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About SUPRT

What is SUPRT?

The Substance Abuse and Mental Health Services Administration (SAMHSA) Unified Performance Reporting Tools (SUPRT) is a two-part questionnaire that collects information related to a client's mental health and substance use, treatment services, and life circumstances. SAMHSA funds California's State Opioid Response (SOR) grant and requires all grantees providing treatment services for clients with an opioid or stimulant use disorder diagnosis to collect and report performance data using the SAMHSA-approved measurement tool. Effective October 1, 2025, SUPRT will replace the GPRA reporting tool. SUPRT is designed to streamline reporting, reduce administrative burden, improve reporting accuracy, and align with [SAMHSA's 2023-2026 Strategic Priority Area goals and objectives](#). SUPRT should be completed for all eligible clients.

SUPRT is comprised of two components:

- » SUPRT-Administrative (SUPRT-A) is completed by site staff based on available client records (e.g., client behavioral health history, diagnosis, and services provided). Providers must complete a SUPRT-A form on behalf of all eligible clients.
- » SUPRT-Client or Caregiver (SUPRT-C) is a brief survey completed by the client or caregiver. The SUPRT-C survey removes the previous requirement for interviews, reducing the burden on staff and clients. Site staff should encourage clients and caregivers to complete SUPRT-C; however, it is optional.

Does my site have to complete SUPRT, if we completed GPRA?

The transition from GPRA to SUPRT does not affect SOR data reporting requirements. All SOR IV projects utilizing grant funding for direct treatment and recovery services for clients with an opioid or stimulant use disorder diagnosis must have client-level data collected using a SAMHSA-approved measurement tool. This data will now be collected using the SUPRT.

Which clients should receive SUPRT?

Clients who meet the following criteria must have SUPRT completed:

- » Clients who are underinsured or uninsured and are receiving medication, counseling, or recovery services funded by the grant.

- » Clients who are receiving medical services (medications, screening, immunizations, etc.) from a physician, nurse, or other provider whose salary is funded fully or partially by the grant.
- » Clients who are receiving counseling, peer support, or case management services from a staff member whose salary is funded fully or partially by the grant.

Clients who are not receiving treatment or recovery services should not complete SUPRT. Examples include:

- » Clients engaged only in prevention and education activities.
- » Clients who are receiving screening or referral services but have not yet been admitted for substance use treatment or recovery services.
- » Clients whose only interaction with a grant-funded staff member is with administrative/front desk support staff.

What site staff should complete SUPRT?

SAMHSA does not offer specific guidance regarding the types of staff members that should collect and submit SUPRT data, but there are a few important things to keep in mind:

- » The staff member responsible for SUPRT-A should have access to necessary client records.
- » Site staff should communicate to clients about the sensitive nature of the SUPRT-C questions and let them know they are free to skip any question or decline the survey.
- » The SUPRT-C survey should take place in a quiet location free from distractions or interruptions, to ensure privacy and comfort for the client.
- » Sites should ensure that any staff who may conduct the SUPRT have received the SUPRT training – either by attending a training webinar or viewing training videos on the [SUPRT Resources Page](#).
- » Because of the sensitivity of the survey, sites often designate a counselor, case manager, peer recovery support specialist, or MAT navigator to offer and collect consent for the SUPRT-C.

Is SUPRT required?

Providers must complete SUPRT-A for all eligible clients. Clients may decline to complete SUPRT-C, with no impact on their access to treatment services. Clients who choose to complete SUPRT-C surveys may decline to answer any items they do not want to answer or stop the survey at any time.

Please refer to the [SUPRT Client-Facing Flyer](#) and the SUPRT Consent Forms on the [SUPRT Resources webpage](#) for information to share with clients.

How will SUPRT-A be completed?

Site staff will complete questions included in the SUPRT-A tool using information regarding behavioral health history, screenings, diagnoses, and services documented in the client’s record. Site staff are not required to conduct interviews with clients to complete the SUPRT-A survey.

How will SUPRT-C be administered to clients?

