



GPRA Data Collection Training

**Emergency COVID-19 Response
Grant**

October 2021

What is GPRA?

The Government Performance and Reporting Act (GPRA) is a public law that was passed by Congress in 1993.

Enacted to improve program management in the Federal government and to link resources and management decisions with program performance.

As part of this federal mandate, all SAMHSA grantees are required to collect and report performance data using approved measurement tools.

Who collects GPRA?

All SAMHSA grantees are required to collect and report performance data using approved measurement tools.

Program staff must collect data on all clients as defined by SAMHSA for the Emergency COVID-19 Response grant.

A client is an individual who receives services enhanced by grant funds and who plans to follow-up with a provider for further treatment (not a one-time or occasional crisis service).

How is GPRA collected?

GPRA is collected through the CSAT-GPRA Core Client Outcome Measures in the CSAT-GPRA data collection tool. A fillable PDF version of this tool is available on our [website](#) and should be used for GPRA collection.

This tool comes in two forms:

- [A fillable PDF form](#)
- Pen and paper

The form is then uploaded to Survey Gizmo:

<https://www.surveygizmo.com/s3/5391637/GPRA-Submission>

What information is being collected?

Outcome measures include substance use, criminal activity, mental and physical health, family and living conditions, education/ employment status and social connectedness.

These measures are structured in sections labeled A, B, C, D, E, F, G, I, J, K

When is GPRA collected?

GPRA data is collected at three points:

At intake/baseline

At discharge

At a 6-month follow-up

We will discuss these three interviews in more depth later.

How much GPRA are we collecting?

Because program staff must collect data on all clients as defined by the Emergency COVID-19 Response grant, the amount of GPRA you're collecting will depend on the number of clients served in these programs.

Only one GPRA intake for each client counts toward our target numbers.

Nationally, the target follow-up rate is 80%

Clients that are unable to be reached for follow up or discharge do not count toward the target GPRA rate of 80%

Why do we collect GPRA?

Demonstrate that these programs make tangible contributions to meeting GPRA objectives.

For SAMHSA to report to Congress on the status of grant activities, services provided, and client outcomes.

Make the case to Congress that the money awarded to grantees is being spent effectively.

And, because we have to!

What are the 'rules' for GPRA collection?

- Consent must be given before the interview.
- The entirety of the interview must be conducted on the same day.
- Questions must be asked as written.
- The client can refuse to answer any question.
- Client report questions are answered as reported, even if the interviewer knows the answer is not truthful.
- Interviews can be face-to-face, by phone, or virtually.
- A client's unique Client ID must follow that individual through all GPRA interviews.
- GPRA records must be kept for 3 years after the grant period ends.
- Questions cannot be left blank – you can either choose 'don't know' or 'refused.'

What are the components of GPRA?

Administrative sections are labeled as A, I, J, & K and includes:

- Client ID
 - Interview type
 - Interview date
 - Behavioral health diagnoses
 - Planned services
 - Follow-up status (follow-up interview only)
 - Discharge status (discharge interview only)
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- Section A1
- Section A2
- Section A3
- Section I
- Sections J & K

The administrative section is completed by program staff.

What are the components of GPRA?

Client Report sections are labeled as A4, A5, B, C, D, E, F, G and includes:

- Demographics – [Section A4](#)
- Military history – [Section A5](#)
- Drug and alcohol use – [Section B](#)
- Family and living conditions – [Section C](#)
- Education, employment and income – [Section D](#)
- Crime and criminal justice status – [Section E](#)
- Mental and physical health problems and treatment/recovery, violence and trauma – [Section F](#)
- Social connectedness – [Section G](#)

These questions are asked to the client and are recorded as reported.

Client ID

Each client should have their own unique client ID that is used at all three data collection points. 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.

