MONMOUTH COUNTY

2025 OPIOID

ABATEMENT REPORT

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	Opioid Settlement Funding Report		
	Sub Division: Monmouth County		
	State ID:	NJ140	
	County Name:	Monmouth	
	Address:	3000 Kozloski Road, Freehold, New Jersey, 07728	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$2,192,032.49	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$193,926.94	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$7,776,400.28	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$1,260,932.21	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$1,525,862.44	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$45,675.64	
8a.	Please provide details about any administrative expenses.	Administrative expenses included cost for consultant to ensure approved uses were followed and creating reporting templates, etc., as well as payroll and SurveyMonkey.	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$4,473,268.98	

10	Please share brief information on your	Overarching goals and values include lowering the
	subdivisions overarching goals and values to provide context for this year's spending decisions	overdose fatalities in the county, providing upstream prevention, and increasing recovery support services available. A general RFP was issued this past Spring with the opportunity for multiple awards for projects totaling \$600,000, which align with any of the approved uses. Additionally, a RFP was issued for the enhancement/expansion of established Monmouth County Recovery High Schools, totaling \$200,000, and \$30,000 has been allocated for the development of a specialized youth postvention team. Furthermore, \$1,650,000 has been allocated for several projects though the money has not been encumbered at this time since the projects are pending RFP process at this time.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	The Opioid Settlement Advisory board met several times to review the approved uses, previously conducted needs assessment that were completed for the county comprehensive plan and other needs assessments available to the county that had been recently completed (did not perform new to not duplicate), and other relevant date from the alliances, OFRT, prevention coalition, etc. After review, needs and gaps were identified. The council then discussed ways to address the needs and gaps, proposed ideas for use in alignment with the approved uses and then voted on what to approve. Then approved ideas were submitted to County Administration and County Commissioners for approval. RFP was drafted based on that and proposals went through the competitive process and awarded accordingly.
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding

Please describe your public engagement/input efforts?	Focus Groups, county wide meetings, Monmouth Acts all already exist and were completed previously for the county comprehensive plan. Multiple needs assessments have already been completed that included public engagement and input. All of that information was utilized for the first round of planning. Information is continually collected through stakeholders and community partners across the various public meetings held throughout the reporting period. This year, a community survey was drafted via SurveyMonkey. The draft was reviewed and finalized with the Local Advisory Council on Substance Use Support Services (County LACADA) and the Opioid Advisory Council before being submitted to County Administration and the Board of County Commissioners for approval and publication. The survey link was shared through email, posted on the County website, and was converted into a QR code for further distribution.
Does your county/subdivision have a strategic plan?	No
Have you completed a Risk Assessment profile for demographic or geographic impact?	No
Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
2025 Fiscal Program #1	
Program Name/Title	Monmouth County Community Outreach Supplies
Agency/Funding Recipient Name	Monmouth County Division of Behavioral Health within the Department of Health & Human Services
Agency/Funding Recipient Category	County or Municipality (including Departments and Municipal Alliances)
	Does your county/subdivision have a strategic plan? Have you completed a Risk Assessment profile for demographic or geographic impact? Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title

5	Brief program description:	Community Outreach efforts are carried out under the Community Outreach Committee, which is a subcommittee of the Monmouth County Overdose Fatality Review Team (OFRT). The Committee is comprised of community partners throughout the county, representing the various sectors, including individuals with lived experience. It aims to carry OFRT recommendations into action. The committee meets to plan outreach efforts and review data and community feedback to assess current community needs in relation to overdose prevention, harm reduction, and recovery supports. The funds are utilized to obtain the supplies utilized in community outreach throughout the county, targeting areas adversely impacted by substance use and overdose. The outreach activities not only supply resources but serve to engage the community and connect individuals with services, including treatment, harm reduction, and other related recovery support services.
6	Program target population:	Children and Young Adults - 19-24 (post-grad through college); Healthcare Personnel and Workforce;Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2025
8	Amount of funding for this program.	\$18,505.60
8a.	Amount expended:	\$3,589.03
8b.	Amount encumbered/appropriated:	\$14,916.57
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	Funds encumbered annually. Total above includes amount from 2024 reporting period in addition to 2025 amount. NTE 15,000 annually.
10	Program Launch Date	01/01/2024

11	Please choose the length of time of this program's duration:	5+ years
12	What is the anticipated number of unduplicated clients this program will reach annually?	400
13	Please state this program's statement of impact.	Outreach efforts focus on delivering essential resources, including overdose prevention supplies, harm reduction materials, and recovery support services, directly to areas adversely impacted by substance use and overdose. These activities foster meaningful community engagement, create pathways for individuals to access vital services, and help reduce stigma surrounding addiction and recovery. The funds allocated for these efforts make it possible to connect individuals with resources and other critical supports. Ultimately, outreach efforts are not only about providing resources; they are about building a stronger, more connected community where individuals impacted by substance use can find the care, support, and hope they deserve.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	Distributed wound care kits, testing strips, narcan, hygiene items, resource bags, handbags of hope, harm reduction kits, etc. 460 wound care kits; 374 resource bags; 230 handbags of hope; 200 harm reduction kits; 1120 individual boxes of narcan
	Increased community awareness (please describe):	
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Impact is measured by number of outreaches, number of individuals encountered during outreach, number of those connected with services, number of materials distributed, and utilizing OD Map and OFRT data to track number of overdose incidents and narcan administrations.

17	Primary Category:	Harm Reduction and Overdose Prevention
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Primary Prevention, Education, and Training; Recovery Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction), Training
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Community Outreach addresses OUD/SUD by leveraging data, community feedback, and partnerships with community providers. It offers a compassionate response to the interconnected challenges faced by this population. Key strategies include harm reduction, providing naloxone, connecting individuals to treatment options, peer support, and other recovery support services. Furthermore, education and stigma reduction are critical in improving access to care and building a supportive environment for recovery. Through community outreach, the committee brings services directly to individuals who may otherwise avoid traditional service settings. Outreach teams often engage with community members to provide resources, information, and guidance. Assessment of need is based in OFRT data and recommendations as well as community and partner collaboration, which ensures that individuals receive the resources, care, and support needed.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	OFRT identified a need and provided recommendation. Recommendation was shared with Administration and approved by Opioid Settlement Council.
	2025 Fiscal Program #2	
1	Program Name/Title	Recovery Diversion Program
2	Agency/Funding Recipient Name	Monmouth County Prosecutor's Office
3	Agency/Funding Recipient Category	County or Municipality (including Departments and Municipal Alliances)

4	Primary problem being addressed by this program:	Providing a diversion program for substance use, mental health and co-occurring disorders in municipal court
5	Brief program description:	Recovery Diversion Program diverts non-violent, low level offenders with a substance use, mental health or co-occurring disorder to treatment and social services. If the participant completes the program, remains in contact with their recovery coach and stays arrest-free, the eligible charge(s) will be dismissed
6	Program target population:	Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2024
8	Amount of funding for this program.	\$110,016.64
8a.	Amount expended:	\$25,081.56
8b.	Amount encumbered/appropriated:	\$84,935.08
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	monthly
10	Program Launch Date	01/01/2024
11	Please choose the length of time of this program's duration:	5+ years
12	What is the anticipated number of unduplicated clients this program will reach annually?	20
13	Please state this program's statement of impact.	Launch dates vary per municipality: RDP Long Branch – November 2021 RDP Asbury Park – February 2023 RDP Red Bank – May 2023 RDP Keansburg – October 2023 RDP Howell – October 2023 RDP Freehold Boro – March 2024 RDP Wall Township – October 2024 RDP Middletown – March 2025 We have about 20 graduates per year and 30 pending participants at a time. To intervene early in one's addiction and mental health journey

