

**OCEAN
COUNTY
2023 OPIOID
ABATEMENT REPORT**

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2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Ocean County**
3. What is your subdivision's State ID? **NJ164**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Jamie Busch**

Name of Administering Agency: **Ocean County Dept of Human Services**

Business Address: **PO Box 2191**

City/Town: **Toms River**

Lead Contact Phone Number: **732-506-5374**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a county and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$2,563,043.10**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **Ocean County's goals for 2023 were to establish an advisory body in compliance with the settlement, create bylaws to build a framework for the Council that will help ensure it meets its responsibilities, and execute a community needs assessment and strategic planning process, inclusive of public input, to inform the use of funds. It is the intention of the OCOAC to facilitate and enhance the delivery of Opioid Use Disorder (OUD), and subsequently Substance Use Disorder, services through collaborative relationships in the community and between local, county, state and federal agencies. The OCOAC seeks to utilize these relationships to identify high priority needs and improve access for target populations through its planning, coordinating, enhancing and implementation of initiatives at the county level. Ocean County's functional network of agencies and organizations are dedicated to delivering strong programs and services to the community and its most vulnerable residents.**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds? **Yes, Ocean County established its Opioid Advisory Council (OCOAC) in early 2023 for the purposes of advising the Board of Commissioners and participating municipalities on the use of settlement funds.**

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12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **Yes**

13. Please describe your public engagement/input efforts?

- **An online needs assessment survey was developed to seek broad input on the importance of the Approved Uses of settlement funds for the residents of Ocean County. Survey respondents were prompted to anonymously rate each category of Approved Uses and individual Approved Uses with respect to their opinion of its importance to be developed or expanded in Ocean County.**
- **A series of forums were held to facilitate public participation in the planning process. Two were in-person and one was conducted via WebEx. All attendees were given the opportunity to speak. Attendees were also invited to complete the survey and submit written testimony. A report and thematic analysis of the feedback gathered through the public forums and a list of participants was shared with the Council in preparation for its executive planning session.**
- **Written testimony was invited from the public alongside the announcements regarding the survey and public forums. A dedicated email address was created to receive the feedback: OCOAC@co.ocean.nj.us. A qualitative, thematic analysis of the feedback was shared with the Council in preparation for its executive planning session.**

14. Does your county/subdivision have a strategic plan? **Yes**

15. Can we post your strategic plan online? **Yes, you may post it.**

16. Have you completed a risk assessment profile for demographic or geographic impact? **Yes**

17. Can we post your risk assessment online? **Yes.**

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **A wealth of information, data, and feedback were gathered in the development of a strategic Plan. A comprehensive community needs assessment process was undertaken to identify needed services and target groups, existing services and service availability, and priorities for resource development and funding. To inform the Council and provide context for the Plan, pertinent data points and trends, such as opioid use disorder treatment access, drug related deaths, drug related arrests, incidence of neonatal abstinence syndrome, and so forth were gathered. This background information was presented alongside the identified gaps, priorities for funding, and recommendations identified in other related plans and planning bodies, such as the Comprehensive Alcohol and Drug Abuse Services Plan and annual report of the Opioid Fatality Review Team. Information was cross referenced with the Approved Uses, needs assessment survey results, and forum feedback on funding priorities. The Council presented a Strategic Plan at its open public meeting on May 25, 2023. It was approved by the Board of Commissioners on August 2, 2023. The Plan is posted publicly as a file of interest on the Council's website: <https://www.co.ocean.nj.us/OC/OCDHS/frmOpioid Council.aspx>. Ocean County intends to subcontract the settlement funds to partner community based organizations that will carry out programming that fall within the priority uses identified in the Plan. An open competitive contracting process is slated for the fall of 2023 with services to begin January 1, 2024.**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **BARNEGAT TOWNSHIP**
3. What is your subdivision's State ID? **NJ5**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **THOMAS LOMBARSKI**

Name of Administering Agency: **BARNEGAT TOWNSHIP**

Business Address: **900 W. BAY AVENUE**

City/Town: **BARNEGAT**

Lead Contact Phone Number: **609-698-0080 ext. 160**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$68,395.63**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$1,247.56**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **Mainly starting use of funds for Opioid prevention, education and awareness**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**
17. Can we post your risk assessment online?

