

## State Opioid Response (SOR) FIA 20.04 Police Diversion to Treatment Questions and Answers – (10.14.20)

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1.	<p>Can counties that currently do not have any specialty courts apply for this grant?</p> <p style="color: red;">Any Single County Authority (SCA) eligible and interested in developing a police diversion to treatment initiative or expanding on an existing police diversion initiative can apply for this funding. Whether or not a county has a specialty court already in existence is irrelevant in terms of eligibility to apply for this funding.</p>
2.	<p>Can the funding be used to develop a specialty court with this grant?</p> <p style="color: red;">No.</p>
3.	<p>If a county used STR grant money to develop a treatment drug court in 2018 that has since dissolved and these current grant funds could be used for a specialty court, would this county be eligible for the diversion to treatment grant monies?</p> <p style="color: red;">No.</p>
4.	<p>Some of our local police departments have expressed interest in Co-Responder Models that partner behavioral health practitioners with police officers. Can these grant funds be used to fund a more comprehensive program that would also respond to offenders with mental health issues?</p> <p style="color: red;">The proposed model must focus on assisting individuals with stimulant or opioid misuse issues. If the SCA wants to provide a more comprehensive program other funding must be used to address the mental health components of the model.</p>
5.	<p>Local police report that the drug most likely to be involved in substance abuse-related offenses is alcohol. Can these grant funds be used to set up a comprehensive substance use disorder program that also diverts offenders with alcohol use disorders to treatment?</p> <p style="color: red;">Grants funds for this project can be used to fund police diversion initiatives that support individuals with stimulant or opioid misuse issues. If an individual has an opioid or stimulant misuse issue and another substance use issue, like alcohol use disorder, all substance issues may be addressed. If the individual has no history of opioid or stimulant misuse but they struggle with another substance, like alcohol, then grant funds may not be used to support this individual's treatment or diversion.</p> <p style="color: red;">State Opioid Response 2020 Special Terms state the following: "SOR funds for treatment and recovery support services shall only be utilized to provide services to individuals that specifically address stimulant or opioid misuse issues. If either a stimulant or opioid misuse problem (history) exists concurrently with other substance use, all substance use issues may be addressed. Individuals who have</p>

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	no history of or no current issues with stimulants or opioids misuse shall not receive treatment or recovery services with SOR grant funds.”
6.	<p>If case management or certified recovery specialist positions are created for this project and funded with grant monies, can those positions only work with individuals with opioid use disorders or stimulant use disorders?</p> <p>Please refer to Question #5. In addition, if a position funded by this initiative is also spending time working under another initiative, it is expected that the time worked under this initiative is coded and documented accordingly.</p>
7.	<p>Grant funds cannot be used to cover the cost of treatment, but can they be used for the cost of clinical assessments and case coordination?</p> <p>Grant funds cannot be used to cover the cost of treatment, but they can be used to cover the cost of clinical assessments and case coordination if the individual does not have insurance which covers the cost of these services.</p>
8.	<p>We would be subcontracting with a community-based recovery organization to provide brief intervention, warm handoff and system navigation services. Can certified recovery specialists (CRS’s) complete the GPRA and enter it into WITS?</p> <p>SCA’s cannot have CRS’s administer the GPRA. GPRA is a function of case management, so only case managers should administer the GPRA. Recovery Community Organizations are at liberty to decide who is most appropriate to administer the GPRA at their organization.</p>
9.	<p>Some local police departments have expressed interest in this idea, but they are clear that they would want us to work with all substance abuse related offenders, not just those with Opioid Use or Stimulant Use Disorders. If we do develop a program to work with all offenders, will we be expected to charge project staff salaries and benefits based on a log indicating the actual percentage of offenders that have Opioid Use or Stimulant Use Disorders (e.g. 33% of offenders encountered in this pay period have Opioid Use or Stimulant Use Disorders so we can charge 33% of salaries and benefits to the project)? If yes, would this need to vary from one pay period to the next based on actual utilization data?</p> <p>Please refer to Question #5 and Question #6.</p>