13 cont.	Please state this program's statement of impact. cont.	To streamline the process - which can be difficult to navigate To strengthen the relationship between law enforcement and the community To build trust between defendants and the court system To provide an efficient way to resolves cases involving substance use and/or mental health disorders To highlight the role that prosecutors can play in community building and in preventing future crime
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	70
	Number of training/education sessions:	10
	Number of services provided/encounters:	120
	Increased community awareness (please describe):	MCPO does press releases, social media posts, attends community events, provides promotional items to the police departments, local agencies, highlights the program on our website
	Number of referrals to treatment	120
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	To intervene early in one's addiction and mental health journey To streamline the process - which can be difficult to navigate To strengthen the relationship between law enforcement and the community To build trust between defendants and the court system To provide an efficient way to resolves cases involving substance use and/or mental health disorders To highlight the role that prosecutors can play in community building and in preventing future crime Number of people offered services and number of people that graduate from the program
17	Primary Category:	Diversionary and Re-entry Support

18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Recovery Supports;Treatment; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	To provide substance use and mental health diversion to every court in the county, and to expand RDP to Wall and Middletown and provide a Recovery Coach Supervisor for RDP
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Monmouth County Prosecutor Program
	2025 Fiscal Program #3	
1	Program Name/Title	Innovation - Trinity
2	Agency/Funding Recipient Name	Trinity Episcopal Church
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations;Others
3(a).	Agency/Funding Recipient Category - Others	church
4	Primary problem being addressed by this program:	Opioid Use in Monmouth County
5	Brief program description:	Trinity's OUD Recovery Support Services Innovation Project is part of the Trinty Center's Radical Well-being Program (RWbP). The RWbP is an interconnected, holistic program that offers services to at-risk community members. It is guided by the awareness that poverty, hunger, poor mental and physical health, substance abuse, and homelessness are interconnected – and are cycles that can be broken. The multi-disciplined approach cares for the whole person and relies on a strength-based support model. They engage with clients to provide wrap-around case management to address housing, job training, financial stabilization, and referrals for health care needs to support recovery from OUD; coordinate and

5 cont.	Brief program description: cont.	collaborate with community organizations to provide referral, support, and services for persons with OUD; provide both NA abstinence support while also providing Harm-Reduction outreach opportunities for community-based organizations to distribute supplies to train, and support persons with OUD and their family/friends; provide overdose training, awareness, and education opportunities to persons in the community.
6	Program target population:	Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2024
8	Amount of funding for this program.	\$168,205.94
8a.	Amount expended:	\$98,004.90
8b.	Amount encumbered/appropriated:	\$70,201.04
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	01/01/2024
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	40
13	Please state this program's statement of impact.	Trinity's OUD Recovery Support Services Innovation Project helps reduce OUD-related deaths among the community members of Asbury Park and Monmouth County. The program provides wrap-around services that address the multiple needs of our clients in recovery, helping them to achieve personal well-being.

14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	134
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	Naloxone and fentanyl test strips were dispersed on 104 occasions
	Number of training/education sessions:	15
	Number of services provided/encounters:	2000
	Increased community awareness (please describe):	The Harm Reduction Book Club; hosted RWJ Barnabas Health Institute for Prevention and Recovery: Asbury Park Communities that Care event Trinity held a Harm Reduction Book Club in which there were 15 participants, Power of Recovery tabling on 13 occasions, and a training for 90 Code Blue volunteers with instruction on how to handle an overdose, use naloxone, and safely interact with community members using opioids.
	Other:	# of people served, type of assistance needed, # of hours of casework, milestones achieved by clients 134 clients received recovery case management during the 7/1/24 – 6/30/25 timeframe; 35 of those clients were provided financial assistance for housing. 2,370 community members were served in group settings, participating in recovery support meetings, securing naloxone, attending trainings, receiving health care from visiting outside organizations, and participating in harm-reduction book club or other events.
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Since services are client-based, achievements are measured in the number of people services are provided to, how many of them are able to sustain sobriety, the hours of casework performed, and attendance at NA meetings or our peer-led recovery support group. Success can be difficult to quantify when working with community members who are at high risk for OUD relapses. The program often views it as a victory when someone consistently remains

16 cont.	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? cont.	engaged. Trinity Center measures the qualitative outcomes of the OUD recovery support program by following the progress of our participants from the day they start providing casework and by maintaining open lines of communication and support with the community members they serve. Client feedback is collected and is a valuable evaluation tool. The relationships built with program participants allow them to observe long-term progress. Overall, the program provides wrap-around services that address the multiple needs of our clients in recovery, helping them to achieve personal well-being, lower homelessness rates and OUD/SUD related issues and overdoses.
17	Primary Category:	Wraparound and Connected Care Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Diversion and Re-entry Support; Harm Reduction and Overdose Prevention; Housing; Recovery Supports; Treatment
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The overall intended effect of the program is to provide support to those who have experienced OUD in Asbury Park and Monmouth County and to reduce occurrences of relapses and opioid-related overdose deaths by providing to wrap-around services that address the multiple challenges of recovery from OUD.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #4	
1	Program Name/Title	Innovation - Girl Scouts
2	Agency/Funding Recipient Name	Girl Scouts of the Jersey Shore

3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
4	Primary problem being addressed by this program:	Prevention, Education and Mentorship
5	Brief program description:	The program is designed to reduce the incidence, prevalence, and impact of Opioid use in Monmouth County. Girl Scouts of the Jersey Shore is providing training for staff and troop leaders and brining programming to all of our nocost troops in Monmouth County (almost 750 Girl Scouts) as well as continuing prevention support by serving over 120 Girl Scouts for 2 weeks of summer camp, including transportation.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade); Children and Young Adults - 14-18 (high school aged)
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2024
8	Amount of funding for this program.	\$261,609.71
8a.	Amount expended:	\$194,046.71
8b.	Amount encumbered/appropriated:	\$67,563.00
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	01/01/2024
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	405
13	Please state this program's statement of impact.	Throughout the year, Girl Scouts engage in a dynamic, enriching journey designed to foster personal growth, resilience, and connection. From the very beginning, they immerse themselves in a supportive and inclusive environment where they build lasting friendships, develop healthy and trusting relationships

13 Please state this program's statement of impact. with caring adult mentors, and acquire essential cont. life skills that strengthen their confidence and cont. emotional well-being. This year-long experience is carefully crafted to help each girl feel seen, heard, and valued — while nurturing leadership qualities, self-awareness, and a deep sense of belonging. The "Cocoons & Connections" program facilitated by staff provided programming to over 700 outreach (no cost) troops in Monmouth County. The objective of this program is to develop resilience and support systems. It's essential that girl scouts (especially those from disadvantaged communities) have the tools to build resilience and establish strong support networks. The concept of a "cocoon" can serve as a powerful metaphor— representing a safe, nurturing environment where Girl Scouts can grow emotionally, mentally, and socially, especially during difficult or vulnerable times. Just as a cocoon provides protection and space for transformation, our program aims to create a similar space for Girl Scouts. In a world where peer pressure, stress, and uncertainty can lead youth toward risky behaviors, having a strong "cocoon" of trusted adults, peers, and healthy coping strategies can be the foundation for making positive choices. The 2-week camp experience hosts Girl Scouts at no cost including transportation to and from their school to camp. The goal of the camp experience is to build social and emotional development skills such as communication, healthy decision making, healthy relationships, peer support, confidence, courage and resiliency. Just as importantly, they're empowered to listen to their inner voice and say "no" when something doesn't feel right to them, reinforcing their autonomy, boundaries, and self-trust. Camp offers a unique opportunity for girls to expand their social circles by

connecting with new friends from different communities, broadening their perspectives

