

## SECTION 1—INTRODUCTION

### Overview

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#### In this section

This section provides a broad introduction to the Center for Substance Abuse Treatment (CSAT) Government Performance and Results Act (GPRA) Tool.

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## **Substance Abuse and Mental Health Services Administration (SAMHSA) Organization**

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### **U.S. Department of Health and Human Services**

The U.S. Department of Health and Human Services (DHHS) is a large Cabinet-level department comprising several Federal agencies. One of these agencies, the Substance Abuse and Mental Health Services Administration (SAMHSA), comprises four centers:

- The Center for Behavioral Health Statistics and Quality (CBHSQ)
- The Center for Mental Health Services (CMHS)
- The Center for Substance Abuse Prevention (CSAP)
- The Center for Substance Abuse Treatment (CSAT)

Together, these agencies support several grants that promote accountability, capacity, and effectiveness at the community level.

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### **SAMHSA's mission**

SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities. To achieve this mission, SAMHSA has identified strategic initiatives to focus the agency's work on improving lives and capitalizing on emerging opportunities.

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### **What does CSAT do?**

The mission of the Center for Substance Abuse Treatment is to promote community-based substance abuse treatment and recovery services for individuals and families in every community. CSAT provides national leadership to improve access, reduce barriers, and promote high quality, effective treatment and recovery services. CSAT works with States and community-based groups to improve and expand existing substance abuse treatment services under the Substance Abuse Prevention and Treatment Block Grant Program. CSAT also supports States, Territories, Tribes, communities, and local organizations through grant and contract awards and provides national leadership in promoting the provision of quality behavioral health services. It also supports SAMHSA's free treatment referral service to link people with the community-based substance abuse services they need.

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## **SAMHSA Organization, *continued***

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### **How CSAT is organized**

CSAT comprises:

- One major office (the Office of the Director)
- Two supporting offices (the Office of Program Analysis and Coordination and the Office of Consumer Affairs)
- Three major divisions:
  - The Division of Pharmacologic Therapies (DPT)
  - The Division of Services Improvement (DSI)
  - The Division of State and Community Assistance (DSCA)

Each division has a Division Director who oversees operations and is accountable to the Office of the Director.

For more information on CSAT and SAMHSA, visit the SAMHSA home page at <http://www.samhsa.gov>.

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### **Government Project Officers (GPOs)**

DSI and DSCA are made up of three different branches. Within each branch is a group of Government Project Officers (GPOs), who serve as liaisons between you and CSAT. You should know who your GPO is, since he or she will be your Federal point of contact throughout the life of your grant.

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## **SAMHSA's Performance Accountability Reporting System (SPARS)**

### **Description**

SAMHSA's Performance Accountability Reporting System (SPARS) is SAMHSA's data management system. It contains the technology that supports grantees, GPOs, and other CSAT staff in their performance accountability to Congress.

SPARS is the entity into which you will report GPRA data on your clients—<https://spars.samhsa.gov/>.

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### **Components**

SPARS has several components designed to help SAMHSA use your GPRA data to track your performance and provide required outcomes data to the Office of Management and Budget (OMB) and Congress.

To help you use your data for program management and outcome tracking, SPARS has developed a comprehensive list of reports that you can readily use to monitor your program. The system also permits grantees to download their data in several different formats so that you can conduct your own specialized analyses.

To help you with any issues, SPARS has a Help Desk and a variety of free training options to help your staff get familiar with GPRA. Trainings include live webinars and recorded videos available through the SPARS Training and Resource Site.

SPARS also provides Technical Assistance (TA) Packages that help facilitate your success in providing services and collecting performance data. SPARS also supports a group of consultants available to provide TA to your program. Section 4: Grantee Support provides more details regarding these packages.

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## Importance of GPRA Data Reporting

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### Why is GPRA such a big deal?

At some point, staff might ask you—or you might wonder yourself—why GPRA is such a big deal. The following table provides the big picture as to why your data collection efforts are so important and how GPRA is much bigger than just CSAT. There is a direct link between Federal government funding and the availability of grantee performance data.

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### The big picture

The steps presented in the following table are not all-inclusive nor are they as linear as they are presented. However, they should provide a general idea of the big picture.

