences, and consumption indicators ○ Other	
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ Differing perspectives between the project and jurisdiction-level administrators (e.g., Single State Authority, Governor's Office, tribal entity) ○ Difficulties getting buy-in from partnering agencies ○ Difficulty balancing efficiency vs. inclusiveness of project members	

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ Funding challenges (e.g., state budget cuts; delayed receipt of program funds) ○ Inadequate funds to thoroughly implement Strategic Prevention Framework model ○ Inadequate pool of qualified people for identifying members (State Advisory Council, Epidemiological Outcomes Workgroup, Evidence-Based Practices Workgroup) ○ Inadequate time for project staff and members to devote to the project ○ Selection and implementation of effective prevention strategies ○ Other	Select an option from the drop-down menu to report any barriers/challenges you experienced related to capacity during the reporting period. If you selected "Other," enter a brief description of the barrier/challenge. The field accepts up to 200 characters.
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect capacity for more than one reporting period). The field accepts up to 3,000 characters.
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the issue, please report it under Capacity in the Training and Technical Assistance section.

Data Item	Response Options	Content Guidance & Related Definitions
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/challenge.
In what other ways did you address the Barrier/ Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Planning

Planning involves following logical, sequential steps designed to produce specific results. Data obtained from a formal assessment of needs and resources form the basis for the desired results or outcomes. Thus, the plan outlines what the grantee will do over time to create the desired change.

Strategic Plan (PFS Only)

PFS grantees, if specifically requested by their Project Officer, will use the Strategic Planning section to upload and provide a brief description of their strategic plan.

The Strategic Plan section is a Work Plan report. From the Progress Report module, you can view a previously entered report once your Project Officer approves it, if applicable, but you cannot add or edit a report. To add or edit your Strategic Plan, go to the Work Plans section on your Dashboard and select the plus sign (+) or "Edit" option next to Strategic Plan. Refer to the Work Plans section of this document on page 9 for specifics on what to include in your plan, if applicable.

Action Plan and Logic Model (STOP Act Only)

STOP Act grantees, if specifically requested by their Project Officer, will use this section to upload and provide a brief description of their action plan, and if available, their logic model.

The Action Plan and Logic Model section is a Work Plan report. From the Progress Report module, you can view a previously entered report once your Project Officer approves it, if applicable, but you cannot add or edit a report. To add or edit your Action Plan and Logic Model, go to the Work Plans section on your Dashboard and select the plus sign (+) or "Edit" option next to Action Plan and Logic Model. Please refer to the Work Plans section of this document on page 24 for specifics on what to include in your plan, if applicable.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to planning. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you conducted planning-related activities or faced new planning-related Barriers/Challenges during this reporting period.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Articulation of a vision for prevention activities ○ Discussion on adjustments based on on-going needs assessment activities ○ Establishment of key policies ○ Identification of appropriate funding mechanism(s) ○ Identification of key milestones and outcomes ○ Identification of other sources of funding for the plan ○ Identification of the State/Tribe/Jurisdiction level priorities ○ Identification/coordination/allocation of resources ○ Involvement of public and private service systems in planning ○ Planning for sustaining the infrastructure ○ Use of statewide needs assessment in the development of the strategic plan ○ Other	Select an option from the drop-down menu to report any accomplishments you experienced related to planning during the reporting period. If you select "Other," enter a brief description of the accomplishment. The field accepts up to 250 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ Challenges finding other sources of funding for the plan ○ Challenges planning for sustaining the infrastructure ○ Differing perspectives between the project and jurisdiction-level administrators (e.g., Single State Authority, Governor's Office, tribal entity) ○ Difficulty balancing efficiency vs. inclusiveness of project members ○ Difficulty convening members ○ Disagreement among stakeholders about resource allocation procedures (i.e., alignment) ○ Disagreement among stakeholders regarding the project's priorities or strategies ○ Inadequate time for project staff and members to devote to the project	Select an option from the drop-down menu to report any barriers/challenges you experienced related to planning during the reporting period. If you select "Other," enter a brief description of the barrier/challenge. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ Lack of collaboration between stakeholders (e.g., between agencies, between coalitions, between jurisdictions and funded community levels) ○ Lack of stakeholder support for the program plan ○ Limited time to implement this Strategic Prevention Framework step ○ Major external community events like weather disasters ○ No leadership or political commitment to substance abuse prevention ○ Resistance to adopting Strategic Prevention Framework model ○ State/Tribal/Jurisdictional contract or other delays getting subrecipient communities on board ○ Other	
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect capacity for more than one reporting period). The field accepts up to 3,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, please report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/challenge.
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Behavioral Health Disparities

SAMHSA defines **behavioral health** as mental/emotional well-being and/or actions that affect wellness. The phrase *behavioral health* is also used to describe service systems that encompass prevention and promotion of emotional health; prevention of mental and substance use disorders, substance use, and related problems; treatments and services for mental and substance use disorders; and recovery support (for more information, visit https://www.samhsa.gov/samhsa-data-outcomes-quality/samhsas-efforts).

Healthy People 2020 defines **health disparity** as a "particular type of health difference that is closely linked with social, economic, and/or environmental disadvantage. Health disparities adversely affect groups of people who have systematically experienced greater obstacles to health based on their racial or ethnic group; religion; socioeconomic status; gender; age; mental health; cognitive, sensory, or physical disability; sexual orientation or gender identity; geographic location; or other characteristics historically linked to discrimination or exclusion."

In this section, we would like you to describe the efforts and activities that your state, tribe, or jurisdiction has undertaken in the project to address Behavioral Health Disparities related to substance use disorders risks, prevalence, and outcomes.

Disparity Impact Statement

The Disparity Impact Statement—or DIS—section is a Work Plan report. From the Progress Report module, you can view a previously entered report once your Project Officer approves it; however, you cannot add or edit a report. To add or edit your Disparity Impact Statement, go to the Work Plans section on your Dashboard and select the plus sign (+) or "Edit" option next to Disparity Impact Statement. Please refer to the Work Plans section of this document on page 9 for specifics on what to include in your statement.

Population(s) Experiencing the Disparity

According to Healthy People 2020, "Although the term disparities is often interpreted to mean racial or ethnic disparities, many dimensions of disparity exist in the United States, particularly in health. If a health outcome is seen to a greater or lesser extent between populations, there is disparity." We are asking grantees to specify the population(s) experiencing the disparity within the context of your High-Need Community(ies) and subrecipients.

Grantees may describe the population(s) experiencing the disparity using a broad demographic or cultural category or **subpopulation**. DIS asks you to use publicly available data to identify subpopulations within your High-Need Communities. You may quantify subpopulations more specifically as a "disparate population" using data and a designated comparison group. For example, you may identify the subpopulations by "race" and the disparate population as "Black or African American." However, just because you *can* separate out a subpopulation (e.g., age separated out by age ranges), does not mean that you *should* identify it as disparate. Only consider a population "disparate" if you identify a specific race, ethnicity, sex, or LGBTQ identity using a data-driven justification. Select "Add a Population(s) Experiencing Disparity Record" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Select High-Need Community(ies)*	○ All High-Need Communities ○ Specific High-Need Community(ies)	If all high-need communities focus on the same disparate and subpopulations, select "All High-Need Communities." If not, select "Specific High-Need Community" and choose the high-need community(ies) on which you wish to report. Only select more than one community under "Specific High-Need Community(ies)" if the communities focus on the same disparate and subpopulations. If they do not focus on the same disparate and subpopulations, please add a separate record. Add a record for each high-need community in SPARS, regardless of it being a group or an individual.
Plan: From the subpopulations below, please select the disparate population(s) on which this high-need community(ies) is focusing its efforts. For each selected disparate population, provide estimates for how many individuals the high-need community(ies) plans to directly serve and indirectly reach with its efforts *per year*.	**Race** ○ African American/Black ○ American Indian or Alaska Native ○ Asian ○ Native Hawaiian or Other Pacific Islander ○ White ○ Two or more races	**Directly serve** refers to individual-based prevention strategies or services delivered directly to individuals, either on a one-on-one basis or in a group setting. Typically, the service provider and the participant are at the same location during the service encounter. Since providers have direct interaction with these individuals, they can keep accurate counts and, in many cases, collect data about the characteristics and outcomes of these participants through attendance lists and pre-post surveys. Examples include training sessions and educational classes.

Data Item	Response Options	Content Guidance & Related Definitions
Plan (continued)	**Ethnicity** ○ Hispanic or Latino ○ Not Hispanic or Latino **Sex** ○ Male ○ Female **LGBTQ** ○ Lesbian, Gay, Bisexual, Transgender, Questioning, or Two-Spirit	**Indirectly reach** refers to population-based prevention strategies aimed at affecting an entire population. Since there is no direct interaction between the populations affected by the services, counts of people reached are typically estimates obtained from sources such as the census (the population of the targeted community) or media outlets (estimated readership or audience size). There are two categories of indirect strategies commonly implemented by grantees: ○ Information Dissemination ○ Environmental Strategies
Actual: From the subpopulations below, please select all of the disparate populations on which this high-need community is focusing its efforts. For each selected disparate population, provide estimates for the actual number of individuals the high-need community(ies) directly served and indirectly reached *for this reporting period*.	**Race** ○ African American/Black ○ American Indian or Alaska Native ○ Asian ○ Native Hawaiian or Other Pacific Islander ○ White ○ Two or more races **Ethnicity** ○ Hispanic or Latino ○ Not Hispanic or Latino	This section appears when you are reporting actual values. To record actual values, you must first enter the planned values. After entering your planned values, select "Complete Plan." A prompt will pop up asking you to confirm that you want to complete the record. SPARS will then mark the plan as complete and an "Edit Actual" link will appear. Select this link to open the record. You will now see the "Actual" columns available where you can enter data for the actual number of people directly served and indirectly reached in each population. Enter and save this data so that SPARS includes it in your submission.

Data Item	Response Options	Content Guidance & Related Definitions
Actual (continued)	**Sex** ○ Male ○ Female **LGBTQ** ○ Lesbian, Gay, Bisexual, Transgender, Questioning, or Two-Spirit	
Describe why this high-need community(ies) has not yet identified (or finalized the identification of) a disparate population, when it intends to do so, and how soon implementation will begin.	Free text	You only need to respond to this item if your selection of the disparate population is in progress. If your selection is complete, enter "n/a" for not applicable. The field accepts up to 1,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
If "Show Additional Populations" is selected: From the options below, please select any additional subpopulation(s) on which this high-need community is focusing its efforts. For each subpopulation below, provide estimates for how many individuals you expect this high-need community to directly serve and indirectly reach with their efforts per year.	**Age** ○ 12–17 years old ○ 18–24 years old ○ 25–34 years old ○ 35–44 years old ○ 45–54 years old ○ 55–64 years old ○ 65+ years old **Residence** ○ Urban ○ City ○ Town ○ Suburb ○ Rural **Socioeconomic status** ○ High ○ Middle ○ Low **Other** ○ Service members, veterans, veterans, and their families ○ Persons with disabilities ○ Persons with mental illness ○ Other	Select "Show Additional Populations" to view this section. To record actual values, you must first enter the planned values. After entering your planned values, select "Complete Plan." A prompt will pop up asking you to confirm that you want to complete the record. SPARS then marks the plan as complete and an "Edit Actual" link appears. Select this link to open the record. You will now see the "Actual" columns available where you can enter data for the actual number of people directly served and indirectly reached in each population. Enter and save this data so that SPARS includes it in your submission. If you select "Other," enter a description of the population. The field accepts up to 2,500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Describe how and why the population(s) experiencing the disparity has changed.	Free text	This question only appears if you need to edit your Disparity Impact Statement. The field accepts up to 1,000 characters.
For each selected subpopulation, provide estimates for the actual number of individuals the High-Need Community(ies) directly served and indirectly reached for this reporting period	**Age** ○ 12–17 years old ○ 18–24 years old ○ 25–34 years old ○ 35–44 years old ○ 45–54 years old ○ 55–64 years old ○ 65+ years old	Select "Show Additional Populations" to view this section. To record actual values, you must first enter the planned values. After entering your planned values, select "Complete Plan." A prompt pops up asking you to confirm that you want to complete the record. SPARS marks the plan as complete and you will see an "Edit Actual" link. Select this link to open the record. You will now see the "Actual" columns available where you can enter data for the actual number of people directly served and indirectly reached in each population. Fill in this data and save it so that SPARS includes it in your submission. If you select "Other," enter a description of the population. The field accepts up to 250 characters.

