

Arorp Award

Please complete the survey below.Thank you!

| | |
|---|---|
| 1) Name of Organization | Sebastian County Sheriff's Department ORT |
| 2) Award Type | <input type="radio"/> Hero <input type="radio"/> COPE <input checked="" type="radio"/> ORT <input type="radio"/> General <input type="radio"/> Direct <input type="radio"/> Life |
| 3) List of counties your award serves | Sebastian and Crawford Counties |
| 4) Name of Project | Sebastian County Sheriff's Department ORT |
| 5) How much funding has been distributed? (100.00) | 418658.37 |
| 6) How much naloxone funding has been distributed? (100.00) | _____ |

Arorp Admin And Budget

Please complete the survey below. Thank you!

Response was added on 03/18/2024 3:53pm.

ARORP Administrative and Budgetary Materials (For this project in this quarter)

- | | |
|--|---|
| 1) Year (The calendar year you are currently in) | <input type="radio"/> 2023 <input checked="" type="radio"/> 2024 <input type="radio"/> 2025 <input type="radio"/> 2026 |
| 2) Month (The calendar month you are currently in) | <input type="radio"/> January <input type="radio"/> February <input checked="" type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December |
| 3) What quarter is your report for? | <input checked="" type="radio"/> Quarter 1 <input type="radio"/> Quarter 2 <input type="radio"/> Quarter 3 <input type="radio"/> Quarter 4 |
| 4) Accomplishments and/or Setbacks | We have been meeting with Chief's of police in Sebastian and Crawford Counties. Making sure they know we are here to help and assist with opioid investigations. |
| 5) Annotated Budget | [FILE: Quarterly Annotated Budget.xlsx] |
| 6) Supplemental Material | [FILE: inside brochure.pdf] |

Arorp Admin And Budget

Please complete the survey below. Thank you!

Response was added on 05/01/2024 1:24pm.

ARORP Administrative and Budgetary Materials (For this project in this quarter)

- | | |
|--|---|
| 1) Year (The calendar year you are currently in) | <input type="radio"/> 2023 <input checked="" type="radio"/> 2024 <input type="radio"/> 2025 <input type="radio"/> 2026 |
| 2) Month (The calendar month you are currently in) | <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input checked="" type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December |
| 3) What quarter is your report for? | <input type="radio"/> Quarter 1 <input checked="" type="radio"/> Quarter 2 <input type="radio"/> Quarter 3 <input type="radio"/> Quarter 4 |
| 4) Accomplishments and/or Setbacks | Just finished drug take back event. We collected 380 lbs of prescription medications. |
| 5) Annotated Budget | [FILE: Quarterly Annotated Budget.xlsx] |
| 6) Supplemental Material | |

Arorp Admin And Budget

Please complete the survey below. Thank you!

Response was added on 07/29/2024 5:45pm.

ARORP Administrative and Budgetary Materials (For this project in this quarter)

- | | |
|--|---|
| 1) Year (The calendar year you are currently in) | <input type="radio"/> 2023 <input checked="" type="radio"/> 2024 <input type="radio"/> 2025 <input type="radio"/> 2026 |
| 2) Month (The calendar month you are currently in) | <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input checked="" type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December |
| 3) What quarter is your report for? | <input type="radio"/> Quarter 1 <input type="radio"/> Quarter 2 <input checked="" type="radio"/> Quarter 3 <input type="radio"/> Quarter 4 |
| 4) Accomplishments and/or Setbacks | None |
| 5) Annotated Budget | [FILE: Quarterly Annotated Budget.xlsx] |
| 6) Supplemental Material | |

Arorp Admin And Budget

Please complete the survey below. Thank you!

Response was added on 10/30/2024 6:15pm.

