

SOR-II Quarterly Treatment and Recovery Reporting Surveys



What are the quarterly surveys and why do we complete them?

WHAT: The SOR-II Quarterly Treatment and Recovery Reporting Surveys, frequently referred to as the “Quarterly Surveys,” are an important part of the evaluation of Virginia’s federal State Opioid Response (SOR) grant. These surveys collect organization-level data on CSB’s service provision and impact, information that is not captured through the GPRA survey.

WHY: Data collected from the quarterly surveys fulfill SAMHSA’s federal reporting requirements and provide an understanding of CSBs’ statewide impact. Fulfilling SAMHSA reporting requirements increases the likelihood of acquiring future funding opportunities.



How do we complete the quarterly surveys?

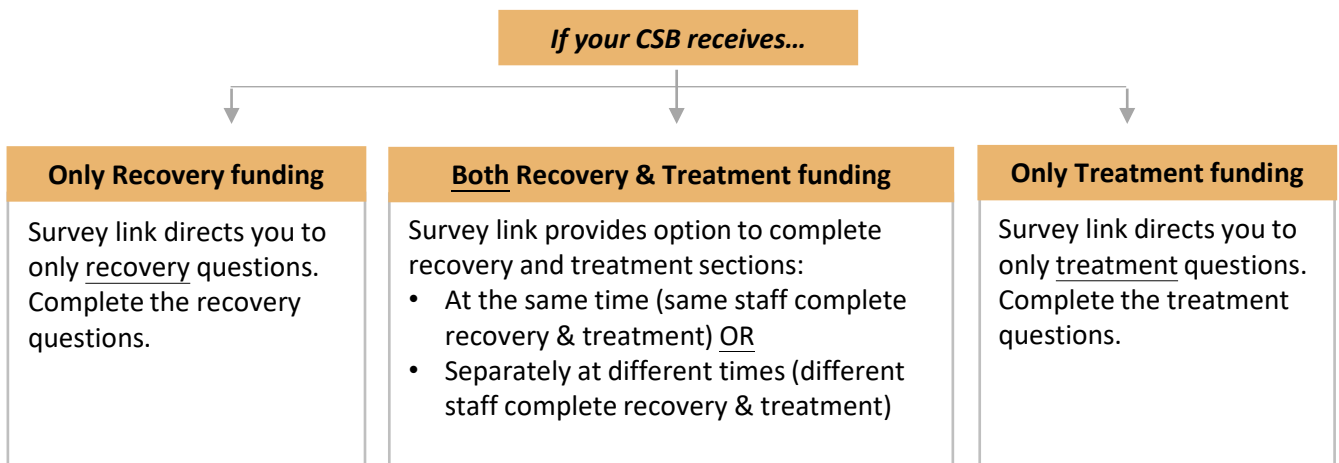
The survey is completed online. The **OMNI TA Team** will email your CSB’s point-of-contact the link to the **quarterly survey**, typically on the first business day of the new quarter. PDF files of survey questions will be on the [Quarterly Survey resources page](#) of the website and included in the emails, but **the survey must be completed in the online form**.

Your survey responses will be available for download upon completion in the online form. We encourage you to save your response for your records. Contact SORSupport@omni.org if you need copies of past responses.



What is the structure of the surveys and who completes them?

The quarterly surveys have two parts: a **Recovery section** and a **Treatment section**.



WHO at my agency should complete the surveys? Ideally, a staff member with higher-level knowledge of your agency’s programmatic offerings. The survey completer must have access to programmatic data (e.g., total number of clients served, number/type of services offered).



When do we complete the quarterly surveys?

Survey	Date range reported on	Week survey sent out	Week survey due
Quarter 1 Survey	Oct. 1 – Dec. 31	January 4 th	January 18 th
Quarter 2 Survey	Jan. 1 – Mar. 31	April 1 st	April 12 th
Quarter 3 Survey	Apr. 1 – Jun. 30	July 1 st	July 12 th
Quarter 4 Survey	Jul. 1 – Sept. 30	October 1 st	October 11 th



What do I need to know to properly answer the survey questions?

“SOR-Funded”

Nearly all questions in the quarterly surveys ask about “SOR-funded” services. By “SOR-funded” we mean services that are funded partially or fully by State Opioid Responses grant funds. Unless otherwise stated in the question, please be sure you are only including services funded by SOR in your responses to survey questions.

