

## Native Connections Cohorts 3, 4, and 5

The Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) Center for Mental Health Services (CMHS) collects data from Native Connections Grantees (Cohorts 3, 4, and 5) on their Infrastructure Development, Prevention, and Mental Health Promotion (IPP) activities. Every quarter, grantees must report on these *seven* IPP indicators in SAMHSA’s Performance Accountability and Reporting System (SPARS):

1. **Policy Development (PD1):** The number of policy changes completed as a result of the grant.
2. **Partnerships/Collaborations (PC2):** The number of organizations collaborating, coordinating, and sharing resources with other organizations because of the grant.
3. **Accountability (A2):** The number of organizations that regularly obtain, analyze, and use mental health–related data as a result of the grant.
4. **Types/Targets of Practices (T2):** The number of programs, organizations, or communities that implemented evidence-based, mental health–related practices or activities as a result of the grant.
5. **Types/Targets of Practices (T3):** The number of people receiving evidence-based, mental health–related services as a result of the grant.
6. **Outreach (O1):** The number of individuals contacted through program outreach efforts.
7. **Access (AC1):** The number and percentage of individuals receiving mental health or related services after referral.

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

- IPP operational definitions and criteria
- IPP quarterly reporting requirements and deadlines
- Data entry tips and resources

### IPP Reporting Requirements and Deadlines

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

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

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

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

## Data Entry Requirements 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).

## Policy Development (PD1)

PD1 is the number of policy changes completed as a result of the grant.

### Definitions of Key Terms

- **Policy:** A written document directing an action or event that is administrative or legislative in origin.
- **Change:** The creation of a policy that did not previously exist, the documentation of a policy that existed in an undocumented form, or the elimination or alteration of a policy that previously existed and had already been documented.
- **Completed:** Exists in its final form and the party (or parties) with authority to do so has approved or passed the policy.

### Examples of Policies

- Directives
- Guidance
- Clinical practice guidelines
- Regulations
- Statutes
- Operations manuals
- Procedures
- Bylaws
- Strategic plans
- Mission statements
- Written decisions
- Standards

### Guidelines for Entering PD1 Results

On the Result Form, enter the following information in the quarter when the policy change is complete:

- **Result Name:** Enter the name/title of the changed policy.
- **Result Description:** Enter a description of who changed the policy and what the policy entailed.
- **Result Number:** Report one policy change per result record.

If you have no activity to report for PD1, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Examples of PD1 Results

#### *Scenario 1.*

- **Result Name:** County Statute
- **Result Description:** The county put a policy in place that all community centers must implement a national suicide plan.
- **Result Number:** 1

#### *Scenario 2.*

- **Result Name:** Clinical Practice Guidelines
- **Result Description:** Our organization put procedures in place to implement clinical practice guidelines regarding children’s residential services.
- **Result Number:** 1

### What to Report

- **Report** on all policy changes completed in the quarter as a result of the grant.
- **Report** each policy change once—and only do so when the change is complete.
- **Do not report** the policy change if discussions about the policy have only begun and the change is not complete or approved.
- You may **report** the policy change before its implementation.

## Partnerships/Collaborations (PC2)

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

### Definitions of Key Terms

- **Collaborating/Coordinating:** Process where two or more organizations work in partnership together toward a common goal.
- **Organizations:** State/local/tribal agencies, bureaus, counties, or other major subdivisions that provide behavioral health, mental health, and related services to your American Indian/Alaska Native youth up to age 24. Organizations may include consumer-, youth-, or family member–run organizations; private providers and nongovernmental organizations; schools, educational institutions, juvenile justice and foster care systems, and other child- or youth-serving organizations; and committees, coalitions, advisory boards, and task forces.
- **Sharing Resources:** Allowing others to use the means available to an organization to increase outcomes or attain goals. Resources may include personnel time, facilities, equipment, and information.

### Guidelines for Entering PC2 Results

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

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

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

### Examples of PC2 Results

#### *Scenario 1.*

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

#### *Scenario 2.*

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

## Who to Count

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

## Accountability (A2)

**A2 is the number of organizations that regularly obtain, analyze, and use mental health–related data as a result of the grant.**

### Definitions of Key Terms

- **Organizations:** May include state agencies, bureaus, departments, or other major subdivisions; counties, cities, or tribal agencies/bureaus/departments; or agencies providing mental health or related services to people who have or are at risk for developing mental health needs. The latter includes consumer-, youth-, or family member–run organizations; private provider entities; and nongovernmental organizations.
- **Regularly, Obtain, Analyze, and Share Data:** Receiving or collecting data on a scheduled, repeated, and ongoing basis that is systematically reviewed to facilitate program, organization, or state agency/department planning; to facilitate consumer choice or shared decision-making; or to improve the quality or efficiency of services. *Data* are any quantitative or qualitative information collected through specified methods and procedures.
- **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 (but are not limited to), those pertaining to physical health, co-occurring disorders (mental illness and substance abuse disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, financial well-being, etc.