Data Item	Response Options	Content Guidance & Related Definitions
For each selected subpopulation (continued)	**Residence** ○ Urban ○ City ○ Town ○ Suburb ○ Rural **Socioeconomic status** ○ High ○ Middle ○ Low **Other** ○ Service members, veterans, veterans, and their families ○ Persons with disabilities ○ Persons with mental illness ○ Other	
Describe how and why the population(s) experiencing the disparity has changed. (This question appears if you indicate you need to edit your plan.)	Free text	This question only appears if you need to edit your Disparity Impact Statement. The field accepts up to 1,000 characters.

Focus and Data Gaps

The following questions ask about ensuring that high-need communities focus on the subpopulation(s) experiencing disparities and about data gaps related to the disparate and subpopulation(s) that you identified. Select "Edit Focus and Data Gaps" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
What steps did you take to ensure that your high-need communities are focusing on the identified disparate and subpopulation(s)?*	Free text	The field accepts up to 1,000 characters.
Describe any data gaps you identified related to the disparate or subpopulation(s). Please be specific. If no data gaps currently exist, please enter "n/a" for not applicable.	Free text	The field accepts up to 1,000 characters.
For any data gaps described above, please explain how you are addressing the gaps. If you had none, please enter "n/a" for not applicable.	Free text	The field accepts up to 1,000 characters.

Access to Prevention Efforts

Increasing access to prevention efforts is an important part of reducing behavioral health disparities. Use this section to enter information about technical assistance and/or guidance that you provided to your high-need communities to increase access to prevention efforts for their identified disparate subpopulations. Be sure to consider this as it relates to implementation of policies, practices, and/or programs to address behavioral health disparities.

Data Item	Response Options	Content Guidance & Related Definitions
Briefly describe the specific strategies implemented to address behavioral health disparities in your high-need community(ies). Include any information on how you, as the grantee, are supporting its/their progress.	Free text	The field accepts up to 3,000 characters.
If you used a planning model, please briefly describe the model you are using and how you are ensuring your high-need community(ies) integrated it into its/their approach to addressing behavioral health disparities. If you did not use a planning model, enter "n/a" for not applicable. Note: You will report general updates in the Implementation section. Information reported here should be specific to behavioral health disparities.	Free text	The field accepts up to 3,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
From the list below, please select the strategies you developed and implemented to ensure that your high-need communities understand and are using the National CLAS Standards.*	○ Increased participation of disparate and subpopulations on advisory boards and workgroups ○ Developed strategic partnerships and collaborations with the goal of preventing behavioral health disparities among disparate and subpopulations ○ Increased capacity and readiness of high-need communities to prevent behavioral health disparities among identified disparate and subpopulations ○ Implemented diverse cultural health beliefs and practices ○ Used preferred languages ○ Addressed health literacy and other communication needs of all disparate and subpopulations ○ Other	Select all that apply. If you select "Other," enter a description of the strategy. The field accepts up to 250 characters.
How are communities documenting and monitoring use of National CLAS Standards?	○ Free text	The field accepts up to 3,000 characters.

Use and Reach of Prevention Efforts

Ensuring that the prevention efforts reach the populations experiencing the behavioral health disparity and that they in turn use them is another important factor. Use this section to enter information about steps you are taking to monitor implementation at the community level to address behavioral health disparities. Select "Edit Use and Reach of Prevention Efforts" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
How do you monitor the efforts related to addressing behavioral health disparities at the community level?*	Free text	The field accepts up to 3,000 characters.
What are your data collection processes related to behavioral health disparities data?*	Free text	The field accepts up to 3,000 characters.
How are you determining the accuracy of numbers directly served and numbers indirectly reached for each high-need community?	Free text	The field accepts up to 3,000 characters.
How are you helping communities use their data to address the identified behavioral health disparities?	Free text	The field accepts up to 3,000 characters.

Outcomes of Prevention Efforts

The goal is for prevention efforts is to produce positive outcomes for those experiencing disparities. Use this section to enter additional information on how you will assess behavioral health disparities outcomes at the community level. Select "Edit Outcomes of Prevention Efforts" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
How are you monitoring outcomes related to disparate subpopulations at the community level?*	Free text	The field accepts up to 3,000 characters.
Describe how you use outcome data related to disparate subpopulations to evaluate processes and/or make programmatic adjustments to address your identified priorities and issues.	Free text	The field accepts up to 3,000 characters.
Describe other ways that you use programmatic data to demonstrate the impact of your efforts on reducing behavioral health disparities.	Free text	The field accepts up to 3,000 characters.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to behavioral health disparities. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you conducted behavioral health disparities-related activities or faced new behavioral health disparities-related Barriers/Challenges during this reporting period.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ ASSESSMENT: Defined disparate population(s) (race, ethnicity, sex, LGBTQ) ○ ASSESSMENT: Defined additional high-need subpopulations (age, residential area, SES, other) ○ ASSESSMENT: Identified specific behavioral health disparities faced by your disparate or high-need subpopulation(s) ○ ASSESSMENT: Obtained data specific to your disparate or high-need subpopulation(s) ○ PLANNING: Considered behavioral health disparities in the planning process (e.g., in prioritization, community selection, or intervention selection) ○ ALL: Ensured the involvement of population(s) experiencing substance abuse-related behavioral health disparities in assessment, capacity building, planning, implementation, evaluation, or dissemination efforts ○ ALL: Integrated National Standards for Culturally and Linguistically Appropriate Services (CLAS) into grant program activities ○ CAPACITY: Developed coalitions or strategic partnerships with other agencies or key stakeholders to address substance abuse-related behavioral health disparities in your state, tribe, or jurisdiction ○ CAPACITY: Provided training to increase the capacity of prevention workforce and relevant agencies or organizations to address substance abuse-related behavioral health disparities in your state, tribe, or jurisdiction.	Report any accomplishments you experienced related to Behavioral Health Disparities during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name* (continued)	○ CAPACITY: Delivered training to increase subrecipient community capacity related to behavioral health disparities ○ IMPLEMENTATION: Ensured that implemented interventions were specific to behavioral health disparities of disparate and high-need subpopulation(s) ○ IMPLEMENTATION: Helped adapt interventions to make them apply to specific health disparities of disparate and high-need subpopulation(s) ○ IMPLEMENTATION: Increased availability of substance abuse prevention services to disparate population(s) (race, ethnicity, sex, LGBTQ) ○ IMPLEMENTATION: Increased availability of substance abuse prevention services to high-need subpopulation(s) (age, residential area, SES, other) ○ IMPLEMENTATION: Increased access to substance abuse prevention services to disparate population(s) (race, ethnicity, SES, other) ○ IMPLEMENTATION: Increased access to substance abuse prevention services to high-need subpopulation(s) (age, residential area, SES, other) ○ EVALUATION: Assessed changes in outcomes by populations that face behavioral health disparities related to substance abuse. ○ EVALUATION: Assessed changes in the number of individuals in the disparate population served or reached (race, ethnicity, sex, LGBTQ) ○ EVALUATION: Assessed changes in the number of individuals in the high-need subpopulation served or reached (age, residential area, SES, other)	

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name* (continued)	○ SUSTAINABILITY: Developed a plan to ensure that the progress made in addressing substance abuse-related behavioral health disparities is sustained beyond the grant program initiative ○ Other	
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ ASSESSMENT: Difficulty defining the disparate population(s) (race, ethnicity, sex, LGBTQ) ○ ASSESSMENT: Difficulty obtaining data on needs or outcomes for disparate population(s) (race, ethnicity, sex, LGBTQ) ○ ASSESSMENT: Difficulty obtaining data on needs or outcomes for high-need subpopulations (age, residential area, SES, other) ○ ALL: Difficulty engaging the population(s) experiencing substance abuse-related behavioral health disparities in assessment, capacity building, planning, implementation, evaluation, or dissemination efforts	Report any barriers/challenges you experienced related to Behavioral Health Disparities during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ ALL: Problems understanding or applying National Standards for Culturally and Linguistically Appropriate Services (CLAS) to grant program activities ○ CAPACITY: Difficulty developing coalitions or strategic partnerships with other agencies or key stakeholders to address substance abuse-related behavioral health disparities in your state, tribe, or jurisdiction ○ CAPACITY: Low capacity among subrecipients to address behavioral health disparities issues ○ CAPACITY: Difficulty finding or providing appropriate training for communities to address behavioral health disparities ○ IMPLEMENTATION: Lack of interventions specific to the disparate population(s) (race, ethnicity, sex, LGBTQ) ○ IMPLEMENTATION: Lack of interventions specific to the high-need subpopulation(s) (age, residential area, SES, other) ○ IMPLEMENTATION: Inability to adapt interventions to make them applicable to specific behavioral health disparities of disparate and high-need subpopulation(s) ○ EVALUATION: Lack of data to assess changes in outcomes by populations that face behavioral health disparities related to substance use.	

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ EVALUATION: Lack of data to assess changes in the number of individuals in the disparate population served or reached. (race, ethnicity, sex, LGBTQ) ○ EVALUATION: Lack of data to assess changes in the number of individuals in the high-need subpopulation served or reached. (age, residential area, SES, other) ○ Other	
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect disparities for more than one reporting period). The field accepts up to 3,000 characters.
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, please report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/challenge.

Data Item	Response Options	Content Guidance & Related Definitions
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Implementation

Implementation is the point at which you or your subrecipients conduct the grant's intervention activities.

Subrecipient Progress (PFS Only)

Select the Subrecipient that you wish to describe where it is in the process and its accomplishments to date. Select "Add Subrecipient Progress" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Select Subrecipient*	Drop-down menu with subrecipient names	**Remember:** You must first enter subrecipient information in the Administration section for subrecipient(s) names to appear in the drop-down menu.
Briefly describe where this subrecipient is in the process and their accomplishments to date*	Free text	The field accepts up to 1,000 characters.

Promising Approaches and Innovations

Use this section to enter information on any promising approaches or innovations demonstrated while implementing the grant. Only update this section if you implemented new promising approaches or innovations during this reporting period. Select "Add Approach or Innovation" to enter information.