13 cont.	Please state this program's statement of impact. cont.	and building inclusive relationships. In the heart of nature, they face challenges that help them grow stronger, more independent, and more self-assured. Whether it's learning how to tie a knot, navigating team activities, or simply enjoying quiet moments of reflection by the lake, each experience helps shape a deeper sense of self. Ultimately, this combination of year-round engagement and intentional summer programming provides girls with a consistent, safe and empowering foundation. It allows them to thrive emotionally, socially, and mentally – preparing them to become confident, compassionate and capable young leaders, both within Girl Scouts and beyond.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	750
	Increased community awareness (please describe):	All of the girls served by the program are given the opportunity to attend the Holiday Event at Camp Sacajawea. This allows them to share the camp experience with their families, fostering meaningful bonding time in a space that already holds personal significance. These shared moments not only strengthen family relationships but also help each girl develop a stronger sense of identity, belonging, and emotional security.
	Other:	Programming for 700 Girl Scouts and Camp experience for 140 Girl Scouts. Participants attend one Girl Scout session each month, conveniently held at the school they already attend. By bringing programming directly to the girls' familiar and accessible environment, eliminating significant barriers, such as transportation limitations and scheduling conflicts that often prevent consistent participation in extracurricular activities. This intentional approach ensures that every girl has the opportunity to engage fully and regularly in Girl Scout programming, regardless of her

cont.	Other: cont.	circumstances. Beyond the monthly in-school sessions, the girls have the chance to deepen and expand upon the skills they've learned through additional Girl Scout events.
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Surveys to caregivers; surveys to participants; number of participants As the participants continue to participate in the evolving and dynamic offerings of Girl Scout programming throughout the year, the core principles of prevention education are continually reinforced. Whether through skill-building activities, values-based discussions, or community events, the repetition and consistency of these messages help to solidify key lessons around resilience, healthy decision making, and self-empowerment. This layered, ongoing approach creates a lasting impact— ensuring that the values and tools gained through Girl Scouting become deeply embedded in the lives of the girls.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction), Leadership, Planning and Coordination
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Through targeted outreach efforts, Girl Scouts programming is being brought directly into Title I school districts, reaching girls who are often considered at-risk due to socioeconomic challenges, limited access to extracurricular opportunities, and systemic barriers to success. By embedding Girl Scout experiences within these school communities, the program ensures that every girl — regardless of her background or zip code — has the opportunity to participate in high-quality, consistent programming that supports her academic, emotional, and social development. This includes

20 cont.	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies. cont.	Long Branch, Asbury Park, Keansburg, Neptune, Red Bank, and Freehold.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #5	
1	Program Name/Title	Enhancements - HSL
2	Agency/Funding Recipient Name	Hope Sheds Light
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
4	Primary problem being addressed by this program:	The Enhancement Program seeks to address three main areas of concern: 1. To provide resources to offer professional development, recruitment and retention strategies to improve the frontline workforce for community-based organizations. 2. To provide resources to increase the ability to provide peer recovery support services to the Spanish speaking population in Monmouth County; and, 3. To offer increased resources to assist residents in securing sober living and accessing transportation support to access treatment and other care management services
5	Brief program description:	These funds help provide essential early-stage recovery supports to both English and Spanish speaking community members and offers opportunity for peer recovery staff to continue their education and remain informed on best practice strategies.
6	Program target population:	Healthcare Personnel and Workforce; Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs;

6 cont.	Program target population: cont.	Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2024
8	Amount of funding for this program.	\$142,971.59
8a.	Amount expended:	\$85,977.52
8b.	Amount encumbered/appropriated:	\$56,994.07
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	Monthly
10	Program Launch Date	01/01/2024
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	500
13	Please state this program's statement of impact.	This program seeks to lower two of the primary barriers identified when seeking treatment and/or maintaining recovery, which are transportation and accessing sober living. It also seeks to support strategies and provide resources that will increase the skill set of the peer specialist workforce and to enhance the ability to serve the Spanish speaking population.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	500
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	135
	Number of training/education sessions:	48
	Increased community awareness (please describe):	Conduct quarterly community outreach events entitled Esperanza to increase community awareness in the bi-lingual population and conduct weekly outreach in areas identified as being 'hot spots' for overdoses.

	Number of referrals to treatment	80
	Other:	Tracking the number of people who access sober living, the number of people who receive transportation assistance. Ensure the staff accesses professional development and workplace resources to support retention.
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Use an online data collection system to track type and length of engagement to measure impact of this program.
17	Primary Category:	Recovery Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Housing; Workforce Development and Capacity Building; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Provide Recovery Support Services, including transportation and sober living assistance, to those in need. To remove barriers to services and to improve the skillset of the peer workforce.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #6	
1	Program Name/Title	Certified Peer Recovery Specialist Law Enforcement Referral Program
2	Agency/Funding Recipient Name	Hope Sheds Light
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
4	Primary problem being addressed by this program:	The objective of the HONOR program is to reduce the number of fatal overdoses in Monmouth County by collaborating with law enforcement and emergency responders to provide immediate

4 cont.	Primary problem being addressed by this program: cont.	support and recovery services to township personnel experiencing negative impact from opioid use and overdoses.
5	Brief program description:	The program continues to expand partnerships, increasing referral activity, and deepening engagement with local departments. They have successfully onboarded the following municipalities: Long Branch, Neptune, Atlantic Highlands, Asbury Park, Ocean Township, Tinton Falls, Howell, and Manasquan. In addition, NJ Rise and Jersey Shore Medical Center (JSMC) have joined as referral partners. Each department is equipped with the tools and training needed to make strong, effective referrals. Towns who are engaged and making referral are as follows: Asbury Park: 21; Neptune Township: 20; Ocean Township: 13; Long Branch: 11; Jersey Shore Medical Center: 3; Atlantic Highlands: 1; NJ Rise: 1; Tinton Falls: 1
6	Program target population:	First Responders, Law Enforcement and other Emergency Responders; Individuals experiencing Homelessness; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Others
6(a).	Program target population: - Others	Impacted family and community members
7	Date this program was funded (please use MM/DD/YYYY)	01/01/2024
8	Amount of funding for this program.	\$341,019.12
8a.	Amount expended:	\$204,650.09
8b.	Amount encumbered/appropriated:	\$136,369.03
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	monthly
10	Program Launch Date	01/01/2024

11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	500
13	Please state this program's statement of impact.	The objective of the HONOR program is to reduce the number of fatal overdoses in Monmouth County.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	1200
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	135
	Number of training/education sessions:	6
	Number of services provided/encounters:	75
	Increased community awareness (please describe):	Community outreach days in all participating townships
	Number of referrals to treatment	29
	Other:	The number of engaged police departments The number of referrals The number of people who engage in treatment and/or recovery support services 42 people received other special assistance as part of additional recovery support services
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	We use an online data collection system to track type and length of engagement to measure impact of this program
17	Primary Category:	Harm Reduction and Overdose Prevention
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Diversion and Re-entry Support; Housing; Recovery Supports; Treatment; Wraparound and Connected Care Supports

18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Prevent Overdose Deaths and Other Harms (Harm Reduction), First Responders
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Respond in-person to law enforcement or first responder referral for individuals in community post overdose reversal who refuse medical transport to over connections to care, wrap-around and various recovery support services.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contract
	2025 Fiscal Program #7	
1	Program Name/Title	Innovation - L.E.D by Tigger
2	Agency/Funding Recipient Name	Tigger Stavola Foundation
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
4	Primary problem being addressed by this program:	Drug prevention education
5	Brief program description:	L.E.D By Tigger program is an innovative tool that connects students and parents to resources like decision-making strategies, coping tools, and expert advice. The platform is designed to embrace ongoing engagement and ensure students have access to support and information, 24/7. Their mission is to provide our communities with the knowledge and resources they need to make informed decisions for a healthy, drug-free future.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade); Children and Young Adults - 14-18 (high school aged)

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7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$150,500.00
8a.	Amount expended:	\$99,000.00
8b.	Amount encumbered/appropriated:	\$51,500.00
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	1000
13	Please state this program's statement of impact.	Bring drug prevention education through L.E.D By Tigger so students can make better choices for a healthy future. Fight Addiction. Spread Awareness. Save Lives.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	16000
	Number of training/education sessions:	63
	Number of services provided/encounters:	63
	Increased community awareness (please describe):	Boy and Girls Club of America, we provide food and speakers to during the summer to promote L.E.D By Tigger. We also support our community organizations by attending their fundraisers, such Hope Sheds Light where we have a table to promote L.E.D By Tigger. Will be on as guest for a drug-prevention related pod cast soon as well, where we will promote our program.
	Other:	Key performance indicators: enrollment and retention rate.
15	How frequently are you measuring the tracked key performance indicators?	Monthly

