

**GOVERNMENT PERFORMANCE AND RESULTS ACT
(GPRA) CLIENT OUTCOME MEASURES**

**FREQUENTLY ASKED QUESTIONS
(FAQs) FOR
Center for Substance Abuse Treatment (CSAT)
Discretionary Services Programs**

May 2020
v3.0

Government Performance and Results Act (GPRA) Questions

1. What is the GPRA of 1993?

GPRA is a public law that was passed by Congress in 1993. GPRA was enacted to improve stewardship in the federal government and to link resources and management decisions with program performance. GPRA requires that all federal departments

- develop a strategic plan specifying what it will accomplish over a 3- to 5-year period,
- set annual performance targets related to their strategic plan,
- report annually the degree to which the targets set in the previous year were met, and
- conduct regular evaluations of their programs and use performance monitoring data to understand their successes and opportunities for improvement.

The GPRA Modernization Act of 2010 updated some aspects of the GPRA of 1993. It placed greater emphasis on setting goals, cross-organizational collaboration, and improving programs through the use of performance metrics. As part of this federal mandate, all Substance Abuse and Mental Health Services Administration (SAMHSA) grantees are required to collect and report performance data using approved measurement tools.

2. Do we have to comply with GPRA?

All Center for Substance Abuse Treatment (CSAT) discretionary programs—both Best Practices and Discretionary Services—must comply with GPRA. In their grant applications, prospective grantees should state the procedures they will put in place to ensure both compliance with GPRA and the collection of CSAT’s GPRA Core Client Outcome Measures data elements at baseline, discharge, and 6-month follow-up interviews. Select programs must also conduct 3-month follow-up interviews.

For a more detailed description of grantees’ GPRA requirements, please review your grant requirements as described in your Funding Opportunity Announcement (FOA).

3. How do I contact the SPARS Help Desk?

You can call the Help Desk at 855-322-2746. It is available Monday–Friday, 8 a.m.–7 p.m. (EST). The Help Desk email address is SPARS-support@rti.org.

General CSAT GPRA Tool Questions

4. What are the Core Client Outcome Measures in the CSAT GPRA data collection tool?

The CSAT GPRA Core Client Outcome Measures in the CSAT GPRA data collection tool (the GPRA tool) are client-level data items that have been selected from widely used data collection instruments (e.g., the Addiction Severity Index and the McKinney Homeless Program reporting system). Outcome measures include substance use, criminal activity, mental and physical health, family and living conditions, education/ employment status, and social connectedness.

5. How will these data be used?

These data will help CSAT do the following:

- Demonstrate tangible CSAT contributions to meeting GPRA objectives.
- Report to Congress via the GPRA Plan/Report, aggregated by program, along with a narrative developed by your Government Project Officer (GPO) on the status of grant activities, services provided, and client outcomes.
- Report to SAMHSA on the National Outcome Measures (NOMs). For more information, go to SAMHSA's [GPRA Measurement Tools](#) web page.
- Make the case to Congress that the money awarded to grantees is being spent effectively.

6. Do we need Institutional Review Board (IRB) approval to collect GPRA data?

SAMHSA does not require IRB approval for the collection of GPRA data. However, we encourage you to check with your local IRB should you have questions. For those who require IRB approval, please note that only the GPRA contractor has access to raw, client-level data.

7. Can projects change the GPRA tool?

No, the GPRA tool cannot be changed.

CSAT encourages grantees to use other data collection instruments to enhance their data collection efforts. However, data from additional questions should not be forwarded to CSAT as part of GPRA reporting.

8. Do we have to ask the questions as written in the GPRA tool?

Yes, questions must be asked as written. After the question is asked as written, grantees can paraphrase if additional clarification is required for the client. However, grantees may use their existing instruments (in conjunction with the GPRA tool) to collect data for GPRA reporting as long as their questions have the **exact same wording** as those in the CSAT GPRA tool and the response categories are exactly the same or can be rolled up to the exact categories in the tool.

9. Are grantees responsible for submitting data for the first few months of their grant?

Yes. Grantees are expected to begin submitting data into SPARS as described in the FOA for their grant. As soon as your grant begins to provide services to clients, you should begin conducting the GPRA interviews. Any delays in data submission should be discussed with the CSAT GPO.

10. Do we have to collect information on every person our program serves?

Program staff must collect data on **all** clients to whom they are providing CSAT-funded services (as defined by the CSAT grant).