Clients or caregivers will complete the age-specific SUPRT-C by responding directly to demographic, physical and mental health, social drivers of health, and treatment goals and outcomes questions. Clients can enter their responses directly onto the form or work with site staff to complete. Site staff may allow clients to complete the SUPRT-C questionnaire electronically on a computer or tablet or on paper while in office. Questionnaires completed on paper must be entered into REDCap by site staff.

When should SUPRT data be collected?

There are four assessment time points for SUPRT-A: baseline, 6-month reassessment, annual assessment, and closeout. SUPRT-A should be completed for adult clients (persons 18 years or older) at all four assessment time points; children and youth clients do not have an annual assessment and only need an assessment at baseline, six months, and closeout.

Site staff must complete the SUPRT-A baseline assessment within 30 days after a client begins treatment services. If the client remains engaged in treatment six months after baseline, site staff must complete the 6-month reassessment. If the client is an adult and remains engaged in treatment for 12 months, site staff must complete the annual assessment. If at any point the client stops engaging in treatment services, site staff must complete a closeout assessment.

If a client chooses to complete SUPRT-C, the client should complete the questionnaire at baseline, a reassessment at six months, and an assessment at 12 months (if the client is an adult), if they are still engaged in treatment services. No SUPRT-C reassessment is necessary after a client discontinues services.

Assessment Timepoint	SUPRT-A	SUPRT-C	Completion Window*
Baseline	Required	Optional	Within 30 days of intake

6-month Reassessment	Required if client is still active	Optional if client is still active	Due 180 days after baseline assessment Completed +/-30 days from due date
Annual assessment	Required if client is still active	Optional if client is still active; only for adult clients	Due every 12-month anniversary of the baseline assessment Completed +/-30 days from due date
Closeout	Required		Due within 30 days of end of episode of care

***Note:** Completion refers to conducting the survey and entering the data into REDCap.

What should I enter if I do not have access to some of the client’s information?

When data requested in the SUPRT-A form are not available for site staff to report through record keeping systems, site staff should select that the data are, “Not documented in records or not documented in records using this standard.”

How long do site staff and clients have to complete the SUPRT surveys?

Site staff must complete SUPRT-A baseline assessments within 30 days of the client beginning services. A 6-month reassessment must be completed six months after the SUPRT-A baseline, if the client is still engaged in services. Site staff will have a window of 30 days prior to and 30 days after the deadline to submit the reassessment. Annual assessments must be completed one year after the SUPRT-A baseline, if the client is still engaged in services, and site staff will have a window of 30 days prior and 30 days after the deadline to submit the assessment. At any point the client completed or discontinues treatment, the site staff must submit a SUPRT-A closeout in REDCap within 30 days.

What are the different SUPRT-C surveys?

There are seven versions of SUPRT-C for CA SOR, which tailor the questions to who the survey respondent is, the age of the client, and assessment timepoint.

- » Adult Client Baseline Form
- » Adult Client Reassessment Form

- » Adult Client Annual Assessment
- » Youth (aged 12 to 17) Client Baseline Form
- » Youth (aged 12 to 17) Client Reassessment Form
- » Child (aged 5 to 17) Caregiver Baseline Form
- » Child (aged 5 to 17) Caregiver Reassessment Form

How do we handle the SUPRT-C for children and youth between ages 12 and 17?

For children and youth aged 12 to 17 enrolled in services, they may complete the SUPRT-C Youth Client Baseline and Reassessment form, or their parent or guardian may complete the SUPRT-C Caregiver Baseline or Reassessment form. Only one survey should be completed for each client. The client and caregiver may choose their preferred survey.

What SUPRT-C survey should we administer if a client is 17 years old at intake, but 18 years old at reassessment?

Clients or caregivers should complete the same age version of the SUPRT-C at each subsequent assessment. For example, if a 17-year-old client chooses to complete the Youth SUPRT-C form at baseline and turns 18 before their reassessment, they will still complete the Youth SUPRT-C form at reassessment rather than the Adult SUPRT-C form.

