**FY23-24 SORIII Recovery Housing Coversheet & Quarterly Report**

**To:** DOH Finance & Management Services Grants & Contracts Section

**Attention Grant Administrator:** Katlyn Felki

**Organization:** Click or tap here to enter text.

**Grant Type:** SORII Recovery Housing

**Grant Number:** Click or tap here to enter text.

**DATE OF GRANT EXECUTION**: Click or tap here to enter text.

**Form submitted by:** Click or tap here to enter text.

**Date:** Click or tap to enter a date.

**Quarter** (choose one)**:** Choose an item.

Maximum number of beds designated for this grant program during the quarter: Click or tap here to enter text.

*\*If this number fluctuated during the quarter, please explain*

Click or tap here to enter text.

How many unduplicated clients have been served during this quarter? Click or tap here to enter text.

Describe agency’s internal process for ensuring GPRA completion and uploading into AKAIMS: Click or tap here to enter text.

Describe any barriers the program or participants encountered that impeded the recovery process: Click or tap here to enter text.

* Describe agency’s efforts to overcome or adjust to the barriers: Click or tap here to enter text.

Describe agency efforts this quarter to align with NARR Standards: Click or tap here to enter text.

List any requests for technical assistance, including contact information to arrange for technical assistance: Click or tap here to enter text.

Provide details related to any staff turnover that occurred this quarter, efforts made to fill any open positions, and qualifications of any newly hired staff: Click or tap here to enter text.

**State required data includes the following:**

Efficiency-Percent of occupancy per fiscal year (Number of beds occupied/Total number of beds allocated for program)

During Month 1: Click or tap here to enter text.

During Month 2: Click or tap here to enter text.

During Month 3: Click or tap here to enter text.

Participant’s average length of stay before discharging this Quarter: Click or tap here to enter text.

Program cost per participant this Quarter: Click or tap here to enter text.