CSAT GPRA Core Client Outcome Measures data items must be collected at baseline, 6-month follow-up, and discharge. Some CSAT-designated programs are also required to conduct a 3-month follow-up interview. Sites should collect follow-up data on all clients,

regardless of whether a client is discharged or drops out of the program. When a program cannot follow up on a client, the program must complete an administrative GPRA to report that information to CSAT and explain why they were not able to follow up.

11. Should we use the CSAT GPRA Core Client Outcome Measures elements to collect data on adolescents and juveniles, even though the core elements are designed for use with adults? Will there be a separate set of GPRA core elements for use with adolescents? Should we not collect data on adolescents?

CSAT recognizes the difficult issues involved in collecting data on adolescents and juveniles. At this time, Discretionary Services grantees are to use the GPRA tool to collect GPRA data on all juveniles and adolescent clients in their programs.

12. What are the required data collection points for the GPRA information?

GPRA data are to be collected face-to-face for each individual client at these specific points:

- intake/baseline,
- 3 months after the initial collection of CSAT GPRA Core Client Outcome Measures data (only required of certain CSAT-designated programs),
- 6 months after the initial collection of CSAT GPRA Core Client Outcome Measures data, and
- discharge.

It is imperative that grantees collect GPRA data on each client as soon as possible after the client's intake into the program.

To comply with the requirement to collect GPRA data at intake/admission, **residential programs** must collect GPRA data on each client as soon as possible after intake but no later than 3 days after the client officially enters the substance abuse treatment program. All types of outpatient programs other than Recovery Community Services Program (RCSP) must collect GPRA data on each client as soon as possible after assessment or intake but no later than 4 days after the client officially enters the substance abuse treatment program. For grants under the FOA RCSP, GPRA intake/baseline interviews must be completed within two to five contacts after the client enters the program. Program entry dates should be the date which the client began receiving CSAT-funded services.

13. Do all programs use “the past 30 days” as the basis for client reported data?

For questions B1–B4, all programs—with the exception of the Offender Re-entry Program (ORP)—will use “the past 30 days” for questions that capture the number days.

ORP grants should ask about drug use in “the past 90 days prior to incarceration” for questions B1–B4 at intake/baseline and “the past 90 days” at follow-up and discharge.

14. Do we count a client's reported use of illegal drugs in question B1c as having committed a crime for question E4 (“In the past 30 days, how many times have you committed a crime?”)?

Yes. If a client reports the use of illegal drugs in response to question B1c but his/her answer to question E4 is not consistent with question B1c, the interviewer should probe the client for

clarification. The interviewer must be certain that the number in question E4 is equal to or greater than the number in question B1c.

15. Does CSAT allow offering incentives for completed interviews?

For certain types of interviews, CSAT funding can be used 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 GPRA follow-up interview. The incentive cannot be used for routine GPRA discharge interviews; they can only be used when program staff must search for a client who has left the program or when a client has dropped out of a program.

16. What do we do if we are unaware of a client’s International Classification of Diseases, 10th Revision (ICD-10), codes listed under the Behavioral Health Diagnoses section?

ICD-10 codes are not a requirement for each client served by every SAMHSA grant. Select “None of the Above” if there are no substance use or mental health diagnoses being assigned to the client or if the client was diagnosed with a substance use or mental health disorder that is not listed in the CSAT GPRA tool. Select “Don’t Know” if the program is unaware if the client was diagnosed with a substance use or mental health disorder.

17. My client was diagnosed with an opioid use disorder and was offered a U.S. Food and Drug Administration (FDA)-approved medication for an opioid use disorder but refused to use it. Which response should I select?

You should mark that the client was diagnosed with an opioid use disorder but did not receive an FDA-approved medication for an opioid use disorder.

18. How do I find out which Section H program questions my grant is responsible for completing?

Only certain programs complete Section H questions. You are not responsible for collecting data on all Section H questions. If your program requires Section H, you will receive guidance from your GPO on which Section H questions to ask. If you have any questions, please contact your GPO.

GPRA Intake/Baseline Questions

19. Who develops the client identification system?

Each individual grant develops its own client identification (ID). Each client should have his/her own unique client ID that is used at all three data collection points (i.e., GPRA intake/baseline, 6 months GPRA post-intake/baseline, 3 months GPRA post-baseline for CSAT-designated programs, GPRA discharge). The same unique ID is used each time, even if the client has more than one episode of care. For confidentiality reasons, do not use any portion of the client’s date of birth Social Security number or mother’s maiden name in the client ID. Grantees with more than one service site should consider using one of the client ID digits to identify the site that conducted the interview.