Are the questions different between the Adult Client, Youth Client, and Caregiver surveys?

Yes, while some of the survey items are the same, the questions in the survey are tailored to the individual completing the survey. The Adult Client Baseline survey includes the Client-Reported Core Outcomes section that inquires about the client's life circumstances and goals for participating in the program; this section is not included in the Youth Client or Caregiver surveys. The language in the Caregiver survey is tailored to ask about the youth client, not the caregiver.

When should we offer the SUPRT-C Client survey or SUPRT-C Caregiver survey?

It depends on the age of the client, client's preference, and abilities. In general, the SUPRT-C Adult Client survey should be given to adults aged 18 and older. For clients aged 5 to 11 years, caregivers should complete the Caregiver form on behalf of the

child. For youth aged 12 to 17 years, the client can complete the Youth form independently.

Please note, even if the youth client is completing the SUPRT-C Youth Client survey directly, parent or guardian consent is required before data collection.

How do we complete the SUPRT-A Demographics section if the client declined to complete SUPRT-C?

If the client chooses to complete SUPRT-C, site staff do not need to complete the Demographics section in SUPRT-A. If the client declines to complete SUPRT-C, site staff will complete the SUPRT-A Demographics section using information **provided by the client**. This can be information taken from internal records, such as an intake form where the client responded directly to demographic questions, or the site staff may ask the client the questions in the SUPRT-A Demographics section. Site staff should not make assumptions about a client's demographics when completing this section; the responses must come from the client directly.

Is SUPRT anonymous?

SUPRT is anonymous and does not gather any identifying information from the client. Site staff will assign all SUPRT-eligible clients unique IDs. When creating client IDs, it is important that the identifier does not include any identifying information, such as the client's date of birth, last four digits of their social security number, or last four digits of their medical record number.

What if a client is covered by Medi-Cal? Do site staff need to submit SUPRT for the client?

If a client is covered by Medi-Cal but receiving services from a provider who is funded by the SOR grant, the client would still need to receive SUPRT.

What if clients leave and return to treatment? Do we need to complete a new SUPRT?

If your program has an existing discharge definition or policy, please follow that definition or policy and conduct the closeout assessment at that time.

If your program does not have a discharge definition or policy, SAMHSA recommends completing the closeout assessment for clients for whom 30 days have elapsed from the time you last had contact with the client.

If the client returns to treatment after being closed out, site staff should complete a new SUPRT-A baseline assessment using the same SUPRT Client ID previously assigned to

the client. **Site staff will access the Survey Queue found in the [SUPRT Data Dashboard](#) for the client to complete the new intake, not the intake survey link.**

Do clients receiving services under multiple SAMHSA grants need to have more than one SUPRT completed on their behalf?

Clients served under multiple **SOR grants** (e.g., Hub & Spoke System (H&SS), Low-Barrier Syringe Services Programs (SSP), Youth Opioid Response (YOR)) should not have multiple SUPRT forms completed. For these clients, site staff should complete one SUPRT form for the grant that primarily funds the client's direct treatment services.

Each client receiving services under a **SAMHSA grant, such as SOR or another program**, must have a SUPRT completed. If a client begins services under one grant before receiving services under another grant, a separate SUPRT must be conducted at the start of services for each grant. However, if a client begins services under both grants at the same time, only one SUPRT must be completed. The completed SUPRT will need to be submitted separately for each grant.

If your organization completes SUPRT for clients served under another grant, such as the Tribal Opioid Response (TOR), continue to submit those forms as you normally would. For clients served under SOR grants, submit the forms in REDCap as outlined in the SUPRT Handbook on the [SUPRT Resources for SOR Contractors webpage](#).

Can I submit an exemption form for my CA SOR site, if we collect GPRA for another grant, for example CA TOR?

No, a separate SUPRT must be completed for each grant that is serving the client.

If we have a provider whose salary is only partially paid for by SOR, will a client seeing that provider need to have SUPRT-A completed if their services are covered by Medi-Cal?

