

## Mental Health Awareness Training

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Mental Health Services (CMHS) collects data regarding Mental Health Awareness Training (MHAT) Grantees' Infrastructure Development, Prevention, and Mental Health Promotion (IPP) activities. Every quarter, grantees must report on these *three* IPP indicators in SAMHSA's Performance Accountability and Reporting System (SPARS):

1. **Workforce Development (WD2):** The number of people in the mental health and related workforce trained in mental health–related practices or activities that are consistent with the goals of the grant.
2. **Training (TR1):** The number of individuals who have received training in prevention or mental health promotion.
3. **Referral (R1)** is the number of individuals referred to mental health or related services.

This program guidance document helps MHAT grantees meet their IPP data reporting requirements in SPARS. The guide provides information on:

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

### IPP Reporting Requirements and Deadlines

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

**Table 1: Quarterly Reporting Periods and Deadlines for Submitting IPP Results**

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

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

## IPP Reporting Tips and Resources

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

1. Go to SPARS online data entry/reporting system at <https://spars.samhsa.gov/> to enter your data on the Result Record Form.
  2. Submit data only on *completed* activities and trainings *in the quarter* they were completed. You can access SPARS at any time to enter your quarterly IPP results by the due date listed above.
  3. DO NOT enter data on activities that are in progress, in planning phase, or pending.
  4. CMHS understands that not every indicator will have a completed activity every quarter. If you have no activity to report for an indicator, you must enter a **No New Result** record in SPARS. To do so, select “If there were no new results, check this box” on the Result Record, then click the **Save - Add New** or **Save - Finish** button to complete the entry. The system will not accept a zero (0) result.
  5. After you submit your data, your GPO will review and either approve, disapprove, or request revisions.
- Contact your GPO for additional guidance about your IPP indicators.
  - For additional guidance on IPP indicators, refer to these practical resources accessible from either the SPARS Resource Library or Training Page:
    - CMHS IPP Overview of Indicators Guide
    - CMHS IPP How to Enter Results Guide for Grantees
    - CMHS AGB & IPP Overview Training Recording
    - IPP Data Entry Clinic Recording
  - The **SPARS Help Desk** is also available to provide technical support and answer questions about SPARS user accounts, passwords, or submitting data to SPARS. Call the SPARS Help Desk at (855) 322-2746 (toll-free) or email [SPARS-Support@rti.org](mailto:SPARS-Support@rti.org).

## Workforce Development (WD2)

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

The intent of WD2 is to capture information on improvements in the workforce in addressing mental health issues (e.g., intensive services, trauma-informed care, assessment) that are consistent with the goals of the grant.

### Definitions of Key Terms

- **Mental Health–Related:** Pertaining to mental health or the population of people with or at risk of mental illness; also includes people with co-occurring substance abuse disorders. When people with or at risk of mental illness are the population of focus, a wide array of subject areas may be considered to be mental health–related by virtue of the connection with this population. Under such circumstances, mental health–related areas may include, for example, those pertaining to physical health, co-occurring disorders (mental illness and substance abuse disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, and financial well-being.
- **Practices or Activities:** Includes treatment, rehabilitation, prevention, mental health–related promotion and supportive services (e.g., evidence-based practices, consumer-operated services [family driven and/or youth guided services], culturally specific practices, suicide prevention programs, rural telehealth programs, anti-stigma campaigns).
- **Mental Health Workforce:** People providing mental health prevention, treatment, rehabilitation, or recovery services.
- **Related Workforce:** People providing ancillary support services to people who have—or are at risk for developing—mental health needs.
- **Training:** Process, event, or activity guided by a curriculum (e.g., a syllabus, agenda, training manual), within a structured timeframe, and guided by an identified trainer or training method.

### Examples of Trainings

- Wraparound facilitator
- Mental health first aid
- Cognitive behavioral therapy
- Suicide risk assessment and management
- Crisis response training
- Trauma-informed care
- Case management or care coordination
- Peer services

### Examples of Mental Health and Related Workforce

- Mental health and substance use providers
  - Clinician/counselor/psychologist
  - Social/case worker
  - Care coordinator/manager
  - Program/system administrator
- Other health/primary care provider
  - Program/system administrator
  - Physician and nurse
  - Nursing assistant/health technician
- Education and higher education
  - Counselors and clinicians
  - School police/safety
  - Child welfare and juvenile justice
  - Social/case worker
- Emergency/crisis support worker
- Tribal services/government
  - Tribal healers and elders
  - Elected tribal official
  - Community outreach worker
- Emergency/crisis support worker
- Clinician
- Emergency response
  - Law enforcement
  - Public safety workers
  - Hotline/helpline staff
  - Probation officer
- Clergy/religious advisor
  - Program/system administrator

## Guidelines for Entering WD2 Results

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

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

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

## Examples of WD2 Results

### *Scenario 1.*

- **Result Name:** Mental health first aid training
- **Result Description:** Twenty people, including community health workers, case managers, and school social workers learned more about helping people experiencing a mental health or addiction challenge or crisis. The course covered risk factors and warning signs for mental health and addiction concerns, strategies for how to help someone in both crisis and non-crisis situations, and where to turn for help.
- **Result Number:** 20

### *Scenario 2.*

- **Result Name:** PHQ 9 training
- **Result Description:** Thirty college social workers and health care technicians learned how to recognize the signs of depression in young adults, how to assess and respond to potential suicide risk, and how to use and read the results from the Patient Health Questionnaire–9 (PHQ-9).
- **Result Number:** 30

## Who to Count

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

## Training (TR1)

**TR1 is the number of individuals who have received training in prevention or mental health promotion.**

The intent of TR1 is to capture information on people from the public (e.g., landlords, bus drivers, friends, employers, roommates, family members) other than the mental health or related workforce who have received training in prevention or mental health promotion because of the grant. The training may be outside these individuals' typical job duties.