Data Item	Response Options	Content Guidance & Related Definitions
Select Subrecipient* (PFS Only)	Drop-down menu with subrecipient names	This item is only visible if you entered subrecipients in the Administration section. If not, SPARS assumes that the approach or innovation that you are reporting is at the grantee level. Promising approaches and innovations could include innovations that you, as the grantee, implemented *with* a subrecipient or high-need community.
Promising Approach or Innovation Name*	Free text	The field accepts up to 100 characters.
Briefly describe the promising approach or innovation implemented*	Free text	The field accepts up to 1,000 characters.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to Implementation, including actions that you took to address Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you or your subrecipients conducted implementation-related activities or faced new implementation-related Barriers/Challenges during this reporting period (e.g., if you funded subrecipients or if your subrecipient communities began implementing interventions).

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Adapting interventions to ensure cultural competence while preserving core program elements ○ Developed effective stakeholder partnerships (e.g., between state agencies, and community and partner organizations) ○ Developed efficient systems for distributing tangible resources (e.g., naloxone kits) ○ Developing a process for selection of evidence-based policies, programs, and practices ○ Ensured interventions implemented with consistency and fidelity ○ Grantee-level interventions being implemented ○ Implemented policies within organizations to facilitate interventions ○ Leadership or political commitment to the issue among stakeholders ○ Monitoring the development and implementation of community-level strategic plans ○ Monitoring the implementation of interventions	Report any accomplishments that you experienced related to Implementation during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name* (continued)	○ Obtaining evidence that selected interventions are proven effective in research settings and communities ○ Selection of evidence-based interventions (policies, programs, practices) ○ Specific community-level interventions being implemented ○ Successfully recruited appropriate intervention attendees ○ Other	
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ Difficulties getting schools, law enforcement, medical facilities, or other organizations on board for implementation ○ Inadequate funds to thoroughly implement SPF model ○ Inadequate knowledge of evidence-based programs, policies, and practices that are relevant for our goals ○ Inadequate time for project staff and members to devote to the project	Report any barriers/challenges you experienced related to Implementation during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ Interventions not well attended by desired audience ○ Lack of collaboration between stakeholders (e.g., between agencies, between coalitions, between jurisdictions and funded community levels) ○ Lack of information on how to incorporate cultural competencies ○ Limited evidence-based programs, policies, and practices that are relevant for our goals ○ Limited stakeholder support for the program plan ○ Limited time to implement this Strategic Prevention Framework step ○ Logistical barriers to providing interventions (e.g., lack of space) ○ Logistical barriers to purchasing/distributing tangible resources (e.g., naloxone kits) ○ Major external community events like weather disasters ○ Need to adapt evidence-based programs, policies, and practices for our local culture and context ○ No leadership or political commitment to the issue ○ Staffing challenges (e.g., hiring delays, lack of adequate skills, turnover)	

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ State/Tribal/Jurisdictional contract or other delays getting subrecipient communities on board ○ Other	
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/ challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect implementation for more than one reporting period). The field accepts up to 3,000 characters.
Was technical assistance (TA) requested to help address the Barrier/ Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge?" enter the date when you requested TA for the barrier/ challenge.
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Evaluation

The **Evaluation** step comprises conducting, analyzing, reporting on, and using the results of outcome evaluation. Outcome evaluation involves collecting and analyzing information about whether the grantee achieved the intended Goals and Objectives. Evaluation results identify areas where grantees may need to make modifications to prevention strategies, and grantees can use these results to plan for sustaining the prevention effort as well as future endeavors.

Evaluation Plan (PFS Only)

The Evaluation Plan section is a Work Plan report. From the Progress Report module, you can view a previously entered report once your Project Officer approves it, if applicable, however, you cannot add or edit a report. To add or edit your Evaluation Plan, go to the Work Plans section on your Dashboard and select the plus sign (+) or "Edit" option next to Evaluation Plan. Please refer the Work Plans section of this document on page 11 for specifics on what to include in your plan.

Evaluation Report

If you have a local evaluation report that you wish to submit, you can upload it here. Do not use this section, however, to upload documents that are Work Plans, such as the Disparity Impact Statement or the Evaluation Plan.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Use the Browse button to select a file from your computer and click the Upload button to add your document to SPARS.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the Save button. If your document has not changed since your previous upload, you do not need to upload a new document. The field accepts up to 1,000 characters.

Other Document Upload

If you have other evaluation-related documents or if your Project Officer requests submission of additional documents, you can upload them here. Do not use this section, however, to upload documents that are Work Plans, such as the Disparity Impact Statement or the Evaluation Plan.

Data Item	Response Options	Content Guidance & Related Definitions
Upload Document	Document upload function	Use the Browse button to select a file from your computer and click the Upload button to add your document to SPARS.
Provide a brief description of your document and, if relevant, any changes made to your document between the previous version and this one.	Free text	Enter a description of the document, then click the Save button. If your document has not changed since your previous upload, you do not need to upload a new document. The field accepts up to 1,000 characters.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to Evaluation. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you or your subrecipients conducted evaluation-related activities or faced new evaluation-related Barriers/Challenges during this reporting period.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Assess program effectiveness ○ Development and implementation of community-level evaluation ○ Encourage needed improvement ○ Ensure service delivery quality ○ Identify successes ○ Monitor and evaluate all program activities ○ Promote sustainability of outcomes ○ Other	Report any accomplishments you experienced related to Evaluation during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ Challenges assessing program effectiveness ○ Challenges identifying successes ○ Challenges in development and implementation of community-level evaluation ○ Delays in hiring evaluator ○ Inadequate time for project staff and members to devote to the project	Report any barriers/challenges you experienced related to Evaluation during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Barrier/Challenge Name* (continued)	○ Lack of available data to assess differences for racial/ethnic minorities LGTBQ, or other special populations ○ Lack of available data to meet national cross-site evaluation or monitoring requirements ○ Lack of collaboration between stakeholders (e.g., between agencies, between coalitions, between jurisdictions and funded community levels) ○ Lack of cooperation/follow-through by communities/subrecipients/ partners in collecting data ○ Lack of data analysis or evaluation expertise ○ Limited time to implement this Strategic Prevention Framework step ○ Major external community events like weather disasters ○ Mismatch between level available data (e.g., county) and communities being funded (e.g., towns within counties) ○ No capacity for monitoring objectives and goals ○ Other data or data collection challenges ○ State/Tribal/Jurisdictional contract or other delays getting subrecipient communities on board ○ Underdevelopment of existing data or performance monitoring infrastructure ○ Other	

Data Item	Response Options	Content Guidance & Related Definitions
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect evaluation for more than one reporting period). The field accepts up to 3,000 characters.
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you select "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/challenge.
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/challenge. The field accepts up to 3,000 characters.

Sustainability

Sustainability is the process of ensuring an adaptive and effective system that achieves and maintains long-term results. Sustainability efforts may include the institutionalization of policies and practices, the acquisition of stable funding for training and prevention efforts, continued workforce development, and other efforts.

Accomplishments and Barriers/Challenges

Use this section to enter information on any Accomplishments and/or Barriers/Challenges that you experienced while performing activities related to sustainability. Please include actions you took to address any Barriers/Challenges. Select "Add Accomplishments" or "Add Barriers/Challenges" to enter information. After you save the Accomplishment or Barrier/Challenge, it will appear on the list in SPARS. You can click "Edit" to revise the record or you can add an additional record by clicking the "Add Accomplishments" or the "Add Barriers/Challenges" button.

Only update this section if you or your subrecipients conducted sustainability-related activities or faced new sustainability-related Barriers/Challenges during this reporting period.

Data Item	Response Options	Content Guidance & Related Definitions
Accomplishment Name*	○ Establishment of key ongoing policies ○ Leveraging funding and other resources to ensure sustainability of efforts ○ Planning for sustaining the infrastructure ○ Training grantee-level stakeholders and administrators on the importance of program activities ○ Other	Report any accomplishments you experienced related to sustainability during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Describe the Accomplishment*	Free text	Provide a brief description of the accomplishment experienced during the reporting period. You can report an accomplishment again in subsequent reporting periods (e.g., if a related accomplishment occurred in more than one reporting period). The field accepts up to 3,000 characters.
Barrier/Challenge Name*	○ No capacity for leveraging of funds or in-kind donations to ensure sustainability of activities ○ No coordination of funds to ensure sustainability of program activities ○ No leadership or political commitment to sustaining program activities ○ No planning for sustaining the infrastructure ○ Underdeveloped data infrastructure to demonstrate outcomes in support of sustaining activities ○ Other	Report any barriers/challenges you experienced related to sustainability during the reporting period. If you select "Other," provide a brief description. The field accepts up to 200 characters.
Describe the Challenge/Barrier*	Free text	Provide a brief description of the barrier/ challenge experienced during the reporting period. You can report a barrier/challenge again in subsequent reporting periods (e.g., if a barrier continued to affect sustainability for more than one reporting period). The field accepts up to 3,000 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Was technical assistance (TA) requested to help address the Barrier/Challenge?*	○ Yes ○ No	If you received TA for the barrier/challenge, please report it under Capacity in the Training and Technical Assistance section.
Date TA Requested*	Date (mm/dd/yyyy)	If you selected "Yes" for "Was TA requested to help address the Barrier/Challenge," enter the date when you requested TA for the barrier/ challenge.
In what other ways did you address the Barrier/Challenge?	Free text	Provide a brief description of ways, other than requesting TA, that you addressed this barrier/ challenge. The field accepts up to 3,000 characters.

Annual Outcomes

PFS grantees report Evidence-Based Practices, Policies, and Programs (EBPPPs) and community outcomes data on an annual basis. STOP Act grantees report EBPPPs every reporting period and community outcomes at least every 2 years.

EBPPPs are interventions that grantees implement to change policies, attitudes, and behaviors. **Community outcomes** come from various survey and administrative sources. SAMHSA uses community outcomes to reflect changes in the consumption, consequence, and intervening variables expected to be influenced by EBPPPs at the community level, which can be used to modify and improve interventions.

Evidence-Based Practices, Policies, and Programs (EBPPPs)

Use this section to report Evidence-Based Practices, Policies, and Programs as well as the numbers served and reached through your prevention interventions. **EBPPPs** are interventions that come from a Federal Registry, were reported as effective for your target substance in a published scientific journal article, were based on a documented theory of change, or were deemed effective by a panel of experts. A **panel of experts** may include qualified prevention researchers, local prevention practitioners, and key community leaders (such as law enforcement and education representatives, elders within indigenous cultures).

Under the Annual Outcomes tab, select "View" to open the EBPPPs section. PFS grantees can add or edit EBPPPs on the grantee level and/or the subrecipient level. STOP Act grantees will add or edit EBPPPs at the grantee level only. After completing the required information, select "Add EBPPP" to add the entry to your list, then select "Save." After you add the EBPPP, it will appear on the EBPPP main screen.

Data Item	Response Options	Content Guidance & Related Definitions
Did you or your subrecipients actively deliver any Prevention Interventions that are evidence-based programs, policies, or practices (EBPPPs), during the last fiscal year?*	○ Yes ○ No	Select "Edit" to answer this question. If you selected "Yes," the remaining fields in this section will open or appear for completion and editing. If you selected "No," the only item that will appear is "If no, explain why."
If no, explain why*	Free text	This item only appears if you selected "No" for "Did you or your subrecipients actively deliver any Prevention Interventions that are evidence-based programs, policies or practices (EBPPPs), during the last fiscal year?" The field accepts up to 1,000 characters.