ARORP Administrative and Budgetary Materials (For this project in this quarter)

- 1) Year (The calendar year you are currently in)
- 2023
 2024
 2025
 2026
-
- 2) Month (The calendar month you are currently in)
- January
 February
 March
 April
 May
 June
 July
 August
 September
 October
 November
 December
-
- 3) What quarter is your report for?
- Quarter 1
 Quarter 2
 Quarter 3
 Quarter 4
-
- 4) Accomplishments and/or Setbacks
- We are continuing to work and build relationships with the community. Through community gatherings, educational material and social media.
-
- 5) Annotated Budget
- [FILE: Quarterly Annotated Budget.xlsx]
-
- 6) Supplemental Material

Arorp Ort Milestones

Please complete the survey below. Thank you!

Response was added on 03/18/2024 3:47pm.

When discussing milestones please include names, dates, and locations

- 1) Please discuss your milestones completed this quarter
 - Hired investigator 12/9/2023 salary
 - Hired peer support specialist 12/4/2023
 - Submitted first ARORP report 1/30/24
 - Data tracking system: uploaded into quarterly reporting form.
 - Developed educational materials.
 - Recovery support system launched.

1st Quarter

- 2) Hire law enforcement investigator
 - No
 - Yes

- 3) Hire peer specialist(s)
 - No
 - Yes

- 4) Develop recovery support program
 - No
 - Yes

- 5) Develop education materials
 - No
 - Yes

2nd Quarter

- 6) Continue recovery support program
 - No
 - Yes

3rd Quarter

- 7) Continue recovery support program
 - No
 - Yes

4th Quarter

- 8) Yearly ARORP evaluation meeting
 - No
 - Yes

1st Quarter

- 9) Continue recovery support program No Yes

2nd Quarter

- 10) Continue recovery support program No Yes

3rd Quarter

- 11) Continue recovery support program No Yes

4th Quarter

- 12) Continue recovery support program No Yes
-
- 13) Attended yearly ARORP evaluation meeting No Yes

Arorp Ort Milestones

Please complete the survey below. Thank you!

Response was added on 04/29/2024 2:10pm.

When discussing milestones please include names, dates, and locations

- 1) Please discuss your milestones completed this quarter
- Ma1 2nd set of milestones
Continuing recovery support system
Data Tracking system in place,
Submitted quarterly ARORP report

1st Quarter

- 2) Hire law enforcement investigator No
 Yes
- 3) Hire peer specialist(s) No
 Yes
- 4) Develop recovery support program No
 Yes
- 5) Develop education materials No
 Yes

2nd Quarter

- 6) Continue recovery support program No
 Yes

3rd Quarter

- 7) Continue recovery support program No
 Yes

4th Quarter

- 8) Yearly ARORP evaluation meeting No
 Yes

1st Quarter

- 9) Continue recovery support program No
 Yes

2nd Quarter

- 10) Continue recovery support program No
 Yes

3rd Quarter

- 11) Continue recovery support program No
 Yes

4th Quarter

- 12) Continue recovery support program No
 Yes
-
- 13) Attened yearly ARORP evaluation meeting No
 Yes

Arorp Ort Milestones

Please complete the survey below. Thank you!

When discussing milestones please include names, dates, and locations

- 1) Please discuss your milestones completed this quarter

1st Quarter

- 2) Hire law enforcement investigator No
 Yes
- 3) Hire peer specialist(s) No
 Yes
- 4) Develop recovery support program No
 Yes
- 5) Develop education materials No
 Yes

2nd Quarter

- 6) Continue recovery support program No
 Yes

3rd Quarter

- 7) Continue recovery support program No
 Yes

4th Quarter

- 8) Yearly ARORP evaluation meeting No
 Yes

1st Quarter

- 9) Continue recovery support program No
 Yes

2nd Quarter

- 10) Continue recovery support program No
 Yes

3rd Quarter

- 11) Continue recovery support program No
 Yes

4th Quarter

- 12) Continue recovery support program No
 Yes
-
- 13) Attened yearly ARORP evaluation meeting No
 Yes

Arorp Ort Milestones

Please complete the survey below. Thank you!

Response was added on 10/30/2024 5:46pm.