Step	Action
1	Interviewers collect GPRA data using the CSAT-GPRA Tool in a face-to-face setting.
2	Grantees submit data through the SPARS online data entry and reporting system. Some grants permit data uploading to the system.
3	Your GPO accesses your data and reviews it to make sure things are proceeding as expected.
4	GPOs are accountable to their Branch Chiefs and Division Directors for the success of the grants for which they are responsible.
5	The Office of the CSAT Director reviews all of the data submitted and submits it to SAMHSA, the umbrella agency.
6	SAMHSA staff reviews all data submitted across the three centers and submits the data to HHS.
7	HHS reviews the SAMHSA data against performance targets and submits the data to OMB.
8	A representative from OMB reviews SAMHSA data and submits it on behalf of the agency to Congress.
9	Congress reviews the data from all agencies under HHS.

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## Importance of GPRA Data Reporting, *continued*

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### **Congressional review**

Several other agencies submit large amounts of data to Congress for review. Each of these agencies comprises offices and centers that collect similar GPRA data, with various performance measures.

By the time these data reach Congress, you can imagine the enormity of the data sets. Limited resources require Congress to make selective funding. Members of Congress make informed decisions based on what the data are telling them. Reviewing the overall data against specific performance targets tells Congress whether agencies have met their goals for the performance period.

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#### **Note**



Complete and consistent data help Congress understand the need to continue funding treatment and recovery. You and your staff play a very important role in this process.

## Tips for Improving Your Data Collection Efforts

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### **Guidance for Applicants**

All staff should be aware of the Funding Opportunity Announcement with which their grant is associated. This information can be found on the CSAT Notice of Award.

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### **Know your CSAT grant identification number**

All staff should know their CSAT grant identification (ID) number (for example, TI 12345). Your specific number also can be found on the CSAT Notice of Award. If you cannot locate it, please contact the Help Desk at [SPARS-support@rti.org](mailto:SPARS-support@rti.org) or 1-855-322-2746 to request this information.

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### **Inform all staff of program goals as well as grant requirements**

All staff should read and understand the goals stated in the grant application as well as the requirements of the grant, including the collection and submission of GPRA data.

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### **Client confidentiality**

Remember, to ensure client confidentiality, you should *not* use *any* part of a client's date of birth, mother's maiden name, or Social Security number in the client identifier.

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### **Begin the intake process with clients/participants even if you have not received GPRA Administration Training**

Please refer to the GPRA Question-by-Question Guide for assistance with interviewing clients/participants. This packet includes a copy of this guide. The most up-to-date version can be found on SPARS at <https://spars.samhsa.gov/>. You should also attend free trainings that are offered. Training communication emails will be sent to all CSAT grantees. If you cannot attend these trainings, they will be recorded for viewing at a later date and posted to SPARS. For a complete list of trainings, go to the SPARS website at <https://spars.samhsa.gov/>. Anyone who wants to access the "Training" section will need a username and password as login is required. To obtain a username and password, please have your Project Director contact the Help Desk at [SPARS-support@rti.org](mailto:SPARS-support@rti.org) or 1-855-322-2746.

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## Tips for Improving Your Data Collection Efforts, *continued*

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**Staff may be able to interview clients/ participants even if they are not certified counselors**

CSAT does not require interviewers to be certified counselors; however, your agency’s policy might require certification, and *your agency’s policy supersedes CSAT’s*.

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**Stay within the intake/baseline interview window**

The timeframe in which you must complete and submit the client intake/baseline GPRA is known as the “interview window.” The intake/baseline interview window is 1–3 days for residential facilities and 1–4 days for nonresidential programs. For programs under GFA Recovery Community Services Program (RCSP), GPRA intake/baseline interviews must be completed within two to five contacts after the client enters the program. Program entry dates should follow the grantee’s program entry definition.

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**Conduct face-to-face interviews with clients**

Conduct all GPRA interviews—even the 6-month follow-up—face-to-face and in person, not over the telephone. Begin early to plan how you are going to find clients at 6 months.

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**Conduct a GPRA follow-up interview even if clients are no longer receiving services**

GPRA requires follow-up interviews even if clients have been discharged and are no longer receiving services at your agency.