Provider Key

| Provider | Provider ID |
|--|-------------|
| Counseling Services of Addison County | 01 |
| Northwest Counseling and Support Services | 02 |
| Howard Center | 03 |
| Lamoille County Mental Health | 04 |
| Health Care & Rehabilitation Services of Southeast Vermont | 05 |
| Northeast Kingdom Human Services | 06 |
| Clara Martin Center | 07 |
| Rutland Mental Health Services | 08 |
| United Counseling Services | 09 |
| Washington County Mental Health Services | 10 |
| Pathways | 50 |

Client ID Examples

C O V M 0 2 4 S G 4 6 2 8 F E

C O V S 0 9 R S 7 3 5 7 7

C O V M 0 3 A J R T 6 8 2 5

Consent

- Consent must be given by client prior to conducting the initial interview and can be withdrawn at any point.
- A client may also consent to the interview and refuse to answer any of the questions.
- If a client does not consent to GPRA, they will still receive services, BUT they need to be 'counted' for the grant. To do this, you will complete an administrative intake by assigning a Client ID and completing Section A1. You do not need to collect a 6-month follow-up or discharge when consent is not given at intake.

Intake/Baseline Interview

Must be completed 1-4 calendar days after entering a non-residential program. It is imperative that grantees begin to collect GPRA data on each client as soon as possible after the client's intake into the program.

Sections A1-A3 is completed by program staff. Sections A4 & A5, B-G are client-report.

Grantees are only required to administer the GPRA baseline one time per client. However, grantees may choose to administer additional baseline GPRA if the client leaves and is readmitted to treatment. In this case, the subsequent 6-month follow-up will be required from the latest baseline only.

Discharge

Discharge interviews are related to the funded services and not the services to which the client is referred.

For discharge interviews, sections A1, A2, J and K are completed by program staff and sections B-G are client report.

If a client is unable to be reached for the discharge interview, program staff will complete the section A1 and sections J and K.

If a client is discharged from your program within 7 calendar days of their GPRA intake, a face-to-face interview is not required, and program staff will complete the discharge as above.

Discharge interviews may be done along with the 6-month follow-up interview even if the client is still engaged in services.

6-Month Follow-Up Interview

Must be completed within the window of 1 month before and 2 months after the 6-month mark. The 6-month mark is in relation to the date of the latest intake interview.

Sections A1, A2, and I are completed by program staff. Sections B-G are client-report. These questions must be asked and answered again in a new interview.

If a client is not able to be reached, conduct an administrative follow up intake by entering the Client ID and completing Sections A1 and I.

If the client discharges before the 6-month follow up, a complete 6-month follow-up interview must still be conducted.

Tips for Completing Multiple Interviews Together

In some cases, you may do intake and discharge interviews or 6-month follow-up and discharge interviews on the same day. To save time and avoid potential errors, you do not have to conduct two interviews to collect Sections A2-H. Instead, you may use the first GPRA form to pre-populate answers for the next form. To do this:

Fill out the GPRA Tool for the 6-month Follow-up interview.

Save the file with the filename <Client ID_Followup>.

Save the file again with the filename <Client ID_Discharge>.

Modify A1 to change the form to a Discharge interview.

Clear Section I to remove Follow-up information.

Fill out Sections J and K with Discharge Information.

Save the Discharge file.

You will now have two files to upload. Please note that it is imperative that these two files are uploaded for tracking purposes.

Client Incentives

If your grant includes funding for GPRA Support/Incentives, clients may be offered non-cash incentives for their participation in the GPRA data collection process.

Client incentives valuing \$30 may be provided for each interview (Intake, Follow-up, and Discharge) for a total not to exceed \$90 per client. Separate GPRA forms must be collected for each interview that includes an incentive.

The incentives CAN include items such as food vouchers, transportation vouchers, or phone cards. Incentives CANNOT be cash or used to purchase tobacco, alcohol, firearms, or lottery tickets.

GPRA Records Management

Grantees are responsible for their GPRA records management.

