

Center for Substance Abuse Prevention (CSAP)

Harm Reduction Grant Reporting Tool

**Question-by-Question Instruction Guide
for
Harm Reduction Grantees**

December 2022

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I. Introduction

The Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) requires grantees to submit work plans, progress reports, and annual outcomes throughout the life of their grant. Grantees use SAMHSA's Performance Accountability and Reporting System (SPARS) to complete the Harm Reduction Annual and Quarterly Reporting Tools. The Harm Reduction Reporting Tool captures information about grantees' project planning and progress in implementing their projects. Work plans include your Annual Report, Organizational Readiness, Strategic Action Plan, and Sustainability Plan. Work plans are to be completed in eRA commons except for the Annual Report, which is to be completed in SPARS, and the Organizational Readiness Assessment, which is to be collected in Microsoft Forms and submitted into eRA. Please reference the "Guidance and Related Definitions" column throughout this document for information about what to report for each data item. 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.

This *Question-by-Question Instruction Guide* provides guidance for successfully completing the Harm Reduction Annual and Quarterly Report. The guide is based on the Harm Reduction Annual and Quarterly Report tool, which you can download from the [SPARS website](#) to use as a reference. Grantees must electronically submit annual report data once per year and progress report data quarterly through SPARS.

II. Harm Reduction Reporting Due Dates

Grantees must submit Progress Report data through SPARS by the last day of the month following the end of each reporting period unless SAMHSA grants an extension. The tables below list report due dates by report type.

Table 1. Harm Reduction Grant Reporting Deadlines for Quarterly Progress Reports

Quarterly Report	Reporting Period	Due Date
1	May 31, 2022 - September 30, 2022	No quarterly report due
2	October 1, 2022 - December 31, 2022	January 31, 2023
3	January 1, 2023 - March 31, 2023	April 30, 2023
4	April 1, 2023 - June 30, 2023	July 31, 2023
5	July 1, 2023 - September 20, 2023	October 31, 2023
6	October 1, 2023 - December 31, 2023	January 31, 2024
7	January 1, 2024 - March 31, 2024	April 30, 2024
8	April 1, 2024 - June 30, 2024	July 31, 2024
9	July 1, 2024 - September 30, 2024	October 31, 2024
10	October 1, 2024 - December 31, 2024	January 31, 2025
11	January 1, 2025 - March 31, 2025	April 30, 2025
12	April 1, 2024 - May 29, 2025	July 31, 2025

Table 2. Harm Reduction Grant Reporting Deadlines for Annual Targets Reports

Annual Target Report	Reporting Period	Due Dates
1	October 1, 2022 - September 30, 2023	January 31, 2023
2	October 1, 2023 - September 30, 2024	July 31, 2023
3	October 1, 2024 - May 29, 2025	July 31, 2024

III. Harm Reduction Grant Annual Data Performance Report

The Harm Reduction Annual Report is located under the Work Plans section of grantees CSAP SPARS dashboard. The annual report is to be completed once a year. This report should be completed and have GPO approval before completing the quarterly report. The data entered in the Annual report are targets, so actual numbers are not required, but they should be attainable.

Grantee Information (To be completed on an annual basis.)

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
1	Organization Name		This item will be pre-filled by SPARS		
2	Grant Number		This item will be pre-filled by SPARS		
3	Federal Fiscal Year	2022 2023 2024 2025 2026	Select the grant year that this report will be reporting on.		

A. Service Encounter Target Setting (To be completed on an annual basis.)

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
A.1	Total number of service encounters expected this year? (In the field)	Numerical	Provide the expected total number of service encounters that may occur in the field during the federal fiscal year.	<p>Service encounters for target setting is defined as any expected interaction with a program participant that will include at least one harm reduction service that is funded through this grant.</p> <p>In the field is defined for target setting as a service location that is not a fixed site of your organization, where services or personnel expected to receive funds through this grant that will provide harm reduction services and/or where harm reduction supplies are expected to be purchased through this grant and will be distributed. Examples might include mobile units, partner organizations/providers where your organization provides on-site services or outreach, street-based outreach, delivery services, and community events. Include the total number of service encounters expected to occur in the field as a single response.</p>	<p>Include expected encounters at a mobile unit service location where personnel funded through this grant provides harm reduction services or where harm reduction supplies purchased through this grant will be distributed.</p> <p>Exclude expected encounters that will not be funded through this grant.</p> <p>Also exclude encounters expected to be provided at a fixed site service location where services or personnel funded through this grant will provide harm reduction services.</p>
A.2	Total number of service encounters expected this year? (At a facility)	Numerical	Provide the expected total number of service encounters that may occur at the grant site during the federal fiscal year.	<p>See above.</p> <p>Facility is defined for target setting as a fixed site service location where personnel funded through this grant are expected to provide harm reduction services.</p> <p>If your organization has multiple fixed site locations, include the total number of expected service encounters across all fixed sites.</p>	<p>See above.</p> <p>Exclude encounters expected to be provided outside of a fixed site service location where personnel funded through this grant will provide harm reduction services.</p>