Yes, clients seeing a provider whose salary is funded, either in part or in full, by a SOR grant must have a SUPRT-A form completed and be offered the SUPRT-C survey.

How should we track clients who have completed SUPRT?

Please use the [SUPRT and Incentives Tracker Template](#) on the [SUPRT Resources for Contractors webpage](#) to assist with SUPRT tracking and data management efforts. If you wish to develop a different tracker, the tracker must include, at a minimum:

- » Project and Site

- » Client first and last name
- » Client SUPRT ID
- » Client enrollment date
- » Client consent
- » Client contact information
- » Status dates of baseline, six-month reassessment, annual assessment, and closeout assessments
- » Provision of SUPRT incentive gift cards

What types of client services does the SUPRT-A ask about?

The SUPRT-A asks about services that the client received at both reassessments and closeout. Services include a wide range of behavioral health interventions such as case or care management, counseling, medications including medication for addiction treatment (MAT), crisis support, recovery support, and integrated care services.

GPRA to SUPRT Transition

How will existing GPRA clients be transitioned to SUPRT?

Active clients who have already completed either a GPRA intake or follow-up will move into the SUPRT-A assessment cycle without needing to complete SUPRT-C. Site staff will complete the SUPRT-A for existing clients at their next reassessment or closeout, whichever the client's next care event is.

For example, a client who has had a GPRA intake completed prior to September 1, 2025, will have a SUPRT-A reassessment as their next touchpoint. If a client has already completed a GPRA intake and GPRA follow-up prior to September 1, 2025, their next assessment will either be an annual or closeout SUPRT-A, depending on whether the client remains engaged in treatment or leaves treatment.

Will existing GPRA clients need new Client IDs for SUPRT?

No, existing clients will retain their GPRA Client IDs when they transition to SUPRT.

Will my site receive a new Site ID for SUPRT?

No, Site IDs will remain the same as those used for GPRA.

Does my site need to discharge all GPRA clients to transition them to SUPRT?

No, GPRA clients do not need to be discharged to transition to SUPRT. All existing GPRA clients will automatically move into the SUPRT reassessment cycle, and SUPRT surveys will be available from existing client's Survey Queues after October 1, 2025.

What are the primary differences between the GPRA and the SUPRT tools?

- » The SUPRT includes one additional data collection time point for clients 18 years and older: the Annual Reassessment.
- » The SUPRT offers two tool options for clients 12-17 – a form completed by the client themselves and a form completed by the caregiver. The client may choose their preferred tool.
- » Unlike the GPRA which was strictly interview-style, the SUPRT-A can be completed with client health records and the SUPRT-C can be self-reported by the client.
- » Unlike GPRA follow-up, which was required for all clients that had completed a GPRA intake, SUPRT reassessment is only intended for clients still active in treatment. After a closeout SUPRT has been completed for the client, they do not need a reassessment.

Will the links to enter data remain the same for SUPRT as they were for GPRA?

No, the intake survey link is different for SUPRT. Please use the [REDCap SUPRT Baseline Link](#) to enter baseline SUPRTs.

The link to access all existing client survey queues is also different. Please use the [CA SOR SUPRT Data Dashboard Link](#) to log into your organization's Dashboard to see a list of all clients and URLs to their survey queues.

Will there be a new tracking log shared for SUPRT data management?

Yes, a SUPRT [client tracking spreadsheet](#) template is available on the SUPRT Resources webpage.

Survey Timing

How do we handle clients who are receiving long-term treatment (more than one year)?

Adult clients 18 years and older receiving long-term treatment should have an annual assessment completed when due and a closeout assessment when they leave treatment.

My project will be administering SUPRT to youth. Are there any differences in the reassessment timeline for this age group?

Youth should also receive the SUPRT-A baseline assessment when they begin services, the six-month reassessment, and the closeout assessment when they are discharged or leave treatment. There is no SUPRT-C annual assessment form for children and youth.

