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**Center for Mental Health Services (CMHS) National Outcome Measures (NOMs)  
Client-Level Measures for Programs Providing Direct Services  
(Services Activities):  
FREQUENTLY ASKED QUESTIONS (FAQs)**

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***What is the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Performance Accountability and Reporting System (SPARS)?***

**1) What is the Government Performance and Results Act of 1993 (GPRA)?**

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 agencies

- develop strategic plans specifying what they will accomplish over a 3- to 5-year period;
- annually set performance targets related to their strategic plans;
- annually report the degree to which the targets set in the previous year were met; and
- regularly conduct 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 Act 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 SAMHSA grantees are required to collect and report performance data using approved measurement tools.

**2) What are the National Outcome Measures (NOMs)?**

In response to GPRA, SAMHSA created 10 domains for measurement known as NOMs. The 10 domains are

- Access/Capacity,
- Functioning,
- Stability in Housing,
- Education and Employment,
- Crime and Criminal Justice Status,
- Retention,
- Perception of Care,
- Social Connectedness,
- Use of Evidence-Based Practices, and
- Cost-Efficiency.

The Center for Mental Health Services (CMHS) currently requires grantees to collect data for the first 8 of the 10 SAMHSA domains listed above.

### 3) What is SPARS?

SPARS is a web-based data entry system used by CMHS discretionary grants to report timely and accurate data to SAMHSA.

#### **CMHS monitors three types of grantee activities through SPARS:**

- Client-Level Measures for Programs Providing Direct Services, also known as Services Activities (collected through the Client-level Measures Tool);
- Infrastructure Development, Prevention, and Mental Health Promotion (IPP); and
- Annual Goals Information.

### 4) How are the data in 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; Department of Health and Human Services [HHS]; 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.

### 5) How can I get a SPARS username and password?

Please contact the Help Desk to request a SPARS username and password. The Help Desk is available Monday through Friday, 8:00 AM to 7:00 PM EST/EDT, by phone (855-322-2746, toll-free) and email ([SPARS-support@rti.org](mailto:SPARS-support@rti.org)).

#### ***CMHS NOMs Client-level Measures (Services Tool) Information***

### 6) **Am I required to ask and report the questions exactly as written in the Services tool? If the questions on the tool are the same as questions I collect for our program's evaluation, do I need to collect Services Activities data? Can I change the tool or add questions?**

Questions must be asked as they appear on the Services tool and cannot be changed. However, grantees in some programs may use their existing instruments (in lieu of the Services tool) to collect data under the following conditions:

- Questions have the **exact same wording** as those in the Services tool;
- Response categories on your tool are **exactly the same** as the Services tool response categories;
- Response categories on your tool can be **rolled up** to the Services tool response categories (in other words, they can be mapped exhaustively and consistently); and
- Your tool is approved by CMHS.

For more information, please contact your Government Project Officer (GPO).

## 7) Are there different versions of the Servicestool?

Yes. There are two versions:

- **The Child/Adolescent or Caregiver Combined Respondent Version**—CMHS recognizes that programs serving children and adolescents may require an alternative to directly interviewing the consumer and thus has developed a combined version of the tool. This version is used when either the child/adolescent or the caregiver is being interviewed on behalf of the child/adolescent.
- **The Adult Programs Version**—Adult programs have a Services tool version specifically designed for the population they serve.

Please see the separate Question-by-Question Instruction Guides for the [Adult version](#) and [Child/Adolescent/Caregiver version](#) for further guidance on which version(s) to use to conduct consumer interviews. These guides are available in English and Spanish on the SPARS website by selecting the “[Data Collection Tool Resources](#)” button on the home page.

## 8) Is the Services tool available in other languages?

Both the Adult and Child/Adolescent/Caregiver versions of the Services tool are available in Spanish and can be found on the SPARS website by selecting the “[Data Collection Tool Resources](#)” button on the home page.

In cases where a consumer speaks any other language, the grantee should follow the same procedures for collecting Services Activities data as those that are used to obtain any other information for the consumer.