16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	With GOMO, they can gather data and reports for engagement; they can measure how long students/parents stay enrolled in the program. Their retention rates for active users are updated each quarter of the year. They encourage partner schools to provide feedback to us. They can use any rates of students quitting vaping, parent requested assemblies, as well as re-occurring schools requesting us for their new students each year.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Recovery Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Continuing education that provides at home resources. L.E.D By Tigger allows those educated to leave with the information and tools provided. Once signed up, the mobile platform can go anywhere and be accessed 24/7
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #8	
1	Program Name/Title	Innovation - VNA
2	Agency/Funding Recipient Name	Visiting Nurse Association of Central Jersey/CFHI
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
4	Primary problem being addressed by this program:	Medical concerns for SUD/OUD population
5	Brief program description:	Providing outreach to clients that are often found to be isolated, lonely, and without family contact or support. These clients often lack knowledge about their own health care needs and the ability to access services, therefore VNACJ nurses can provide vital connections to needed services. Nurses provide valuable

5 cont.	Brief program description: cont.	health education and assessment in the community with cultural competence and without bias. The program is available throughout Monmouth County. To access the communities in need, the MOCP Nurses consistently go to homeless shelters, motels, boarding homes, group homes, lunch programs, community-based organizations, community events and any other place where individuals congregate. Clients identified as substance users are consistently provided Narcan and Narcan education, referred for harm reduction counselling, syringe access, and low threshold MAT when needed. These clients are also referred for primary care and other support services as needed.
6	Program target population:	Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$173,925.07
8a.	Amount expended:	\$95,551.55
8b.	Amount encumbered/appropriated:	\$78,373.52
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	150

13	Please state this program's statement of impact.	MOCP brings essential health services directly to these individuals through on-site nursing care, eliminating access challenges and establishing trust within the community. With a focus on harm reduction, stabilization, and crisis prevention, MOCP nurses connect clients to detox, medication-assisted treatment (MAT), behavioral health services, and recovery programs. The program reduces emergency room visits, supports medication adherence, improves hygiene and nutrition, and enhances quality of life through personalized, trauma- informed care. The MOCP nurse will provide physical health and mental health assessments to 150 clients during the grant period. The MOCP nurse will provide 600 referrals and/or connections during the grant period.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	82
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	12 Narcan
	Number of training/education sessions:	12
	Number of services provided/encounters:	222
	Increased community awareness (please describe):	Building community partnerships and advocating for underserved populations by addressing service gaps; expanded collaborations with local and state health departments, schools, food pantries, faith-based groups, and organizations serving LGBTQ+, housing-insecure, food-insecure, uninsured, and disabled populations—ensuring no one was left behind, including through in-home vaccinations for homebound individuals. VNACJ works with a wide network of partners such as the NJ Department of Health, United Way, Meals on Wheels, Interfaith Neighbors, CPC Behavioral Healthcare, and others to meet the complex needs of clients. The MOCP delivers services directly in the communities where clients live, with outreach at community meal sites, health centers, and

cont.	Increased community awareness (please describe): cont.	drop-in centers. MOCP nurses build trust through consistent, on-site engagement with clients, ensuring accessible, compassionate care.
	Number of referrals to treatment	37
	Other:	222 assessments 34 referrals 3 referrals to harm reduction centers 22 harm reduction discussions
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	VNACJ integrates quality and performance improvement into its strategic planning, program development, and daily operations, including grant programs. Oversight is led by a multidisciplinary Quality Steering Committee, with regular reporting from the Vice President of the Children and Family Health Institute (CFHI). Grant program effectiveness is assessed through internal dashboards, financial and operating indicators, and a universal client satisfaction survey. The Mobile outreach clinic Program (MOCP) follows a continuous quality improvement (CQI) plan managed by the Program Manager, who oversees service quality, staff, data reporting, and community engagement. Program outcomes are monitored through monthly and quarterly statistical analysis, client feedback, and site collaboration. The MOCP's strength lies in its ability to connect vulnerable clients to essential health and social services, helping them remain stable in the community, with VNACJ consistently meeting its goals and objectives.
17	Primary Category:	Harm Reduction and Overdose Prevention
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Recovery Supports; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Connections to Care, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)

20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	To decrease the harm associated with substance use by providing awareness of over dose prevention interventions, improving access to healthcare and creating a stigma free environment. Providing services in community based settings fosters trust and tailors interventions to the communities being served. Meeting individuals where they are removes barriers associated with stigma and creates a low barrier approach to care.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #9	
1	Program Name/Title	Innovation - Preferred
2	Agency/Funding Recipient Name	Preferred Behavioral Health Group
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations; Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider)
4	Primary problem being addressed by this program:	The primary problems being addressed by this program is outreach, harm reduction, and removing barriers to recovery support.
5	Brief program description:	PBHG screens individuals in the community. PBHG staff provide clients with resources in the community, including crisis kits, Narcan, testing strips and hygiene kits. PBHG staff also provides referrals for treatment and other needs.
6	Program target population:	Individuals experiencing Homelessness; Individuals in Recovery; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$133,744.71
8a.	Amount expended:	\$53,198.40
8b.	Amount encumbered/appropriated:	\$80,546.31

9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	100
13	Please state this program's statement of impact.	This is to assist in reducing overdoses, by providing harm reduction supplies (Narcan and testing strips) and to develop relationships and trust with individuals with substance use disorders to assist them and provide resources when needed.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	1551
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	The following harm reduction supplies were provided between July 1, 2024 and June 30, 2025: - 652 Narcan Kits - 658 Fentanyl Test Strips
	Number of services provided/encounters:	54
	Increased community awareness (please describe):	Due to the Innovation team going out to the same spots multiple times, the community begins to know the team and how they can help. Individuals are more comfortable taking Narcan and testing strips then when they first started this project.
	Number of referrals to treatment	15
	Other:	Due to this being an anonymous program, it is difficult to know how many unduplicated individuals are being seen each time Innovations is out in the community. PBHG does monitor how many individuals are seen each time. PBHG tracks the number of individuals served,

cont.	Other: cont.	amount of Narcan given out, number of testing strips given out, the number of crisis kits given out, the number of hygiene kits given out and the number of cell phones provided to individuals. PBHG goes out weekly to various spots in the community as part of the Mobile Outreach. They went out 54 times between July 1, 2024 and June 30, 2025. In addition to referring individuals to treatment, they also provide resources for re-entry and the harm reduction center. Also, in the last year, they provided 1551 hygiene kits and 207 emergency kits. PBHG also provided 25 phones and 4 additional phone cards.
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	There is success when individuals are beginning to trust the innovations team and will seek them out for assistance. Overdoses have decreased in NJ, which is due to multiple factors, including community outreach.
17	Primary Category:	Harm Reduction and Overdose Prevention
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Diversion and Re-entry Support; Housing; Recovery Supports; Treatment; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This program aims to reduce overdoses and provide outreach/resources for those who are ready for treatment, to eliminate barriers to resources and recovery, and increase awareness and access to services.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting

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	2025 Fiscal Program #10	
1	Program Name/Title	Enhancements - Preferred
2	Agency/Funding Recipient Name	Preferred Behavioral Health Group
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations; Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider)
4	Primary problem being addressed by this program:	The primary problem being addressed is a transportation barrier to treatment for clients.
5	Brief program description:	This program enhances treatment by providing assistance with transportation.
6	Program target population:	Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Others
6(a).	Program target population: - Others	The target population are individuals who are in need of substance use treatment and who have a barrier to treatment due to transportation.
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$110,172.28
8a.	Amount expended:	\$56,336.81
8b.	Amount encumbered/appropriated:	\$53,835.47
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	100
13	Please state this program's statement of impact.	Increase treatment availability due to eliminating the barrier of transportation.