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## **Tips for Improving Your Data Collection Efforts, *continued***

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**Select only CSAT-funded services when completing the planned and actual services section of the tool**

When completing the planned and actual services sections of the tool, you should only select and report upon services funded by your CSAT grant. This does not include services that were provided to the client by other funding sources.

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**Obtain client contact information during the intake/baseline interview**

Collect all client contact information—including that of family and/or friends the client has signed a waiver for you to be able to contact during the intake/baseline process. Do not wait for a later appointment to collect contact information as this information can assist in locating a client for the GPRA follow-up interview.

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## How You Can Use GPRA Data

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### **Usefulness beyond reporting purposes**

You might not be aware of the usefulness of GPRA data beyond reporting purposes. You are strongly encouraged to use the data for reasons other than accountability for your performance. Uses you should consider and keep in mind during the data collection process include:

- Viewing the outcomes of clients served by your grant.
  - Supporting other grant proposals that you submit—the data will tell a story about your target population, their behaviors, education, use of resources, and living conditions, as well as your success in delivering services.
  - Determining client needs.
  - Making adjustments to service delivery to improve outcomes.
  - Making more informed decisions regarding your staff and budget.
  - Supplementing presentations to your stakeholders.
  - Marketing your program.
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## Data Collection Points

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### Required data collection points

You are required to administer the CSAT-GPRA Tool to your clients at a number of data collection points. The *required* data collection points are:

- Intake/baseline
- Three-month post-intake (only for designated adolescent programs)
- Six-month post-intake
- Discharge

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### Not required for all programs

The 12-month post-intake data collection point is *not required*; however, the data system will allow you to enter a 12-month record for any client you choose. If your program chooses to collect 12-month post-intake, the “12-month” option will need to be handwritten on the GPRA Tool, since it is not included as an interview type.

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## Information on Follow-up Requirements

### CSAT follow-up requirements

All CSAT Services grantees are required to conduct face-to-face 6-month post-intake GPRA follow-up interviews on every client regardless of the client's status, even if the client is discharged before the scheduled follow-up date. For some CSAT-designated programs, a 3-month post-intake follow-up interview is required in addition to the 6-month interview.

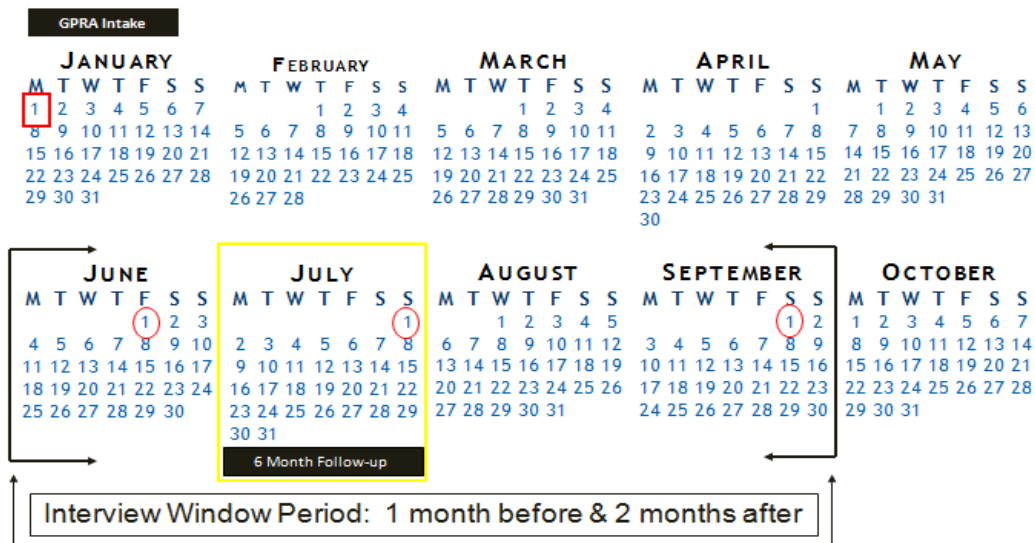
### Minimum follow-up rate

CSAT expects you to make a concerted effort to follow up on 100 percent of your clients. However, 80 percent of all intake interviews must have a *completed* 6-month follow-up interview within the follow-up interview window, at minimum.