When discussing milestones please include names, dates, and locations

- 1) Please discuss your milestones completed this quarter
- We are continuing recovery support program, attending National Night Out , drug take back and other community events. Our goal for coming year will be to design more educational materials, for breaks rooms, and lunch areas at local businesses and factories. Along with attending community gatherings. So we have even more exposure.

1st Quarter

- 2) Hire law enforcement investigator No
 Yes
- 3) Hire peer specialist(s) No
 Yes
- 4) Develop recovery support program No
 Yes
- 5) Develop education materials No
 Yes

2nd Quarter

- 6) Continue recovery support program No
 Yes

3rd Quarter

- 7) Continue recovery support program No
 Yes

4th Quarter

- 8) Yearly ARORP evaluation meeting No
 Yes

1st Quarter

- 9) Continue recovery support program No
 Yes

2nd Quarter

- 10) Continue recovery support program No
 Yes

3rd Quarter

- 11) Continue recovery support program No
 Yes

4th Quarter

- 12) Continue recovery support program No
 Yes
-
- 13) Attended yearly ARORP evaluation meeting No
 Yes

Arorp Overdose Response

Please complete the survey below. Thank you!

Response was added on 03/18/2024 3:37pm.

(For this project in this quarter)

| | |
|---|-----------|
| Counties where the overdoses occurred (for example, Benton - 3) | Sebastian |
|---|-----------|

| | |
|---------------------------|---|
| Number of fatal overdoses | 4 |
|---------------------------|---|

| | |
|-------------------------------|---|
| Number of non-fatal overdoses | 3 |
|-------------------------------|---|

| | |
|---|---|
| Number of fatal and non-fatal overdoses related to opioid use | 7 |
|---|---|

| | |
|--|---|
| Number of people referred to treatment | 3 |
|--|---|

| | |
|---|-------|
| Number of those referred who received treatment | _____ |
|---|-------|

| | |
|---|----|
| Number of referrals to mental health services | 29 |
|---|----|

| | |
|---------------------------------------|---|
| Number of people referred to recovery | 2 |
|---------------------------------------|---|

| | |
|--------------------------|---|
| Number of naloxone saves | 3 |
|--------------------------|---|

| | |
|------------------------|----|
| Number of cases opened | 12 |
|------------------------|----|

| | |
|------------------------|---|
| Number of cases closed | 3 |
|------------------------|---|

| | |
|--|-------|
| Please briefly explain why cases were closed | _____ |
|--|-------|

| | |
|--|---|
| Number of one-on-one peer support meetings with families of overdose victims | 2 |
|--|---|

| | |
|--|---|
| Number of one-on-one peer support meetings with overdose victims | 2 |
|--|---|

| | |
|-------------------|---|
| Number of arrests | 3 |
|-------------------|---|

Age (for all people receiving an ARORP-related overdose response or referral)

0 to 11

12 to 17

0

18 to 25

0

26 to 44

32

45 to 64

4

65 plus

0

Unknown Age

0

Gender (for all people receiving an ARORP-related overdose response or referral)

Male

6

Female

30

Non-Binary

0

Unknown Gender

0

Race (for all people receiving an ARORP-related overdose response or referral)

White

28

Black or African American

4

Asian

0

Native American

0

Pacific Islander

Unknown Race

2

Other Race/Multi-Racial (please specify)

0

Ethnicity (for all people receiving an ARORP-related overdose response or referral)

| | |
|-------------------|----|
| Hispanic | 0 |
| Non-Hispanic | 28 |
| Unknown Ethnicity | 8 |

Arorp Overdose Response

Please complete the survey below. Thank you!

Response was added on 04/29/2024 3:15pm.

