

Arorp Ort Milestones

Please complete the survey below.

Thank you!

Description of Milestones

- | | | |
|----|---|--|
| 1) | Please discuss your milestones completed this quarter
Include a brief description of progress made on all
milestones. Include dates items were completed. | We have Continued Our Recovery Support Program
We Had Our Yearly ARORP Evaluation Meeting |
|----|---|--|

1st Report (Year 1)

- | | | |
|----|-----------------------------------|--|
| 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 Report (Year 1)

- | | | |
|----|-----------------------------------|--|
| 6) | Continue recovery support program | ☐ No
☒ Yes |
|----|-----------------------------------|--|

3rd Report (Year 1)

- | | | |
|----|-----------------------------------|--|
| 7) | Continue recovery support program | ☐ No
☒ Yes |
|----|-----------------------------------|--|

4th Report (Year 1)

- | | | |
|----|---------------------------------|--|
| 8) | Yearly ARORP evaluation meeting | ☐ No
☒ Yes |
|----|---------------------------------|--|

5th Report (Year 2)

- | | | |
|----|-----------------------------------|--|
| 9) | Continue recovery support program | ☒ No
☐ Yes |
|----|-----------------------------------|--|

6th Report (Year 2)

- 10) Continue recovery support program ☒ No
☐ Yes

7th Report (Year 2)

- 11) Continue recovery support program ☒ No
☐ Yes

8th Report (Year 2)

- 12) Continue recovery support program ☒ No
☐ Yes

- 13) Attended yearly ARORP evaluation meeting ☒ No
☐ Yes