20. How should we handle clients who are readmitted for treatment services?

Occasionally, a client will return for treatment after his/her episode of care has ended and he/she has been discharged from the program. Grantees are only required to administer the GPRA baseline one time per client. However, in those instances in which considerable time has passed since the client was discharged, grantees may choose to administer a second (or third, fourth, etc.) baseline GPRA. In such cases, the subsequent 6-month follow-up date will be set to the 6-month anniversary of the latest GPRA intake interview. The same client ID number should be used, regardless of the number of episodes of care. Each client will only count once toward reaching the target number of clients to be seen, regardless of the number of GPRA intakes.

There is an exception to this rule for Screening, Brief Intervention and Referral to Treatment (SBIRT) grantees, given the purpose of their grant. A client may be screened and identified as needing one level of service, served, and discharged but then return again to be screened and identified as needing a different level of service. In such cases, the grant receives credit for providing treatment for each different level of service. For example, during the initial screening, the client is identified as needing a *brief intervention* and is provided with the brief intervention and discharged. The client returns 5 months later, is screened, and is identified as needing *brief treatment*. The client is provided with the brief treatment and then discharged. In cases such as this when the client receives two levels of service, the grant receives credit for having served two clients.

21. If a client is discharged and returns for services, does the client count toward our grant's GPRA targets as another client?

No. Only one GPRA intake for each client counts toward your target numbers.

There is an exception to this for SBIRT grantees, given the purpose of their grant. A client may be discharged from one level of service and counted again if that client returns and is assessed and coded into a different level of service: screening and positive feedback (SF), brief intervention (BI), brief treatment (BT), or referral to treatment (RT). The grant may receive one client credit per level of service that the client was assessed as requiring.

GPRA Follow-up Questions

22. Do we have to follow up on each client? What is the target follow-up rate?

Yes, each grantee should conduct a GPRA follow-up on every client, regardless of discharge status (completion/graduate or termination).

The minimum follow-up rate is 80%. Please note that grants should attempt to complete 100% of follow-ups on all clients that received an intake interview.

For SBIRT Grants: SBIRT grants are required to have a minimum follow-up sampling pool of 10% of clients that received treatment from each level of service. SBIRT grantees are required to follow up with 80% of that sample.

23. What if we locate clients before or after their scheduled GPRA follow-up interview date?

The GPRA follow-up interview window is 1 month before and 2 months after the scheduled 6-month GPRA follow-up interview. For example, if you locate a client 5–8 months after the initial GPRA intake/baseline data collection, you may conduct a 6-month GPRA follow-up, and you will get credit for completing a follow-up on that client. If you locate a client for the 6-month GPRA follow-up 9 months or 10 months after the initial GPRA data collection (after the follow-up window has closed), you may conduct a GPRA follow-up interview and report the data into SPARS, but the data from the GPRA follow-up interview may not be included in any analyses reported to Congress.

For CSAT-designated programs collecting the 3-month GPRA follow-up, the follow-up interview window is the same as the 6-month GPRA follow-up (1 month before and 2 months after the initial GPRA intake/baseline interview). Those programs designated by CSAT as homeless are allowed 2 months before and up to 2 months after the GPRA intake/baseline date.

24. Do we collect follow-up data on clients who drop out of our program?

Yes, you are required to attempt to collect follow-up data from all individuals who received CSAT-funded services through your program.

25. What if the follow-up period for the last client served is past the funding period of the project?

All grantees are expected to collect 6-month follow-up GPRA data for all clients who receive grant-funded services. The sole exception to this rule is for follow-ups due after the grant ends. Grantees who receive no-cost extensions may be required to continue 3- and 6-month follow-up data collection up to the new end date for the grant.

GPRA Discharge Questions

26. Does CSAT require a GPRA discharge on every client?

Yes, CSAT requires you to submit a GPRA discharge record for every client. The only exception to this rule is when the client is still in the program after the grant ends. You will not be responsible for submitting GPRA discharge interviews for clients who are still in treatment when the grant ends. At the time of a client's discharge (as defined by the grantee), you should complete a face-to-face GPRA discharge interview (see questions 21 and 22 below for more information on discharge).

27. How does CSAT define discharge?

CSAT defines discharge in the following ways:

If your program has an existing discharge definition or policy, you should follow it and conduct the discharge interview on the day of discharge.

If you do not have a discharge definition or policy, you must complete a discharge interview for all clients for whom 30 days have elapsed from the time you last had contact with the client. In other words, if the client does not present between May 16 and June 15, a GPRA discharge interview should be conducted.