(For this project in this quarter)

| | |
|--|---|
| Counties where the overdoses occurred (for example, Benton - 3) | Sebastian 1 Crawford 6 |
| Number of fatal overdoses | 0 |
| Number of non-fatal overdoses | 7 |
| Number of fatal and non-fatal overdoses related to opioid use | 7 |
| Number of people referred to treatment | 7 |
| Number of those referred who received treatment | _____ |
| Number of referrals to mental health services | 36 |
| Number of people referred to recovery | 7 |
| Number of naloxone saves | 7 |
| Number of cases opened | 10 |
| Number of cases closed | 2 |
| Please briefly explain why cases were closed | Cases were closed with arrest for possession of fentanyl. |
| Number of one-on-one peer support meetings with families of overdose victims | 6 |
| Number of one-on-one peer support meetings with overdose victims | 6 |
| Number of arrests | 2 |

Age (for all people receiving an ARORP-related overdose response or referral)

0 to 11

12 to 17

0

18 to 25

41

26 to 44

29

45 to 64

5

65 plus

0

Unknown Age

0

Gender (for all people receiving an ARORP-related overdose response or referral)

Male

7

Female

68

Non-Binary

0

Unknown Gender

0

Race (for all people receiving an ARORP-related overdose response or referral)

White

66

Black or African American

2

Asian

0

Native American

0

Pacific Islander

Unknown Race

7

Other Race/Multi-Racial (please specify)

0

Ethnicity (for all people receiving an ARORP-related overdose response or referral)

| | |
|-------------------|----|
| Hispanic | 0 |
| Non-Hispanic | 75 |
| Unknown Ethnicity | 0 |

Arorp Overdose Response

Please complete the survey below. Thank you!

(For this project in this quarter)

Counties where the overdoses occurred (for example, Benton - 3)

Number of fatal overdoses

Number of non-fatal overdoses

Number of fatal and non-fatal overdoses related to opioid use

Number of people referred to treatment

Number of those referred who received treatment

Number of referrals to mental health services

Number of people referred to recovery

Number of naloxone saves

Number of cases opened

Number of cases closed

Number of one-on-one peer support meetings with families of overdose victims

Number of one-on-one peer support meetings with overdose victims

Number of arrests

Age (for all people receiving an ARORP-related overdose response or referral)

| | |
|-------------|-------|
| 0 to 11 | _____ |
| 12 to 17 | _____ |
| 18 to 25 | _____ |
| 26 to 44 | _____ |
| 45 to 64 | _____ |
| 65 plus | _____ |
| Unknown Age | _____ |

Gender (for all people receiving an ARORP-related overdose response or referral)

| | |
|----------------|-------|
| Male | _____ |
| Female | _____ |
| Non-Binary | _____ |
| Unknown Gender | _____ |

Race (for all people receiving an ARORP-related overdose response or referral)

| | |
|---------------------------|-------|
| White | _____ |
| Black or African American | _____ |
| Asian | _____ |
| Native American | _____ |
| Pacific Islander | _____ |

Unknown Race

Other Race/Multi-Racial (please specify)

Ethnicity (for all people receiving an ARORP-related overdose response or referral)

Hispanic

Non-Hispanic

Unknown Ethnicity

Arorp Overdose Response

Please complete the survey below. Thank you!

Response was added on 07/29/2024 6:14pm.

(For this project in this quarter)

| | |
|--|-------------|
| Counties where the overdoses occurred (for example, Benton - 3) | Sebastian 3 |
| Number of fatal overdoses | 0 |
| Number of non-fatal overdoses | 3 |
| Number of fatal and non-fatal overdoses related to opioid use | 3 |
| Number of people referred to treatment | 11 |
| Number of those referred who received treatment | 13 |
| Number of referrals to mental health services | 5 |
| Number of people referred to recovery | 11 |
| Number of naloxone saves | 0 |
| Number of cases opened | 3 |
| Number of cases closed | 0 |
| Number of one-on-one peer support meetings with families of overdose victims | 3 |
| Number of one-on-one peer support meetings with overdose victims | 3 |
| Number of arrests | 0 |

