**What is SPARS?**

1) **What is the Government Performance and Results Act of 1993?**
The Government Performance and Results Act (GPRA) is a 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;
- Annually set performance targets related to their strategic plan;
- Annually report the degree to which the targets set in the previous year were met; and
- Regularly conduct evaluations of their programs, and use the results to explain their successes and failures on the basis of the performance monitoring data.

As part of the annual budget development process, the Office of Management and Budget (OMB) requires agencies to report performance measures, referred to as GPRA measures, based on the Government Performance and Results Act.

2) **What is Infrastructure Development, Prevention and Mental Health Promotion?**
In response to the Government Performance and Results Act (GPRA), SAMHSA has created 14 categories for measurement. Infrastructure Development, Prevention and Mental Health Promotion, or IPP consists of 31 indicators under these 14 categories. These indicators capture IPP activities and quantify a grant program’s achievements. The 14 categories are:

**Infrastructure:**
- Policy Development
- Workforce Development
- Financing
- Organizational Change
- Partnership/Collaborations
- Accountability
- Types/Targets of Practices

**Prevention and Mental Health Promotion:**
- Awareness
- Training
- Knowledge/Attitudes/Beliefs
- Screening
- Outreach
- Referral
- Access
3) **What is SPARS?**
   - The SPARS system is a web-based system for reporting performance measures on Center for Mental Health Services (CMHS) discretionary services programs.
   - SPARS reporting is a strategic imperative for CMHS driven by: government-wide requirements; SAMHSA’s data strategy; and the Center’s commitment to performance management.

   **CMHS monitors three types of grantee activities through SPARS:**
   - Client-Level Measures for Programs Providing Direct Services (collected through the Client-level Measures Tool);
   - Infrastructure Development, Mental Health Prevention and Promotion (IPP); and
   - Annual Goals and Budget Information.

4) **How is the data obtained from SPARS used?**
   SPARS data are used for the following purposes:
   - **Grantees** – to manage programs on a continual basis.
   - **CMHS** – to conduct performance management.
   - **CMHS Constituents** – SAMHSA; DHHS; state, local, and tribal governments; provider organizations: to understand how CMHS is performing.
   - **Office of Management and Budget (OMB)** – to review program performance.
   - **Congress** – to include program performance as part of the budget process.

**IPP Information**

5) **How do I enter zero for an IPP Indicator?**
   The system does not accept a 0 for any indicator. You should record no activity for an indicator by selecting “No New Result” in the system when an activity did not occur during the quarter. This is how CMHS specified no results (or 0’s) to be captured.

6) **For Indicator AC1, how should I report the number of consumers that have been referred in the current quarter if none of these consumers have received services yet?**
   The intent of AC1 is to capture the number and percentage of consumers that were both referred and received services in the specified quarter. In this case, you should enter a “No New Result” record for AC1 given that none of the consumers that were referred received services.

7) **How do I count individuals in Indicator R1 when we also collect Client-Level Measures (Services Activities) data?**
   The intent of R1 is **not** to capture people entering direct client services offered through the grant program—these people are already being captured through the Client-Level Measures (Services Activities) data. Instead, it is intended to capture large numbers of people who, as a result of the grant, are being referred for services outside of the grant program and who, therefore, cannot be tracked through Services Activities data. Some grant programs choose to focus not on providing direct client services themselves, but instead, or in addition, they choose to set up screening and referral programs—R1 is meant to be used by the latter, not the former.