B. Commodities Purchased Target Setting *(To be completed on an annual basis.)*

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.1	Total number of safe sex kit supplies expected to be purchased	Numerical	Provide the numerical amount of safe sex kit supplies that are expected to be purchased during the federal fiscal year. Safe sex kits refer to items that are effective in preventing the spread of HIV infection.	The expected number of safe sex kits to increase safety during sex using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	<p>If items are self-serve, a comparison of inventory to supplies ordered is sufficient.</p> <p>Include: any items used to increase safety during sex, such as external condoms, internal condoms, dental dams, and lubricant.</p> <p>Exclude: safer sex kit supplies to be purchased with funding sources other than SAMHSA Harm Reduction Grant funds.</p>
B.2	Total number of naloxone kits [nasal spray] expected to be purchased	Numerical	Provide the numerical amount of naloxone kits that are expected to be purchased during the federal fiscal year. To help with estimation, one naloxone kit contains 2 doses.	Number of naloxone kits expected to be purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to community members.	<p>A kit is defined as 2 doses of naloxone. If 1 dose is given out, that would count as .5 kits.</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.3	Total number of naloxone kits [intramuscular] expected to be purchased	Numerical	Provide the numerical amount of naloxone kits that are expected to be purchased during the federal fiscal year. To help with estimation, one naloxone kit contains 2 doses,	Number of naloxone kits expected to be purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to community members.	<p>A kit is defined as 2 doses of naloxone. If 1 dose is given out, that would count as .5 kits.</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that will be not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.4	Total number of vending machines expected to be purchased/leased	Numerical	Provide the numerical number of vending machines that the organization expects to buy or lease during the federal fiscal year.	<p>Purchased: Total number of vending machines expected to be purchased or leased using SAMHSA Harm Reduction Grant Program funds for distributing safer drug use supplies, including overdose prevention supplies, during the project period.</p> <p>Operationalized: Total number of vending machines expect to purchase or lease for the purpose of distributing safer drug use supplies, including overdose prevention supplies, that are in operation.</p>	Exclude: Items that will not funded by the SAMHSA Harm Reduction Grant Program.

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.5	Total amount of stock for vending machines expected to be purchased.	Numerical	Provide the numerical number of items that are expected to be bought for the vending machines during the federal fiscal year.	Total number of all items and/or supplies expected to be purchased using SAMHSA Harm Reduction Grant Program funds for the purpose of distributing in vending machines to program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.6	Total number of medication lock boxes expected to be purchased.	Numerical	Provide the expected number of medication lock boxes that are expected to be purchased during the federal fiscal year. A medication lock box refers to a locked container for individuals to store their medications from unwanted access.	Number of individual boxes expected to purchase using SAMHSA Harm Reduction Grant Program funds for the purpose of distribution to program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.7	Total number of sharps/medication disposal boxes expected to be purchased.	Numerical	Provide the numerical amount of sharps/medication disposal boxes that are expected to be purchased during the federal fiscal year.	Number of personal sharps containers and kiosks for large scale disposal expected to purchase using SAMHSA Harm Reduction Grant Program funds for the distribution to program participants or operationalized for use by program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.8	Total number of wound care management supplies expected to be purchased.	Numerical	Provide the numerical amount of wound care management supplies that are expected to be purchased during the federal fiscal year. Wound care management refers to supplies that can be used to provide treatment to an injury that damages the body such as band aids and antibiotics.	Total number of wound care management supplies expected to be purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	<p>If items are self-serve, a comparison of inventory to supplies ordered is sufficient.</p> <p>Include: Band-aids Antibiotic ointment Gauze Latex gloves Medical tape Saline</p> <p>Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.</p>

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.9	Total number of fentanyl test strips expected to be purchased.	Numerical	Provide the numerical amount of fentanyl test strips that are expected to be purchased during the federal fiscal year. Fentanyl test strips refer to paper strips that are used to detect the presence of fentanyl.	Number of fentanyl test strips expected to be purchased using SAMHSA Harm Reduction Grant Program funds for the purpose of distributing to program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.10	Total number of other substance test strips expected to be purchased.	Numerical	Provide the numerical amount of other substance test strips that are expected to be purchased during the federal fiscal year. Other substance test strips should be tests to detect substances other than fentanyl.	Number of non-fentanyl test strips expected to be purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.11	Total number of sterile syringes expected to be purchased	Numerical	Provide the numerical number of sterile syringes that are expected to be purchased during the federal fiscal year.	Number of sterile syringes expected to be purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.
B.12	Total number of safe smoking kits expected to be purchased.	Numerical	Provide the numerical number of safe smoking kits that are expected to be purchased during the federal fiscal year. Safe smoking kits refer to clean items for smoking substances.	Number of safe smoking kits expected to be purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	<p>Include: Stem covers Screen/Chore Boy Foil</p> <p>Exclude: Pipes</p> <p>Exclude: Items that will not be funded by the SAMHSA Harm Reduction Grant Program.</p>