14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	93
	Number of services provided/encounters:	201
	Other:	The key performance indicator examined are the number of individuals benefitting from the service; ie number of individuals receiving gas cards, uber services and transports via the van. - 21 clients were transported using the van during the reporting period. - 72 clients were provided with uber services during the reporting period. - 22 unduplicated clients received a gas card during reporting period. - 201 one way trips were provided using the van to transport clients to treatment in the reporting period. - The enhancement grant provided 47 gas cards in the reporting period.
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	This program tracks the utilization of this grant quarterly.
17	Primary Category:	Treatment
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Recovery Supports; Wraparound and Connected Care Supports
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Address the Needs of Pregnant or Parenting Women and their Families, including Babies with Neonatal Abstinence Syndrome

20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This program reduces the barriers for accessing treatment, by addressing transportation needs in an effort to increase treatment outcomes.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #11	
1	Program Name/Title	Enhancements - Discovery
2	Agency/Funding Recipient Name	Discovery Institute for Addictive Disorders, Inc.
3	Agency/Funding Recipient Category	Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider)
4	Primary problem being addressed by this program:	Reduction in hospital send outs, increase patient engagement, reduce AMA and ACA rates, reduce recidivism rates.
5	Brief program description:	The poplar device, getting placed on the patient as they arrive, allows for very early detection and intervention of cardiac, respiratory, and hemodynamically unstable patients, preventing worsening conditions, and reducing EMS calls and hospital send- outs.
6	Program target population:	Individuals in Treatment; Individuals who Use Drugs
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$80,300.00
8a.	Amount expended:	\$54,820.00
8b.	Amount encumbered/appropriated:	\$25,480.00
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition

11 (a). cont.	Please choose the length of time of this program's duration: - Others cont.	to current contract.
12	What is the anticipated number of unduplicated clients this program will reach annually?	2000
13	Please state this program's statement of impact.	Obtaining compliance of every patient entering facility - 38 detox beds to be monitored daily utilizing this equipment
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	2000
	Number of training/education sessions:	12
	Number of services provided/encounters:	2000
	Increased community awareness (please describe):	Actively marketing our use of wearables to community
	Other:	Tracking hospital send-outs, cardiac and respiratory early detection.
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Lower the amount of hospital send-outs, monitor clients and prevent overdose and other medical emergencies by catching symptoms earlier and treating accordingly
17	Primary Category:	Treatment
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Recovery Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This technology is a critical part of treatment, providing continuum of care.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
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	2025 Fiscal Program #12	

1 Program Name/Title Enhancements - CPC 2 Agency/Funding Recipient Name CPC Integrated Health 3 Agency/Funding Recipient Category Community Based Organizations/Non-Governmental Organizations 4 Primary problem being addressed by this program: Opioid Use Disorder Prevention, Treatment, and Recovery Support Services 5 Brief program description: The Recovery Diversion Program links court involved individuals with SUD services with the anticipated outcome of applicable charges being dismissed. 6 Program target population: Individuals involved with the Criminal Justice System; Individuals who Use Drugs 7 Date this program was funded (please use MM/DD/YYYY) 8 Amount of funding for this program. \$160,000.00 8a. Amount expended: \$85,000.00 8b. Amount encumbered/appropriated: \$75,000.00 9 How often are you disbursing funds to this program? Quarterly program? 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: Others 11 Please choose the length of time of this program's duration: Others 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? 19 Number of participants served: 92 10 Number of services provided/encounters: 304			
Agency/Funding Recipient Category Community Based Organizations/Non-Governmental Organizations Primary problem being addressed by this program: Brief program description: The Recovery Support Services The Recovery Diversion Program links court involved individuals with SUD services with the anticipated outcome of applicable charges being dismissed. Program target population: Individuals involved with the Criminal Justice System; Individuals who Use Drugs Amount of funding for this program. Amount of funding for this program. S160,000.00 Amount expended: S85,000.00 How often are you disbursing funds to this program? Program Launch Date Program Launch Date Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: What is the anticipated number of unduplicated clients this program will reach annually? Please state this program will reach annually? Please state this program's statement of impact. What is the anticipated number of unduplicated clients this program's statement of impact. What is the anticipated number of unduplicated clients this program will reach annually? What is the anticipated number of unduplicated clients this program will reach annually? What is the anticipated number of unduplicated clients this program will reach annually? What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	1	Program Name/Title	Enhancements - CPC
A Primary problem being addressed by this program: Primary problem being addressed by this program: Dipid Use Disorder Prevention, Treatment, and Recovery Support Services The Recovery Diversion Program links court involved individuals with SUD services with the anticipated outcome of applicable charges being dismissed. Program target population: Individuals involved with the Criminal Justice System; Individuals who Use Drugs Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. Amount expended: S85,000.00 Amount expended: S85,000.00 How often are you disbursing funds to this program? Use Program Launch Date Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Please choose the length of time of this program is in its first one-year renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. What is the anticipated number of unduplicated clients this program will reach annually? Please state this program will reach annually? Please state this program statement of impact. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	2	Agency/Funding Recipient Name	CPC Integrated Health
Recovery Support Services	3	Agency/Funding Recipient Category	
involved individuals with SUD services with the anticipated outcome of applicable charges being dismissed. Program target population: Individuals involved with the Criminal Justice System; Individuals who Use Drugs Individuals who Use Drugs	4	Primary problem being addressed by this program:	
System; Individuals who Use Drugs Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. Amount expended: S85,000.00 Ba. Amount expended: S85,000.00 How often are you disbursing funds to this program? Program Launch Date Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Annual contract with possible renewal options. Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. What is the anticipated number of unduplicated clients this program will reach annually? Please state this program will reach annually? Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	5	Brief program description:	involved individuals with SUD services with the anticipated outcome of applicable charges being
MM/DD/YYYY) 8 Amount of funding for this program. \$160,000.00 8a. Amount expended: \$85,000.00 8b. Amount encumbered/appropriated: \$75,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Annual contract with possible renewal options. Program is in its first one-year renewal options (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	6	Program target population:	System;
8a. Amount expended: \$85,000.00 8b. Amount encumbered/appropriated: \$75,000.00 9 How often are you disbursing funds to this program? Quarterly 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: 12 Please choose the length of time of this program's duration: - Others 13 What is the anticipated number of unduplicated clients this program will reach annually? 14 Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	7		10/01/2023
8b. Amount encumbered/appropriated: \$75,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: 12 Please choose the length of time of this program's duration: - Others 13 Please choose the length of time of this program's duration: - Others 14 What is the anticipated number of unduplicated clients this program will reach annually? 15 Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 16 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	8	Amount of funding for this program.	\$160,000.00
9 How often are you disbursing funds to this program? 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: 11 Please choose the length of time of this program's duration: 12 Please choose the length of time of this program's duration: 13 Vhat is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	8a.	Amount expended:	\$85,000.00
program? 10 Program Launch Date 10/01/2023 11 Please choose the length of time of this program's duration: 11 Please choose the length of time of this program's duration: 12 Please choose the length of time of this program's duration: - Others 13 What is the anticipated number of unduplicated clients this program will reach annually? 14 Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	8b.	Amount encumbered/appropriated:	\$75,000.00
Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: Please choose the length of time of this program's duration: - Others Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	9		Quarterly
duration: Please choose the length of time of this program's duration: - Others Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served:	10	Program Launch Date	10/01/2023
(a). duration: - Others Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current contract. What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	11		Others
clients this program will reach annually? Please state this program's statement of impact. Provide SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal Court for dismissal of charges. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92			Program is in its first one-year renewal option (1/1/25-12/31/25). Total amount of funding reported above includes the amount remaining from original contract year in addition to current
management services to defendants with substance use arrests in Municipal Court for dismissal of charges. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	12	l '	75
to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Number of participants served: 92	13	Please state this program's statement of impact.	substance use arrests in Municipal Court for
	14	to ensure success of the program (for example, # of services provided, # of people	
Number of services provided/encounters: 304		Number of participants served:	92
Number of referrals to treatment 60		Number of services provided/encounters:	304

	Other:	All agency services/encounters to RDP clients = 2,129 All indicators reviewed: # of individuals served; treatment provided; criminal justice involvement; hospitalizations; hospital readmissions (30/90 day); diagnosis; treatment retention; client demographics;
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Measurement of outcomes for the RDP initiative is jointly monitored and evaluated by the Vice President of Quality & Risk Management and the Program Supervisor. Services are monitored on a daily basis by the Program Supervisor and at least monthly through existing technology infrastructure and QM processes. Available technology includes the agency's electronic health record, which provides a dashboard for key performance indicators regarding the RDP clients. Data is reviewed and informs continuous quality improvement projects related to the program that are monitored by QM and the Program Supervisor.
17	Primary Category:	Diversionary and Re-entry Support
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Recovery Supports; Treatment; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care,Address the Needs of Criminal Justice-Involved Persons, Appropriate Opioid Prescribing and Dispensing, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The funds appropriated though this grant are used to support the salaries of the staff assigned to work within the RDP program. Through the delivery of SUD, co-occurring MH treatment and case management services to defendants with substance use arrests in Municipal