## 9) How should the interview be conducted for a deaf or hard-of-hearing consumer?

People who experience hearing loss or who are deaf vary considerably in their language needs and English literacy levels. Some may prefer to read the questions on paper with an interviewer available to explain further verbally or written on paper. Others use sign language and will benefit from having a sign language interpreter sign each question and response options. Programs are encouraged to ask consumers about their language preferences and needs and to make prior arrangements so that a scheduled interview can be successfully conducted. The process may take longer than a typical assessment and planning more frequent breaks will help both consumers and staff avoid feeling overwhelmed.

## 10) Where can I get copies of the Services tools, Question-by-Question Instruction Guides, Codebooks, User Guides, SPARS Data Entry and Reports Guides, and FAQs?

The Services tools, Question-by-Question Instruction Guides, Codebooks, and FAQs are available to the public on the SPARS website and may be accessed by selecting the “[Data Collection Tool Resources](#)” button on the SPARS home page. You can find the Data Collection Tool Resources page at <https://spars.samhsa.gov/content/data-collection-tool-resources>.

Additionally, the CMHS User Guide and SPARS CMHS Data Entry and Report Guides may be accessed by selecting the “Resource Library” button on the SPARS home page. You can find the CMHS Resource Library at <https://spars-ta.samhsa.gov/Resources/CMHS>.

**11) Where can I view recorded SPARS trainings?**

SPARS users can view recordings of previously conducted trainings on the SPARS Training page at <https://spars-lc.samhsa.gov/>.

**Data Entry**

**12) If a staff member leaves a project, how can I disable their account?**

Please contact the Help Desk to disable another user’s account. The Help Desk is available Monday through Friday, 8:00 AM to 7:00 PM EST/EDT, by phone (855-322-2746, toll-free) and email ([SPARS-support@rti.org](mailto:SPARS-support@rti.org)).

**13) SPARS shows that my password has been disabled. What do I do now?**

Please contact the Help Desk to inquire about a disabled password. The Help Desk is available Monday through Friday, 8:00 AM to 7:00 PM EST/EDT, by phone (855-322-2746, toll-free) and email ([SPARS-support@rti.org](mailto:SPARS-support@rti.org)).

**14) Can we upload our data rather than using the data entry system?**

No. You must submit data via online data entry in SPARS.

**15) Who develops the consumer identification (ID) number?**

The unique consumer identifier is determined by you. It can be between 1 character and 11 characters in length and can include both numbers and/or letters. It cannot begin with a dash or contain non-alphanumeric characters (including any of the following: “. [ ]! @#\$\$%^&\*()”) with the exception of dashes or underscores. This ID is designed to track a specific consumer through their interviews, baseline, clinical discharge, and reassessments while maintaining the anonymity of the consumer. The same unique ID is used each time, regardless of whether the consumer has more than one episode of care (i.e., if they are discharged and then return). To protect personally identifiable identification (PII), do not use any information that could identify the consumer. This includes, but is not limited to, the consumer’s name, date of birth, or Social Security number as all or part of the Consumer ID.

If you collect services data, you may need to have a Site ID to enter interviews for multiple locations. To request a Site ID for your grant, the project director must go into “My Grants” > “Update my Grant” on the SPARS website and request one by completing the questions under the “For Consumer Service Program Grants Only Section.” The Help Desk will contact you with questions, as necessary. The Site ID will be emailed to your grant from the SPARS Help Desk.

**16) I need to delete or change some data. How can I do that?**

All data in Sections A–K can be edited. Additionally, the Behavioral Health Diagnoses in the Record Management Section can be edited. Please refer to the SPARS Client-level Measures Data Entry Guide for instructions on how to edit data.

However, other data in the first portion of the Record Management Section **cannot** be edited (e.g., Consumer ID, Grant ID, Site ID, assessment type, was the interview conducted?); if you need to change data in this section, the entire baseline interview must be deleted, and you will

need to re-enter the entire interview. Grantees can delete interviews by following the steps below. If you do not have a paper copy of the completed interview, print the summary screen for each record before deleting the record. **NOTE: To remove an entire baseline interview, all reassessments and discharges related to that consumer's baseline data will need to be deleted first and then re-entered after the baseline is completed.**

The steps for deleting a consumer record are as follow:

1. Find the consumer for whom you need to delete the baseline interview by using the “Find Interview” Screen under the “Data Entry” > “Services” section of the SPARS website;
2. Click “Show Interviews” next to the Consumer ID;
3. If necessary, print the summary of the interview by clicking “Print”;
4. Click “Del”;
5. Confirm you want to delete and click “Yes”; and
6. Re-enter the interview with the correct Record Management data, if necessary.