C. Specific Harm Reduction Encounters Services Target Setting *(To be completed on an annual basis.)*

1. Overdose Prevention

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.1.A	Expected number of naloxone trainings to be provided.	Numerical	Provide the numerical number of naloxone trainings that are expected to be provided during the federal fiscal year.	Number of naloxone trainings expected to be conducted, either during one on one or group trainings, to train attendee(s) in successful administration of naloxone to be funded through this grant	Trainings typically include: Identifying an opioid overdose, identifying non-responsiveness, administering naloxone, how to put someone in the recovery position, overdose aftercare, and information about the Good Samaritan Law as relevant.
C.1.B	Expected number of individuals to received naloxone trainings.	Numerical	Provide the numerical number of individuals that are expected to receive the naloxone trainings that are provided during the federal fiscal year.	Number of non-unique individuals expected to attend naloxone trainings, either in one on one or group trainings, that will be funded through this grant.	Tracking non-unique individuals. If a single individual attends multiple trainings, they will be counted once per training. Sessions can be one on one or group trainings. An individual does not need to receive a naloxone kit to be counted as receiving training.
C.1.C	Expected number of overdose education sessions to be provided.	Numerical	Provide the numerical number of overdose education sessions that are expected to be provided during the federal fiscal year.	Total number of overdose education sessions, expected to be conducted, either one on one or group sessions, that include education pertaining to opioid, stimulant, or poly substance overdose, that will be funded through this grant.	Sessions can be one on one or group sessions. Include: Messaging related to using small amounts after periods of reduced use or abstinence, drug checking/testing, education on overamping, information about possible contamination of the drug supply, reminders to use with someone else trained in naloxone administration present, information about the Good Samaritan Law, etc. Exclude: Naloxone trainings

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.1.D	Expected number of individuals to receive overdose trainings.	Numerical	Provide the number of individuals that are expected to attend all overdose education sessions during the federal fiscal year.	Number of non-unique individuals expected to attend overdose education trainings, either one on one or group trainings, that will be funded through this grant.	Tracking is of non-unique individuals. If a single individual attends multiple training on different dates, this individual will be counted once per training. Sessions can be one on one or group trainings.
C.1.E	Expected number of other overdose prevention services to be provided.	Numerical	Provide the expected number of overdose prevention services that are beyond naloxone training and overdose education that may be provided during the federal fiscal year.	List any other overdose prevention services funded through this grant and not listed above.	Include: Observation of consumption, post-consumption observation, administration of oxygen
C.1.F	Expected number of individuals to receive other overdose prevention services.	Numerical	Provide the number of individuals that are expected to receive other types of overdose prevention services that are beyond naloxone training and overdose education during the federal fiscal year.	Number of non-unique individuals expected to receive other overdose prevention services, either one on one or group sessions that will to be funded through this grant.	Tracking is of non-unique individuals. If a single individual attends multiple training on different dates, this individual will be counted once per training. Services can be one-on-one or group based.

2. Mental and Physical Health Promotion

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.2.A	Expected number of counseling services to be provided.	Numerical	Provide the expected number of counseling services (i.e., group or individual sessions) expected to be provided during the federal fiscal year.	<p>Number of counseling services, either one on one or group sessions, expected to be funded through this grant.</p> <p>Counseling services include supportive short term and crisis counseling but should not include long term regular mental health counseling.</p>	<p>Sessions can be one-on-one or group based.</p> <p>Exclude: regular mental health counseling from a therapist.</p>
C.2.B	Expected number of health education sessions to be provided.	Numerical	Provide the expected number of health education sessions that will be provided during the federal fiscal year.	Any educational session expected to provide to a program participant during a harm reduction encounter pertaining to their physical wellbeing, including information on hydration and diet, exercise, smoking, hepatitis C and HIV prevention counseling, vein care, sleep, first aid, reproductive health, and more.	
C.2.C	Expected number of other mental/physical/health promotion services to be provided.	Numerical	Provide the expected number of other types of mental and physical health services that are beyond counseling services and health education that the grant site may provide during the federal fiscal year.	List any other mental/physical/health promotion services expected to be provided through this grant.	