If the client leaves treatment around the 6-month mark or 12-month mark, can the six-month reassessment/annual reassessment and closeout assessment be completed in the same form?

The six-month reassessment and annual assessment must be completed separately from closeout assessments. If a client leaves treatment near the six-month reassessment or annual assessment, site staff will need to complete both SUPRT-A forms.

The typical episode of care for my clients is very short. Many clients may end up with baseline and closeout assessment dates very close to one another. Do I still have to collect both records?

Yes, both assessments are required regardless of the amount of time between the two; however, a client's last day of services cannot be the same date as the first day of services.

We missed collecting the assessment during the window period, should we still enter in a record?

For baseline or closeout assessments that were not done during the window for data collection (30 days after intake or closeout), a SUPRT-A assessment should be done as soon as possible, even if the window closed.

For reassessment and annual assessments that were not done during the window for data collection (30 days prior to or after the assessment due date), no assessment record is required. The site staff can complete the next assessment due.

Consent Forms

Is the consent form needed at baseline, six-month reassessment, annual assessment, and closeout?

No, the consent form only needs to be completed at baseline. Clients may decline to participate in subsequent assessments, even if they consented to the baseline survey.

Do clients need to provide written consent for SUPRT-C participation?

No, the consent form only needs to be completed verbally with clients. By answering the SUPRT-C questions, the client consents to participate. However, site staff must record all client consent using the appropriate provided consent form. For example, for adult clients 18+, site staff will fill, sign and date the Adult Client SUPRT-C Consent Form. Consent forms only need to be saved for your site's records; they do not need to be submitted to DHCS, Aurrera Health Group, or your SOR Administrative Entity.

If a client declines to participate in a SUPRT-C assessment, should they be offered to complete future assessments?

Yes, site staff should still offer clients or caregivers the opportunity to complete future assessments, as long as a SUPRT-A baseline was completed. A client's decision to decline a SUPRT-C assessment applies only to that specific assessment (i.e., baseline, reassessment, or annual).

Do we have to complete SUPRT-A if the client does not consent to SUPRT-C?

Yes, SUPRT-A must be completed for all eligible clients. SUPRT-C is optional, and client consent must be obtained before SUPRT-C data can be collected.

Are there any special considerations for gathering consent from youth?

Yes, for individuals under age 18, a parent or guardian's consent is required for SUPRT-C, even if the youth (aged 12 to 17) will be completing the SUPRT-C Youth Client Baseline and Reassessment forms. If the parent or guardian is not available, SUPRT-C data cannot be collected for that client.

Where can I find PDF versions of the survey and consent forms for clients?

PDF versions of the SUPRT-A/C and SUPRT-C consent forms for clients can be found on the [SUPRT Resources Page](#).

Can I complete SUPRT-A in REDCap before the client has been offered SUPRT-C?

Site staff must ask the client whether they wish to participate in SUPRT-C before beginning SUPRT-A in REDCap. The SUPRT-C form will not appear in the client's survey queue unless consent has been gathered from the client and the site staff select "Yes," indicating that the client consents to SUPRT-C on the Start Form. **Please ensure that the SUPRT-A Start Form is only completed once SUPRT-C consent/non-consent has been obtained from the client.**

Baseline Assessments and Client IDs

How do I start a new baseline assessment for a client?

Use the link [CA SOR SUPRT Baseline Survey Link](#) to begin a new client baseline assessment. The baseline survey link should only be used for **new clients**. If the client is returning to treatment, please find their survey queue URL in the [CA SOR SUPRT Data Dashboard](#) and complete a new active record for this client.

How do we create the client ID?

To create the client ID that will identify a client across baseline, reassessments, and closeout, begin by entering the unique identifier or prefix for this client; this will be a set of four numbers between 0000 and 9999 (example: 1234). These four digits should not include any personally identifiable information, such as a date of birth, social security number, or medical record number.

Once you have assigned a unique four-digit ID, enter the 3-letter identifier for the project (ex: HSS for Hub & Spoke, YOR for Youth Opioid Response). Then enter the site identifier, which is found in the SUPRT Handbook.