Grantee-Level Evidence-Based Practices, Policies, and Programs (EBPPPs)

Select "Edit" to begin entering grantee-level information.

Data Item	Response Options	Content Guidance & Related Definitions
Status of Intervention*	○ Active ○ Inactive	This item only appears after you enter an intervention. To edit the status of the intervention, click the "Active/Inactive" check box on the EBPPP grid showing implemented interventions. **Active** indicates that you implemented the intervention during the reporting period. **Note:** When an EBPPP is "Active," you can update the remaining fields in this section. **Inactive** indicates that you did not implement the intervention during the period. **Note:** When an EBPPP is "Inactive," SPARS locks the remaining fields in this section and you cannot update them. In addition, when an intervention is "Inactive," SPARS deletes data on the number of people served and reached.
Prevention Intervention Name*	Drop-down menu with prevention intervention names	

Data Item	Response Options	Content Guidance & Related Definitions
Was this EBPPP intervention actively implemented in this community prior to receiving funding for this grant?*	○ Yes ○ No	
Target of the Intervention* [**Note:** You should only report on EBPPPs that target substances appropriate for the grant program you are reporting on.]	○ Alcohol ○ Prescription Drug Misuse ○ Marijuana ○ Opioids ○ Other	Select *all* targets (i.e., mark all that apply). If you select "Other," enter a description to specify the target of the intervention. The field accepts up to 100 characters.
Number Served*	Open-ended numerical response	Enter the total number of people served during the last fiscal year. **Number Served** refers to individual-based prevention strategies or services directly delivered to individuals, either on a one-on-one basis or in a group setting. Typically, the service provider and the participant are at the same location during the service encounter. Since providers have direct interaction with these individuals, they can keep accurate counts and, in many cases, collect data about the characteristics and outcomes of these participants through attendance lists and pre-post surveys. Examples include training sessions and educational classes.

Data Item	Response Options	Content Guidance & Related Definitions
Number Reached*	Open-ended numerical response	Enter the total number of people reached during the last fiscal year. **Number Reached** refers to population-based prevention strategies aimed at affecting an entire population. Since there is no direct interaction with the populations affected by the services, counts of people reached are typically estimates obtained from sources such as the census (the population of the targeted community) or media outlets (estimated readership or audience size). There are two categories of indirect strategies commonly implemented by grantees: ○ Information Dissemination ○ Environmental Strategies

REMINDER: After completing the required information, select "Add EBPPP" to add the entry to your list, then "Save." After you add the EBPPP, it will appear on the EBPPP main screen.

Subrecipient-Level Evidence-Based Practices, Policies, and Programs (EBPPPs) (PFS Only)

Select "Edit" to begin entering subrecipient-level information.

Data Item	Response Options	Content Guidance & Related Definitions
Select Subrecipient	Drop-down menu with subrecipient names	You must first enter subrecipient information in the Administration section for subrecipients' names to appear in the drop-down menu.
Status of Intervention*	○ Active ○ Inactive	This item only appears after you enter an intervention. To edit the status of the intervention, click on the "Active/Inactive" check box on the EBPPP grid that shows implemented interventions. **Active** indicates that the grantee implemented the intervention during the reporting period. **Note:** When an EBPPP is "Active," you can update the remaining fields in this section. **Inactive** indicates that the grantee did not implement the intervention during the reporting period. **Note:** When an EBPPP is "Inactive," SPARS locks the remaining fields in this section and you cannot update them.

Data Item	Response Options	Content Guidance & Related Definitions
Prevention Intervention Name*	Drop-down menu with prevention intervention names	
Was this EBPPP intervention actively implemented in this community prior to receiving funding for this grant?*	○ Yes ○ No	
Target of the Intervention* [**Note:** You should only report on EBPPPs that target substances appropriate for the grant program you are reporting on.]	○ Alcohol ○ Prescription Drug Misuse ○ Marijuana ○ Opioids ○ Other	Select all targets (i.e., mark all that apply). If you select "Other," enter a description to specify the target of the intervention. The field accepts up to 100 characters.
Number Served*	Open-ended numerical response	Enter the total number of people served during the last fiscal year. **Number Served** refers to individual-based prevention strategies or services directly delivered to individuals, either on a one-on-one basis or in a group setting. Typically, the service provider and the participant are at the same location during the service encounter. Since providers have direct interaction with these individuals, they can keep accurate counts and, in many cases, collect data about the characteristics and outcomes of these participants through attendance lists and pre-post surveys. Examples include training sessions and educational classes.

Data Item	Response Options	Content Guidance & Related Definitions
Number Reached*	Open-ended numerical response	Enter the total number of people reached during the last fiscal year. **Number Reached** refers to population-based prevention strategies aimed at affecting an entire population. Since there is no direct interaction with the populations affected by the services, counts of people reached are typically estimates obtained from sources such as the census (the population of the targeted community) or media outlets (estimated readership or audience size). There are two categories of indirect strategies commonly implemented by grantees: ○ Information Dissemination ○ Environmental Strategies

REMINDER: After completing the required information, select "Add EBPPP" to add the entry to your list, then select "Save." After you add the EBPPP, it will appear on the EBPPP main screen.

PFS grantees should enter EBPPP data in SPARS by **October 31**, but not complete the submission process until after they complete the full Progress Report.

STOP Act grantees should enter EBPPP data in SPARS each reporting period. Grantees submit EBPPPs as part of their Progress Report.

Community Outcomes

PFS grantees use this section to enter community outcome data at the grantee-level and for subrecipients. If you do not have subrecipients, use this section to enter grantee-level outcome data. To begin entering data at the grantee-level, click on "Add Baseline Response Data." To begin entering data for your subrecipients, click on "Add Subrecipient Response Data" and select a subrecipient from the drop-down menu. Once you have added records, you will be able to view previously added records for the selected subrecipient.

STOP Act grantees will use this section to enter community outcome data at the grantee-level. To begin entering grantee-level data, click on "Add Baseline Response Data."

Community outcomes data include survey data and administrative data:

○ **Survey data** is data collected from individuals, usually a sample of the population, by asking questions either in person, on paper, by phone, or online. Examples of survey data include the National Survey of Drug Use and Health (NSDUH), Youth Risk Behavior Survey (YRBS), and Behavioral Risk Factor Surveillance System (BRFSS).

○ **Administrative data** refers to information collected primarily for administrative—not research—purposes. Government departments and other organizations often collect this type of data for the purposes of registration, transaction, and record keeping, and often the data include program outcome indicators. Examples of administrative data include educational records, client information from financial institutions, and hospital records of patient visits and health outcomes.

PFS Grantees

For community outcomes data, ideally, the baseline data points reflect data collected in the federal fiscal year *before* PFS funding:

○ PFS 2014: October 1, 2013–September 30, 2014

○ PFS 2015: October 1, 2014–September 30, 2015

○ PFS 18: October 1, 2017–September 30, 2018

○ PFS 19: October 1, 2018–September 30, 2018

○ PFS 20: October 1, 2019–September 30, 2020 (and so on)

If you are providing data to meet requirements for a specific PFS Required Outcome Measure and your data source does not match the PFS Required Outcome *exactly* (survey item wording/response options or administrative data measure calculation) nor does the data source match the list of acceptable PFS Required Outcome Measure substitutes (see Table A.3 in Appendix A), you are required to submit a substitute data request and receive approval (*however,* for PFS 2016 and earlier, this only applies if you did not receive previous approval). Use the Substitute Data Source Request (see the Work Plans section of this document starting on page 12) to submit a request for review and approval. See Appendix A, Table A.2, to view the PFS required outcome measures. Grantees should enter Community Outcomes data in SPARS by October 31, but not submit the data until after they complete the full Progress Report.

SAMHSA requires PFS grantees funded in 2016 or earlier to submit the following community outcomes data:

- **One Annual Exact Measure for Underage Drinking:** Grantees must report one annual exact outcome measure for underage drinking.

- **One Annual Exact Measure for Prescription Drugs:** Grantees must report one annual exact outcome measure for prescription drugs.

- **One Annual Exact Measure for Each Additional Targeted Priority:** Grantees must report one annual exact outcome measure for each additional targeted priority (such as marijuana, in addition to underage drinking and prescription drugs). Unless you have already received approval, grantees must submit a substitute data request because exact annual outcome measures do not exist.

PFS grantees funded in 2018 or 2019 must submit the following community outcomes data:

- **One Annual Exact Measure for Underage Drinking:** Grantees must report one annual exact outcome measure for underage drinking.

- **One or Two Additional Measure**s: Grantees that focus on additional substances must report one or two additional measures. These measures should be data-driven substance use prevention priorities (such as marijuana, cocaine, methamphetamine, prescription drugs, and so on) that align with the substances your program is targeting.

PFS grantees funded in 2020 or later should contact their Project Officer for details on the outcome measure requirements.

STOP Act Grantees

For community outcomes data, ideally, the baseline data points reflect data collected in the federal fiscal year *before* STOP Act funding:

- ○ STOP Act 2016: October 1, 2015–September 30, 2016

- ○ STOP Act 2017: October 1, 2016–September 30, 2017

- ○ STOP Act 2019 and later: October 1, 2018–September 30, 2018 (and so on).

Grantees must submit a data request for the four alcohol measures and sources they want to use and receive approval before entering community outcomes. For STOP Act 2016 and 2017, however, this only applies if you did not receive prior approval. Use the Data Request (see the Work Plans section of this document starting on page 25) to submit a request for review and approval. See Appendix B to view the STOP Act required outcome measures.

Grantees should enter community outcomes data in SPARS by **February 28** at least once every 2 years. On the year you are submitting community outcomes, you should not submit the data until you complete the full Progress Report.

STOP Act 2016 and 2017 grantees will continue to follow their schedule community outcome reporting.

STOP Act 2019 grantees should report baseline data with their first progress report due on February 28, 2021, and report follow-up data with their February 2022 and 2024 progress reports.

STOP Act grantees must submit the following community outcomes data:

- ○ Past 30-day alcohol use

- ○ Perception of risk or harm from alcohol

- ○ Perception of parental disapproval of alcohol use

- ○ Perception of peer disapproval of alcohol use

Survey Data

Survey data is data collected from individuals by asking questions either in person, on paper, by phone, or online. Examples of survey data include the National Survey of Drug Use and Health (NSDUH), Youth Risk Behavior Survey (YRBS), and Behavioral Risk Factor Surveillance System (BRFSS). To enter Survey Data, select "Add Data Source," enter the name of the survey, and select "Save."

Data Item	Response Options	Content Guidance & Related Definitions
Data Source Name*	Free text	The field accepts up to 200 characters.

After you enter the data source, select the arrow next to the data source name and select "Add Outcome Measure" to enter data associated with that data source.