3. Linkages to Treatment and Recovery Support Services

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.3.A	Expected number of linkages to peer services.	Numerical	Provide the expected number of connections to peer support services that may be made during the federal fiscal year.	For the purpose of targeting, “linkages to peer services” are defined as the estimated number of engagements with any peer support service. Each linkage should be counted (e.g., one individual participant expected to be engaged with five individual support services should reflect five linkages).	
C.3.B	Expected number of linkages to treatment services.	Numerical	Provide the expected number of connections to treatment services that may be made during the federal fiscal year.	For the purpose of targeting, “linkages to treatment” are defined as the number of expected engagements with any substance use disorder treatment services. Each linkage should be counted (e.g., one individual participant expected to be engaged with five individual support services should be counted as five linkages). Number of expected linkages to substance use disorder treatment, which does not need to include a confirmed medical diagnosis. A linkage is a warm hand off to an internal or external service.	<p>Include expected linkages to:</p> <ul style="list-style-type: none"> Residential treatment Outpatient treatment Medications for opioid use disorder (MOUD) Contingency management Detox <p>Exclude: Treatment referrals, where only information will be provided</p>
C.3.C	Expected number of linkages to recovery services.	Numerical	Provide the expected number of connections to recovery services that may be made the federal fiscal year.	For the purpose of this indicator, “linkages” are defined as the number of expected engagements with any support service. Each linkage should be counted (e.g., one individual participant expected to be engaged with five individual support services should reflect five linkages).	
C.3.D	Expected number of other linkages to treatment and recovery support services.	Numerical	Provide the expected number of connections to other types of support services that may be made during the federal fiscal year.	List any other linkages to treatment and recovery support services expected to be provided through this grant not already listed above.	Exclude: expected linkages already counted in previous service domains.

D. Demographics

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
D.1	Gender	Numerical	Provide the expected number of service encounters that involved individuals who identify as Female, Male, Transgender (Male to Female or Female to Male), Non-Binary, or Other during the federal fiscal year.	Grantees must report an aggregate of service encounters by gender and NOT by number of individuals of each gender. The sum of the actual number of gender service encounters should not exceed the sum of in the field and at a facility service encounter entered in Section A.	
D.2	Ethnicity	Numerical	Provide the expected number of service encounters during the federal fiscal year that involve individuals who identify as either Hispanic, Latino/a, or Spanish origin or Not Hispanic, Latino/a, or Spanish Origin.	Grantees must report an aggregate of service encounters by ethnicity and NOT by the number of individuals of each ethnicity. The sum of the actual number of ethnicity service encounters should not exceed the sum of services entered in Section A.	
D.3	Race	Numerical	Provide the expected number of service encounters during the federal fiscal year that will involve individuals who identify as having a racial background as American Indian, or Alaskan Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White, or Multiracial.	<p>Grantees must report an aggregate of service encounters by race and NOT by the number of individuals of each race. The sum of the actual number of race service encounters should not exceed the sum of services entered in Section A.</p> <p>American Indian or Alaska Native – A person having origins in any of the original people of North and South America (including Central America) and who maintains tribal affiliation or community attachment.</p> <p>Asian – A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</p> <p>Black or African American – A person having origins in any of the Black racial groups of Africa.</p> <p>Native Hawaiian or Other Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.</p> <p>White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.</p> <p>Multiracial – A person identifying as two or more races (listed above).</p>	
D.4	Age	Numerical	Provide the expected number of service encounters during the grant year that will involve individuals who are in the age ranges of under 15 years, 15-17 years, 18-24 years, 25 to 34 years, 35 to 44 years, 45 to 54 years, 55 to 64 years, and 65 years and older.	Grantees must report an aggregate of service encounters of each age range and NOT by the number of individuals of each age range. The sum of the actual number of age service encounters should not exceed the sum of services entered in Section A.	

IV. Harm Reduction Grant Quarterly Data Performance Report

The Quarterly Report is located under the Progress Report section of the CSAP SPARS dashboard. The Quarterly Report should be completed after receiving GPO approval of the Annual Report. The quarterly report requires actual data entry for the quarter.

SPARS will pre-fill the Project Officer information (which grantees cannot edit).

Grantee Information

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
1	Organization Name		This item will be pre-filled by SPARS		
2	Grant Number		This item will be pre-filled by SPARS		
3	Federal Fiscal Year		This item will be pre-filled by SPARS.		
4	Federal Fiscal Quarter		This item will be pre-filled by SPARS.		

A. Encounters Attained

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
A.1	Total Number of Service Encounters (Field)	Numerical	Provide the actual number of service encounters that occurred out in the field during the quarter.	<p>A service encounter is an engagement to receive a unique service that is funded through this grant. For example, if an individual is tested for HIV and VH and later returns to receive fentanyl test strips and counseling, these two visits/interactions should be counted as four service encounters.</p> <p>In the field is defined as a service location that is not a fixed site of your organization, where services or personnel funded through this grant provide harm reduction services and/or where harm reduction supplies purchased through this grant are distributed. Examples include mobile units, partner organizations/providers where your organization provides on-site services or outreach, street-based outreach, delivery services, and community events. Include the total number of service encounters that occurred in the field as a single response.</p>	<p>Include: encounters at a mobile unit service location where personnel funded through this grant provide harm reduction services or where harm reduction supplies purchased through this grant are distributed.</p> <p>Exclude: encounters that are not funded through this grant.</p> <p>Exclude: encounters provided at a fixed site service location where services or personnel funded through this grant provide harm reduction services.</p>
A.2	Total Number of Service Encounters (Facility)	Numerical	Provide the actual number of service encounters that occurred at the grant site during the quarter.	<p>See above.</p> <p>Facility is defined as a fixed site service location where personnel funded through this grant provide harm reduction services.</p> <p>If your organization has multiple fixed site locations, include the total number of service encounters across all fixed sites.</p>	<p>See above.</p> <p>Exclude: encounters provided outside of a fixed site service location where personnel funded through this grant provide harm reduction services.</p>

B. Commodities Purchased/Distributed

Select "Edit Grantee Information" to begin entering data.