2023 Opioid Abatement Report

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Needs assessment**

Program 1

19. Program name/title: **Participation in the DEA National Rx Drug Take Back Day**

Agency/funding recipient name: **Barnegat Police Department**

Primary problem being addressed by this program: **N/A**

Brief program description: **N/A**

Program target population: **Township – about 23,000**

Date this program was funded (please use M/D/Y): **4/22/2023**

Amount of funding for this program: **\$1,247.56**

Program launch date: **4/22/2023**

If program has started, how many clients have been seen as of 6/30/2023: **N/A**

What key performance indicators are you tracking to ensure success of the program? **N/A**

Please state this program's statement of impact: **N/A**

How do you plan to measure or track success and impact of this program? **N/A**

20. Primary Category (Please select the category that fits the primary focus of this program). **Harm Reduction**

21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Overdose Prevention, Prevention and Education**

22. Please choose the length of time of this program's duration: **Less than 1 year**

Other (please specify):

23. How often are you disbursing funds to this program? **One time only**

Other (please specify):

24. Rationale for Program

What is the reason for this program spending choice? **N/A**

What outcomes or impact does the program aim to achieve? **N/A**

What is the anticipated number of unduplicated clients this program will reach annually? **N/A**

2023 Opioid Abatement Report

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Beachwood Borough**
3. What is your subdivision's State ID? **NJ7**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator" managing/overseeing these funds): **Jennifer Martin**

Name of Administering Agency: **Beachwood Borough**

Business Address: **1600 Pinewald Road**

City/Town: **Beachwood**

Lead Contact Phone Number: **732-286-6000 x 212**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$6,169.85**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$4,000.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions.
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No, but we plan to in the future.**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Needs assessment**

Program 1

19. Program name/title: **MA Enhancement/Prevention and education**

Agency/funding recipient name: **Health Department**

Primary problem being addressed by this program: **Education and prevention**

Brief program description: **To enhance our Municipal Alliance program already in place**

Program target population: **Community**

Date this program was funded (please use M/D/Y): **8/18/2023**

Amount of funding for this program: **\$4,000.00**

Program launch date: **Already in place**

If program has started, how many clients have been seen as of 6/30/2023: **n/a**

What key performance indicators are you tracking to ensure success of the program? **n/a**

Please state this program's statement of impact: **n/a**

How do you plan to measure or track success and impact of this program? **n/a**

20. Primary Category (Please select the category that fits the primary focus of this program).
Prevention and Education

21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Prevention and Education**

22. Please choose the length of time of this program's duration: **5+ years**

Other (please specify):

23. How often are you disbursing funds to this program? **One time only**

Other (please specify):

24. Rationale for Program

What is the reason for this program spending choice? **Enhance knowledge to the community**

What outcomes or impact does the program aim to achieve? **Education and prevention**

What is the anticipated number of unduplicated clients this program will reach annually? **250**

2023 Opioid Abatement Report

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Berkeley Township**
3. What is your subdivision's State ID? **NJ13**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
 - Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Scott Tirella**
 - Name of Administering Agency: **Berkeley Township**
 - Business Address: **627 Pinewald-Keswick Road**
 - City/Town: **Bayville**
 - Lead Contact Phone Number: **732-244-7400 ext. 1201**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$104,630.85**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **We did not spend any funds as of 6/30/23. We anticipate a naloxone distribution program within the next year.**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Needs assessment.**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Brick Township**
3. What is your subdivision's State ID? **NJ19**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator" managing/overseeing these funds): **Maureen Laffey-Berg**

Name of Administering Agency: **Brick Township**

Business Address: **401 Chambersbridge Rd**

City/Town: **Brick**

Lead Contact Phone Number: **732-262-1077**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$12,452.57**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions.
Emphasis on existing opioid programs already in place and expand our community outreach through education and support services.
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No, but we plan to in the future.**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Needs assessment**

Program 1

19. Program name/title: **Brick Municipal Anti-Drug Coalition (BMAC)**

Agency/funding recipient name: **Brick Township**

Primary problem being addressed by this program: **Drug addiction**

Brief program description: **Provide substance abuse prevention programs and services for the community**