For an administrative discharge when the interview is not conducted, interviewers must complete the first four items in Section A (Client ID, Client Type, Contract/Grant ID, Interview Type), marking that the GPRA discharge interview was not completed; Section J (Discharge); and Section K (Services Received). Follow the skip pattern instructions on the tool.

If a client is discharged from your program within 7 calendar days of his/her GPRA intake interview, a face-to-face interview is not required. You will be required to complete the first four GPRA items in Section A (Client ID, Client Type, Contract/Grant ID, Interview Type), marking that the interview was not completed; Section J (Discharge); and Section K (Services Received). Follow the skip pattern instructions on the tool.

28. Is there a window period for conducting and submitting a GPRA discharge interview record?

For programs with a discharge policy or definition:

If the client is present on the day of discharge, the GPRA discharge interview should be conducted on the day of discharge.

If a client has not finished treatment, drops out, and is not present the day of discharge, the project will have to find the client to conduct the in-person GPRA discharge interview. The grant will have 14 days after discharge to contact the client and conduct the in-person GPRA discharge interview. If the GPRA interview has not been conducted by day 15, conduct an administrative discharge (see question 21 above).

For programs without a discharge policy or definition:

If you are using the CSAT policy of discharging a client for whom 30 days has elapsed from the time of last contact, the grant will have 14 days after discharge date to contact the client and conduct the in-person GPRA discharge interview. If the interview has not been conducted by day 15, complete an administrative discharge (see question 21 above).

29. The typical episode of care for my clients is very short, so many clients may end up with GPRA intake and discharge interview dates very close to one another. Do we still have to collect both records?

Yes. Grantees should collect all GPRA data for each data collection point, regardless of how close they are to one another; for those clients who are discharged less than or equal to 7 calendar days from the GPRA intake/baseline interview, however, a face-to-face GPRA discharge interview is not required. In this case, you will be required to complete an administrative discharge, which means that you must complete the first four items in Section A, Record Management (Client ID, Client Type, Contract/Grant ID, Interview Type), marking that the interview was not completed; Section J (Discharge); and Section K (Services Received). Follow the skip pattern instructions on the tool. If the client receives services 8 or more days from the GPRA intake interview, then a full face-to-face GPRA discharge interview is required.

30. Is there a target discharge rate?

At this time, CSAT has not specified a discharge target rate. However, grantee may want to encourage the administration of the discharge interview because it contains detailed information on the services the client received as a result of the grant.

GPRA Follow-up and Discharge Timing Questions

31. What if the discharge GPRA interview occurs during the 6-month GPRA follow-up interview window? Do we still have to collect both records?

Yes. There may be cases when the client's GPRA discharge is due during the window of time that the 3- or 6-month GPRA follow-up interview is open. In these cases, you must still enter data for both the GPRA discharge **and** the GPRA follow-up interview(s). However, only one interview is required. Once the interview is conducted, you will then enter the data into the system as two records: one for discharge with Sections J and K, so that the service provided is documented in the GPRA system; and the other for follow-up with Section I, so that the follow-up status is documented in the GPRA system.

If the client's GPRA discharge interview from the program occurs during the 6-month follow-up window, and you have already conducted the GPRA follow-up interview, you will need to do a separate GPRA discharge interview.

(Note: For CSAT-designated programs, the same rule applies when the GPRA discharge interview is due close to when the 3-month GPRA follow-up interview is due.)

CSAT Discretionary Services Grantees who do not upload their GPRA data will have the option of having the SPARS system complete GPRA Sections A–G for the discharge submission when both the follow-up interview and the discharge interview occur on the same day and the follow-up interview occurs first. (Note: If the discharge interview occurs first, Sections A–G will be completed for the follow-up interview.) To use this data pre-populate option, the following requirements must be met:

- both the follow-up and the discharge must be completed on the same day;
- the date must be on or after the follow-up window opens and before it closes; and
- neither the follow-up nor discharge GPRA has been conducted previously.

Follow these steps to use the data pre-populate option:

1. Enter your client's GPRA follow-up or GPRA discharge into SPARS; when finished, click "Submit."
2. Begin the respective follow-up or discharge GPRA. When you enter the same date, a message will appear asking if you would like to have SPARS copy the corresponding data from the first submission into SPARS. If you select "yes," the system will copy the data you have already entered to the appropriate sections for the follow-up or discharge GPRA and then will take you to the final unique sections of the GPRA that you must complete. Specifically, for a discharge GPRA, you must complete Section J and Section K. For a follow-up GPRA, you must complete Section I.

