OhioMHAS SAMHSA Emergency COVID-19 Grant

Responses to frequently asked questions

1. Determining Eligibility for Data Collection

Data should be collected for each consumer who has a presenting problem that is due to or exacerbated by the COVID-19 pandemic, including those whose treatment is related to emotional, financial, or social stressors caused by this health crisis. If you are not certain whether an individual's presenting problem meets this criteria, please ask the following clarifying question:

   “Is the treatment (or support) that you are seeking (or “Are the problems you are experiencing…” related to emotional, financial, or social stressors caused by the COVID-19 health crisis?”

   If YES, please complete a data collection instrument
   If NO, not eligible for data collection

2. Determining Which Data Collection Form to Administer

   In general, one-time services should be documented using the short form and treatment provided over a period of seven days or longer can be documented using GPRA data collection forms. For some services, the decision is less clear. In some cases, GRC will work with each regional data coordinator and program leads to identify the best strategy to meet SAMHSA minimum GPRA data collection requirements while minimizing data collection burden. Examples include:

   1. Crisis stabilization services that are provided over several days and lead to ongoing treatment.
      - Services could be documented using the GPRA form, since they will occur over a period of more than seven days. However, this would require coordination between the crisis stabilization and other treatment providers. GRC and your regional data coordinator will work with you to discuss the feasibility of collecting GPRA data for a sample of consumers who receive ongoing treatment. Regional data coordinator will communicate specific regional plans to collect the GPRA in these situations.

   2. Repeated calls to the same crisis hotline on different days.
      - Each call should be documented as a single crisis service and reported on a new short form instrument each day.

   3. Repeated calls to the same crisis hotline on the same day.
      - For two crisis services to the same individual in the same day, use one form. The form will capture the presenting problem(s) and basic information about the individual served.

3. Identifying a Regional Data Coordinator

   Each regional board grantee must assign a regional data coordinator who will be responsible for coordination of data collection in their region and submitting data to GRC and SPARS. The data coordinator will coordinate regional data reporting activities and serve as a point of contact for GRC. The data coordinator will also work with GRC and OhioMHAS to develop and implement a strategy to ensure minimum reporting requirements are met and review regional progress reports to ensure data reporting progress is on track. The data coordinator may be an employee of the regional board, although this is not a requirement.
4. Entering the GPRA into SPARS
Data must be entered in as close to real time as possible. Therefore, for sites that are using paper copies of the GPRA, the forms should be entered into SPARS within 1 business day—but no later than 7 business days—after the GPRA interview is conducted.

5. GPRA administration at 6 months and discharge
The GPRA instrument must be repeated every 6 months and upon discharge. Many consumers will complete the intake GPRA and the discharge GPRA before 6 months, which is appropriate for shorter treatment episodes. For consumers who are receiving services at 6 and 12 months, the GPRA will need to be re-administered twice. Repeat and/or discharge GPRAs are required for a minimum of 80% of consumers who complete an intake GPRA.