Data Item	Response Options	Content Guidance & Related Definitions
Specified Substance*	○ Alcohol ○ Prescription drugs ○ Other	Please select the specific substance (alcohol prescription drugs, other) for the measure that you are reporting in this record. If you are reporting data for a substance that is not alcohol or prescription drugs, select "Other" and you will receive a prompt to describe the substance(s). "Other" could be a specific substance or drugs in general, for example, if you are reporting data for Family Communication about Drugs or Drug-Related Car Crashes. **Note:** You must report at least one outcome for both alcohol and prescription drugs for each subrecipient, regardless of whether you also report data for additional substances.
Other (If "Other" is selected for Specified Substance)	Free text	This item only appears if you selected "Other" for the specified substance. The field accepts up to 500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Outcome Measure*	**Alcohol Outcome Measure Response Options** o 30-day use o Binge drinking o Perception of parental disapproval/attitude o Perception of peer disapproval/attitude o Perceived risk/harm of use o Substance-related car crashes and injuries o Substance-related crime o Family communication o Substance-related emergency room visits o Other **Prescription Drug Outcome Measure Response Options** o 30-day use o Past 12-month use o Perception of parental disapproval/attitude o Perception of peer disapproval/attitude o Perceived risk/harm of use o Substance-related car crashes and injuries o Substance-related crime o Family communication o Substance-related emergency room visits o Other	Select the Required Outcome Measure that you are reporting in this record. If you are reporting data for an outcome that is not a Required Outcome Measure, select "Other" and you will receive a prompt to describe the outcome measure. **Note:** You must report a Required Outcome Measure for each subrecipient, regardless of whether you also reported data for additional outcomes. **Note:** You can collect and report perception of parental or peer disapproval or attitude, perceived risk or harm of use, and family communication about drug use measures, however, you cannot use these measures as annual exact outcome measures. For more detail on community outcomes reporting requirements, review the information on **survey data** and **administrative data** on page 102.

Data Item	Response Options	Content Guidance & Related Definitions
Outcome Measure* (continued)	**Other Substance Outcome Measure Response Options** ○ 30-day use ○ Perception of parental disapproval/attitude ○ Perception or peer disapproval/attitude ○ Perceived risk/harm of use ○ Substance-related car crashes and injuries ○ Substance-related crime ○ Family communication ○ Substance-related emergency room visits ○ Other	
Other Outcome Measure*	Free text	This item only appears if you selected "Other" for the required outcome measure. The field accepts up to 500 characters.
Are you reporting an exact PFS Required Outcome, an approved substitute PFS Required Outcome, or neither?* (PFS only)	○ Exact PFS Required Outcome Measure ○ Approved substitute PFS Required Outcome Measure ○ Not a PFS Required Outcome Measure or approved substitute	Choose "Exact PFS Required Outcome Measure" only if the measure (survey item and response items, measure calculation) matches the PFS Required Outcome Measure wording exactly. Choose "Approved substitute PFS Required Outcome Measure" if you received approval to use a measure that approximates the PFS Required Outcome Measure but does not use the measure's exact wording. Otherwise, choose "Not a PFS Required Outcome Measure or substitute." Reporting additional data beyond the required measure is optional.

Data Item	Response Options	Content Guidance & Related Definitions
Survey Item*	Free text	Indicate for which survey item you are reporting data. Type the source item *verbatim*, providing the exact wording of the item as it appears on the survey instrument. For example, *During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?* This field accepts up to 500 characters.
Response Options*	Free text	Enter the response options for the survey item used for this measure. Type the entire set of response options *verbatim*, exactly as they appear on the survey instrument. If applicable, include the associated codes for each response that you used in analyses. The coding schema is necessary for CSAP to understand reported outcomes that are means, medians, and so forth. **Example:** A number between 0 and 30 or for example: 0 = no risk, 1 = slight risk, 2 = moderate risk, 3 = great risk, 99 = don't know/can't say. This field accepts up to 1,000 characters.
Reported Outcome Description*	Free text	Provide a description of the specific outcome you will be reporting for this measure. For example: *Percentage of Grade 9 students who used alcohol in the past 30 days.* This field accepts up to 1,000 characters.

Remember:

- Click on "Add Follow-up Data" to add follow-up data for a previously entered baseline record.

- To edit existing records, click "Edit" next to the Survey Item name.

- To enter Subrecipient Survey Response Data, select "Add Subrecipient Response Data."

- If you are entering survey data at the grantee level, select "Add Baseline Response Data."

Response Data

Data Item	Response Options	Content Guidance & Related Definitions
Subrecipient* [Item only appears if applicable]	Drop-down menu with subrecipient names	You must first enter subrecipient information in the Administration section for subrecipient(s) names to appear in the drop-down menu. **Note:** Grantees that do not fund subrecipients will not see this item and will enter data at the grantee level.
Data Collection Date*	Date Field	Report the month and year when you conducted the survey. If data collection took multiple months, report the month at the middle of the period. If data collection took an even number of months, report the middle month closer to the end date of the survey. If you combined multiple years of data into a single estimate due to a small sample size, report the month and year of the most recent survey and check "Multiple Year Pooled Estimate." **Note:** CSAP must pre-approve the use of multi-year estimates.

Data Item	Response Options	Content Guidance & Related Definitions
Population Parameters*	o Age Range o Grade	Indicate whether you defined the survey population by Age (e.g., 18- to 25-year-olds) or by Grade (e.g., 9th grade students). If you chose Age, SPARS will prompt you to enter the applicable age range by indicating minimum and maximum ages. If you chose Grade, SPARS will prompt you to enter the applicable grade levels by indicating the grades involved in the survey data.
Age Range Minimum* (If "Age range" is selected for Population Parameters)	Numerical	Enter the lower bounds of the age range for the population specified.
Age Range Maximum* (If "Enter age range" is selected for Population Parameters)	Numerical	Enter the upper bounds of the age range for the population specified. For example, if the outcome is alcohol-related motor vehicle crashes among young adults age 18 to 25, the maximum would be 25. If the population age range is bound at the lower, but not the upper end (such as age 16 and older), enter 99 as the maximum age.

Data Item	Response Options	Content Guidance & Related Definitions
Grades* (If "Grade" is selected for Population Parameters)	○ K ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10 ○ 11 ○ 12 ○ College	Select the grade(s) of the population represented by the survey. When possible, report data for each specified grade separately. If you administered the survey to Grade 7 students *only*, then select 7. If you administered the survey to students in Grades 9 and 11 and you are reporting current data for Grade 9 students, then select 9. If you administered the survey to students in Grades 9 and 11 and you are reporting data for both grades together, select *both* 9 and 11.
Other Sample Descriptors*	Free text	Describe any other distinguishing characteristics of the sample, if applicable. For example, the sample may represent a specific racial/ethnic group, LGBTQ, or veterans. This field accepts up to 500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Description of Sampling Design*	○ Census ○ Convenience Sample ○ Random Sample ○ Stratified Random Sample	Indicate which type of sampling you used for the survey: **Census:** Researchers ask all members of the target population to participate. **Convenience sample:** The survey uses any members of the target population who are available or volunteer to participate (e.g., intercept surveys at malls or schools, Facebook surveys). **Random sample:** Researchers randomly select individuals to complete the survey. **Stratified random sample:** Researchers divide members of the population into subgroups, or strata, then apply random sampling within each stratum.
Multiple Year Pooled Estimate*	○ Yes ○ No	Indicate whether you are reporting data pooled across several years of survey data. **Note:** You must receive prior approval from CSAP to report pooled multi-year estimates.
Multiple Year Estimate Description* (If "Yes" is selected for Multiple Year Pooled Estimate)	Free text	Report the data collection years for the multi-year pooled estimate that you are reporting. This field accepts up to 100 characters.
Value Type*	○ Percentage ○ Mean ○ Other	Select from the drop-down list the type of number that you will report in the Calculated Value field (percentage, mean, other).

Data Item	Response Options	Content Guidance & Related Definitions
Other (If "Other" is selected for Value Type)	Free text	This item only appears if you selected "Other" for Value Type. The "Other" field accepts up to 500 characters.
Calculated Value*	Numerical response	Enter the actual numeric result. For example, to report that 23.20 percent of the targeted population used alcohol in the past 30 days enter "23.20." If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. Once data are available, return to this field and enter the correct result. The percentage must be between 0 percent and 100 percent with up to two decimals.
Standard Error*	Numerical response	Enter the standard error for the calculated value, computed considering the sampling design used (such as simple random, two-stage cluster design). Enter numeric values up to two decimals.
Standard Deviation*	Numerical response	Enter the standard deviation for the calculated value computed considering the sampling design used (such as simple random or two-stage cluster design).

Data Item	Response Options	Content Guidance & Related Definitions
Survey Item Valid N*	Numerical response	Indicate how many respondents provided a valid response (i.e., not missing) to the survey item. If data to complete this field are not yet available, please enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result. *Survey Item Valid N is required.*
Comments	Free text	Provide any comments that you think may help the reader understand the data and other information you are providing. This field accepts up to 500 characters.

Administrative Data

Administrative data is data collected for the purposes of registration, transaction, and record keeping, however, these data often include indicators of program outcomes. Examples of administrative data include educational records, client information from financial institutions, and hospital records of patient visits and health outcomes. To enter Administrative Data, select "Add Data Source," enter the name of the new data source, and select "Save."

Data Item	Response Options	Content Guidance & Related Definitions
Data Source Name*	Free text	The field accepts up to 200 characters.

After you enter the data source, select the arrow next to the data source name and select "Add Outcome Measure" to enter data associated with that data source.

Data Item	Response Options	Content Guidance & Related Definitions
Specified Substance*	○ Alcohol ○ Prescription drugs ○ Other	Select the specific substance (alcohol prescription drugs, other) for the measure you are reporting in this record. If you are reporting data for a substance that is not alcohol or prescription drugs, select "Other" and you will receive a prompt to describe the substance(s). "Other" could be a specific substance or drugs in general, for example, if you are reporting data for Family Communication about Drugs or Drug-Related Car Crashes. **Note**: You must report at least one outcome for both alcohol and prescription drugs for each subrecipient, regardless of whether you reported data for additional substances.
Other Substance* (If "Other" is selected)	Free text	This item only appears if you selected "Other" for Specified Substance. The field accepts up to 500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Outcome Measure*	**Alcohol Outcome Measure Response Options** ○ 30-day use ○ Binge drinking ○ Perception of parental disapproval/attitude ○ Perception of peer disapproval/attitude ○ Perceived risk/harm of use ○ Substance-related car crashes and injuries ○ Substance-related crime ○ Family communication ○ Substance-related emergency room visits ○ Other **Prescription Drug Outcome Measure Response Options** ○ 30-day use ○ 12-month use ○ Perception of parental disapproval/attitude ○ Perception of peer disapproval/attitude ○ Perceived risk/harm of use ○ Substance-related car crashes and injuries ○ Substance-related crime ○ Family communication ○ Substance-related emergency room visits ○ Other	**Note:** You can collect and report perception of parental or peer disapproval/attitude, perceived risk or harm of use, and family communication about drug use measures, however, you cannot use these measures as annual exact outcome measures. See page 103 for a summary of the community outcomes reporting requirements.