### Window period

The follow-up interview window is 1 month before the 3- or 6-month anniversary date and up to 2 months after the 3- or 6-month anniversary date. For example, if the initial intake/baseline interview was completed on January 1, the 6-month follow-up anniversary date would be July 1. The window period for conducting the 6-month follow-up interview would open 1 month before the anniversary date on June 1 and close 2 months after the anniversary date on September 1.

Those programs designated by CSAT as homeless programs are allowed a window period of 2 months before and 2 months after the 6-month follow-up anniversary date.



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## **Information on Follow-up Requirements, *continued***

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If you locate a client for the 6-month follow-up outside the follow-up window, you may conduct an interview, but the data may not be included in any analyses reported to Congress.

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### **Incentive policy**

For certain types of interviews, you can use CSAT grant funding for incentives, with a maximum cash value of \$30 per interview. The incentives can include items such as food vouchers, transportation vouchers, or phone cards.

Incentives are permitted for:

- Completion of a 3- and/or 6-month follow-up interview.
- Discharge interviews where program staff must search for a client who has left the program or a client who has dropped out of a program.

Incentives are not permitted for:

- Routine GPRA discharge interviews.
  - Twelve-month follow-up interviews.
  - GPRA intake interviews.
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### **Discharge policy**

For information on CSAT's discharge policy, see the "CSAT GPRA Client Outcome Measures Frequently Asked Questions" document found on the SPARS website at <https://spars.samhsa.gov/>.

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## Information on Follow-up Requirements, *continued*

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### Resources

You may find these additional resources useful as they supplement the information presented in this document.

CSAT website:

<http://www.samhsa.gov/about-uws/who-we-are/offices-centers/csat>

SAMHSA's Knowledge Application Program (KAP)—access to Treatment Improvement Protocols (TIPs) and Technical Assistance Publications (TAPs):

[www.kap.samhsa.gov](http://www.kap.samhsa.gov)

U.S. Drug Enforcement Administration:

<http://www.justice.gov/dea/index.shtml>

National Institute on Drug Abuse

<http://www.drugabuse.gov>

National Institute on Alcohol Abuse and Alcoholism

<http://www.niaaa.nih.gov>

Office of National Drug Control Policy

<http://www.whitehouse.gov/ondcp/>

SAMHSA's Co-Occurring Disorders:

<http://www.samhsa.gov/co-occurring/>

SAMHSA's National Registry of Evidence-based Programs and Practices

<http://nrepp.samhsa.gov/>

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## Typical CSAT Grantee's Experience

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### **Snapshot of typical grantee's experience**

As a new grantee, you may be uncertain what to expect now that your grant is underway. A quick snapshot of a typical CSAT grantee's experience is described below.

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### ***Face-to-face client interviews***

First, in support of GPRA, you can expect to collect GPRA data on your clients using the CSAT-GPRA Tool. Conduct interviews face-to-face while coding the responses from the client on the tool.

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### ***Online data submission***

Data collected on most clients are submitted online in real time through the SPARS data entry and reporting system (described in Section 3 of this guide). Some grantees submit data via data upload.

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### ***Semiannual reports to GPO***

As a means of communicating with your GPO, you will be required to submit semiannual reports that summarize your grant's activities. It is your opportunity to make your GPO aware of how your grant is coming along.

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### ***Announcements via e-mail***

The Project Director of your grant was automatically added to an e-mail list that keeps grantees informed about important announcements or changes. Look for important announcements throughout the life of your grant to come via e-mail. It is strongly encouraged that you share e-mail messages with appropriate members of your staff. They also can be added or removed from the e-mail list by contacting the Help Desk at [SPARS-support@rti.org](mailto:SPARS-support@rti.org) or 1-855-322-2746

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### ***Additional support***

Finally, the SPARS Help Desk provides additional support regarding specific technical concerns. For example, you may need help deciphering a GPRA data codebook or need more information on a particular report that you want to run. If you require assistance, please contact the Help Desk at [SPARS-support@rti.org](mailto:SPARS-support@rti.org) or 1-855-322-2746

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