3. When you are finished with these sections, click “Submit”; you then will have completed the submission of both the discharge and follow-up GPRA.

(Note: After you submit, if you identify items that must be corrected, you must make the corrections to both documents because SPARS will not autocorrect either.)

32. Do we collect follow-up information if the GPRA discharge interview is before or after the GPRA follow-up interview?

Yes, grantees must locate clients and complete the 6-month GPRA follow-up record, regardless of when the client is discharged.

For certain CSAT-designated programs, the same rule applies for the 3-month GPRA follow-up.

33. Do we need to conduct an in-person GPRA follow-up interview if the client could not be contacted to conduct the discharge interview?

If the client cannot be reached for the discharge GPRA interview and receives an administrative discharge, a separate 6-month GPRA follow-up interview must be conducted, completed, and entered into the system for the follow-up to count toward the program’s target rate.

For certain CSAT-designated programs, the same rule applies for the 3-month GPRA follow-up.

SPARS Reports and Data Download Questions

34. What reports are available in SPARS for CSAT grantees?

The following CSAT-specific reports are available in SPARS.

Administrative:

- Grantee Info Report
- Missing Info Report
- Grantee Setting, Modality, and Sub-Population Report
- Login Tracking Report
- Data Inventory Report
- Integrated Administrative Report (6 Month)
- Integrated Administrative Report (12 Month)

Discretionary Services:

- SBIRT Distribution
- Intake Coverage Report
- 3-Month Follow-Up Rate
- 6-Month Follow-Up Rate
- 12-Month Follow-Up Rate

- Grantee Delinquency
- 3-Month Follow-Up Change Report
- 6-Month Follow-Up Change Report
- 12-Month Follow-Up Change Report
- Grantee Cost
- Summary Cost
- Frequency Report
- Crosstabulations Report
- Missing Data Frequency Report
- 3-Month Follow-Up Notification
- 6-Month Follow-Up Notification
- 12-Month Follow-Up Notification
- Combined Intake Coverage/Follow-Up Report
- Poor Performance Report
- Drug Use Report
- Treatment Non-Completers Report
- Length of Stay Client Characteristics Report
- Risky Behavior Outcome Report
- Demographics Report
- Intake to Discharge Change Report
- Data Visualization Reports

35. Do any of the reports include graphical data images?

Yes, the SPARS CSAT Data Visualization Reports allow for you to view CSAT GPRA data in a graphical form with supportive tabular data. These reports instantly convert your GPRA data into summaries, trends, and comparisons using graphical images, including bar charts, pie charts, graphs, and tables. The available reports include Demographics, Intake Coverage Rate, Follow-up Rate, ICD-10 Frequency, and Outcome Change.

36. How do we report the GPRA data to CSAT and to our GPO?

The GPRA data you enter via the SPARS website or data upload are automatically submitted to CSAT. These data will be included in GPRA reports 24–48 hours after it is entered into SPARS. Please note that data upload is only available for specific programs.

37. In the “Data Download” section, I clicked on “Yes” when it asked me if I wanted to proceed to download the records, but nothing happened. Where did my data go?

You probably have a pop-up blocker that is preventing you from downloading your data. Please momentarily disable your pop-up blocker and reattempt the data download procedure. If still nothing appears in your computer’s “Downloads” folder, contact the SPARS Help Desk for additional assistance.

SPARS System and Technical Questions

38. Is training available on how to use the SPARS Technical Assistance (TA) Request System?

Yes, an archived training titled “CSAT TA Request System Training” provides an overview and instructions for using the SPARS CSAT TA Request System. The training shows the types of TA that can be requested, how to create a TA request, and how to review the status of a submitted request. The training can be found on the SPARS Training Site by clicking on the link (<https://spars-lc.samhsa.gov/course/view.php?id=121>) or following the steps below:

- Grantees must have a SPARS account. Log into SPARS, and click on the “Training” tab at the top of the SPARS home page.
- On the Training page, select “CSAT Archived Webinars.”
- Next, you will see a list of all conducted trainings. Scroll down until you find the “CSAT TA Request System Training” webinar and click on the link.
- On the page for the “CSAT TA Request System Training,” you will first need to go to the bottom of the page and click on the blue “Enroll Me” button.
- Once enrolled, the page will refresh and the materials from the training will be available. Select “Click here to review the recording.” A new page with a link will appear. Click on the link and the recording will begin. Note that the recording is in Adobe Connect; you may need to download that application first.

