

SAMHSA “Now is the Time” Healthy Transitions Required Indicators

SAMHSA’s Center for Mental Health Services (CMHS) developed five indicators to collect performance data on the “Now is the Time” Healthy Transitions (NITT-HT) Grantees’ Infrastructure Development, Prevention, and Mental Health Promotion (IPP) activities. CMHS requires NITT-HT grantees to collect and submit data on a *quarterly* basis. The five indicators are Policy Development (PD1), Partnerships/Collaborations (PC1), Screening (S1), Outreach (O1), and Referral (R1). We developed this “cheat sheet” to help grantees classify and submit indicator data results. The guide is organized into three sections:

- Overview of data reporting requirements and deadlines
- Operational definitions and data entry guidelines for the five required indicators
- How to access help, tips, and resources

General Overview: Grantees must comply with three data submission components:

- 1) **Quarterly Data:** Grantees submit data quarterly for each indicator based on the federal fiscal year (FFY) calendar. As a new grantee, submission will begin the second quarter. After grantees submit data, the government project officer (GPO) will review the data and approve, disapprove, or request revisions.
- 2) **Annual Goals:** Grantees submit annual performance goals for each indicator for each grant year. Based on the original, approved application, goals should be realistic and attainable. Grantees can update and revise their goals annually during the first quarter of each new FFY.
- 3) **Annual Budget Estimates:** For each grant year, grantees submit budget estimates for specific budget categories. These are estimates, not actual expenditures. Grantees can also update and revise budget estimates annually during the first quarter of each new FFY. For this grant you should NOT allocate any funds to Prevention or Technical Assistance.

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Table 1. Quarterly Reporting Period and Deadlines for Submitting Indicator Data

Quarter	Quarterly Reporting Period	Grantee Deadline to Submit Data	GPO Review Deadline	Grantee Deadline to Revise Data	System-Lock Date*
1st	October 1–December 31	January 31	February 28	March 31	April 1
2nd	January 1–March 31	April 30	May 31	June 30	July 1
3rd	April 1–June 30	July 31	August 30	September 30	October 1
4th	July 1–September 30	October 31	November 30	December 31	January 1

* No further data entry, GPO reviews, or grantee revisions allowed.

Submission Requirements: Grantees submit data quarterly for each indicator based on the FFY calendar, which runs from October 1 through September 30. For new grantees, data submission begins in the second quarter, January 1–March 31. After grantees submit data, the GPO will review and approve, disapprove, or request revisions. Grantees have until midnight of the grantee revision deadline (see “Grantee Deadline to Revise Data” column in Table 1) to submit final data revisions. Following the deadline, the data system locks for that particular quarter and does not allow any additional data entry or revisions.

Required Indicators: Tables 2 through 6 outline operational definitions and data entry guidelines for the five required indicators:

- **Policy Development (PD1)** is the number of policy changes completed as a result of the grant.
- **Partnerships/Collaborations (PC1)** is the number of organizations that entered into formal written inter/intra-organizational agreements (e.g., MOUs/MOAs) to improve mental health-related practices or activities that are consistent with the goals of the grant.
- **Screening (S1)** is the number of people screened for mental health or related interventions.
- **Outreach (O1)** is the number of people contacted through the program outreach efforts.
- **Referral (R1)** is the number of people referred to mental health or related services.

Each table explains the intent of the particular indicator, provides definitions of key terms related to the indicator, describes who or what grantees can count or not count, and gives useful examples.

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Table 2. IPP Indicator: Policy Development (PD1)

PD1 is the **number of policy changes** completed as a result of the grant.

Intent & Key Terms	What To Count	Guidelines for Entering Data
<p>Intent: To report all policy changes that have been completed as a result of the grant.</p> <p>Key Terms: Policy is a written document directing an action or event; administrative or legislative in origin.</p> <p>Examples:</p> <ul style="list-style-type: none"> ▪ Directives ▪ Guidance ▪ Clinical practice guidelines ▪ Regulations ▪ Statutes ▪ Operational manuals ▪ Procedures ▪ Bylaws ▪ Strategic plans ▪ Mission statements ▪ Written decisions ▪ Standards <p>Financing policies are excluded.</p> <p>Change is the creation of a policy that did not previously exist, the documentation of a policy that existed in an undocumented form, or the elimination or alteration of a policy that previously existed and had already been</p>	<p>Count the policy change only once and only when the change has been completed.</p> <p>The policy may be reported if it is not yet implemented.</p> <p>Do not count the policy change if discussions have only begun about the policy but it has not been completed or approved.</p>	<p>On the Result Form, enter the following information in the quarter when the policy change was completed:</p> <p>Result Name: Enter the name or type of policy change.</p> <p>Result Description: Enter a description of 1) the organizations and 2) the completed policy change.</p> <p>Result Number: Enter one policy change per result record.</p> <p>Example: Result Name: Changed state administrative code to include the TIP model for Youth of Transition age. Result Description: The state established new standards to include Transition to Independence Process (TIP) for youth of transition age. Result Number: 1</p>