Treatment vs. Recovery

We recognize the interrelated nature of treatment and recovery services in practice, but for the purposes of the SOR-II Quarterly Surveys, we distinguish between SOR-funded treatment services and SOR-funded recovery services. The table below describes how these two service groups are defined and should be reported.

	Treatment	Recovery
What services are typically funded?	<ul style="list-style-type: none"> • MAT for OUD • Detox services • Individual treatment services (i.e., counseling, therapy, psychiatry, crisis support) • Group treatment services (i.e., counseling or therapy groups) • Intensive outpatient program services (IOP) • Contingency management • Residential treatment services • Treatment wraparound services (i.e., case management, transportation and childcare for treatment appointments) • Any other services funded through SOR treatment dollars that are not in either this treatment services list or the recovery services list 	<ul style="list-style-type: none"> • Services provided by a peer supporter, such as: <ul style="list-style-type: none"> • Community outreach • Warmline support • Group support • Individual support • Peer support in an emergency department setting • Peer support in a justice setting (e.g., jails, recovery courts) • Community education or trainings from a peer • Housing support (i.e., rapid re-housing, transitional housing, recovery housing) • Any other services funded through SOR recovery dollars that are not in either this recovery services list or the treatment services list
Include Peers?	No , do not include peer services in treatment questions.	Yes , please include peer services in recovery questions.

Response Approximations

Many of the survey questions ask for specific numbers (e.g., number of clients served). While we ask that your responses be as accurate as possible, we also recognize that ascertaining these *exact* numbers is difficult. As such, please approximate responses to the best of your ability.



What questions are asked in the surveys?

The following tables list the Treatment and Recovery questions that ask for specific numerical data so that your CSB can prepare in advance for collecting and reporting this data.

Treatment Questions

Question	Explanation & Details
<p><i>How many unique clients total received SOR-funded treatment services during...</i></p> <ul style="list-style-type: none"><i>the past quarter?</i> (asked at every quarter)<i>Quarter 1 and Quarter 2 combined?</i> (asked at Q2)<i>the past year?</i> (asked at Q4)	<p>This question will be asked for different time periods, depending on the quarter (as noted in the bulleted items on the left).</p> <p>Please type the number of total clients that received any SOR-funded treatment services. Client should not be double-counted if receiving multiple services. Please refer to the treatment services listed on page 2 of this document when determining the treatment services to include in this total.</p>
<p><i>How many unique clients received each of the following SOR-funded treatment services in the past quarter?</i></p> <ul style="list-style-type: none"><i>MAT for OUD</i><i>Detox services</i><i>Individual treatment services (i.e., counseling, therapy, psychiatry, crisis support (not provided by a peer); do not include individual peer support)</i><i>Group treatment services (i.e., counseling or therapy groups; do not include peer support groups)</i><i>Intensive outpatient program services (IOP)</i><i>Contingency management</i><i>Residential treatment services</i><i>Treatment wraparound services (i.e., case management, transportation and childcare for treatment appointments)</i>	<p>Please enter the number of clients that received each of the services. If none, please enter "0." Clients can be counted multiple times across services (i.e., client can be counted in the "MAT for OUD" total and the "Detox services" total if they received both). Please do not include individuals who received services in a justice system setting in this question.</p> <p>Note: We recognize treatment and recovery services can be intertwined, but the questions are divided by funding type. As such, the services in this question are typically funded by SOR treatment funds. If your agency funds any of these services with recovery funding, please still count clients receiving that service here.</p>
<p><i>How many MAT prescribers does your agency currently have?</i></p>	<p>Please enter the number of MAT prescribers who are in-house AND/OR who are contracted to provide services. Please include all prescribers, regardless of how they are funded (i.e., they do not need to be SOR-funded).</p>



What questions are asked in the surveys? (cont.)

Treatment Questions (cont.)