Program target population: **Youth and adults**

Date this program was funded (please use M/D/Y): **01/01/2023**

Amount of funding for this program: **\$0.00**

Program launch date: **01/01/2023**

If program has started, how many clients have been seen as of 6/30/2023: **Unknown**

What key performance indicators are you tracking to ensure success of the program? **Volume and calls for service, decrease in recidivism**

Please state this program's statement of impact: **Provide substance abuse prevention programs and services for the community. Reducing prescription medication misuse, particularly opiates.**

How do you plan to measure or track success and impact of this program? **Volume and calls for service, decrease in recidivism**

20. Primary Category (Please select the category that fits the primary focus of this program).
Prevention and Education

21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Overdose Prevention**

22. Please choose the length of time of this program's duration: **5+ years**

Other (please specify):

23. How often are you disbursing funds to this program? **Annually**

Other (please specify):

24. Rationale for Program

2023 Opioid Abatement Report

What is the reason for this program spending choice? **Provide substance abuse prevention programs and services for the community**

What outcomes or impact does the program aim to achieve? **Reducing prescription medication misuse, particularly opiates.**

What is the anticipated number of unduplicated clients this program will reach annually?

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Jackson Township**
3. What is your subdivision's State ID? **NJ102**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
 - Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Terence M. Wall**
 - Name of Administering Agency: **Jackson Township**
 - Business Address: **95 West Veterans Highway**
 - City/Town: **Jackson**
 - Lead Contact Phone Number: **732-928-1200 ext. 1310**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$112,270.15**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **N/A**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**
17. Can we post your risk assessment online?

2023 Opioid Abatement Report

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Overall rationale is intended to be tied to education, recovery and enforcement related to opioids-program to be determined.**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Lacey Township**
3. What is your subdivision's State ID? **NJ106**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator" managing/overseeing these funds): **VERONICA LAUREIGH**

Name of Administering Agency: **LACEY TOWNSHIP**

Business Address: **818 LACEY ROAD**

City/Town: **Forked River**

Lead Contact Phone Number: **609-693-1100**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$63,167.60**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$7,993.09**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions.
Our goal is to reduce the impact of opioids, stimulants and other substances on individuals, families and our community by supporting comprehensive collaborative initiatives. Expanding our comprehensive programs in response to illicit opioid, stimulants or other substance abuse by expanding our outreach related to intervention to prevent people from developing opioid use disorder, including the funding of media campaigns and school-based prevention programs to prevent youth and other individuals from misusing prescription drugs.
Goals:
Prevent cases and addiction and misuse: Educating the community of all ages of opioid risks; increase family and youth knowledge of opioid risk and benefits; increase public safety knowledge of opioid risk and benefits.
Improve early identification & intervention of addiction: Improve identification of and provision of services to youth at high-risk for opioid addiction and their families. Expand access to services that support recovery. Provide overdose education to individuals of high risk for opioid overdoses and their families/friends. Utilize the Behavioral Health On-point program to contact with the high-risk community and provide support and information for recovery support services. Community outreach through on Municipal Alliance Program.
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?

2023 Opioid Abatement Report

12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**
17. Can we post your risk assessment online?
18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **The emphasis of the program in fifth grade is to help students recognize and resist the many direct and subtle pressures that influence them to experiment with alcohol, tobacco, marijuana, inhalants, or other drugs or to engage in violence. Students in this age category are vulnerable.**

Program 1

19. Program name/title: **L.E.A.D. Program**

Agency/funding recipient name: **Lacey Township in cooperation with the Lacey Board of Education**

Primary problem being addressed by this program: **Youth at the vulnerable age of 5th grade to recognize and resist the many direct & subtle pressures that influence them to experiment with alcohol, tobacco, marijuana, inhalants, or other drugs or to engage in violence.**

Brief program description: **The LEAD program offers preventive strategies to enhance protective factors – especially bonding to the family, school, and community – which has been proven to help foster the development of resiliency in young people who may be at risk for substance abuse or other problem behaviors.**

Program target population: **Middle School age children in the 5th and 6th grades**

Date this program was funded (please use M/D/Y): **04/01/2023- 6/30/2023**

Amount of funding for this program: **\$7,993.09**

Program launch date: **04/01/2023**

If program has started, how many clients have been seen as of 6/30/2023: **300 5th graders**