As an example, a client with the identifier of 1234 served under Hub & Spoke System (HSS) Funds at Organization NAH01 would have an identifier with the following format: 1234HSSNAH01.

As a reminder, active clients who were assigned IDs under GPRA should not be assigned new IDs. Please use the client's same ID for any subsequent SUPRT surveys to ensure the client's records can be correctly tracked across time.

Do we need to assign client IDs to clients who decline to participate in SUPRT-C?

Yes, because site staff must complete SUPRT-A for all clients, please create a client ID for all SUPRT-eligible clients. If a client declines to participate in SUPRT-C, you will access REDCap, create a Client ID and indicate 'No' when asked if the client consented to participate. Then site staff will complete SUPRT-A for this client.

Should client IDs be changed between grant cycles or when someone leaves and re-enters services?

No, clients will maintain the same ID across grant cycles and episodes of care. This ensures that we can recognize the same patient across grant periods.

What if it was not possible to administer SUPRT during the intake process and the client does not come back?

In this case, you do not need to complete a SUPRT-C or a SUPRT-A. SUPRT-C is optional for the client to complete, and SUPRT-A does not need to be completed if the client's first day and last day of services are the same date.

How do we handle clients with limited or no information available for the SUPRT-A? Can site staff skip SUPRT-A questions if the information is not available?

Yes, site staff can skip SUPRT-A questions if the information is not available in the client's health records. For most SUPRT-A questions there is a "Not documented in records or not documented in records using this standard" option for site staff to select if the information is not available for the client.

Reassessment and Closeout

Do we have to complete reassessments with clients that have left the program?

No, 6-month and annual reassessments are only intended for clients still active in treatment. Staff will complete a closeout form once the client leaves the program or is discharged. There is no requirement to reassess any clients that have been closed out.

Is there a follow-up rate we need to meet for the six-month reassessments and annual assessments?

All clients that are eligible for SUPRT are expected to have a SUPRT-A completed at all data collection time points (intake for all clients, closeout for all clients, 6-month and annual reassessments for clients still active in care when windows open). There are no

intake or reassessment rates for SUPRT-C, as it is optional. However, it is anticipated that a SUPRT-C will be offered to all eligible clients/caregivers.

If we cannot reach a client for their six-month reassessment or annual assessment, how should we document this client?

Because only SUPRT-A is required to be completed, site staff will complete the SUPRT-A form on behalf of the client without contacting the client or having the client complete SUPRT-C.

As a reminder, SAMHSA recommends completing the closeout assessment for clients for whom 30 days have elapsed from the time you last had contact with the client. If the client cannot be contacted and 30 days have elapsed, site staff should complete SUPRT-A record closeout. In the SUPRT-A form, under Section A. Record Management, Question A6, site staff should select "No Contact" as the reason for closing out the client's record.

Does the reassessment require an in-person administration, or can it be done by phone or an online link?

SUPRT-A does not require the client to be present as it can be completed using only what is available in the client's record. We do not currently offer an online link for clients to complete the SUPRT-C reassessments independently; these surveys are intended to be completed during a care event.

Many of our clients are unhoused and may be difficult to contact. What is the expectation for completing SUPRT reassessments and closeout for these clients?

Because SUPRT-A can be completed using information in the client's medical record and does not require an interview or the completion of SUPRT-C, site staff must complete six-month reassessments and annual assessments for clients still engaged in treatment services or a closeout form if the client has left treatment. The SUPRT-C is optional for clients or caregivers to complete. See above for guidance on reassessments for clients that cannot be contacted.

Incentives

Can I provide an incentive for the client to complete SUPRT-C?

SOR funding may be used to pay for incentives, with a maximum of \$30 per survey. Incentives are currently permitted for SUPRT-C reassessments only. Incentives are not permitted for SUPRT-A forms or SUPRT-C intake surveys. Incentives may include items such as food vouchers, transportation vouchers, or phone cards.