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.1	Safe Sex Kit Supplies Purchased	Numerical	Provide the actual number of Safe Sex Kit supplies that were purchased during the quarter. Safe sex kits refer to items that are effective in preventing the spread of HIV infection.	Number of safe sex kits to increase safety during sex that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	<p>If items are self-serve, a comparison of inventory to supplies ordered is sufficient.</p> <p>Include: any items used to increase safety during sex, including external condoms, internal condoms, dental dams, and lubricant</p> <p>Exclude: safer sex kit supplies purchased with funding sources other than SAMHSA Harm Reduction Grant funds</p>
B.2	Safe Sex Kit Supplies Distributed	Numerical	Provide the actual number of Safe Sex Kit supplies that were distributed during the quarter.	Safe sex kit supplies that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed directly or by self-serve to program participants.	<p>Include: Items that are self-serve as well as directly given to participants.</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.3	Naloxone Kits Purchased (nasal spray) (1 kit=2 doses).	Numerical	Provide the actual number of nasal naloxone kits that have been purchased during the quarter.	Number of nasal naloxone kits that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to community members.	<p>A kit is defined as 2 doses of naloxone. If 1 dose is given out, that would count as .5 kits.</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.4	Naloxone Kits Distributed (nasal spray) (1 kit=2 doses)	Numerical	Provide the actual number of nasal naloxone kits that have been distributed during the quarter.	Number of naloxone kits that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to community members.	<p>A kit is defined as 2 IM doses or 1 Nasal. If 1 IM vial is given out, that would count as .5</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.5	Naloxone Kits Purchased (intramuscular) (1 kit=2 doses)	Numerical	Provide the actual number of intramuscular naloxone kits that have been distributed during the quarter.	Number of naloxone kits that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to community members.	<p>A kit is defined as 2 doses of naloxone. If 1 dose is given out, that would count as .5 kits.</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.6	Naloxone Kits Distributed (intramuscular) (1 kit=2 doses)	Numerical	Provide the actual number of nasal naloxone kits that have been distributed during the quarter.	Number of naloxone kits that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to community members.	<p>A kit is defined as 2 doses of naloxone. If 1 dose is given out, that would count as .5 kits.</p> <p>Include: IM naloxone Nasal naloxone</p> <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.7	Vending Machine Purchased or Leased	Numerical	Provide the actual number of vending machines that were purchased and/or leased during the quarter.	<p>Purchased: Total number of vending machines purchased or leased using SAMHSA Harm Reduction Grant Program funds for the purpose of distributing safer drug use supplies, including overdose prevention supplies, during the project period.</p> <p>Operationalized: Total number of purchased or leased vending machines for the purpose of distributing safer drug use supplies, including overdose prevention supplies, that are in operation.</p>	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.8	Stock for Vending Machines Purchased	Numerical	Provide the actual number of supplies that were purchased for the vending machines during the quarter.	Total number of all items and/or supplies that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution in vending machines to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.9	Medication Lock Boxes Purchased	Numerical	Provide the actual number of medication lock boxes that have been purchased during the quarter.	Number of individual boxes that lock to protect medication from unwanted access that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.10	Medication Lock Boxes Distributed	Numerical	Provide the actual number of medication lock boxes that have been distributed during the quarter.	Number of individual boxes that lock to protect medication from unwanted access that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.11	Sharps/Medication Disposal Boxes Purchased	Numerical	Provide the actual number of needle and medication disposal boxes that been purchased during the quarter.	Number of personal sharps containers and kiosks for large scale disposal that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants or operationalized for use by program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.12	Sharps/Medication Disposal Boxes Distributed	Numerical	Provide the actual number of needle and medication disposal boxes that were distributed during the quarter.	Number of personal sharps containers and kiosks for large scale disposal that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants or operationalized for use by program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.13	Wound Care Management Supplies Purchased	Numerical	Provide the actual dollar amount of wound care management supplies that were purchased during the quarter. Wound care management refers to supplies that can be used to provide treatment to an injury that damages the body such as band aids and antibiotics.	Total number of wound care management supplies that were purchased using SAMHSA Harm Reduction Grant Program funds.	<p>If items are self-serve, a comparison of inventory to supplies ordered is sufficient.</p> <p>Include:</p> <ul style="list-style-type: none"> Band-aids Antibiotic ointment Gauze Latex gloves Medical tape Saline <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.14	Wound Care Management Service Encounters	Numerical	Provide the actual number of wound care management service encounters that were provided during the quarter.	Number of encounters with participants related to wound prevention and wound care, including counseling, first aid, and/or medical treatment as applicable. May also include referrals and/or linkages to higher threshold clinical care.	<p>Include:</p> <p>Counseling on what to look for in terms of an abscess, how to identify skin and soft tissue infections, abscess prevention education</p> <p>By medical personnel only as appropriate:</p> <p>Cleaning a wound Incision & drainage services Re-wrapping</p>
B.15	Fentanyl Test Strips Purchased	Numerical	Provide the actual number of fentanyl test strips that were purchased during the quarter.	Number of fentanyl test strips that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.16	Fentanyl Test Strips Distributed	Numerical	Provide the actual number of fentanyl test strips that were distributed during the quarter.	Number of fentanyl test strips that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.17	Other Substance Test Strips Purchased	Numerical	Provide the actual number of test strips for other substance types that were purchased during the quarter. The other substance test strips must test for substances beyond fentanyl.	Number of non-fentanyl test strips that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.18	Other Substance Test Strips Distributed	Numerical	Provide the actual number of test strips for other substance types that were distributed during the quarter.	Number of non-fentanyl test strips that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.19	Sterile Syringes Purchased	Numerical	Provide the actual number of sterile syringes that were purchased during the quarter.	Number of sterile syringes that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.
B.20	Sterile Syringes Distributed	Numerical	Provide the actual number of sterile syringes that were distributed during the quarter.	Number of sterile syringes that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
B.21	Smoking Kits Purchased	Numerical	Provide the actual number of safe smoking kits purchased during the quarter. Safe smoking kits refer to clean items that individuals can use to smoke substances with.	Number of safe smoking kits that were purchased using SAMHSA Harm Reduction Grant Program funds for purposes of distribution to program participants.	<p>Include:</p> <ul style="list-style-type: none"> Stem covers Screen/Chore Boy Foil <p>Exclude:</p> <ul style="list-style-type: none"> Pipes <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>
B.22	Smoking Kits Distributed	Numerical	Provide the actual number of safe smoking kits that have been distributed during the quarter.	Number of safe smoking kits that were purchased using SAMHSA Harm Reduction Grant Program funds and distributed to program participants.	<p>Include:</p> <ul style="list-style-type: none"> Stem covers Screen/Chore Boy Foil <p>Exclude:</p> <ul style="list-style-type: none"> Pipes <p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>