### ***Data Collection Requirements***

#### **17) Is my grant required to comply with SPARS data collection requirements?**

Beginning in 2010, all CMHS Funding Opportunity Announcements (FOAs) list the data collection requirements by program. CMHS grant applications require prospective grantees to explain the procedures they have or will put into place to ensure compliance with the collection of required data elements. If you are awarded a grant, your GPO will also tell you what data your grant is required to collect.

#### **18) What are the requirements for collecting data with the Services tool? When am I required to start collecting and submitting data?**

Your GPO will determine when all the grants within their program are required to start collecting SPARS data. Some programs have start-up years where few direct services are offered, whereas others start offering services right away.

#### **19) Do we have to collect information on every consumer served?**

Yes. You must collect data on *every* consumer that is enrolled in treatment for the duration of their episode of care. A *consumer* is defined as a person who is actively in treatment with a CMHS-funded program. An *episode of care* begins when the consumer enters CMHS-funded treatment or services, as defined by the program, and ends when the consumer is discharged and no longer receiving CMHS-funded treatment or services from your project.

#### **20) Does CMHS allow us to offer consumers incentives for completing interviews?**

The use of incentives is addressed in each individual CMHS program's FOA. Preferred incentives include items such as food vouchers, transportation vouchers, or phone cards.

**21) What are the required interviews for Services tool data collection?**

Services Activities data are collected through three types of face-to-face interviews:

- Baseline,
- Reassessments, and
- Clinical Discharge.

For more detailed information about how and when to conduct interviews, please see the NOMs Client-level Measures for Discretionary Programs Providing Direct Services Question-by-Question Instruction Guide. *Note: Most CMHS programs complete reassessments every 6 months for the duration of an episode of care. Certain CMHS programs are required to complete reassessments every 3 months. Your GPO will inform you if this is applicable to your grant.*

**22) If my grant receives an extension, are we required to continue SPARS data collection?**

If your grant receives an extension or is re-awarded, you are required to continue data collection. Please have the project director of your grant contact the SPARS Help Desk regarding an extension so that SPARS is updated with this new information.

**23) My reassessment rate is low. What could be the reason for this?**

If your reassessment rate is low, it could be due to one or more of the reasons below:

- ***Discharge records are not being entered into SPARS***—When a discharge record is entered into SPARS for a consumer (or a Reassessment indicates in Section I that the grant has not had contact with the consumer for 90 days), reassessment interviews will no longer be counted as due.
- ***Consumers are not being reassessed within the window***—Reassessment interviews must be conducted within the window, which is 30 calendar days before and after the reassessment due date. Please use the Notification Report to see which interviews are currently due and the earliest and latest eligibility dates of the window.
- ***The reassessments are not conducted interviews***—To have reassessments count toward the total number of reassessments completed, they must be conducted interviews. They cannot be administrative records.

**24) The race categories do not appear to be culturally competent—can they be modified?**

No. The race categories cannot be changed. The Services tool has been approved by the U.S. Office of Management and Budget (OMB). Respondents may indicate “Refused” for all categories listed if they do not associate themselves with any of the existing categories.

**25) What is Section H? Why can’t I find Section H in my training materials?**

Section H is for program-specific questions. CMHS will determine if your grant will administer questions from Section H. If it applies to your grant, your GPO will let you know. There are currently eight separate versions of Section H for adult programs and four versions of Section H for child programs.

Appendix A of the Question-by-Question Instruction Guides provide additional information regarding each version of Section H.

**26) My GPO says I have Section H data to collect. How often do I need to complete Section H data?**

Section H data are included as part of the full baseline, reassessment, and clinical discharge interview but not as part of an administrative interview. Some programs collect physical health indicators as part of their Section H data and are required to submit that information every 3 months. Information regarding when each specific version of Section H should be collected is available in the Question-by-Question Instruction Guide, which can be accessed at the Resource Library. For further information and clarification about what version of Section H your program may be required to collect, please contact your GPO.