What key performance indicators are you tracking to ensure success of the program? **To be determined**

Please state this program's statement of impact: **To be determined**

How do you plan to measure or track success and impact of this program? **To be determined**

20. Primary Category (Please select the category that fits the primary focus of this program).
Prevention and Education

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21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Prevention and Education**

22. Please choose the length of time of this program's duration: **Less than 1 year**

Other (please specify):

23. How often are you disbursing funds to this program? **Annually**

Other (please specify):

24. Rationale for Program

What is the reason for this program spending choice? **To deter the vulnerable population of the youth from resisting the pressures of populations to utilize substance abuse as a means of social activity and fitting in to society and culture of their peers.**

What outcomes or impact does the program aim to achieve? **To reduce substance abuse and to have knowledge of the signs of users and issues these matters cause in the family and social environment**

What is the anticipated number of unduplicated clients this program will reach annually? **Unsure**

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Lakewood Township**
3. What is your subdivision's State ID? **NJ107**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Evan Cornell**

Name of Administering Agency: **Township of Lakewood**

Business Address: **231 Third Street**

City/Town: **Lakewood**

Lead Contact Phone Number: **732-288-6312**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$308,733.73**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **We are currently looking into how we can utilize these funds for proper usage such as partnering with local organizations that assist with citizens in regards to opioid usage, etc.**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Other plans**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Little Egg Harbor Township**
3. What is your subdivision's State ID? **NJ112**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Rodney Haines**

Name of Administering Agency: **Little Egg Harbor Township**

Business Address: **665 Radio Road**

City/Town: **Little Egg Harbor**

Lead Contact Phone Number: **609-296-7241 x 226**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$75,906.61**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses?
\$0.00
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **To develop programs and information availability to reduce opioid dependency in the Township**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but we plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but we plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **We are still working on a plan.**

Program 1

19. Program name/title: **Reduction of Opioid Dependency Education**

Agency/funding recipient name: **Little Egg Harbor Township**

Primary problem being addressed by this program: **Opioid Dependency**

Brief program description: **Educate the Township residents**

Program target population: **Unknown**

Date this program was funded (please use M/D/Y): **Not started yet**

Amount of funding for this program: **Unknown**

Program launch date: **TBD**

If program has started, how many clients have been seen as of 6/30/2023: **Not started**

What key performance indicators are you tracking to ensure success of the program? **TBD**

Please state this program's statement of impact: **Reduce opioid related deaths in the township**

How do you plan to measure or track success and impact of this program? **TBD**

20. Primary Category (Please select the category that fits the primary focus of this program).
Prevention and Education

21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Overdose Prevention, Prevention and Education, Recovery and Support**

22. Please choose the length of time of this program's duration: **5+ years**

Other (please specify):

23. How often are you disbursing funds to this program? **Other (please specify)**

Other (please specify): **As needed**

24. Rationale for Program

What is the reason for this program spending choice? **Educate the residents of the municipality**

What outcomes or impact does the program aim to achieve? **Fewer opioid and other drug-related medical emergencies.**

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What is the anticipated number of unduplicated clients this program will reach annually?

Unknown

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Manchester Township**
3. What is your subdivision's State ID? **NJ124**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
 - Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Diane Lapp**
 - Name of Administering Agency: **Manchester Township**
 - Business Address: **1 Colonial Drive**
 - City/Town: **Manchester**
 - Lead Contact Phone Number: **732-657-8121**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$89,846.53**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$35,000.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **Training of first responders and lay personnel and all township for utilization of Narcan deployment kits, purchase of high-fidelity simulation mannequins for realistic training purposes**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?