### Definitions of Key Terms

- **Training:** Process, event, or activity guided by a curriculum (e.g., a syllabus, agenda, training manual), within a structured timeframe, and guided by an identified trainer or training method.
- **Prevention:** Interventions, which are intended to prevent or reduce the risk for the disorder, that occur either before the onset of a disorder, or after the onset of the disorder to prevent or reduce the disorder's negative consequences.
- **Mental Health Promotion:** Interventions that aim to enhance the ability to achieve developmentally appropriate tasks and a positive sense of self-esteem, mastery, well-being, and social inclusion and to strengthen the ability to cope with adversity.

### Guidelines for Entering TR1 Results

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

- **Result Name:** Enter the name or title of the training provided.
- **Result Description:** Enter a two- or three-sentence description of the types of individuals trained, the type of training provided, and the type of skills learned.
- **Result Number:** Enter the total number of participants trained.

If you have no activity to report for TR1, you must record this by checking "If there were no new results, check this box" on the Result Form.

### Example of TR1 Result

- **Result Name:** Teen dating violence training
- **Result Description:** Our agency provided a training on dating violence to 25 teens at a local high school. The training teaches youth to identify key characteristics of healthy versus unhealthy relationships and provides resources on whom to contact in case they need help.
- **Result Number:** 25

### Who to Count

- **Count** the number of people trained, not the number of trainings.
- **Do not count** people who are members of the mental health or related workforce. These individuals are counted under WD2. Contact your GPO if you are unclear whether someone should be counted under TR1 or WD2. If you trained only members of the mental health or related workforce, you will enter zero (0) for Annual Goals in SPARS for this indicator.
- If people attend one training that includes multiple sessions within a quarter to complete it, count them only once in the quarter for that particular training.
- If a training has multiple sessions that span two or more quarters, count the training participants only once in the quarter that the training was completed.

## Referral (R1)

**R1 is the number of individuals referred to mental health or related services.**

The intent of R1 is to capture information on individuals referred to mental health or related services outside the grant program as a result of the grant.

### Definitions of Key Terms

- **Referred:** Recommending an individual for mental health or related services.
- **Mental Health–Related:** Pertaining to mental health or the population of people with or at risk of mental illness; also includes people with co-occurring substance use disorders. When people with or at risk of mental illness are the population of focus, a wide array of subject areas may be considered to be mental health–related by virtue of the connection with this population. Under such circumstances, mental health–related areas may include, for example, those pertaining to physical health, co-occurring disorders (mental illness and substance use disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, and financial well-being.
- **Services:** Includes treatment, rehabilitation, prevention, mental health–related promotion, and supportive services (e.g., evidence-based practices, consumer-operated services [family driven and/or youth guided services], culturally specific practices, suicide prevention programs, rural telehealth programs, anti-stigma campaigns).

### Guidelines for Entering R1 Results

On the Result Form, enter the following information in the quarter when the referral occurred.

- **Result Name:** Enter a short statement of who was being referred.
- **Result Description:** Enter a short description of who was referred and the focus of the referral.
- **Result Number:** Enter the total number of people referred.

If you have no activity to report for R1, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Example of R1 Result

- **Result Name:** Referred Veterans
- **Result Description:** Forty veterans involved in the legal system were referred for jail diversion and trauma recovery services during the quarter.
- **Result Number:** 40

### Who to Count

- **Count** the number of people referred.
- **Do not count** the number of services.

## How to Submit IPP Results in SPARS

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

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

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

[Learn More](#)

**Announcements**

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

**Quick Links**

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

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

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

**IPP**

Home > Data Entry > IPP Print

**My Grants**

**Admin**

**Data Entry**

- Annual Goals & Budget
- Services
- IPP**
- Required Indicators
- Results List**
- Data Download

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

**Results List**

Home > Data Entry > IPP > Results List

Print | Cancel Save Previous Next

My Grants Admin Data Entry

Annual Goals & Budget Services

IPP Required Indicators Results List Data Download

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

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

Program: IPP Test

Grant: IPPTTEST2016 - Westat Test

Add New Result

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

If you have no activity to report for an indicator, you must enter a **No New Result** record in SPARS. To do so, select “If there were no new results, check this box” on the Result Record, then click the **Save - Add New** or **Save - Finish** button to complete the entry.

**Result Record**

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

Save - Add New Save - Finish

**INSTRUCTIONS:** Enter one result per indicator on this data entry screen. Please do not use the same result name twice in one federal fiscal year quarter<sup>1</sup>. Note: Screen will refresh when you select the date range or indicator.

Grant Number: IPPTTEST2016 (IPP TEST 2016)

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

Indicator: Workforce Development - WD3

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

<sup>1</sup> FFY QUARTER 1 (10/1– 12/31); FFY QUARTER 2 (1/1– 3/31); FFY QUARTER 3 (4/1– 6/30); FFY QUARTER 4 (7/1– 9/30)

If there were no new results, check this box:

Result Name: No New Result