C. Specific Harm Reduction Service Encounters

1. Infectious Disease Prevention and Support Services

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.1.A	HIV Testing	Numerical	Provide the actual number of HIV tests that were administered during the quarter.	Number of HIV testing encounters, including either rapid or confirmatory testing, done by entity using SAMHSA Harm Reduction Grant Program funds.	<p>Include:</p> <ul style="list-style-type: none"> Rapid tests Confirmatory tests <p>If both a rapid and confirmatory test are done for 1 person, it counts as 2 encounters.</p>
C.1.B	VH Testing	Numerical	Provide the actual number of VH tests administered during the quarter.	Number of Viral Hepatitis C testing encounters, including either rapid or confirmatory testing, done by entity using SAMHSA Harm Reduction Grant Program funds.	<p>Include:</p> <ul style="list-style-type: none"> Rapid tests PCR tests Genotyping lab SVR-12 <p>Exclude:</p> <ul style="list-style-type: none"> HAV and HBV testing
C.1.C	VH Vaccination Services	Numerical	Provide the actual number of VH Vaccination services that were provided during the quarter.	Every viral hepatitis vaccine given, including monovalent hepatitis A, monovalent hepatitis B, and Twinrix. Each dose in the series should be counted, rather than each individual receiving one dose.	<p>Include:</p> <ul style="list-style-type: none"> Hep A Hep B
C.1.D	Other Infectious Disease Prevention and Treatment	Numerical	Provide the actual number of other types of infectious disease prevention and treatment provided, purchased, or administered during the grant year. These services should go beyond the previous services and linkages mentioned in this section.	List any other infectious disease prevention and treatment services provided by the entity that were funded with SAMHSA Harm Reduction Grant Program funds and not listed above, and the correlated encounter numbers.	<p>Possible examples may include but are not limited to:</p> <ul style="list-style-type: none"> STI testing Sepsis/endocarditis education
C.1.E	Other Safer Drug Use Services	Numerical	Provide the actual number of other types of safer drug use supplies that were purchased or distributed during the quarter. Other safe drug use services should be beyond safe smoking skits.	List any other safer drug use services provided by the entity that were funded with SAMHSA Harm Reduction Grant Program funds and not listed above, and the correlated encounter numbers.	<p>Exclude: Items that are not funded by the SAMHSA Harm Reduction Grant Program.</p>