- All clients served through this grant must be tracked.
- If GPRA is not collected, programs must still track the client and the reason GPRA was not collected.
- GPRA records must be kept for 3 years after the grant period ends.
- A records management template can be found on our website: <https://www.healthvermont.gov/alcohol-drug-abuse/grantees-contractors/reporting-forms-and-guidance-documents>

Scenarios

A (grant funded) outreach/care coordinator connects with a client on May 28th. An intake interview is conducted on June 1st (4 days after client enters treatment).

On June 11th, the outreach coordinator refers the client to (non-grant funded) outpatient services. A discharge interview is completed.

The 6-month mark is October 29th. The 6-month follow up interview must be conducted between September 29th (1 month before 6-month date) and December 29th (2 months after 6-month date).

Scenarios

A client enters (outpatient) treatment on May 28th. An intake interview is conducted on June 1st (4 days after client enters treatment).

The 6-month mark is December 1st. The 6-month follow up interview must be conducted between November 1st (1 month before 6-month date) and February 1st (2 months after 6-month date).

The client engages in treatment on March 1st. By April 1st, with no contact with client, the client is discharged. The discharge interview must take place by April 14th.

How is GPRA submitted?

GPRA will be submitted through a Survey Gizmo [web link](#).

This survey will prompt you to select whether you are uploading GPRA data (either the fillable PDF form or a scanned form completed by hand).

All GPRA is expected to be submitted through Survey Gizmo. If necessary for your program, GPRA can be faxed to: (802) 652-2019.

When is GPRA submitted?

GPRA is collected in real time.

This means that your program must upload all GPRA data into Survey Gizmo within **48 hours** of conducting the interview (or completing the administrative follow-up or discharge).

Rejected Records

- Upon submitting GPRA data, it will be reviewed by our GPRA Coordinator, Trina Crockett.
- If there are errors in the submission Trina will reach out to identify those errors and request corrections.
- It is expected that the corrected GPRA interview will be uploaded back into Survey Gizmo within 48 hours. If this is not possible, grantees will let their grant managers know.

Tips and Tricks

- The interviewer is expected to transition between each section to introduce the topic that is covered by that section.
- Program staff are encouraged to use the [GPRA QxQ](#) during the interview.
- It is encouraged to have a calendar available during the interview to refer to when asking questions that begin, ‘in the last 30 days..’
- Open the GPRA tool using Adobe (not web browser). If submitted through the web browser, the information will not be correctly uploaded. You can download Adobe for free here: <https://get.adobe.com/reader/>.

FAQs

Q: Do we only need to collect GPRA on new intakes to our program?

A: GPRA must be collected for any client, new or established, who receive a service enhanced through funds for this grant, except for a one time or occasional crisis service.

Q: What happens if we cannot collect GPRA on a client within the designated window?

A: Programs must make every effort to collect GPRA within the stated windows. If a program is unable to do this, they must alert their grant manager and submit the GPRA data as soon as it is collected.

Common Errors

Section B: Drugs and Alcohol Use – Question 1

In this section, if the client is reporting alcohol use (B1a) and then breaking down the days by the amount of alcohol use (B1b1 and B1b2). The value of the days alcohol is used (B1a) but equal the breakdown of the days by amount of alcohol used (B1b1 and B1b2).

| | Number of Days | RF | DK |
|---|----------------------|--------------------------|--------------------------|
| 1. During the past 30 days, how many days have you used the following: | | | |
| a. Any alcohol <i>[IF ZERO, SKIP TO ITEM B1c.] *</i> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b1. Alcohol to intoxication (5+ drinks in one sitting) | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b2. Alcohol to intoxication (4 or fewer drinks in one sitting and felt high) | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |

B1.b1 and B.1.b2 combined cannot be greater than the total of B.1.a:

- If B.1.a is 8 then B.1.b1 and B.1.b2 must equal 8 combined
- If B.1.a is 16 then B.1.b1 and B.1.b2 must equal 16 combined