Age (for all people receiving an ARORP-related overdose response or referral)

| | |
|----------|---|
| 0 to 11 | 0 |
| 12 to 17 | 0 |
| 18 to 25 | 3 |
| 26 to 44 | 0 |
| 45 to 64 | 0 |

| | |
|---------|---|
| 65 plus | 0 |
|---------|---|

| | |
|-------------|---|
| Unknown Age | 0 |
|-------------|---|

Gender (for all people receiving an ARORP-related overdose response or referral)

| | |
|------|---|
| Male | 3 |
|------|---|

| | |
|--------|---|
| Female | 0 |
|--------|---|

| | |
|------------|---|
| Non-Binary | 0 |
|------------|---|

| | |
|----------------|---|
| Unknown Gender | 0 |
|----------------|---|

Race (for all people receiving an ARORP-related overdose response or referral)

| | |
|-------|---|
| White | 3 |
|-------|---|

| | |
|---------------------------|---|
| Black or African American | 0 |
|---------------------------|---|

| | |
|-------|---|
| Asian | 0 |
|-------|---|

| | |
|-----------------|---|
| Native American | 0 |
|-----------------|---|

| | |
|------------------|-------|
| Pacific Islander | _____ |
|------------------|-------|

| | |
|--------------|---|
| Unknown Race | 0 |
|--------------|---|

| | |
|--|---|
| Other Race/Multi-Racial (please specify) | 0 |
|--|---|

Ethnicity (for all people receiving an ARORP-related overdose response or referral)

| | |
|----------|---|
| Hispanic | 0 |
|----------|---|

| | |
|--------------|---|
| Non-Hispanic | 0 |
|--------------|---|

| | |
|-------------------|---|
| Unknown Ethnicity | 0 |
|-------------------|---|

Arorp Training

Please complete the survey below. Thank you!

Response was added on 03/18/2024 5:38pm.

(For this project in this quarter)

| | |
|---|---|
| Number of people trained (For trainings you hosted.) | 25 |
| What counties were impacted by the training(s) held? (for example, Benton county) | Sebastian, Crawford |
| What types of training(s) did you hold? (for example, life skills training) | Peer groups, Life skills, money management, recovery steps, and family management |
| Did you host a training with another organization? (please specify which organization(s)) | Arvest Bank, Western Arkansas guidance and counseling |

Age (for all people receiving ARORP training)

| | |
|-------------|-------|
| 0 to 11 | _____ |
| 12 to 17 | 0 |
| 18 to 25 | 0 |
| 26 to 44 | 15 |
| 45 to 64 | 10 |
| 65 plus | 0 |
| Unknown Age | 0 |

Gender (for all people receiving ARORP training)

| | |
|----------------|----|
| Male | 0 |
| Female | 25 |
| Non-Binary | 0 |
| Unknown Gender | 0 |

| Race (for all people receiving ARORP training) | |
|---|----|
| White | 23 |
| Black or African American | 0 |
| Asian | 0 |
| Native American | 0 |
| Pacific Islander | 0 |
| Unknown Race | 0 |
| Other Race/Multi-Racial (please specify) | 2 |
| Please specify which race | 0 |

| Ethnicity (for all people receiving ARORP training) | |
|--|---|
| Hispanic | 2 |
| Non-Hispanic | 0 |
| Unknown Ethnicity | 0 |

Arorp Training

Please complete the survey below. Thank you!

Response was added on 04/29/2024 3:30pm.

(For this project in this quarter)

| | |
|---|---|
| Number of people trained (For trainings you hosted.) | 26 |
| What counties were impacted by the training(s) held? (for example, Benton county) | Sebastian, Crawford |
| What types of training(s) did you hold? (for example, life skills training) | Life Skills, Documentation assistance, Drivers license, Recovery steps. |
| Did you host a training with another organization? (please specify which organization(s)) | Western Arkansas Guidance and counseling |

Age (for all people receiving ARORP training)

| | |
|-------------|-------|
| 0 to 11 | _____ |
| 12 to 17 | 0 |
| 18 to 25 | 16 |
| 26 to 44 | 10 |
| 45 to 64 | 0 |
| 65 plus | 0 |
| Unknown Age | 0 |