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<p>documented.</p> <p>Completed means that the document exists in its final form and has been approved or passed by the party or parties with authority to do so.</p>		
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Table 3. IPP Indicator: Partnerships/Collaborations (PC1)

PC1 is the **number of organizations** that entered into formal written inter/intra-organizational agreements (e.g., MOUs/MOAs) to improve mental health-related practices or activities that are consistent with the goals of the grant.

Intent & Key Terms	What To Count	Guidelines for Entering Data
<p>Intent: To capture information on organizations that entered into formal written inter/intra-organizational agreements (e.g., MOUs/MOAs) to improve mental health-related practices or activities consistent with the goals of the grant.</p> <p>Key Terms: Organizations include state, local, and tribal agencies; bureaus; departments; or other major entities providing mental health and related services.</p> <p>A formal written inter/intra-organizational agreement is a document written between organizations to specify how parties will work together on an agreed upon project or objective. The document must be signed by representatives of both organizations.</p> <p>Mental health-related practices and activities include treatment, rehabilitation, prevention, mental health-related promotion, and supportive services.</p> <p>Examples:</p>	<p>Count the number of organizations that entered into <i>formal written</i> inter/intra-organizational agreements to improve mental health-related practices or activities.</p> <p>If one organization has several agreements, count the organization once per agreement.</p> <p>Count the agreement once and in the quarter that it is finalized; you do not need to repeat it every quarter.</p> <p>Do not count agreements that are still in the planning stages.</p>	<p>On the Result Form, enter the following information in the quarter in which the agreement was finalized. Enter one result record per agreement.</p> <p>Result Name: Enter the name or type of agreement.</p> <p>Result Description: Enter a description of 1) the organizations involved, 2) the type of agreement established (e.g., MOU or MOA), 3) the purpose/objective of the agreement, and 4) the expiration date of the agreement.</p> <p>Result Number: Enter the total number of organizations that entered into the agreement. Do not include yourself, the grantee.</p> <p>Example: Result Name: MOU between the state Department of Mental Health (grantee) and Department of Children and Families. Result Description: The state Department of Mental Health (grantee) finalized an MOU with the Department of Children and Families. The purpose of the agreement is to establish a working group. The working group will identify innovative policy changes to increase the continuity of care for TAY with serious mental health conditions that are transitioning out of</p>

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<p>MOU/MOA with:</p> <ul style="list-style-type: none">▪ Child welfare agency to provide respite services▪ Juvenile justice agency to provide a training for wraparound credentialing▪ Family advocacy group to organize a Children’s Mental Health Awareness Day event▪ County health department to share office space used by peer support specialists▪ Behavioral health provider to refer Transitional Aged Youth (TAY) clients for a specific evidence based treatment intervention▪ Local community organization that offers peer specialist training program for youth		<p>foster care. The MOU will expire in September 2016.</p> <p>Result Number: 1</p>
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Table 4. IPP Indicator: Screening (S1)

S1 is the number of people screened for mental health or related interventions.		
Intent & Key Terms	Who To Count	Guidelines for Entering Data
<p>Intent: To capture information on the number of people screened for mental health or related interventions as a result of the grant.</p> <p>Key Terms: Screening refers to the initial identification of people who may need a specific intervention and is not for monitoring or assessment.</p> <p>Mental health-related pertains to mental health or the population of people with or at risk of mental health condition(s); also includes people with co-occurring substance use disorders.</p> <p>Interventions include treatment, rehabilitation, prevention, mental health-related promotion, and supportive services.</p> <p>Examples:</p> <ul style="list-style-type: none"> ▪ Mental health screening ▪ Beck Depression Inventory (BDI) ▪ Adverse Childhood Experiences (ACE) ▪ Substance use screening ▪ Global Appraisal of Individual Needs – Short Screener (GAIN-SS) ▪ Other Standardized screening tools 	<p>Count the number of people screened.</p> <p>Do not count the number of interventions.</p> <p>Do not count routine follow-up for the purpose of monitoring a child’s progress or status.</p>	<p>On the Result Form, enter the following information in the quarter when the person was screened:</p> <p>Result Name: Enter the name/title of the screening provided.</p> <p>Result Description: Enter a one to two sentence description of 1) who received the screening and 2) type of screening provided.</p> <p>Result Number: Enter the total number of people screened.</p> <p>Example: Result Name: Behavioral health screening Result Description: As a result of the grant, we administered a behavioral health screening to 116 people at the participating primary care practices this quarter. Result Number: 116</p>

