

State Opioid Response (SOR) Fact Sheet

What is SOR?

The State Opioid Response (SOR) is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and implemented by the Division of Substance Abuse and Mental Health (DSAMH). SOR aims to serve 11,850 unduplicated clients for substance use related services from prevention through long-term recovery. Delaware received funding to:

- Improve prevention efforts
- Increase access to treatment and services by developing new referral pipelines and new “front doors”
- Increase capacity in the state to address opioid related treatment services, specifically MAT
- Improve wraparound services
- Develop and use data systems to inform action

What is the purpose of SOR?

SOR aims to address the opioid crisis by increasing access to medication-assisted treatment using the three FDA approved medications for the treatment of opioid use disorder, reducing unmet treatment need, and reducing opioid overdose related deaths through the provision of prevention, treatment, and recovery activities for opioid use disorder (OUD) (including prescription opioids, heroin, and illicit fentanyl and fentanyl analogs). SOR funding seeks to address the full continuum of care (prevention through recovery), with a heavy emphasis on building MAT capacity, creating more referral pipelines and access to treatment, and complementing existing treatment and wraparound services.

What are the goals of SOR?

- Reduce opioid related overdoses
- Reduce unmet need for treatment
- Increase access to medication assisted treatment

SOR will support and enhance improvements in treatment for all Delawareans with a focus on **youth/young adults** and **detainees leaving the Department of Corrections (DOC)**.

How do clients benefit from SOR funding?

SOR aims to reduce unmet treatment need and reduce opioid overdose related deaths through evaluating and improving prevention, treatment and recovery activities for OUD. Clients benefit from SOR funded agencies in multiple ways, such as:

- Improving prevention efforts,
- Developing new referral pipelines to help increase client access to treatment and services,
- Enhancing wraparound services, and
- Improving data systems to inform action.

CSAT GPRA Data Collection

- **Administer:** CSAT GPRA interviews at baseline (within 7 days of the client starting services), every 6 months, and at discharge.
- **Purpose:** The CSAT GPRA is a tool used to assess impact, track SOR goals, and determine if goals have been met.

- **Eligibility:** Clients who receive treatment for OUD at sites receiving SOR funding.
- **Consent:** Ask client to **sign** the CSAT GPRA Interview consent form **before** beginning the interview.
- **Consent:** Inform client that a signed consent permits data sharing with DSAMH and Center for Drug and Health Studies, UD.

Please remember:

- **Record Client’s MCI #**
- **Record Date of Baseline Interview**
- **Do NOT leave any responses blank.**
- **Indicate client refusal**
- **Forward completed GPRAs to SRU daily through SFTP or Egress**



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