2023 Opioid Abatement Report

16. Have you completed a risk assessment profile for demographic or geographic impact? **No, but we plan to in the future.**

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **needs assessment, counseling services**

Program 1

19. Program name/title: **Counseling Services**

Agency/funding recipient name: **OMNIPOINT**

Primary problem being addressed by this program: **ADDICTION**

Brief program description: **Counseling of individuals who are suffering**

Program target population: **10,000**

Date this program was funded (please use M/D/Y): **01/01/2023**

Amount of funding for this program: **\$35,000.00**

Program launch date: **01/01/2023**

If program has started, how many clients have been seen as of 6/30/2023: **Do not know**

What key performance indicators are you tracking to ensure success of the program? **Do not know**

Please state this program's statement of impact: **Do not know**

How do you plan to measure or track success and impact of this program? **Do not know**

20. Primary Category (Please select the category that fits the primary focus of this program).
Prevention and Education

21. The following are other categories that may apply (include all categories with the exception of the Primary category you chose above). **Prevention and Education**

22. Please choose the length of time of this program's duration: **5+ years**

Other (please specify):

23. How often are you disbursing funds to this program? **Quarterly**

Other (please specify):

24. Rationale for Program

What is the reason for this program spending choice? **Preventive measures**

2023 Opioid Abatement Report

What outcomes or impact does the program aim to achieve? **Assist our residents**

What is the anticipated number of unduplicated clients this program will reach annually? **Do not know**

25. Do you have other programs you are funding and/or operating with opioid abatement funds? **No**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Point Pleasant Borough**
3. What is your subdivision's State ID? **NJ185**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
 - Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Frank Pannucci Jr**
 - Name of Administering Agency: **Borough of Point Pleasant**
 - Business Address: **2233 Bridge Avenue**
 - City/Town: **Borough of Point Pleasant**
 - Lead Contact Phone Number: **732-892-3434**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$0.00**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **Will do outreach programs once money is received. Our money went to Point Pleasant Beach in error and is being reversed.**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No, but plan to develop one in the future.**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No, but we plan to in the future.**

2023 Opioid Abatement Report

17. Can we post your risk assessment online?

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Haven't received them yet**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Stafford Township**
3. What is your subdivision's State ID? **NJ220**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Matthew von der Hayden**

Name of Administering Agency: **Township of Stafford**

Business Address: **260 East Bay Avenue**

City/Town: **Manahawkin**

Lead Contact Phone Number: **609-597-1000 Ext 8516**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$90,616.61**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions. **N/A - Looking for input on how to spend funds**
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No, but plan to in the future.**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **Yes**
15. Can we post your strategic plan online? **No.**
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**
17. Can we post your risk assessment online?

2023 Opioid Abatement Report

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **Needs assessment/plan**

2023 Opioid Abatement Report

1. In what county are you located? **Ocean County**
2. For which eligible subdivision (county or municipality) are you reporting? **Toms River Township**
3. What is your subdivision's State ID? **NJ226**
4. As an eligible subdivision (county or municipality) receiving opioid abatement funds, please tell us the following:
 - Full name of individual in your subdivision authorized to report on the settlement funds your subdivision received ("administrator " managing/overseeing these funds): **Judith Tutela**
 - Name of Administering Agency: **Judith Tutela**
 - Business Address: **33 Washington St**
 - City/Town: **Toms River**
 - Lead Contact Phone Number: **732-341-1000 x 8405**
5. As an eligible subdivision receiving abatement funds, which of the following applies to your current status regarding those funds? **We are a municipality and did not transfer our funds.**
6. What amount of your opioid abatement funds did you transfer to the county?
7. Please tell us the full amount of opioid abatement funds you received as of 6/30/23. **\$236,344.89**
8. Please tell us the amount of opioid abatement funds you have expended (as of 6/30/23). **\$0.00**
9. Of the total opioid abatement funds, what amount was spent on program administrative expenses? **\$0.00**
10. Please share brief information on your subdivision's overarching goals and priorities to provide context for this program year's spending decisions.
11. (This question is for counties only) Have you established an Advisory Committee to inform allocation of funds?
12. Did your subdivision engage the public (e.g., town hall meeting, online survey, convened stakeholders) prior to deciding how to use the opioid abatement funds you received? **No**
13. Please describe your public engagement/input efforts?
14. Does your county/subdivision have a strategic plan? **No**
15. Can we post your strategic plan online?
16. Have you completed a risk assessment profile for demographic or geographic impact? **No**
17. Can we post your risk assessment online?

2023 Opioid Abatement Report

18. Please tell us your overall rationale for prioritizing the use of the opioid abatement funds that you received (e.g., are you using a needs assessment, a strategic or other plan, or an epidemiological analysis)? **No funds have been spent**