Data Item	Response Options	Content Guidance & Related Definitions
	Other Substance Outcome Measure Response Options ○ 30-day use ○ Perception of parental disapproval/attitude ○ Perception of peer disapproval/attitude ○ Perceived risk/harm of use ○ Substance-related car crashes and injuries ○ Substance-related crime ○ Family communication ○ Substance-related emergency room visits ○ Other	
Other Outcome Measure*	Free text	This item only appears if you selected "Other" for the required outcome measure. The field accepts up to 500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Are you reporting an exact PFS Required Outcome, an approved substitute PFS Required Outcome, or neither? * **(PFS only)**	○ Exact PFS Required Outcome Measure ○ Approved substitute PFS Required Outcome Measure ○ Not a PFS Required Outcome Measure or approved substitute	Choose "Exact PFS Required Outcome Measure" only if the measure (survey item and response items, measure calculation) matches the PFS Required Outcome Measure wording exactly. Choose "Approved substitute PFS Required Outcome Measure" if you received approval to use a measure that approximates the PFS Required Outcome Measure, but does not use the measure's exact wording. Otherwise, choose "Not a PFS Required Outcome Measure or approved substitute." Reporting additional data beyond the required measure is optional.
Reported Outcome/Measure Calculation Description*	Free text	Provide a description of the specific outcome that you will report and how you will calculate the measure. For example, if you intend to report the percentage of motor vehicle fatalities in County X that were alcohol-related, then you might enter this text in the reported outcome/measure calculation field: *The number of alcohol-related traffic fatalities in County X divided by the total number of traffic fatalities in County X and multiplied by 100.* The field accepts up to 1,000 characters.

Remember:

- o Click on "Add Follow-up Data" to enter follow-up data for an existing baseline record.
- o To edit existing records, click "Edit."
- o To enter Subrecipient Administrative Response Data, select "Add Subrecipient Response Data."
- o If you are entering Administrative Data at the grantee level, select "Add Baseline Response Data."

Response Data

Data Item	Response Options	Content Guidance & Related Definitions
Select Subrecipient* [Item only appears if applicable]	Drop-down menu with subrecipient names	You must first enter subrecipient information in the Administration section for subrecipient(s) names to appear in the drop-down menu. **Note:** Grantees that do not fund subrecipients will not see this item and will enter data at the grantee level.
Data Source Time Frame Begin Date*	Date field	Insert a beginning date (e.g., 10/01/2012) for the time period of the data you are submitting.
Data Source Time Frame End Date*	Date field	Insert an ending date (e.g., 09/30/2013) for the time period of the data you are submitting.
Population Parameters*	o Age range o Grade	Indicate if the population represented by the administrative data is based on age or grade.
Age Range Minimum* (If "Age range" is selected for Population Parameters)	Numerical	Enter the lower bounds of the Age Range for the population specified.

Data Item	Response Options	Content Guidance & Related Definitions
Age Range Maximum* (If "Enter age range" is selected for Population Parameters)	Numerical	Enter the upper bounds of the Age Range for the population specified. For example, if the outcome is alcohol-related motor vehicle crashes among young adults age 18 to 25, the maximum would be 25. If the population age range is bound at the lower end, but not the upper end (e.g., age 16 and older), enter 99 as the maximum.
Grades* (If "Enter grade[s]" is selected for Population Parameters)	○ K ○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9 ○ 10 ○ 11 ○ 12 ○ College	Select the grade(s) of the population represented by the data. When possible, report data for each specified grade separately. For example, if the data reflect Grade 7 students only, then select 7. If the data reflect students in Grades 9 and 11, but you are reporting data only for Grade 9 students, then select 9. If the data represent students in Grades 9 *and* 11 and you are reporting the data together, select *both* 9 and 11.
Other Sample Descriptors*	Free text	Describe any other distinguishing characteristics of the sample, if applicable. For example, the sample may represent a specific racial/ethnic group, LGBTQ, military, and so on. The field accepts up to 500 characters.

Data Item	Response Options	Content Guidance & Related Definitions
Number of Events*	Numerical	Enter the number of times this event occurred in the community. If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result.
Denominator Definition*	Free text	Indicate how you defined the reported outcome denominator. This information should be consistent with the information in the Reported Outcome/ Measure Calculation Description field. For example, if the reported outcome/measure calculation description is the percentage of motor vehicle crashes attributed to alcohol, the denominator definition is the total number of motor vehicle crashes in the community. The field accepts up to 1,000 characters.
Denominator Value*	Numerical	Indicate the numeric value of the denominator for this reported outcome. This could be the number of people for the specified population (e.g., the number of drivers aged 16–25) or the total number of events on which the smaller subset of events is based (e.g., the number of motor vehicle crashes). If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result.

Data Item	Response Options	Content Guidance & Related Definitions
Value Type*	○ Percentage ○ Rate per 1,000 ○ Rate per 10,000 ○ Rate per 100,000 ○ Other	Select from the drop-down list the type of number you will report in the Calculated Value field (percentage, mean, other). If you are reporting a value type other than those listed, select "Other" and you will be asked to describe the value type.
Other Value Type* (If "Other" is selected)	Free text	The field accepts up to 500 characters.
Calculated Value*	Numerical	Enter the actual numeric result. For example, to indicate that 30.2 percent of traffic crashes were alcohol-related enter "30.2." If data to complete this field are not yet available, enter the following 10-digit "not yet available" code: 9999999999. **Remember:** Once data are available, return to this field and enter the correct result.
Comments	Free text	Provide any comments that you think may help clarify the data and information you have provided. The field accepts up to 1,500 characters.

Appendix A. PFS Community Outcomes Requirements

Note that the term **grantee** refers to the state, jurisdiction, or tribal entity receiving the Partnerships for Success (PFS) grant from the Center for Substance Abuse Prevention (CSAP). The term **subrecipients** refers to the community entities that receive funds from the grantee to carry out Strategic Prevention Framework (SPF)-PFS activities at the community level. CSAP considers some tribal and Pacific jurisdiction grantees to be single-community grantees, which do not have subrecipients.

Purpose of Community Outcomes Data

The purpose of community outcomes data is to:

- help CSAP track overall progress on selected PFS Required Outcome Measures, and
- reflect changes in the consumption and consequence variables expected to be influenced by SPF-PFS programming at the community level that can be used to modify and improve interventions.

Providing outcome measures allows CSAP to meet its federal reporting requirements. Grantees that want to use substitute measures for their annual outcomes must obtain approval for them by submitting descriptions of those measures through the Substitute Data Request form in SPARS.

Community Outcomes Data Reporting Requirements

Grantees must report at least two annual exact measures (or approved substitute measures) per subrecipient (or at the grantee level if you do not fund subrecipients).

PFS grantees funded in 2016 or earlier reporting requirements:

- Grantees must report one annual exact measure for underage drinking.
- Grantees must report one annual exact measure for prescription drugs.
- If you target priorities in addition to underage drinking and prescription drugs (such as marijuana), you must report one annual exact measure for each additional priority targeted. If you have not received prior approval, you must submit a Substitute Data Source Request because exact annual outcome measures do not exist.

Note: Grantees must provide an annual exact outcome measure for both prescription drug and underage drinking even if the community is only targeting one or a different substance (e.g., marijuana).

PFS grantees funded in 2018 and 2019 reporting requirements:

○ Grantees must report one annual exact measure for underage drinking.

○ Grantees that focus on additional substances must report one or two additional measures. These additional measures should be data-driven substance use prevention priorities (such as marijuana, cocaine, methamphetamine, prescription drugs) that align with the substances the program is targeting.

PFS grantees funded in 2020 or later should contact their Project Officer for details on the required community outcome measures.

It is important to note the following:

○ While you must submit annual exact measures as described above, you can submit additional annual measures as well as measures that are available less frequently, such as biennial survey data.

○ You cannot use the National Survey on Drug Use and Health sub-state report to meet community outcomes reporting requirements due to geographic mismatch, pooling data to form 3-year estimates, and wide confidence intervals. Examples of survey data that may be alternatives include Youth Risk Behavior Survey (YRBS), Communities That Care, PRIDE, Behavioral Risk Factor Surveillance System (BRFSS), and state-specific or community-specific surveys; see Table A.2 for more detail.

Grantees can contact the SPARS Help Desk about potential annual data sources and the Help Desk will forward these questions to SAMHSA staff. Grantees can also contact their Project Officer for assistance.

Exact and Substitute PFS Required Outcome Measures

What qualifies as an exact PFS required outcome measure?

An exact PFS Required Outcome Measure consists of the following:

- For survey items, an exact PFS Required Outcome Measure is an outcome measure with the exact item wording and response options provided in Table A.2 (e.g., *percentage who report using in the past 30 days*).

- For Administrative Data, it is an outcome measure with the exact reported outcome/measure calculation as provided in Table A.2 (e.g., *the number of alcohol-related traffic crashes divided by the total number of traffic crashes and multiplied by 100*).

- If grantees are targeting substances other than alcohol and prescription drugs and CSAP requires you to report an exact measure, you must submit a Substitute Data Source Request because exact annual outcome measures for other substances do not exist.

What if we do not have a data source that matches the related PFS required outcome measure exactly?

First check Table A.2 to see if any commonly used surveys have pre-approved substitute outcomes measures that you can use. If so, check online for the most up-to-date version of the survey. Grantees must use the exact item wording and response choices, and in these cases, you do not need to submit a Substitute Data Source Request. If there is no pre-approved substitute outcome measure, the grantee must submit a Substitute Data Source Request in SPARS (for details, see the Work Plans section starting on page 12 of this document).

In situations of extremely limited data availability, CSAP encourages grantees to contact the SPARS Help Desk. Grantees can also contact their Project Officer for assistance or you may schedule a meeting with SAMHSA to discuss your options.

How do I get a substitute measure approved?

If you would like to use a data source to meet annual alcohol or prescription drug community outcome reporting requirements that does not match the related PFS Required Outcome Measure exactly, or if you are targeting additional substances and therefore no exact PFS Required Outcome Measures exist, you must submit and receive approval using the substitute data request form. To begin the substitute measure approval process:

1. First, decide whether CSAP is likely to approve your proposed substitute. Table A.2 (page 131) lists PFS Required Outcome Measures and Table A.3 (page 136) provides a comparison of PFS Required Outcome Measure survey items and items from commonly used surveys. This information will give you an idea of CSAP's expectations for alcohol- and prescription drug-related measures as well as the type of measures that may be acceptable for other substances.

   Before submitting a Substitute Data Source Request for alcohol or prescription drug measures, you must meet these minimum criteria:

   a. For survey data, the wording of the survey question and response options for the proposed substitute measure must align with the intent of the PFS Required Outcome Measure so that you are measuring the same construct.

   b. The proposed substitute measure must have the same recall interval (i.e., reference the same time frame) as the PFS Required Outcome measure.

   c. The proposed substitute measure must be able to yield a reported outcome (e.g., prevalence estimate) that is like the PFS Required Outcome Measure item.

2. Once you are ready to submit a Substitute Data Source Request, complete the form in the DSP-MRT Work Plan section (see Work Plans section, page 12) and submit the form for approval.

Remember: If you are targeting any substances other than alcohol and prescription drugs and must report an exact measure, you must submit a Substitute Data Source Request because exact annual outcome measures for other substances do not exist.

Baseline and Follow-up Community Outcomes Data Submission Dates

When is the data submission deadline?

The deadline for entering community outcome data into the Annual Outcomes tab of the Progress Report is **October 31** of each year, unless otherwise specified.

The *Community-Level Outcome Data* module in the Annual Outcomes tab of the Progress Report does not close, which means that grantees can enter these data as they become available to meet the October 31 deadline.

Remember: Grantees must enter annual outcomes data in SPARS by **October 31** but not submit these data until after completing the full Progress Report (see page 7).

What is the baseline data point?