Additionally, there is a CSAT TA Request System User Guide available to grantees on SPARS. This document provides information on the purpose of the TA Request System, an overview of the TA Request Submission Process, and step-by-step instructions for accessing, submitting, viewing, and processing a TA request. The guide can be found on the SPARS TA Request System and by clicking on the following link: https://spars-ta.samhsa.gov/Content/Document/SPARS_CSAT_TA_Request_System_User_Guide.pdf

For more information, please contact the SPARS Help Desk at 855-322-2746. It is available Monday–Friday, 8 a.m.–7 p.m. (EST). The Help Desk email address is SPARS-support@rti.org.

39. What happens once a grantee has submitted a TA request?

The TA request is delivered electronically to your GPO for their approval. If your GPO has entered the request for your grant, you will receive a copy of that request. The GPO may elect to approve, reject, or place a hold on your request. Before the TA is actually delivered to you, the request must be approved by your GPO’s branch chief and contract monitor.

40. Is it mandatory to use the online GPRA data entry tool?

Yes, staff members at each grantee site will be issued their own username and password for use in accessing the website.

For submitting client GPRA data, SBIRT and select Services grantees have the option of using either the online GPRA data entry tool or submitting data via data upload. Data that are uploaded are automatically submitted to CSAT as well.

41. How do I obtain a SPARS account?

Your Project Director will need to contact the Help Desk to obtain a SPARS account. The Help Desk contact information can be found in question 39 above. Once SPARS receives the required information, Help Desk staff will set up an account, and then you will receive login credentials via email.

Users who have access to more than one grant will be able to use the same login ID and password to access all their grants.

42. The system shows that my password has been disabled. What do I do now?

As a security feature, accounts become disabled when there were too many unsuccessful password attempts. You can either call or send an email to the Help Desk requesting to have your password reset. The Help Desk is available Monday–Friday, 8:00 a.m.–7:00 p.m. (EST) by phone (855-322-2746) and email (SPARS-support@rti.org).

43. Do I have to update my password?

Yes, all users are required to update their password every 60 days.

44. I do not have access to my grant anymore. How do I get it back?

If you feel you should still have access to a grant, then please contact the Help Desk to request access.

Please contact your GPO for additional information about the grants to which you should have access.

45. Where can I get a copy of the GPRA Tool, Question-by-Question Guide, and the Codebook?

These documents can be located on the SPARS website under *Data Collection Tool Resources* and the *Resource Library*.

SPARS Data Entry Questions

46. How often should we enter our GPRA data?

Grantees are required to have all of their GPRA data entered in as close to real time as possible. Thus, grantees should aim to enter their data within 1 day—but no later than 7 days—after the GPRA interview is conducted. **This guidance applies to grantees who manually enter their data and upload their data.**

47. Can I save partial records?

No, the system will not save partial records. You must enter all sections of a record before it can be saved in the system. The system will automatically time out after 20 minutes of inactivity, and an incomplete record will be lost.

Grantees, GPOs, and contractors associated with grantees can access reports that are generated from submitted GPRA data.

48. I entered erroneous data under Section A (i.e., wrong Client ID, Interview Date, etc.) in the “Data Entry” section, but it will not let me edit it. How can I change the data?

Neither you nor the Help Desk can edit any data under Section A, Record Management. If you need data changed in this section, please contact the Help Desk at 855-322-2746 or SPARS-support@rti.org with the request to remove the erroneous record so that you can reenter the record with the correct data. We will need your grant ID, client ID, reason for removal, and which interview you want removed (i.e., all of the client’s record, a particular follow-up record, or just the discharge record). (Note: To remove a GPRA intake, the SPARS system will need to remove all corresponding follow-ups to that GPRA intake as well.)

Once you provide the Help Desk with this information, the SPARS system will remove the record and send you a confirmation email. The turnaround for this is generally 1–2 business days, but it may take longer. **Please do not resend the same request.** If you want to verify that we received your request, call the SPARS Help Desk. To avoid having to reenter a record, the Help Desk strongly recommends that you make sure everything under Section A, Record Management, is correct before you save your record.

49. I mistakenly entered a client’s follow-up as a GPRA intake. Now I have two GPRA intakes in the system: one active, and one inactive. How do I rectify this?

Send the Help Desk an email indicating which client record you would like removed. Since the client IDs will be identical, the best way to specify which record you want removed is to provide the GPRA Intake Date. Please state in your email the grant ID, client ID, GPRA Intake Date of the one you want removed, and the reason for deletion.