Question	Explanation & Details
<p><i>How many unique clients received each of the following SOR-funded services in justice system settings in the past quarter?</i></p> <ul style="list-style-type: none">• MAT services in jail setting• Non-MAT treatment services in the jail setting• MAT services through recovery court programs• Non-MAT treatment services through recovery court programs• MAT services through DOC programs• Non-MAT treatment services through DOC programs	<p>Please enter the number of clients in the justice setting that received each of the services. If none, please enter "0." Clients can be counted multiple times across services.</p>
<p><i>How many justice system facilities or programs have SOR-funded treatment services been provided in in each justice system setting in the past quarter?</i></p> <ul style="list-style-type: none">• Drug/Recovery courts• Regional or local jails• Department of Corrections (DOC)	<p>Please enter the number of justice system programs your CSB provides treatment services in.</p>
<p><i>Please list the names of the justice system facilities or programs in which SOR-funded treatment services have been provided . (Drug/Recovery courts; Regional/local jail; DOC)</i></p>	<p>Enter the name(s) of the justice system facilities or program your CSB provides treatment services in.</p>
<p>Supplemental Questions</p>	<p>Questions that change every survey. These questions will not ask for specific numerical data but will pose more general questions to gauge various services, client capacity, and responses to ongoing current events.</p>

Recovery Questions

Question	Explanation & Details
<p><i>How many SOR-funded peers provided recovery services during the past quarter?</i></p>	<p>Please enter the total number of SOR-funded peers, regardless of setting.</p>
<p><i>How many unique individuals total received SOR-funded recovery services during...</i></p> <ul style="list-style-type: none">• the past quarter? (asked at every quarter)• Quarter 1 and Quarter 2? (asked at Q2)• the past year? (asked at Q4)	<p>This question will be asked for different time periods, depending on the quarter (as noted in the bulleted items on the left).</p> <p>Please type the number of total individuals that received any SOR-funded recovery services (does not have to be provided by a peer). Individuals do not have to be formally enrolled 'clients' with a CCS3 ID number. Individuals should not be double-counted if receiving multiple services. Please refer to the recovery services listed on page 2 of this document when determining the recovery services to include in this total.</p>



What questions are asked in the surveys? (cont.)

Recovery Questions (cont.)

Question	Explanation & Details
<p>How many <i>unique individuals</i> received each of the following services from a SOR-funded peer in the past quarter?</p> <ul style="list-style-type: none"> • Community outreach from a peer • Warmline support from a peer • Group support from a peer facilitator/co-facilitator • Individual support from a peer • Support from a peer in an emergency department setting • Community education/trainings from a peer • Housing support (e.g., rapid re-housing, transitional housing, recovery housing) 	<p>Please enter the number of individuals that received each of the services. If none, please enter “0.” Individuals can be counted multiple times across services (i.e., individuals can be counted in “Community outreach” and “Warmline” if they received both). Individuals do not have to be formally enrolled ‘clients’ with a CCS3 ID number. Please do not include individuals who received services in a justice system setting in this question.</p> <p>Note: We recognize treatment and recovery services can be intertwined, but the questions are divided by funding type. As such, the services in this question are typically funded by SOR recovery funds. If your agency funds any of these services with treatment funding, please still count individuals receiving that service here.</p>
<p>How many SOR-funded peers provided recovery services to individuals in justice system settings in the past quarter?</p>	<p>Please enter the number of peers that provided recovery services in a justice system setting.</p>
<p>How many <i>unique individuals</i> received services from a SOR-funded peer in each of the following justice system settings in the past quarter?</p> <ul style="list-style-type: none"> • Drug/Recovery courts • Regional or local jails • Department of Corrections (DOC) 	<p>Please enter the number of individuals that received services from a SOR-funded peer in the three justice system settings listed. Responses should be separated by justice system setting.</p>
<p>How many justice system facilities or programs have SOR-funded peers provided recovery services to in each justice system setting in the past quarter?</p> <ul style="list-style-type: none"> • Drug/Recovery courts • Regional or local jails • Department of Corrections (DOC) 	<p>Please enter the number of justice setting facilities or programs that received recovery services from SOR-funded peers. Responses should be separated by the three justice system settings listed.</p>
<p>Please list the names of the justice system facilities or programs in which peers provided SOR-funded recovery services. (Drug/Recovery courts; Regional/local jails)</p>	<p>Enter the name(s) of the justice system facilities or program your CSB provides treatment services in.</p>
<p>Supplemental Questions</p>	<p>Questions that change every survey. These questions will not ask for specific numerical data but will pose more general questions to gauge various services, individual capacity, and responses to ongoing current events.</p>

For more information, email SORSupport@omni.org or visit VirginiaSORSupport.org.