



Arorp Hero Milestones

Award ID Number

23-032

When discussing milestones please include names, dates, and locations

Please discuss your milestones completed this quarter

* must provide value

NA

1st Quarter

Designate staff

* must provide value

No
 Yes

Develop naloxone training(s)

* must provide value

No
 Yes

Develop education materials

* must provide value

No
 Yes

2nd Quarter

Implement naloxone training(s)

* must provide value

No
 Yes

3rd Quarter

Implement naloxone training(s)

* must provide value

No
 Yes

4th Quarter

Complete naloxone distribution

* must provide value

No
 Yes

Form Status

Complete?

Complete ▼