

# Ohio's State Opioid and Stimulant Response (SOS) Grant

## Sample Script on SOS Program Background & Procedures

### Background & Purpose

You were selected as a possible participant in this evaluation because you have been referred to and enrolled in LOCAL SOS PROJECT NAME. The evaluation will collect information to determine if the services you will receive in LOCAL SOS PROJECT NAME are effective and improve your health and well-being. Ohio Department of Mental Health and Addiction Services/ LOCAL BOARD OR YOUR AGENCY received a grant from the federal Substance Abuse and Mental Health Services Administration (SAMSHA) to offer these enhanced services.

### Procedures

If you agree to be a participant in this evaluation, you will be interviewed for about twenty-minutes three times: at beginning of LOCAL PROGRAM AT YOUR AGENCY OR PROGRAM NAME, six-months after enrollment and at the end of the LOCAL AGENCY program. These interviews will include questions about your drug and alcohol use, past and current treatment, general health, employment, housing status, criminal justice involvement, and social connectedness. Before I get started do you have any questions that I can answer for you?

## **Sample Script on SOS Program Introduction – Client Referred to Program**

Good Morning/Afternoon,

My name is \_\_\_\_\_ and one of the Assessors, Probation Officers or Case Managers may have mentioned that I would be meeting with you to ask you some questions (or mention the referral source). You were selected as a possible participant in this evaluation because you have been referred to and enrolled in SOS grant program here at LOCAL AGENCY NAME. The evaluation will collect information to determine if the services you will receive in SOS PROGRAM NAME are effective and improve your health and well-being. Your agreement to participate in the evaluation is voluntary and confidential. If you choose not to participate in the evaluation your ability to receive any and all SOS services are the same. No services will be affected if you do not participate.

If you agree, I am now going to ask you a few questions and get some contact information from you for our follow-up interviews (about 6-months from now and when you are done with your SOS program and please remember you will receive a \$30 gift card after you complete your 6-month follow-up interview). Before I get started do you have any questions? I am happy to answer any questions you may have.