### Guidelines for Entering A2 Results

On the Result Form, enter the following information in the quarter when the activity took place:

- **Result Name:** Enter the type of data obtained, analyzed, or used.
- **Result Description:** Enter a description of the organizations and details on data collected and reported.
- **Result Number:** Enter the total number of organizations that are using data.

If you have no activity to report for A2, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Examples of A2 Results

- **Result Name:** Seclusion and Restraint Reporting
- **Result Description:** Six mental health organizations began regularly and systematically reporting the use of seclusion and restraint.
- **Result Number:** 6

### What to Report

- **Count** the number of organizations that *initiate or enhance* the use and analysis of data collected.
- **Report** data only in the quarter in which your organization first started getting data.

## Types/Targets of Practices (T2)

**T2 is the number of programs, organizations, or communities that implemented evidence-based, mental health–related practices or activities as a result of the grant.**

### Definitions of Key Terms

- **Programs:** Providing mental health or related services for distinct groups of consumers. Often, grantees allocate specific staff and resources to a specific program.
- **Organizations:** Federal, state, local, and tribal agencies; programs; departments; nonprofit agencies, grassroots organizations, or other entities providing mental health and related services.
- **Evidence-Based:** Rigorously tested interventions that yield consistent, replicable results and that are proven safe, beneficial, and effective for most people diagnosed with mental illness.
- **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, but are not limited to, 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.

### Examples of Organizations

- State agencies, bureaus, departments, or other major subdivisions
- Counties
- Cities
- Tribal agencies
- Private provider entities
- Bureaus, departments, or agencies providing mental health or related services to people who have or are at risk for developing mental health needs, including consumer-, youth-, or family member–run organizations
- Nongovernmental organizations

### Guidelines for Entering T2 Results

On the Result Form, enter the following information:

- **Result Name:** Enter the name or title of the program, organization, or community that implemented the evidence-based practice.
- **Result Description:** Enter a brief description of the implemented evidence-based practice.
- **Result Number:** Enter the total number of programs, organizations, or communities that implemented the evidence-based practice or activity.

If you have no activity to report for T2, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Example of T2 Results

- **Result Name:** Drug Court Program
- **Result Description:** Our organization implemented *Integrated Treatment for Co-occurring Disorders* for use in association with our drug court program.
- **Result Number:** 1

### Who to Count

- **Count** the number of programs, organizations, or communities that implemented evidence-based, mental health–related practices or activities as a result of the grant during the quarter.

## Types/Targets of Practices (T3)

**T3 is the number of people receiving evidence-based, mental health–related services as a result of the grant.**

### Definitions of Key Terms

- **Evidence-Based:** Rigorously tested interventions that yield consistent, replicable results and that are proven safe, beneficial, and effective for most people diagnosed with mental illness.
- **Mental Health–Related:** Pertaining to mental health or the population of people with or at risk of mental illness, including people with co-occurring substance use disorders. When people with or at risk of mental illness are the population of focus, a wide array of subject areas may be considered to be mental health–related by virtue of the connection with this population. Under such circumstances, mental health–related areas may include, but are not limited to, those pertaining to physical health, co-occurring disorders (mental illness and substance abuse disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, and financial well-being.

### Guidelines for Entering T3 Results

On the Result Form, enter the following information:

- **Result Name:** Enter a name/title of the evidence-based service received or people receiving the service.
- **Result Description:** Enter a brief description of who received the evidence-based service and the types of mental health or related services provided.
- **Result Number:** Enter the total number of individuals who received the service.

If you have no activity to report for T3, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Example of T3 Results

- **Result Name:** Evidence-based Youth Substance Use Prevention Services
- **Result Description:** Seventy-five youth received evidence-based substance use prevention services this quarter.
- **Result Number:** 75

### Who to Count

- **Count** the number of individuals who received evidence-based mental health or related services.
- **Do not count** the number of services.



## Outreach (O1)

**O1 is the number of individuals contacted through program outreach efforts.**

The intent of O1 is to capture information on one-on-one contacts with individuals using outreach or other strategies to increase participation in and access to treatment services for the population of focus as a result of the grant.