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Table 5. IPP Indicator: Outreach (O1)

O1 is the number of people contacted through the program outreach efforts.		
Intent & Key Terms	Who To Count	Guidelines for Entering Data
<p>Intent: To capture information on one-on-one contacts with people using outreach or other strategies to increase participation in and access to treatment services for the population in focus as a result of the grant.</p> <p>Key Terms: Contacted includes making a connection with people. Contacts can be made on the streets, via telephone, in different program settings, at drop-in centers, or in community settings.</p> <p>Outreach pertains to a strategy designed to increase access and participation in treatment service for the population in focus. Outreach is not the same as awareness.</p> <p>Examples: X number of people attended:</p> <ul style="list-style-type: none"> ▪ Back to school event ▪ Health fair ▪ Primary care center ▪ Faith organization ▪ Teen center ▪ Homeless drop in center ▪ Community college registration event 	<p>Count the number of people contacted through one-on-one outreach or other related strategies.</p> <p>The purpose is to engage people who either have untreated mental health conditions or are at risk of developing such conditions.</p> <p>Outreach to further engage those who are already technically enrolled in services can also count (i.e., a person who started services, but had not been seen in a while).</p> <p>Count the number of people.</p> <p>Do not count the number of contacts made. For example, if a person who is homeless is contacted five times, count that person once.</p> <p>Do not count general appointment reminders and contacts as part of services.</p> <p>Do not count awareness activities.</p>	<p>On the Result Form, enter the following information in the quarter when the person was contacted:</p> <p>Result Name: Enter the name of the outreach effort.</p> <p>Result Description: Enter a one to two sentence description of 1) who was contacted and 2) the type of information disseminated.</p> <p>Result Number: Enter the number of people contacted, not the number of contacts made.</p> <p>Example: Result Name: Outdoor outreach effort Result Description: As a result of the grant and during this quarter, we spoke with 15 homeless young adults to encourage participation in services. Result Number: 15</p>

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Table 6. IPP Indicator: Referral (R1)

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R1 is the **number of people** referred to mental health or related services.

Intent & Key Terms	Who To Count	Guidelines for Entering Data
<p>Intent: To capture information on people referred to mental health or related services as a result of the grant.</p> <p>Key Terms: Referred includes recommending a person for mental health or related services. Mental health-related pertains to mental health or the population of people with or at risk of mental health condition(s); also includes people with co-occurring substance use disorders. Services include treatment, rehabilitation, prevention, mental health-related promotion, and supportive services. Examples: People referred to:</p> <ul style="list-style-type: none"> ▪ Mental health services ▪ Substance use services ▪ Crisis intervention ▪ Community based service program ▪ Support group (e.g., alcoholics anonymous) ▪ Family therapy ▪ Peer support services 	<p>Count the number of people referred to mental health or related services.</p> <p>Do not count the number of services.</p> <p>Count people referred to services provided by the grantee or other outside organizations.</p>	<p>On the Result Form, enter the following information in the quarter when the person was referred:</p> <p>Result Name: Enter the type of referral made.</p> <p>Result Description: Enter a one to two sentence description of 1) who received the referral information and 2) the services that they were referred to.</p> <p>Result Number: Enter the total number of people referred.</p> <p>Example: Result Name: Mental health services referrals Result Description: As a result of the grant, 21 people were referred for mental health related services this quarter. Result Number: 21</p>

Reporting Tips for Success

- Report quarterly data only for *completed* activities and trainings in the quarter when they were completed. Do not enter information on activities that are *in progress*.
- If you have no activities to report for a particular indicator, you must report that there has been **No New Result**.

QUESTIONS?

- If you need further support to understand the operational definitions of your required indicators or to set annual goals and budget estimates, **contact your GPO**.