Submit baseline data as soon as they are available. The baseline data point will ideally reflect data collected in the federal fiscal year before grantee funding (October 1–September 30). For example, baseline data for PFS 2015 grantees would be data collected between October 1, 2014, and September 30, 2015.

Table A.1. Baseline Data Time Points by PFS Cohort

PFS Cohort	Baseline Data Collection Period
PFS 2014	October 1, 2013–September 30, 2014
PFS 2015	October 1, 2014–September 30, 2015
PFS 18	October 1, 2017–September 30, 2018
PFS 19	October 1, 2018–September 30, 2019
PFS 20	October 1, 2019–September 30, 2020 (and so on)

Note that grantees should aggregate Administrative Data (e.g., hospital, traffic) to reflect the October 1–September 30 period whenever possible. If this is impossible, contact the SPARS Help Desk for advice.

In some cases (e.g., for some tribal and Pacific jurisdiction grantees, or state subrecipients that have not collected data before PFS), true baseline data may not exist for certain measures. Under these circumstances, the SPARS team advises grantees to communicate with the SPARS Help Desk.

If data points before the baseline are available, grantees can enter these data in the community outcomes module to provide trend data. Simply enter data for the earliest data point, then click "Add Follow-Up Data" to add subsequent data points.

When is the follow-up data submission deadline?

Enter follow-up data into DSP-MRT by October 31 during the year that the data become available or as soon as the data are available. For survey data, ideally you will collect follow-up data points at least 11 months after the previous data collection. Follow-up administrative data ideally reflect the complete year after you collected the previous data point.

Process for Submitting Community Outcomes Data

How are data entered?

You must enter data manually. Data entry begins by clicking the Annual Reporting tab in the Progress Report, then clicking "Community-Level Outcome Data." Do not enter data for substitute data measures until you receive CSAP approval. To receive approval for a substitute measure, grantees must complete the Substitute Data Source Request located in the DSP-MRT Work Plans section.

Is it possible to copy data source information across subrecipients?

As some data source information may apply across multiple subrecipients, grantees should first enter the data source information and then select the subrecipients for which the data source is applicable to reduce data entry burden.

Should we report rounded whole numbers or use decimal places?

When available, use two decimal places rather than rounding to the nearest whole number. All numeric fields accept decimal places, except for age range, survey item valid *N*, and denominator value.

What if I do not have information for a specific field at the time of data submission?

As you may not have all the needed information available at the time of data submission, select fields will allow you to enter a "missing" code of 9999999999. Grantees should update these fields as soon as the information becomes available.

What happens after we submit our data?

SPARS will process the community outcomes data following the October submission deadline. SPARS will document information found to be inconsistent, incomplete, or missing. Grantee representatives (Project Evaluator, Director, and Coordinator) will receive notification from SPARS requesting any needed clarification or edits.

For complex or extensive problems, data cleaning staff will request a telephone conference with appropriate parties to resolve issues.

Resolving Less Common Community Outcomes Reporting Problems

What if a data source does not match the community's target area?

An example of this problem is an administrative data source that provides results at a county level, while a grantee's PFS subrecipients represent communities within counties. SAMHSA intends for community outcome data to represent the areas served/reached by PFS implementation and interventions. CSAP strongly encourages grantees to investigate other data sources that more accurately represent the targeted area. If none exist, grantees should contact the SPARS Help Desk for guidance.

What if we have confidentiality concerns related to providing data for communities with very small sample sizes?

For federal reporting purposes, report community outcome results in the aggregate. In rare circumstances, however, grantees have requested and received permission for special reporting approaches. Grantees with special considerations should contact the SPARS Help Desk and arrange a discussion with CSAP and SPARS representatives.

Reporting Community Outcomes for Single-Community Grantees

A **single-community grantee** is a tribal or Pacific jurisdiction grantee whose SPF-PFS planning process occurs at the grantee level, not at the level of a smaller unit (e.g., subrecipient communities) within the grantee's jurisdiction. Grantees must seek approval from their State Project Officer to be considered a single-community grantee.

For single-community grantees, the grantee's jurisdiction is the same as the community, therefore you should report community outcome data for the single unified community (e.g., the jurisdiction or tribal entity). Single-community grantees will report their outcomes in the Community Outcomes section of the Annual Outcomes module in DSP-MRT like all other grantees do, but CSAP does not require them to select a subrecipient to enter these data.

PFS Required Outcome Measures Table

Grantees must report at least two annual exact measures (or approved substitute measures) per subrecipient. See page 103 for reporting requirements.

Table A.2 provides the exact wording of the annual exact measures that grantees must select from for alcohol and prescription drug use. To find measures by type (i.e., consumption variable and consequences variable), look for the rows labeled "Consumption" or "Consequences." Under each row is a list of annual exact measures. The first column identifies the type of indicator (i.e., recent substance use). The second column provides the exact wording of the measure and the third column provides response options. Remember, for measures to meet the annual exact measure requirement, the measure must match the wording and response options provided in Table A.2. The last column identifies the reported outcome for each measure.

If the grantee is targeting other priorities and you have not yet received approval, you must submit a substitute data request. Currently, there are no annual exact measures for substances other than alcohol and prescription drugs.

Table A.2. PFS Required Outcome Measures: Alcohol and Prescription Drugs

Indicator	Measure	Measure Response Options[1]	Reported Outcome
Consumption			
Recent Substance Use	**Alcohol** During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?	A number between 0 and 30	Percentage who reported having used alcohol during the past 30 days (i.e., percentage who responded 1 or more days)
	Prescription Drugs During the past 30 days, on how many days did you use prescription drugs that were not prescribed for you or that you took only for the experience or feeling they caused?	A number between 0 and 30	Percentage who reported having used prescription drugs not prescribed or for the experience or feeling during the past 30 days (i.e., percentage who responded 1 or more days)
	OR During the past 12 months, on how many days did you use prescription drugs that were not prescribed for you or that you took only for the experience or feeling they caused? [Note: CSAP encourages reporting both items, if available.]	A number between 0 and 366	Percentage who reported having used prescription drugs not prescribed or for the experience or feeling during the past 12 months (i.e., percentage who responded 1 or more days)
	Binge Drinking During the past 30 days, on how many days did you have 5 or more drinks on the same occasion?	A number between 0 and 30	Percentage who reported having binge drank during the past 30 days (i.e., percentage who responded 1 or more days)

[1] All survey items have "Don't Know" and "Refused" response options.

Indicator	Measure	Measure Response Options[1]	Reported Outcome
Substance-Related Traffic Crashes	**Alcohol** Measure calculation: The number of alcohol-related traffic crashes divided by the total number of traffic crashes and multiplied by 100 (CSAP defines alcohol-related crashes as those where the highest blood alcohol level involved in the crash is 0.01 or higher.)	N/A	Measure calculation: The number of alcohol-related traffic crashes divided by the total number of traffic crashes and multiplied by 100 (CSAP defines alcohol-related crashes as those where the highest blood alcohol level involved in the crash is 0.01 or higher.)
	Prescription Drugs Measure calculation: The number of prescription drug-related traffic crashes divided by the total number of traffic crashes and multiplied by 100 (Prescription drug-related crashes are those in which prescription medications are involved. The exact definition may vary by state or jurisdiction.)	N/A	Measure calculation: The number of prescription drug-related traffic crashes divided by the total number of traffic crashes and multiplied by 100 (Prescription drug-related crashes are those in which prescription medications are involved. The exact definition may vary by state or jurisdiction.)
Substance-Related Traffic Injuries	**Alcohol** Measure calculation: The number of alcohol-related traffic injuries divided by the total number of traffic injuries and multiplied by 100 (CSAP defines alcohol-related traffic injuries as those where the highest blood alcohol level involved is 0.01 or higher.)	N/A	Measure calculation: The number of alcohol-related traffic injuries divided by the total number of traffic injuries and multiplied by 100 (CSAP defines alcohol-related traffic injuries as those where the highest blood alcohol level involved is 0.01 or higher.)

[1] All survey items have "Don't Know" and "Refused" response options.

Indicator	Measure	Measure Response Options[1]	Reported Outcome
Substance-Related Traffic Injuries	**Prescription Drugs** Measure calculation: The number of prescription drug-related traffic injuries divided by the total number of traffic injuries and multiplied by 100 (Prescription drug-related traffic injuries are those in which prescription medications are involved. The exact definition may vary by state or jurisdiction.)	N/A	Measure calculation: The number of prescription drug-related traffic injuries divided by the total number of traffic injuries and multiplied by 100 (Prescription drug-related traffic injuries are those in which prescription medications are involved. The exact definition may vary by state or jurisdiction.)
Substance-Related Crime	**Alcohol** Measure calculation: The number of alcohol-related arrests divided by the total number of arrests and multiplied by 100 (Alcohol-related arrests include the following Uniform Crime Reporting [UCR] categories: DUI and Liquor Law Violations.)	N/A	Measure calculation: The number of alcohol-related arrests divided by the total number of arrests and multiplied by 100 (Alcohol-related arrests include the following UCR categories: DUI and Liquor Law Violations.)

[1] All survey items have "Don't Know" and "Refused" response options.

Indicator	Measure	Measure Response Options[1]	Reported Outcome
Substance-Related Crime	**Prescription Drugs** Measure calculation: The number of prescription drug-related arrests divided by the total number of arrests and multiplied by 100 (Prescription drug-related arrests include crimes in which prescription drugs are involved such as forged or altered prescriptions; doctor shopping; health care fraud; and theft, sale, or possession of prescription drugs.)	N/A	Measure calculation: The number of prescription drug-related arrests divided by the total number of arrests and multiplied by 100 (Prescription drug-related arrests include crimes in which prescription drugs are involved such as forged or altered prescriptions; doctor shopping; health care fraud; and theft, sale, or possession of prescription drugs.)
Substance-Related Emergency Room (ER) Visits	**Alcohol** Measure calculation: The number of ER visits involving alcohol divided by the total number of ER visits and multiplied by 100 (The Drug Abuse Warning Network [DAWN] defines alcohol-involved ER visits as those in which alcohol is the direct cause or contributing factor.)	N/A	Measure calculation: The number of ER visits involving alcohol divided by the total number of ER visits and multiplied by 100 (DAWN defines alcohol-involved ER visits as those in which alcohol is the direct cause or contributing factor.)
	Prescription Drugs Measure calculation: The number of ER visits involving prescription drugs divided by the total number of ER visits and multiplied by 100 (DAWN defines prescription drug-involved ER visits as those in which prescription drugs are the direct cause or contributing factor.)	N/A	Measure calculation: The number of ER visits involving prescription drugs divided by the total number of ER visits and multiplied by 100 (DAWN defines prescription drug–involved ER visits as those in which prescription drugs are the direct cause or contributing factor).

[1] All survey items have "Don't Know" and "Refused" response options.

Comparison of PFS Required Outcome Measures for Alcohol and Prescription Drugs and Items from Commonly Used Surveys

Table A.3 provides a list of survey items commonly used to report consumption measures and intervening variable outcomes. The rows shaded in light blue provide the measures included in commonly used surveys. The first column in the shaded row identifies the type of indicator (i.e., recent substance use) and the additional columns provide the wording and response options from each survey. Under the blue shaded rows, the unshaded rows indicate whether each measure from the listed surveys meets the requirements for use as an annual exact measure.