### Definitions of Key Terms

- **Contacted:** Making a connection with individuals. Programs can make contacts on the streets, via telephone, in various program settings, at drop-in centers, or in community settings.
- **Outreach:** Strategy designed to increase access and participation in treatment service for the population of focus.

### Guidelines for Entering O1 Results

On the Result Form, enter the following information in the quarter when the outreach took place.

- **Result Name:** Enter the name of the outreach effort.
- **Result Description:** Enter a brief description of the outreach effort.
- **Result Number:** Enter the total number of individuals contacted through the program outreach effort.

If you have no activity to report for O1, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Example of O1 Results

- **Result Name:** Youth Cultural Achievement Family Fun Day
- **Result Description:** As a result of the grant and during this quarter, we spoke with 20 young people at a Family Fun Day event sponsored by the Youth Cultural Achievement Program and shared information about intergenerational sharing circles for mental wellness.
- **Result Number:** 20

### Who to Count

- **Count** the number of individuals.
- **Do not count** the number of contacts.
- For example, if a program contacts a person five times, count the individual once.
- Programs can also count outreach to further engage individuals already enrolled in services, such as an individual who started services although the program has not seen this individual in a while.
- **Do not count** individuals contacted for general appointment reminders or as part of service provision.

## Access (AC1)

**AC1 is the number and percentage of individuals receiving mental health or related services after referral.**

### Definitions of Key Terms

- **Referral:** 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, including people with co-occurring substance use disorders. When people with or at risk of mental illness are the population of focus, a wide array of subject areas may be considered to be mental health–related by virtue of the connection with this population. Under such circumstances, mental health–related areas may include, but are not limited to, those pertaining to physical health, co-occurring disorders (mental illness and substance abuse disorders), housing, employment, criminal or juvenile justice involvement, child welfare, education, social and family relationships, independent living skills, peer support, and financial well-being.

### Examples of Mental Health–Related Services

- Physical health
- Mental health outpatient services
- Mental health inpatient services
- Criminal or juvenile justice involvement
- Tribal healing circles
- Child welfare
- Education
- Independent living skills
- Peer support

### Guidelines for Entering AC1 Results

On the Result Form, enter the following information in the quarter when the referrals took place:

- **Result Name:** Enter the program referral type.
- **Result Description:** Enter a brief description of the program referral effort.
- **Numerator:** Enter the total number of individuals you referred *and* who are receiving mental health or related services.
- **Denominator:** Enter the total number of individuals referred.
- **Percentage:** The percentage is automatically calculated in SPARS after entering the numerator and denominator and saving the record.

If you have no activity to report for AC1, you must record this by checking “If there were no new results, check this box” on the Result Form.

### Example of AC1 Result

- **Result Name:** Program referrals for psychotherapy care to treat depression
- **Result Description:** As a result of the grant, out of 21 individuals that were flagged by the Patient Health Questionnaire–9 and referred this quarter, 9 of them are receiving services.
- **Numerator:** 9
- **Denominator:** 21
- **Percentage:** 42.86% (calculated by system)

### Who to Count

- **Count** the number and percentage of individuals receiving mental health or related services after the referral.
- **Do not count** the number of services.

## Tips

Develop a protocol to track all early identification, referral, and follow-up information.

A variety of methods can be used:

- Single point of contact: A person or department serving as the coordinator or focal point of information.
- Multiple information sources: Obtained from or involving more than one source.
- Data sharing agreement: A formal contract that clearly documents what data are being shared and how the data can be used.
- Establish a relationship with a service provider who can provide you with the number of individuals who are receiving 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
- 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**