This is temporary guidance and should only be followed while awaiting official SAMHSA SUPRT policy updates.

At what assessment time points am I allowed to offer a gift card incentive?

Incentives are currently permitted for SUPRT-C reassessments only. Incentives are not permitted for SUPRT-A forms or SUPRT-C intake surveys. However, a client must have completed a SUPRT-C baseline survey to be eligible for the SUPRT-C reassessment incentive.

How should we track SUPRT Incentives?

Sites should implement a system to track gift cards and incentives provided to individuals for completing their SUPRT-C six-month or annual reassessment surveys. The tracking system should include:

- » What client received the incentive (noted by client ID)
- » Type of survey (six-month reassessment, annual reassessment)
- » Type of incentive (food voucher, transportation voucher, or phone card)
- » Amount (maximum \$30)
- » Date provided to the client
- » Staff member providing the gift card

Survey Submission

How do we submit the assessments?

Site staff will submit all baseline, six-month reassessments, annual assessments, and closeouts through the REDCap portal. Site staff will use the [CA SOR SUPRT Baseline Survey Link](#) to complete the baseline survey for all clients. Site staff will access the [California SOR SUPRT Data Dashboard](#) to see which existing clients have upcoming reassessments and closeouts to complete. The dashboard will have REDCap survey links unique to each client for their 6-month reassessment, annual reassessment, and closeout.

To access REDCap, site staff will need reliable internet connection and a desktop, laptop, or tablet. Clients completing SUPRT-C surveys electronically will be able to submit their surveys directly through REDCap. For clients completing the surveys on paper, site staff will need to enter survey responses for the client in REDCap.

What is REDCap?

Research Electronic Data Capture (REDCap) is a HIPAA-compliant, web-based application developed by Vanderbilt University to capture data for clinical research and create databases and projects. REDCap allows Aurrera Health Group to upload SUPRT-A and SUPRT-C data directly to SAMHSA's SPARS portal.

What is the California SOR SUPRT Dashboard?

The CA SOR SUPRT dashboard tracks which of your site's clients are due for reassessments and closeouts and links to the next assessment to complete in REDCap. It replaces the need for specific REDCap report pages for each site. The dashboard lists all clients who have had a SUPRT-A baseline completed and their corresponding REDCap survey links when the client is due for reassessment, annual assessment, or closeout.

Do I need a user account to access REDCap?

No, you do not need a user account to access REDCap. You only need the intake survey link and individualized client Survey Queue links for data submission in REDCap. There is no limit to the number of site staff that can enter data in REDCap.

Do I need a user account to access the CA SOR SUPRT Dashboard?

Yes, you will need an organization email address and password to access the dashboard. This will likely be a shared username (email address) and password that multiple staff at your site who enter SUPRT data have access to.

Will each team member have their own dashboard user account, or will there be one for the whole organization?

As of December 2025, sites will have one email address and password that staff at their site responsible for entering SUPRT data may use to log into the SUPRT Data Dashboard. Sites provided the preferred email address to use as the username through a survey submitted in November.

If you have issues accessing the Data Dashboard, please contact DHCSReporting@aurrerahealth.com

How do we get dashboard access for new staff?

New staff will be able to use the site-level credentials to log into the Data Dashboard. Please remember that all new staff are required to complete mandatory SUPRT training before beginning to collect and enter SUPRT data. Please contact DHCSReporting@aurrerahealth.com with any questions.

How do I access the full list of clients in the Dashboard?

Once you log into the SUPRT Dashboard, you will see the Enrollment History tab with list of all clients who have ever had a GPRA or SUPRT intake form completed in REDCap. The full client list will include links to each client's survey queue in REDCap to complete reassessment and closeout surveys when needed.

What are the open reassessment windows on the Dashboard?

The Open Reassessments tab of the SUPRT Dashboard shows all clients at your site with open reassessment windows. This means that they are due to have either a 6-month or annual reassessment completed. The first window shows all open 6-month reassessments; the bottom window shows all open annual reassessments.