Note: If Table A.3 lists an item as being an acceptable Substitute Outcome Measure, you do not need to submit a substitute data request for the measure. You can use the measure if you use the exact item wording and response choices. If an item is listed as *not* being an acceptable PFS Required Outcome Measure, you should not submit a substitute data request since CSAP will not accept that item as a substitute data source.

Table A.3 compares items from the following sources:

- ○ Youth Risk Behavior Survey (YRBS)

- ○ Communities That Care

- ○ PRIDE

- ○ Behavioral Risk Factor Surveillance System (BRFSS)

- ○ Drug-Free Communities (DFC) Core Measures

Remember: This QxQ guide is a static document, so *always confirm online whether updated versions of these surveys exist to ensure that you use accurate item wording and response choices.*

Table A.3. Commonly Used Survey Items for Alcohol and Prescription Drug Use Compared to PFS Required Outcome Measures

PFS Required Outcome Measures		Items from Commonly Used Surveys*				
Indicator	Measure (Survey Item/Response Options)	YRBS (National 2017)	Communities That Care (2014)	PRIDE (2016)	BRFSS (2018)	DFC Core Measures (2012)
Recent Substance Use	**Alcohol** During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage? *A number between 0 and 30*	During the past 30 days, on how many days did you have at least one drink of alcohol? *0 days, 1 or 2 days, 3 to 5 days, 6 to 9 days, 10 to 19 days, 20 to 29 days, all 30 days*	On how many occasions (if any) have you had beer, wine, or hard liquor during the past 30 days? *0 occasions, 1 or 2 occasions, 0 to 5 occasions, 6 to 9 occasions, 10 to 19 occasions, 20 to 39 occasions, 40 or more occasions*	Within the past year how often have you drunk alcohol (beer, coolers, liquor, etc.)? *Did not use, once/year, 6 times/year, once/month, twice/month, once/week, times/week, 2 every day* During the past 30 days, did you drink one or more drinks of an alcoholic beverage? *Yes, No*	During the past 30 days, how many days per week or per month did you have at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor? *Days per week, Days in the past 30 days, No drinks in the past 30 days, Don't know/Not sure, Refused*	During the past 30 days, did you drink one or more drinks of an alcoholic beverage? *Yes, No*
Is this an acceptable PFS Required Outcome Measure substitute?		**Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage who responded 1 or more days).	**Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage who responded one or more occasions).	First item: **No**, the time frame is past year not past 30 days. Second item: **Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage who responded "yes").	**Yes,** if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage who responded 1 or more days per week or 1 or more days in the past 30 days).	**Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage responding "yes").

PFS Required Outcome Measures		Items from Commonly Used Surveys*				
Indicator	Measure (Survey Item/Response Options)	YRBS (National 2017)	Communities That Care (2014)	PRIDE (2016)	BRFSS (2018)	DFC Core Measures (2012)
Recent Substance Use	**Prescription Drugs** During the past 30 days, on how many days did you use prescription drugs that were not prescribed to you or that you took only for the experience or feeling they caused? *A number between 0 and 30* **OR** During the past 12 months . . . [remaining text same as above] *A number between 0 and 366*	[Middle school] Have you ever taken a prescription drug (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription? *Yes, No* [High school] During your life, how many times have you taken a prescription drug (such as OxyContin, Percocet, Vicodin, codeine, Adderall, Ritalin, or Xanax) without a doctor's prescription? *0 times, 1 or 2 times, 3 to 9 times, 10 to 19 times, 20 to 39 times, 40 or more times*	On how many occasions (if any) have you used prescription pain relievers (e.g., Vicodin, OxyContin, Ritalin, Xanax) not prescribed to you by a doctor in the past 30 days? *0 occasions, 1 or 2, 3 to 5, 6 to 9, 10 to 19, 20 to 39, 40 or more occasions*	Within the past year, how often have you used prescription drugs not prescribed to you (such as Ritalin, Xanax, or OxyContin)? *Did not use, Once/year, 6 times/year, Once/month, Once/week, 3 times/week, Every day* During the past 30 days have you used prescription drugs not prescribed to you? *Yes, No*	Not on survey	During the past 30 days, have you used prescription drugs not prescribed to you? *Yes, No*
Is this an acceptable PFS Required Outcome Measure substitute?		**No**, time frame is lifetime use rather than past 30 days or 12 months.	**Yes,** if the reported outcome is the percentage of respondents who reported any past 30-day use.	First item: **Yes**, if the reported outcome is the percentage of respondents who reported any past year use (i.e., percentage who responded yes). Second item: **Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day use (i.e., percentage who responded "yes").	N/A	**Yes,** if the reported outcome is the percentage of respondents who reported any past 30-day use.

PFS Required Outcome Measures		Items from Commonly Used Surveys*				
Indicator	Measure (Survey Item/Response Options)	YRBS (National 2017)	Communities That Care (2014)	PRIDE (2016)	BRFSS (2018)	DFC Core Measures (2012)
Recent Substance Use	**Binge Drinking** During the past 30 days, on how many days did you have 5 or more drinks on the same occasion? *A number between 0 and 30*	During the past 30 days, on how many days did you have 5 or more drinks of alcohol in a row, that is, within a couple of hours? *0 days, 1 or 2 days, 3 to 5 days, 6 to 9 days, 10 to 19 days, 20 or more days*	Think back over the last 2 weeks. How many times have you had 5 or more alcoholic drinks in a row? *None, Once, Twice, 3–5 times, 6–9 times ,10 or more times*	Have you had 5 or more glasses of beer, coolers, breezers, or liquor within a few hours? *Never, Seldom, Sometimes, Often, A lot*	Considering all types of alcoholic beverages, how many times during the past 30 days did you have X [X = 5 for men, X = 4 for women] or more drinks on an occasion? *___ Number of times, None, Don't know/Not sure, Refused*	Not on survey
Is this an acceptable PFS Required Outcome Measure substitute?		**Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day binge drinking (i.e., percentage who responded 1 or more days).	**No**, time frame is past 2 weeks rather than past 30 days.	**No**, the item does not contain a time reference (i.e., during the past 30 days).	**Yes**, if the reported outcome is the percentage of respondents who reported any past 30-day binge drinking (i.e., the percentage who responded one or more times). CSAP will consider items that specify binge thresholds based on gender acceptable, as will items that do not.	N/A

* **Note:** Always search online and confirm whether updated versions of the surveys exist to ensure accurate item wording and response option choices.

Appendix B. STOP Act Community Outcomes Requirements

SAMHSA uses the term **grantee** to refer to the state, jurisdiction, or tribal entity receiving the STOP Act grant from the Center for Substance Abuse Prevention (CSAP).

Purpose of Community Outcomes Data

The purpose of community outcomes data is to:

- help CSAP track overall progress on selected STOP Act Required Outcome Measures, and
- reflect changes in the consumption and consequence variables expected to be influenced by STOP Act programming at the community level that can be used to modify and improve interventions.

Providing outcome measures allows CSAP to meet its federal reporting requirements. STOP Act grantees 2016 and 2017 should have already received approval for their selected outcome measures. STOP Act 2019 and later grantees must obtain approval for their selected alcohol measures by submitting descriptions of those measures through the Data Request form in SPARS.

Community Outcomes Data Reporting Requirements

Grantees must report their performance on four alcohol measures, which are due at least every 2 years, and include data for at least three grade levels (grades 6 through 12).

- STOP Act 2016 and 2017 grantees will continue to follow their current community outcome reporting schedule.
- STOP Act 2019 grantees should report baseline data with their first progress report, which is due on February 28, 2021, and report follow-up data with their February 2022 and 2024 progress reports.

CSAP requires STOP Act grantees to report the following:

- Past 30-day alcohol use
- Perception of risk or harm from alcohol
- Perception of parental disapproval of alcohol use
- Perception of peer disapproval of alcohol use

Grantees can contact the SPARS Help Desk about potential data sources, and the Help Desk will forward these questions to SPARS technical assistance providers. The SPARS team may schedule a meeting with CSAP and SPARS staff to discuss options with grantees that are having difficulty identifying data sources.

Baseline and Follow-up Community Outcomes Data Submission Dates

When is the data submission deadline?

The deadline for entering community outcome data into the Annual Outcomes tab of the Progress Report is **February 28** at least every 2 years, unless otherwise specified.

The Community Outcomes module in the Annual Outcomes tab of the Progress Report does not close, meaning that grantees can enter data as they become available to meet the February 28 deadline. **Remember:** Grantees must enter annual outcomes data in SPARS by February 28 but not submit these data until after completing their full Progress Report (see page 8).

What is the baseline data point?

Submit baseline data as soon as they are available, preferably by February 28 of the second year of the STOP Act grant. The baseline data point will ideally reflect data collected in the federal fiscal year before grantee funding (October 1–September 30). For example, baseline data for STOP Act 2017 grantees would be data collected between October 1, 2016, and September 30, 2017.

Table B.1. Baseline Data Time Points by STOP Act Cohort

STOP Act Cohort	Baseline Data Collection Period
STOP Act 2016	October 1, 2015–September 30, 2016
STOP Act 2017	October 1, 2016–September 30, 2017
STOP Act 2019	October 1, 2018–September 30, 2019 (and so on)

Note that grantees should aggregate Administrative Data (e.g., hospital, traffic) to reflect the October 1–September 30 period whenever possible. If this is impossible, please contact the SPARS Help Desk.

In some cases (e.g., for some tribal and Pacific jurisdiction grantees), true baseline data may not exist for certain measures. Under these circumstances, the SPARS team advises grantees to communicate with the SPARS Help Desk or their Project Officer.

If data points before the baseline are available, grantees can enter these data in the community outcomes module to provide trend data. Simply enter data for the earliest data point, then click "Add Follow-Up Data" to add subsequent data points.

When is the follow-up data submission deadline?

Enter follow-up data into the Annual Outcomes tab of the Progress Report by February 28 during the year that the data become available or as soon as the data are available. For survey data, grantees ideally collect follow-up data points at least 11 months after the previous data collection. Follow-up administrative data ideally reflect the complete year after you collected the previous data point. STOP Act 2016 and 2017 grantees should continue to enter data based on their current outcomes reporting schedule. STOP Act 2019 grantees should report follow-up data with their 2022 and 2024 progress reports.

Process for Submitting Community Outcomes Data

How are data entered?

You must enter data manually. Data entry begins by clicking the Annual Outcomes tab in the DSP-MRT, then clicking "Community Outcomes." Grantees should not enter data until they receive approval for the four alcohol measures and sources that they select. To receive approval for the selected measures, grantees must complete the Data Request located in the DSP-MRT Work Plans section (see page 25).

Should we report rounded whole numbers or use decimal places?

When available, please use two decimal places rather than rounding to the nearest whole number. All numeric fields accept decimal places, except for age range, survey item valid *N*, and denominator value.

What if I do not have information for a specific field at the time of data submission?

As you may not have all the needed information available at the time of data submission, select fields will allow you to enter a "missing" code of 9999999999. Grantees should update these fields as soon as the information becomes available.

What happens after we submit our data?

SPARS will process the community outcomes data following the October submission deadline. SPARS will document information found to be inconsistent, incomplete, or missing, and grantee representatives (Project Evaluator, Director, and Coordinator) will receive notification from SPARS requesting clarification or edits.

For complex or extensive problems, data cleaning staff will request a telephone conference with appropriate parties to resolve issues.