2. Overdose Prevention

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.2.A	Naloxone Trainings	Numerical	Provide the actual number of naloxone trainings that were provided by during the quarter.	Overall number of naloxone trainings, either one on one or group trainings, to train attendee(s) in successful administration of naloxone funded through this grant	<p>Trainings typically include:</p> <p>Identifying an opioid overdose, identifying non-responsiveness, administering naloxone, how to put someone in the recovery position, overdose aftercare, and information about the Good Samaritan Law as relevant.</p>
C.2.B	Individuals Receiving Naloxone Training	Numerical	Provide the actual number of individuals who received naloxone trainings during the quarter.	Number of non-unique individuals at naloxone trainings, either one on one or group trainings funded through this grant.	<p>Tracking is of non-unique individuals.</p> <p>If a single individual attends multiple training they will be counted once per training.</p> <p>Sessions can be one on one or group trainings.</p> <p>An individual does not need to receive a naloxone kit to be counted as receiving training.</p>
C.2.C	Overdose Education Sessions	Numerical	Provide the actual number of overdose education sessions provided during the quarter.	Overall number of overdose education sessions, either one on one or group sessions, that include education pertaining to opioid, stimulant, or poly substance overdose, either one on one or group trainings, including all messages listed to the right funded through this grant.	<p>Sessions can be one on one or group sessions.</p> <p>Include: Messaging related to using small amounts after periods of reduced use or abstinence, drug checking/testing, education on over-amping, information about possible contamination of the drug supply, reminders to use with someone else trained in naloxone administration present, information about the Good Samaritan Law, etc.</p> <p>Exclude: Naloxone trainings</p>
C.2.D	Individuals Receiving Overdose Education Sessions	Numerical	Provide the actual number of individuals who attended overdose education sessions during the quarter.	Number of non-unique individuals at overdose education trainings, either one on one or group trainings, funded through this grant.	<p>Tracking is of non-unique individuals.</p> <p>If a single individual attends multiple training on different dates, this individual will be counted once per training.</p> <p>Sessions can be one on one or group trainings.</p>

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.2.E	Other Overdose Prevention Services	Numerical	Provide the actual number of other types of overdose prevention services that were provided during the quarter. These services should go beyond Naloxone training and overdose education sessions.	List any other overdose prevention services funded through this grant and not listed above, and the correlated encounter numbers.	Include: Observation of consumption, post-consumption observation, administration of oxygen
C.2.F	Individuals Receiving Other Overdose Prevention Services	Numerical	Provide the actual number of individuals that attended other types of overdose prevention services during the quarter.	Number of non-unique individuals for other overdose prevention services, either one on one or group sessions funded through this grant.	Tracking is of non-unique individuals. If a single individual attends multiple training on different dates, this individual will be counted once per training. Services can be one-on-one or group based.

3. Mental and Physical Health Promotion

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.3.A	Counseling Services	Numerical	Provide the actual number of counseling services encounters that were provided during the quarter.	Number of non-unique individuals receiving counseling services, either one on one or group sessions, funded through this grant. Counseling services include supportive short term and crisis counseling but should not include long term regular mental health counseling.	Tracking is of non-unique individuals. If a single individual attends multiple training on different dates, this individual will be counted once per training. Sessions can be one-on-one or group based. Exclude: regular mental health counseling from a therapist.
C.3.B	Health Education Services	Numerical	Provide the actual number of health education service encounter that were provided during the quarter.	Any educational session provided to a program participant during a harm reduction encounter pertaining to their physical wellbeing, including information on hydration and diet, exercise, smoking, hepatitis C and HIV prevention counseling, vein care, sleep, first aid, reproductive health, and more.	
C.3.C	Other Mental and Physical Health Promotion Services	Numerical	Provide the actual number of other types of mental and physical health services that were provided. The other types of mental and physical health services should go beyond counseling and health education services.	List any other mental/physical/health promotion services provided through this grant, and the correlated encounter numbers.	

4. Linkages to Treatment and Recovery Support Services

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.4.A	Linkages to Peer Services	Numerical	Provide the actual number of connections made to peer support services during the quarter.		Exclude: Peer services referrals, where only information is provided.
C.4.B	Linkages to Treatment Services	Numerical	Provide the actual number of Treatment Service connections made during the quarter.	Number of linkages to substance use disorder treatment (does not need to include a confirmed medical diagnosis). A linkage is a warm hand off to an internal or external service.	<p>Include linkages to:</p> <ul style="list-style-type: none"> Residential treatment Outpatient treatment Medications for opioid use disorder (MOUD) Contingency management Detox <p>Exclude: Treatment referrals, where only information is provided.</p>
C.4.C	Linkages to Recovery Services	Numerical	Provide the actual number of Recovery Service connections made during the quarter.	Number of linkages to substance use disorder recovery services (does not need to include a confirmed medical diagnosis). A linkage is a warm hand off to an internal or external service.	<p>Include linkages to:</p> <ul style="list-style-type: none"> Mental health counseling Psychiatric support <p>These are treatment resources listed above. And therefore, should be removed.</p> <p>Exclude: Recovery referrals, where only information is provided.</p>
C.4.D	Other Linkages to Treatment and Recovery Support Services	Numerical	Provide the actual number of other types of linkages to Support Services made during the quarter.	List any other linkages to treatment and recovery support services provided through this grant and not already listed above, and the correlated encounter numbers.	Exclude: linkages already counted in previous service domains.