Gender (for all people receiving ARORP training)

| | |
|----------------|----|
| Male | 0 |
| Female | 26 |
| Non-Binary | 0 |
| Unknown Gender | 0 |

| Race (for all people receiving ARORP training) | |
|---|----|
| White | 25 |
| Black or African American | 1 |
| Asian | 0 |
| Native American | 0 |
| Pacific Islander | 0 |
| Unknown Race | 0 |
| Other Race/Multi-Racial (please specify) | 0 |

| Ethnicity (for all people receiving ARORP training) | |
|--|----|
| Hispanic | 0 |
| Non-Hispanic | 26 |
| Unknown Ethnicity | 0 |

Arorp Training

Please complete the survey below. Thank you!

Response was added on 07/29/2024 6:25pm.

(For this project in this quarter)

| | |
|---|--|
| Number of people trained (For trainings you hosted.) | 25 |
| What counties were impacted by the training(s) held? (for example, Benton county) | Sebastian, Crawford, Logon |
| What types of training(s) did you hold? (for example, life skills training) | peer groups, life skills, money management, Faith based, relapse prevention, recovery pathways and SUD education |
| Did you host a training with another organization? (please specify which organization(s)) | Church of Christ, Teen Challenge and Arvest bank |

Age (for all people receiving ARORP training)

| | |
|-------------|----|
| 0 to 11 | 0 |
| 12 to 17 | 1 |
| 18 to 25 | 21 |
| 26 to 44 | 34 |
| 45 to 64 | 20 |
| 65 plus | 3 |
| Unknown Age | 4 |

Gender (for all people receiving ARORP training)

| | |
|----------------|----|
| Male | 34 |
| Female | 24 |
| Non-Binary | 0 |
| Unknown Gender | 0 |

| Race (for all people receiving ARORP training) | |
|--|----|
| White | 26 |
| Black or African American | 4 |
| Asian | 0 |
| Native American | 4 |
| Tribal Affiliation | |
| Pacific Islander | 0 |
| Unknown Race | 1 |
| Other Race/Multi-Racial (please specify) | 0 |
| Ethnicity (for all people receiving ARORP training) | |
| Hispanic | 4 |
| Non-Hispanic | 10 |
| Unknown Ethnicity | 0 |

Arorp Training

Please complete the survey below. Thank you!

Response was added on 10/30/2024 6:08pm.

(For this project in this quarter)

| | |
|---|---|
| Number of people trained (For trainings you hosted.) | 7 |
| What counties were impacted by the training(s) held? (for example, Benton county) | Sebastian, Crawford, Scott |
| What types of training(s) did you hold? (for example, life skills training) | Peer Groups, Life Skills, Money Management, Faith Based, Relapse Prevention, and Recovery Pathways, SUD Education |
| Did you host a training with another organization? (please specify which organization(s)) | Church of Christ Teen challenge, Arvest Bank |

Age (for all people receiving ARORP training)

| | |
|-------------|----|
| 0 to 11 | 0 |
| 12 to 17 | 0 |
| 18 to 25 | 8 |
| 26 to 44 | 26 |
| 45 to 64 | 5 |
| 65 plus | 1 |
| Unknown Age | 8 |

Gender (for all people receiving ARORP training)

| | |
|----------------|----|
| Male | 20 |
| Female | 28 |
| Non-Binary | 0 |
| Unknown Gender | 0 |

| Race (for all people receiving ARORP training) | |
|---|---------|
| White | 30 |
| Black or African American | 7 |
| Asian | 4 |
| Native American | 7 |
| Tribal Affiliation | Unknown |
| Pacific Islander | 0 |
| Unknown Race | 0 |
| Other Race/Multi-Racial (please specify) | 0 |

| Ethnicity (for all people receiving ARORP training) | |
|--|----|
| Hispanic | 13 |
| Non-Hispanic | 35 |
| Unknown Ethnicity | 0 |