## Virginia Opioid Abatement Authority Timeline for Cooperative Project

Fiscal Agent:	Culpeper County	
	(Insert name of city or county)	
Project Name:	Overdose Response Unit	

	,												Descriped board on number of expansel years requested to be funded (listed in the parentine coeffice of the application E.b.)																
		REQUIRED											Required based on number of renewal years requested to be funded (listed in the narrative section of the application 5.b)																
	Insert Project Objectives and place an "X" in the appropriate month/year. Add additional objectives as needed.	<u>FY24</u>										<u>FY25</u>				<u>FY26</u>				<u>FY27</u>				<u>FY28</u>					
#	Objective	July	August	September	October	November	December	January	February	March	April	May	June	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1	Create Team Lead Position	Х																									1 1	1 1	
2	Create Peer Recovery Specialist Positions	Х																											
3	Submit Vehicle Lease Requests	Х																											
4	Begin Team Lead Recruiting		Х																								1		
5	Begin Peer Recovery Specialist Postion Recruiting			Х																							1		
6	Fill Team Lead Roll				Х																						1		
7	Fill Peer Recovery Specialits Postions					Х	Х																				1	1	
8	Receive Vehicles						Х	Х																					
9	Establish Response Protocols							Х																					
10	Begin Response - Orange Co							Х	Х																				
11	Begin Response - Culpeper Co								Х	Х																			
12	Begin Response - Fauquier Co									Х	Х																1		
13	Begin Response - Madison and Rappahannock Co										Х	Х	Х														1	7	
14	Project Renewal												Х	Х			Х	Х			Х	Х			Х	Х	1	7	
15																													