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
C.4.E	PrEP Linkages	Numerical	Provide the actual number of PrEP connections made during the quarter.	Number of encounters that include linkages to PrEP care done by entity using SAMHSA Harm Reduction Grant Program funds. A linkage is a warm hand off to an internal or external service.	Exclude: PrEP referrals where only information is provided.
C.4.F	HIV Treatment Linkages	Numerical	Provide the actual number of HIV treatment connections made during the quarter	Number of encounters that include any linkage along the HIV cascade of care (i.e. to confirmatory HIV testing, treatment for a known HIV infection) done by entity using SAMHSA Harm Reduction Grant Program funds. A linkage is a warm hand off to an internal or external service.	Exclude: HIV treatment referrals, where only information is provided.
C.4.H	VH Treatment Linkages	Numerical	Provide the actual number of VH treatment connections made during the quarter.	Number of encounters that include any linkage along the VH cascade of care (e.g., to PCR testing, genotype testing, to treatment,). A linkage is a warm hand off to an internal or external service.	<p>Include: HAV, HBV, or HCV testing or treatment linkages</p> <p>Exclude: VH treatment referrals, where only information is provided.</p>

D. Demographics

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
D.1	Gender	Numerical	Provide the actual number of service encounters that involved individuals who identify as Female, Male, Transgender (Male to Female or Female to Male), Non-Binary, or Other during the quarter.	Grantees must report an aggregate of service encounters by gender and NOT by number of individuals of each gender. The sum of the actual number of gender service encounters should not exceed the sum of in the field and at a facility service encounter entered in Section A.	
D.2	Ethnicity	Numerical	Provide the actual number of service encounters during the quarter that involve individuals who identify as either Hispanic, Latino/a, or Spanish origin or Not Hispanic, Latino/a, or Spanish Origin.	Grantees must report an aggregate of service encounters by ethnicity and NOT by the number of individuals of each ethnicity. The sum of the actual number of ethnicity service encounters should not exceed the sum of services entered in Section A.	
D.3	Race	Numerical	Provide the actual number of service encounters during the grant year that will involve individuals who identify as having a racial background as American Indian, or Alaskan Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander, White, or Multiracial.	<p>Grantees must report an aggregate of service encounters by race and NOT by the number of individuals of each race. The sum of the actual number of race service encounters should not exceed the sum of services entered in Section A.</p> <p>American Indian or Alaska Native – A person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment.</p> <p>Asian – A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.</p> <p>Black or African American – A person having origins in any of the Black racial groups of Africa.</p> <p>Native Hawaiian or Other Pacific Islander – A person having origins in any of the original people of Hawaii, Guam, Samoa, or other Pacific Islands.</p> <p>White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.</p> <p>Multiracial – A person identifying as two or more races (listed above).</p>	
D.4	Age	Numerical	Provide the actual number of service encounters during the grant year that will involve individuals who are in the age ranges of under 15 years, 15-17 years, 18-24 years, 25 to 34 years, 35 to 44 years, 45 to 54 years, 55 to 64 years, and 65 years and older.	Grantees must report an aggregate of service encounters of each age range and NOT by the number of individuals of each age range. The sum of the actual number of age service encounters should not exceed the sum of services entered in Section A.	

E. Quarterly Program Progress Narrative

ID	Data Item	Response Options	Content Guidance & Related Definitions	Expanded Definition	Practical Considerations
E.1	Overall Progress	Free Text	Provide a brief description of the activities that are currently being worked on or have accomplished during the quarter.	(1-2 paragraphs. Please share an update on the program progress completed during this reporting period related to overall programmatic implementation and to the approved goals and objectives).	
E.2	Challenges/Barriers	Free Text	Provide a brief description of the challenges, problems, and limitations that occurred during the quarter.	(1-2 paragraphs. If applicable, please share program challenges or barriers faced during this reporting period related to overall programmatic implementation and to the approved goals/objectives and the identified strategies to overcome them).	
E.3	Successes	Free Text	Provide a brief description of the successes from the quarter.	(1-2 paragraphs. If applicable, please share program accomplishments achieved during this reporting period related to overall programmatic implementation and to approved goals and objectives).	
E.4	Innovations	Free Text	Provide a brief description of any new methods, ideas, or changes to the processes that occurred during the quarter.	Innovations (1-2 paragraphs. If applicable, please share program innovations developed and/or implemented during this reporting period related to harm reduction initiatives).	