**27) Does the arrest definition include immigration charges?**

Yes. An arrest, regardless of the charge, should be counted.

***Reassessment and Clinical Discharge Data Collection***

**28) Do we have to conduct a reassessment interview on each consumer?**

Yes. You must attempt to reassess all consumers for whom a baseline record was submitted.

**29) Should we enter the 6-month (calculated as 180 days) reassessment if the interview was conducted outside of the expected time frame?**

Yes. CMHS encourages you to collect interview data within the specified window to ensure the consistency of comparing consumer outcomes at the various time points. If you have an interview, please enter it, even if it was not conducted within the data collection window. Otherwise, you should enter administrative data.

Some programs are also asked to conduct a 3-month reassessment from Section H. Confirm with your GPO whether this applies to your grant and then follow these instructions if you are entering 3-month data outside of the expected time frame.

**30) Do we have to conduct a clinical discharge interview on each consumer?**

You must attempt to conduct a consumer interview at the time of discharge but are not responsible for finding the consumer to conduct the clinical discharge interview for the purpose of completing the interview. If a clinical discharge interview is not conducted, an Administrative Clinical Discharge must be entered into SPARS. Please refer to the Client-level Measures Question-by-Question Instruction Guide for more information about administering the clinical discharge interview or collecting administrative data.

**31) Do I need to enter discharge records for all consumers at the end of my grant?**

No, discharge records should only be entered for consumers that are discharged from services—not because the grant is ending.

**32) Will my reassessment rate be affected by consumers not discharged at the end of the grant?**

No, the Reassessment Interview Rate Report and Notification Report use the grant end date to determine if consumers should be counted as due for reassessments. This means that a grant's rate will not be affected by consumers that are not discharged that would have reassessments due after the grant end date.

**33) How is clinical discharge defined?**

A clinical discharge is defined by the grant. However, if the consumer has not had contact with the project for 90 calendar days or more, or the consumer has died, the consumer should be considered discharged. Contact refers to services or referrals provided, phone calls related to a treatment plan (not scheduling), or crisis intervention or emergency services.

**34) If a consumer has lost contact with the project or has been clinically discharged, what is the procedure if they return to the project to receive services again?**

If a consumer is reenrolled or readmitted into your project, the next time the consumer is seen, you must conduct a new baseline for the consumer using the existing Consumer ID. This applies to consumers who either lost contact with the project by being out of contact for 90 days or more or who were clinically discharged. Each consumer is only counted once toward the target number of consumers served, regardless of the number of completed baselines.

***Administrative Data Collection Requirements***

**35) Are we required to enter any data if an interview is not conducted (e.g., if the consumer refuses the interview or is impaired)?**

Yes. In this scenario, you must enter administrative data. Please refer to the Question-by-Question Instruction Guide for information about what kind of administrative data is required for each interview.

If an Administrative Reassessment or Clinical Discharge is entered in SPARS and then an interview is conducted, please contact the SPARS Help Desk for assistance in entering the interview.

**36) If a consumer is discharged while a reassessment window is open, do we have to collect both records? How will this affect this consumer's reassessments?**

No, you would conduct a discharge interview and enter it into SPARS. Once the discharge interview is entered, this reassessment and any future reassessments will no longer be due.

**37) The typical episode of care for my consumers is very short. Many consumers may end up with baseline and clinical discharge interview dates very close to one another. Do we still have to collect both records? How will this affect this consumer's reassessments?**

Yes, both interviews are required regardless of the amount of time between the two. This provides CMHS with outcome data.

## ***Who to Contact***

### **38) We have additional questions that need to be addressed. How do we get them answered?**

For all questions related to SPARS and the CMHS NOMs Client-level Measures (Services Activities), please contact the SPARS Help Desk, Monday through Friday, 8:00 AM to 7:00 PM EST/EDT, by phone (855-322-2746, toll-free) and email ([SPARS-support@rti.org](mailto:SPARS-support@rti.org)).

For project-related questions, please contact your GPO.