Common Errors

If the client is reporting alcohol use (B1a) and drug (B1c), they must also report use of both on the same day (B1d).

| | Number of Days | RF | DK |
|---|----------------------|--------------------------|--------------------------|
| 1. During the past 30 days, how many days have you used the following: | | | |
| a. Any alcohol <i>[IF ZERO, SKIP TO ITEM B1c.] *</i> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b1. Alcohol to intoxication (5+ drinks in one sitting) | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b2. Alcohol to intoxication (4 or fewer drinks in one sitting and felt high) | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Illegal drugs <i>[IF B1a OR B1c = 0, REFUSED (RF), DON'T KNOW (DK), THEN SKIP TO ITEM B2.]</i> | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Both alcohol and drugs (on the same day) | <input type="text"/> | <input type="checkbox"/> | <input type="checkbox"/> |

* B1a should equal B1b1 + B1b2

- B.1.d has to be 0 through 30, Refused, or Don't know
- Value in field B.1.d (same day alcohol and drugs) cannot exceed the value in B.1.a (days of alcohol use). Likewise, the value in field B.1.d cannot exceed the value in B.1.c (days of illegal drug use)
- B.1.d must be equal to or less than B.1.a and it cannot be greater than the value of B.1.c

Common Errors

Section B: Drugs and Alcohol Use – Question 2

In this section, if the client reports drug and alcohol use, the Number of Days each are used” (B2a-i) must be answered as well as the Route (of Administration).

2. During the past 30 days, how many days have you used any of the following (include Route of Administration): **[IF THE VALUE IN ANY ITEM B2a–B2i > 0, THEN THE VALUE IN B1c MUST BE > 0.]**

| | # Days | RF | DK | Route | RF | DK |
|---|----------------------|-----------------------|-----------------------|----------------------|-----------------------|-----------------------|
| a. Cocaine/Crack | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| b. Marijuana/Hashish | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| c. Opiates: | | | | | | |
| 1. Heroin (Smack, H, Junk, Skag) | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 2. Morphine | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 3. Dilaudid | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 4. Demerol | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 5. Percocet | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 6. Darvon | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 7. Codeine | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 8. Tylenol 2, 3, 4 | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| 9. OxyContin/Oxycodone | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| d. Non-prescription methadone | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |
| e. Hallucinogens/neurodelirics: PCP (Angel Dust, Orange Walk, Rocket Fuel), MDMA (Ecstasy, YTC) | <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> | <input type="radio"/> | <input type="radio"/> |

NOTE: Since the GPRA is federal reporting, Marijuana/Hashish is considered an illegal drug. Therefore, B.2.b must be included in B.1.c (Drug Use, Illegal Drugs)

Common Errors

Section E: Crime and Criminal Justice Status: Question 4

If the client reported illegal drug use, including Marijuana/Hashish, then the answer to the number of times you have committed a crime (E4), must include the number of days of illegal drug use (B1c).

E. CRIME AND CRIMINAL JUSTICE STATUS
Reported **BY CLIENT**

4. In the past 30 days, how many times have you committed a crime? [CHECK NUMBER OF DAYS USED ILLEGAL DRUGS IN ITEM B1c. ANSWER HERE IN E4 SHOULD BE EQUAL TO OR GREATER THAN NUMBER IN B1c BECAUSE USING ILLEGAL DRUGS IS A CRIME.]

|_|_| times

Refused

Don't know

Activities Requiring GPRA Collection

GPRA is required for any individuals whose services are enhanced through funding from this grant.

GPRA is required if an individual begins treatment (individual, group, IOP, etc) with your agency because of their interaction with crisis services and/or activities funded through this grant.

GPRA is not required for individuals referred to other agencies, or for individuals who do not want a referral for services at your agency.

GPRA is NOT required for one time or occasional crisis services.

Questions?



Thank you!

Reach out with any questions or technical assistance needs:

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