**IPP**

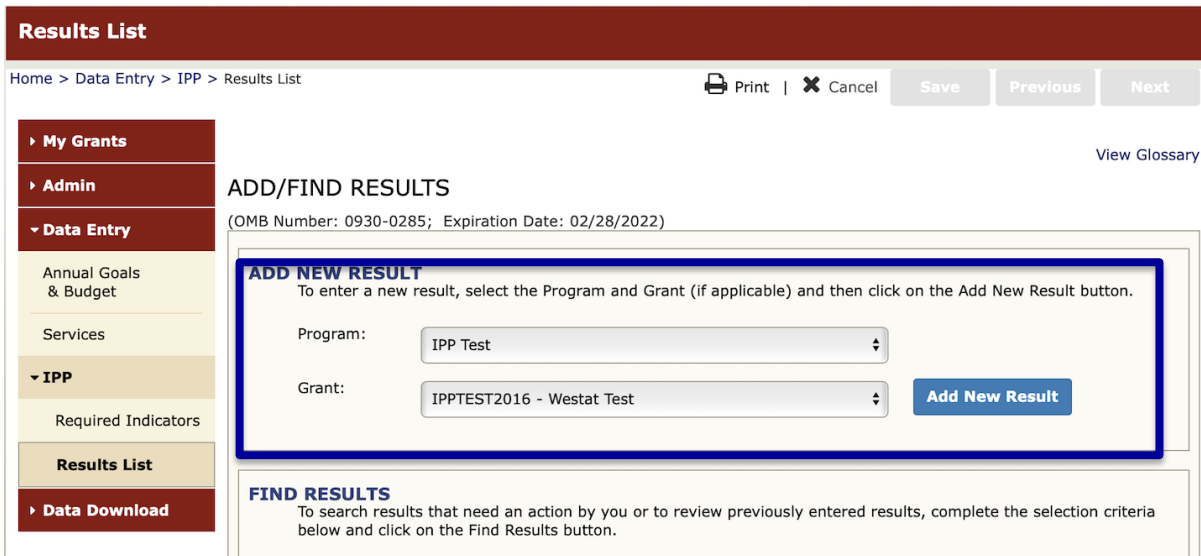
Home > Data Entry > IPP

Print

- My Grants
- Admin
- Data Entry
  - Annual Goals & Budget
  - Services
  - IPP
    - Required Indicators
    - Results List**
- Data Download

## SPARS Program Guidance on IPPs for Native Connections Grantees – Cohorts 3, 4, and 5

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

View Glossary

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

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

Program: IPP Test

Grant: IPPTTEST2016 - Westat Test

**Add New Result**

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

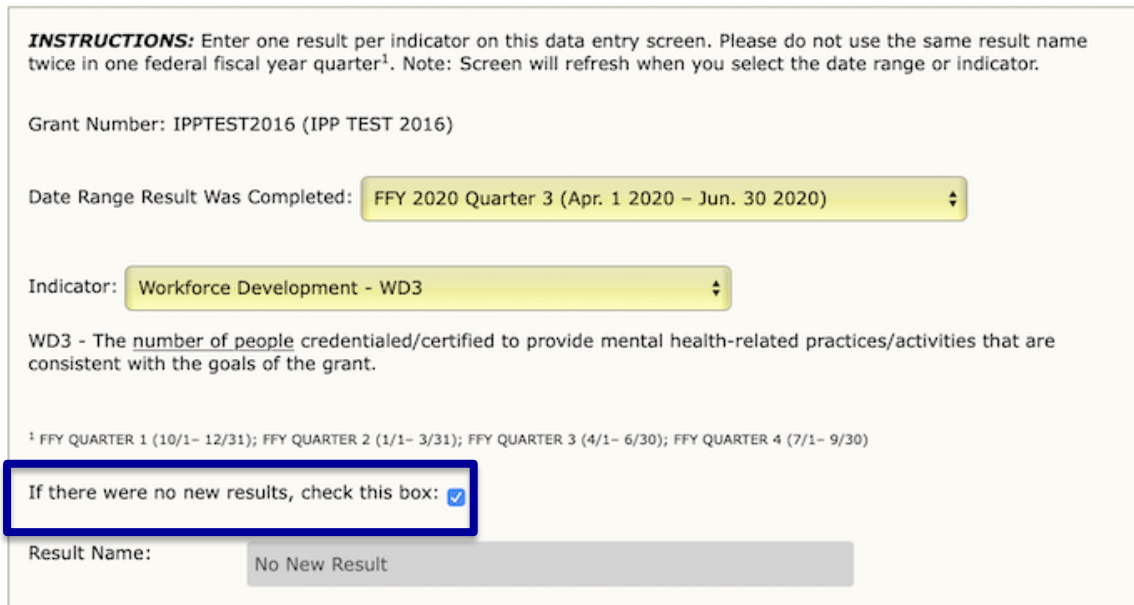
If you have no activity to report for an indicator, you must enter a **No New Result** record in SPARS. To do so, select “If there were no new results, check this box” on the Result Record, then click the **Save - Add New** or **Save - Finish** button to complete the entry.

### Result Record

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

**Save - Add New**

**Save - Finish**



**INSTRUCTIONS:** Enter one result per indicator on this data entry screen. Please do not use the same result name twice in one federal fiscal year 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