These windows show the reassessment due date, which is the date exactly 6-months or 12-months after their intake. However, the reassessment window opens 30 days prior to this date and closes 30 days after. This means site staff must complete and submit the SUPRT reassessment forms no later than 30 days after the reassessment due date. For example, if a client's intake date was January 1, their 6-month reassessment will be June 1. The window to complete and submit the SUPRT forms will open on May 1 and close on July 1. Site staff must complete and submit the forms no later than July 1.

Their information in the 6-month reassessment window for this client will read:

Client ID	Intake Date	Reassessment Due	Reassessment Window Open	Reassessment Window Close	Survey Queue
1234TEST	2026-01-01	2026-06-01	2026-05-01	2026-07-01	EXAMPLEURL.redcap.vumc.org

I completed a client's reassessment today, but they still appear on the reassessment window when I refresh the page.

SUPRT Dashboards are refreshed every 24 hours, so it is possible if you complete a reassessment or a discharge, the client will still appear in the reassessment windows until the following day when the system refreshes.

Will my facility be notified if our assessments had any errors or were not approved?

Yes, if there are issues with the submission, you will be notified via email and asked for clarification.

Can I send SUPRT PDFs instead of completing the form in REDCap?

No, all sites must submit SURPT data through the REDCap system only.

Can I save an assessment and return to it later?

Yes, use the “Save & Return” function in REDCap to save the assessment and come back at a later time to finish and submit. REDCap will provide a return code and request your email address, where it will send a link to finish the assessment. Please save the return code separately as it will not be provided in the email with the assessment link.

Can more than one person complete the SUPRT assessment through REDCap?

There are two approaches for allowing two people to complete the SUPRT forms:

- » Internal communication between the two survey completers: Have the two completers (for example, a counselor and a MAT program coordinator) communicate before and after each survey. For example, the MAT coordinator would let the counselor know the client ID and any other relevant information for the interview, before the counselor completes the survey with the client. The counselor would then communicate back any relevant information to the coordinator (did the person decline, was the survey completed, etc.), who will track it in the site’s tracking log.
- » REDCap “Save & Return Later”: Use the “Save & Return Later” function to allow two survey completers. The first completer will complete their portion of the survey, then select “Save & Return Later” on the bottom right hand of the page. This will provide a link to come back and access the survey. That completer will send the link email to themselves and once received, forward the email along with the client ID for the survey and the return code (provided on the “Save & Return Later” Page) to the completer who will be finishing and submitting the survey. It is essential that the return code is added into the forwarded email, because it is not included in the original email sent from REDCap.

Can the SUPRT-A and SUPRT-C be entered at different times by different staff members?

Yes, SUPRT-A and SUPRT-C can be entered at different times by different staff. However, SUPRT-A must be completed before SUPRT-C will be available in the REDCap survey queue.

Will paper versions of the survey be available?

Yes, PDF versions of the surveys are available on the [SUPRT Resources webpage](#), and we encourage sites to print these copies for pen-and-paper data collection, if helpful. All SUPRT data captured on paper must be entered in REDCap. DHCS will not accept paper surveys in replacement of REDCap SUPRT submissions.

If a patient fills out a SUPRT-C via paper, can the survey be scanned and added to the patient's electronic health record?

No, SUPRT data must be kept separate from any patient identifiable information. The survey cannot be added to the patient's electronic health record.

How do I change or edit a survey submitted through REDCap?

Surveys cannot be edited after they are submitted. If you need to make a change to a survey after you have already submitted it, reach out to Aurrera Health Group at DHCSReporting@aurrerahealth.com and we will make the change.

I lost the return code to return to a survey I saved. How do I get it back?

Email Aurrera Health Group at DHCSReporting@aurrerahealth.com and we will provide you with the return code.

Who can we contact if technical issues prevent us from completing data entry in REDCap?

For any technical issues, please contact the Aurrera Health Group at DHCSReporting@Aurrerahealth.com for assistance. The team can guide you through troubleshooting steps or facilitate manual adjustments.