20 cont.	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies. cont.	Court, the goal is to accomplish the dismissal of charges and continued engagement in services to prevent future instances of substance use charges.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	2025 Fiscal Program #13	
1	Program Name/Title	Enhancements - New Hope
2	Agency/Funding Recipient Name	New Hope Integrated Behavioral Health Care
3	Agency/Funding Recipient Category	Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider)
4	Primary problem being addressed by this program:	Salary increases, tuition reimbursement, and client transportation
5	Brief program description:	The agency's goal is to continue to retain and attract highly skilled candidates and utilize the "enhancement' funds to help for this purpose. Moreover, transportation plays a huge role in client care. Whether it's driving halfway house residents to offsite medical appointments, transporting adolescents from the short- term residential unit to recreational activities, driving adult clients to job and sober living interviews or transporting women often with their young children to medical and other appointments as well as to entertainment or recreation for the youngsters, transportation remains a great need for clients. Thus, the agency was able to purchase a 12- passenger van to continue to provide transportation as described above.
6	Program target population:	Healthcare Personnel and Workforce; Individuals in Treatment; Individuals who Use Drugs; Pregnant and Parenting Individuals and their Families, including Babies with Neonatal Abstinence Syndrome
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023

8	Amount of funding for this program.	\$100,000.00
8a.	Amount expended:	\$100,000.00
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Annually
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	Annual contract with possible renewal options. This program is in the midst of it's first one-year renewal option (1/1/25-12/31/25).
12	What is the anticipated number of unduplicated clients this program will reach annually?	60
13	Please state this program's statement of impact.	The funds help to provide attractive salaries and benefits for employees and to meet the diverse transportation needs for clients as well as, in certain instances, their families. In this way, the funding helps employee retention and help transport clients.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	100
	Other:	Number of employees who received tuition reimbursement, total amount of tuition reimbursement paid to employees, number of employees who received reimbursement for licensing fees, total amount of licensing fee reimbursement paid to employees, number of employees who received reimbursement for certification fees, total amount of certification fees reimbursement paid to employees, number of beneficiaries who were transported in new vehicle, number of one-way trips using new vehicle.
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	In addition to entering data on each client into the New Jersey Substance Abuse Monitoring System (NJSAMS), which collects information on substance use as well as demographics; internally with track: client status as it pertains to discharge, counselor productivity,

16 cont.	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? cont.	no-show rates, Treatment Perception Questionnaires, HAID and HAWD Survey results as well as financial data.
17	Primary Category:	Treatment
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Recovery Supports; Workforce Development and Capacity Building
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Address the Needs of Pregnant or Parenting Women and their Families, including Babies with Neonatal Abstinence Syndrome, Training
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Eliminating barriers to treatment, such as transportation in order to continually effectively provide treatment for SUD/OUD.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	RFP competitive contracting
	T	T
	2024 Fiscal Program #1	
1	Program Name/Title	County-Wide Substance Use Awareness Campaign
2	Have there been any modifications or expansions to this program since the initial report? :	No, Program was a one-time event
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$60,000.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Increased community awareness (please describe):	Completed development of awareness campaign
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No

6	Last Updated Date :	09/16/2025
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	Opioid Settlement Funding Report		
	Sub Division: Aberdeen Township		
	State ID:	NJ1	
	County Name:	Monmouth	
	Address:	1 ABERDEEN SQ; ABERDEEN; New Jersey; 07747	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$39,175.28	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$1,371.13	
3	Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022.	\$129,538.17	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	0	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$0.00	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Nothing currently	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example; did you rely on evidence-based or evidence-informed practices or strategies; the list of Opioid Remediation uses; a needs assessment; a strategic plan; or an epidemiological analysis? If yes; please explain.	Not used
12	In this reporting year (7/1/2024 - 6/30/2025); 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?	Working on it
14	Does your county/subdivision have a strategic plan?	No; but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No; but we plan to in the future
16	Did your subdivision fund any programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report			
	Sub Division: Asbury Park City			
	State ID:	NJ2		
	County Name:	Monmouth		
	Address:	One Municipal Plaza, Asbury Park, New Jersey, 07712		
	Fiscal Year:	2025		
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$192,406.14		
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00		
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$685,570.20		
4	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		
5	What amount of your opioid abatement funds did you transfer to the county?			
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$46,237.12		
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00		
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00		
8a.	Please provide details about any administrative expenses.	We have not charged for Administrative Expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$580,733.13		

10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	We have hired a dedicated substance abuse Peer and formed an "Opioid Team", which includes the Peer, a Social Worker and Registered Nurse with oversight by the Supervisor, who is an LCADC. The Team does community outreach for prevention and harm reduction at various events and fairs, as well as responding to OD's (when feasible). We actively partner with the Asbury Park Police in doing community outreach to various locations. We recently sponsored a Fentanyl Awareness Day Fair at out location. They also engage daily with people who are at-risk or actively using to engage them into treatment, MAT or other harm reduction pathways.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We looked at other models and discussed with City Administration, Council Members and Staff. We are using the Peer Model and incorporating community education including Narcan distriution and education.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	Working with City Administration, City Council and Staff, so far. We have gone to numerus locations for education and feedback with very modest results and feedback. These include Senior Housing sited, local fairs and events. We also sponsor a quarterly "Peer Gathering" where we invite Peers from various agencies (locally) to come and share and exchange ideas and program plans.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for	No, but we plan to in the future

16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Peer Staff
2	Agency/Funding Recipient Name	City of Asbury Park
3	Agency/Funding Recipient Category	County or Municipality (including Departments
3	Agency/i unumg Necipient Category	and Municipal Alliances)
4	Primary problem being addressed by this program:	Outreach & engage with clients, active users and at risk
5	Brief program description:	Hired Peer for outreach/education/patient engagement
6	Program target population:	Children and Young Adults - 19-24 (post-grad through college); Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	01/16/2025
8	Amount of funding for this program.	\$55,000.00
8a.	Amount expended:	\$46,237.12
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	bi-weely
10	Program Launch Date	01/16/2025
11	Please choose the length of time of this program's duration:	5+ years
12	What is the anticipated number of unduplicated clients this program will reach annually?	50
13	Please state this program's statement of impact.	Reduce active Opioid use, offer harm reduction through MAT and pursue active treatment options whenever appropriate.

14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Reduction in opioid-related incidents:	19
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	1080
	Increased community awareness (please describe):	Increase Community education and outreach including follow up with OD's
	Other:	We are beginning to track clients and other items as listed above
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Increase Community Awareness through outreaches . Engage with active users and engage them into treatment.
17	Primary Category:	Treatment
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Diversion and Re-entry Support; Harm Reduction and Overdose Prevention; Housing; Primary Prevention, Education, and Training; Recovery Supports; Wraparound and Connected Care Supports
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	As a in-community agency we engage people through outreach, the Court, with Police and walk-ins. We have a long history working with the co-occurring community
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Funds are managed internally through our Finance Department.
	2024 Fiscal Program #1	
1	Program Name/Title	City of Asbury Park
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions

3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Reduction in opioid-related incidents:	19
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	09/17/2025

	Opioid Settlement Funding Report		
	Sub Division: Eatontown Borough		
	State ID:	NJ50	
	County Name:	Monmouth	
	Address:	47 Broad Street, Eatontown, New Jersey, 07724	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$47,890.62	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$157,986.74	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$21,230.52	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$21,230.52	
8a.	Please provide details about any administrative expenses.	police office to attend "Strategies of Opioid disorder" certificate class	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$170,641.02	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	NA	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a	NA
	needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	NA
14	Does your county/subdivision have a strategic plan?	No
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report			
	Sub Division: Freehold Borough			
	State ID:	NJ68		
	County Name:	Monmouth		
	Address:	Freehold Borough Hall,30 Mechanic Street, Freehold Borough, New Jersey, 07728		
	Fiscal Year:	2025		
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$40,122.42		
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00		
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$142,963.59		
4	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		
5	What amount of your opioid abatement funds did you transfer to the county?			
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$14,306.30		
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$3,200.00		
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$476.30		
8a.	Please provide details about any administrative expenses.	Organizing Informative and Interactive Programs		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$125,455.54		

Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	The Borough of Freehold is a diverse community facing many challenges related to substance abuse. Our desire is to use these funds to provide treatment resources to those who are un or underinsured to access recovery resources. Our desire is to aide young people, adults and senior citizens alike. In 2025 we have partnered with High Focus to run a Youth and Teen outreach program.
How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	Borough officials and staff partnered with available local health groups such as Freehold Neighborhood Connections to Health, the Freehold Aea Health Department and other addiction resources to target identified needs and fill gaps in resources.
In this reporting year (7/1/2024 - 6/30/2025), 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
Please describe your public engagement/input efforts?	Thus far, we have focused on collaborating with community health-oriented organizations and our Municipal Alliance
Does your county/subdivision have a strategic plan?	No, but we plan to in the future
Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
2025 Fiscal Program #1	
Program Name/Title	High Focus
Agency/Funding Recipient Name	American Day CD Center LLC
Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations
Primary problem being addressed by this program:	Opioid Use Disorder and Substance Use Disorder or Mental Health
	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain. In this reporting year (7/1/2024 - 6/30/2025), 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? Please describe your public engagement/input efforts? Does your county/subdivision have a strategic plan? Have you completed a Risk Assessment profile for demographic or geographic impact? Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category

5	Brief program description:	Providing comprehensive mental health and substance use disorder treatment services.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade); Children and Young Adults - 14-18 (high school aged); Children and Young Adults - 19-24 (post-grad through college); Individuals who Use Drugs
7	Date this program was funded (please use MM/DD/YYYY)	04/15/2024
8	Amount of funding for this program.	\$17,500.00
8a.	Amount expended:	\$13,830.00
8b.	Amount encumbered/appropriated:	\$3,670.00
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	They Issue an invoice based on the amount of patients seen.
10	Program Launch Date	04/01/2025
11	Please choose the length of time of this program's duration:	Less than 1 year
12	What is the anticipated number of unduplicated clients this program will reach annually?	10
13	Please state this program's statement of impact.	High Focus Centers in Freehold, New Jersey, is dedicated to providing comprehensive mental health and substance use disorder treatment services. Our Freehold counseling center serves adults, teenagers, and middle school-aged children in the Monmouth, Ocean, and Middlesex County areas. Our specialized therapist team at our Freehold location is committed to helping clients overcome a wide range of behavioral health challenges. We offer tailored treatment for various mental health concerns such as anxiety disorders, depression, bipolar disorder, ADHD, and trauma/PTSD. Our programming includes both partial hospitalization (PHP) and IOP options, with separate therapy sessions for adults and teenagers. High Focus Centers in Freehold is your trusted partner on the path to improved mental health and well-being.

14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of services provided/encounters:	36
15	How frequently are you measuring the tracked key performance indicators?	Monthly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	See a reduction in Opioid arrest, and usage in the area.
17	Primary Category:	Recovery Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Treatment
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Prevent Misuse of Opioids
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Their Co-Occurring PHP is tailored to offer comprehensive treatment, addressing both mental health and substance use disorders concurrently. With a dedicated team and an integrated approach, adolescents receive personalized care, enhancing their prospects of sustained recovery and overall well-being. High Focus Centers is deeply committed to providing adolescents in Freehold with holistic support, ensuring their mental health and substance use challenges are effectively addressed through our PHP program.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Multiple Programs were looked at but high focus matched what Freehold Borough was looking for.

	Opioid Settlement Funding Report		
	Sub Division: Freehold Township		
	State ID:	NJ69	
	County Name:	Monmouth	
	Address:	1 Municipal Plaza, Freehold, New Jersey, 07728	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$90,773.32	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$8,660.23	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$267,454.35	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$26,550.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$6,000.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$208,119.78	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Looking to provide assistance with treatment for uninsured, couseling for senior citizens and evidence-based proanmming for schools.	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	A needs assessment and strategic plan developed by our local Alliance against Substance Abuse.
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding
13	Please describe your public engagement/input efforts?	Met with community steakholders to discuss best use of the funds.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	Yes
15a	Can we post your risk assessment online?	
15a 16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	Did your subdivision fund any new programs using	Yes
	Did your subdivision fund any new programs using	Yes
	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes Konscious Education Training
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1	
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title	Konscious Education Training
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based
16 1 2 3	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based Organizations/Non-Governmental Organizations
16 1 2 3	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program:	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based Organizations/Non-Governmental Organizations Common Youth Risk Factors Teaches community youth leaders how to foster meaningful connections and create nurturing
16 1 2 3 4 5	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description:	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based Organizations/Non-Governmental Organizations Common Youth Risk Factors Teaches community youth leaders how to foster meaningful connections and create nurturing environments
16 1 2 3 4 5	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description:	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based Organizations/Non-Governmental Organizations Common Youth Risk Factors Teaches community youth leaders how to foster meaningful connections and create nurturing environments Others
16 1 2 3 4 5 6 6(a).	Did your subdivision fund any new programs using opioid abatement funds in this reporting year? 2025 Fiscal Program #1 Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description: Program target population: Program target population: - Others Date this program was funded (please use	Konscious Education Training Konscious Youth Developement Services (KYDS) Community Based Organizations/Non-Governmental Organizations Common Youth Risk Factors Teaches community youth leaders how to foster meaningful connections and create nurturing environments Others Community Youth Leaders

8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	08/26/2024
11	Please choose the length of time of this program's duration:	Less than 1 year
12	What is the anticipated number of unduplicated clients this program will reach annually?	2
13	Please state this program's statement of impact.	Youth leaders from community-based organizations requested training on navigating issues affecting troubled youth. Two trained leaders from two CBO's have the ability to positively affect hundreds of youth, positively inpacting youth risk behavior factors
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of training/education sessions:	16
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	2 leaders trained over 5 month period. Periodic check-ins with CBOs to discuss the effects of their impact on youth and how they are able to provide positive recreational opporunities and mentorship.
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Two trained leaders from two CBO's have the ability to positively affect hundreds of youth, positively inpacting youth risk behavior factors.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention; Wraparound and Connected Care Supports
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Connections to Care

Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies. Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program. Program Name/Title Program Name/Title Agency/Funding Recipient Name Primary problem being addressed by this program: Primary problem being addressed by this program: Program target population: Program target population: Others Amount of funding for this program. Amount expended: Amount expended: Amount expended: Amount encumbered/appropriated: Program Launch Date Program Launch Date Please state this program (for example, # of services provider), # of people served, # of another wisk distributed)? What is the anticipated number of unduplicated clients this program will reach annually? What is the anticipated number of unduplicated clients this program will reach annually? What is the program will reach annually? What is the program is statement of impact. What is the program is statement of impact. What is the program will reach annually? What key performance indicators are you tracking to example, # of services provided, # of people served, #		-	
for this program, describe the procurement method identified was used for this program. 2025 Fiscal Program #2	20	opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or	appropriate education to mange and mentor
Program Name/Title Agency/Funding Recipient Name CPC Integrated Health Agency/Funding Recipient Category Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider) Primary problem being addressed by this program: Brief program description: Provide group counseling and one-on-one sessions Program target population: Others Citizens at Twp. Senior Center Facility Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. Amount expended: Amount expended: Amount expended: Amount encumbered/appropriated: Program Launch Date 11/01/2024 Please choose the length of time of this program's duration: Program Launch Date 11/01/2024 Please state this program will reach annually? Please state this program's statement of impact. Address mental health challenges among the aging population. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	21	for this program, describe the procurement process, and explain why the procurement	l · ·
Program Name/Title Agency/Funding Recipient Name CPC Integrated Health Agency/Funding Recipient Category Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider) Primary problem being addressed by this program: Brief program description: Provide group counseling and one-on-one sessions Program target population: Others Citizens at Twp. Senior Center Facility Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. Amount expended: Amount expended: Amount expended: Amount encumbered/appropriated: Program Launch Date 11/01/2024 Please choose the length of time of this program's duration: Program Launch Date 11/01/2024 Please state this program will reach annually? Please state this program's statement of impact. Address mental health challenges among the aging population. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?			
Agency/Funding Recipient Name CPC Integrated Health Agency/Funding Recipient Category Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider) Primary problem being addressed by this program: Grief, loneliness and uncertainty of future Brief program description: Provide group counseling and one-on-one sessions Program target population: Others Program target population: Others Amount of funding for this program. \$11/01/2024 Amount of funding for this program. \$12,300.00 Amount expended: \$6,300.00 Amount encumbered/appropriated: \$6,000.00 How often are you disbursing funds to this program? Program Launch Date 11/01/2024 Please choose the length of time of this program's duration: What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. Address mental health challenges among the aging population. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?		2025 Fiscal Program #2	
Agency/Funding Recipient Category Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider) Primary problem being addressed by this program: Grief, Ioneliness and uncertainty of future Program description: Provide group counseling and one-on-one sessions Program target population: Others G(a). Program target population: - Others Senior Citizens at Twp. Senior Center Facility Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. \$12,300.00 Amount expended: \$6,300.00 Amount encumbered/appropriated: \$6,000.00 How often are you disbursing funds to this program? Quarterly program? Program Launch Date 11/01/2024 Please choose the length of time of this program's duration: 2-3 years What is the anticipated number of unduplicated clients this program will reach annually? 25 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	1	Program Name/Title	1
Health or Substance Use Treatment Provider) 4 Primary problem being addressed by this program: Grief, loneliness and uncertainty of future 5 Brief program description: Provide group counseling and one-on-one sessions 6 Program target population: Others 6(a). Program target population: Others Senior Citizens at Twp. Senior Center Facility 7 Date this program was funded (please use MM/DD/YYYY) 8 Amount of funding for this program. \$12,300.00 8a. Amount expended: \$6,300.00 8b. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 2-3 years 12 What is the anticipated number of unduplicated clients this program will reach annually? 25 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	2	Agency/Funding Recipient Name	CPC Integrated Health
Brief program description: Others Others Senior Citizens at Twp. Senior Center Facility Interpretation: Others Senior Citizens at Twp. Senior Center Facility Interpretation: Interpretation: Interpretation: Interpretation: Others Senior Citizens at Twp. Senior Center Facility Interpretation: Interpreta	3	Agency/Funding Recipient Category	
6 Program target population: Others 6(a). Program target population: - Others 7 Date this program was funded (please use MM/DD/YYYY) 8 Amount of funding for this program. \$12,300.00 8a. Amount expended: \$6,300.00 8b. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 2-3 years 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	4	Primary problem being addressed by this program:	Grief, loneliness and uncertainty of future
6(a). Program target population: - Others Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program. Amount expended: Amount expended: Amount encumbered/appropriated: How often are you disbursing funds to this program? Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? Senior Citizens at Twp. Senior Center Facility 11/01/2024 11/01/2024 \$6,300.00 Quarterly Quarterly 2-3 years 2-3 years 2-5 Address mental health challenges among the aging population.	5	Brief program description:	Provide group counseling and one-on-one sessions
7 Date this program was funded (please use MM/DD/YYYY) 8 Amount of funding for this program. \$12,300.00 \$4. Amount expended: \$6,300.00 \$5. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	6	Program target population:	Others
MM/DD/YYYY) 8 Amount of funding for this program. \$12,300.00 8a. Amount expended: \$6,300.00 8b. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 2-3 years 12 What is the anticipated number of unduplicated clients this program will reach annually? 25 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	6(a).	Program target population: - Others	Senior Citizens at Twp. Senior Center Facility
8a. Amount expended: \$6,300.00 8b. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 2-3 years 12 What is the anticipated number of unduplicated clients this program will reach annually? 25 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	7		11/01/2024
8b. Amount encumbered/appropriated: \$6,000.00 9 How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 2-3 years 12 What is the anticipated number of unduplicated clients this program will reach annually? 25 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	8	Amount of funding for this program.	\$12,300.00
How often are you disbursing funds to this program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? 15 Quarterly 16 Quarterly 2-3 years 2-5 years 4 Address mental health challenges among the aging population.	8a.	Amount expended:	\$6,300.00
program? 10 Program Launch Date 11/01/2024 11 Please choose the length of time of this program's duration: 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)? 15 Please state this program's statement of impact. 16 Address mental health challenges among the aging population.	8b.	Amount encumbered/appropriated:	\$6,000.00
Please choose the length of time of this program's duration: What is the anticipated number of unduplicated clients this program will reach annually? Please state this program's statement of impact. Address mental health challenges among the aging population. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	9		Quarterly
duration: 12 What is the anticipated number of unduplicated clients this program will reach annually? 13 Please state this program's statement of impact. Address mental health challenges among the aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	10	Program Launch Date	11/01/2024
clients this program will reach annually? Please state this program's statement of impact. Address mental health challenges among the aging population. What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	11		2-3 years
aging population. 14 What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	12		25
to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	13	Please state this program's statement of impact.	
Number of participants served: 400	14	to ensure success of the program (for example, # of services provided, # of people	
		Number of participants served:	400

15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Provide group and individual therapy for at risk seniors
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Connections to Care
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Provision of support will reduce or identify depression that could lead to substance abuse or suicide.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Single source procurement
	2023 Fiscal Program #1	
1	Program Name/Title	Access to Free Treatment
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, other modifications/expansions
	2a) If yes, please explain:	Continued with fiancing treatment for uninsured. Added weekly group counseling and individual therapy sessions to senior citizens at Senior facility. Provided Konsciuos Kyds Educators Training
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$17,050.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	
1	1	<u> </u>

	Number of training/education sessions:	
	Increased community awareness (please describe):	Fliers dsitributed at community events
	Number of referrals to treatment	2
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	09/15/2025

	Opioid Settlement Funding Report		
	Sub Division: Hazlet Township		
	State ID:	NJ89	
	County Name:	Monmouth	
	Address:	1766 Union Ave, Hazlet, New Jersey, 07730	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$12,444.10	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$96,352.71	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$1,500.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$2,500.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	No administrative expenses	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$81,404.45	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	The goal for this year was to assist a juvenile suffering with mental health issue and using substances to deal with those issues. The juvenile was ready to give up on school	

10 cont.	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions cont.	due to the lack of support and problems he faces in the public school.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	The best way to use the funds during this period was to support the juvenile through the K.E.Y.S. Academy. (Knowledge Empowers Youth and Sobriety). K.E.Y.S mission is to provide an academically, innovative, and supportive environment which will serve to eliminate the achievement gap for adolescents who have been diagnosed with a substance use disorder and are seeking a sober, healthy lifestyle. The juvenile was able to complete their high school education and graduate in June of 2025.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	Speaking with he high school SAC and the KEYS academy director we were able to decide how to get the juvenile into treatment and then through the academy in order to continue his education and remain sober.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Black Poster Project
2	Agency/Funding Recipient Name	The Black Poster Project
3	Agency/Funding Recipient Category	Schools, Colleges, Universities
4	Primary problem being addressed by this program:	Overdosed caused by opioids

5	Brief program description:	Large scale silent memorial to those in NJ who have lost their lives to overdoses. Their image and a brief biography are displayed.
6	Program target population:	Children and Young Adults - 14-18 (high school aged)
7	Date this program was funded (please use MM/DD/YYYY)	05/17/2024
8	Amount of funding for this program.	\$1,500.00
8a.	Amount expended:	\$1,500.00
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	05/17/2024
11	Please choose the length of time of this program's duration:	One time only
12	What is the anticipated number of unduplicated clients this program will reach annually?	200
13	Please state this program's statement of impact.	The project creates a profound and measurable impact by humanizing the crisis and reducing stigma. Its effect is emotional and educational, changing perspectives and inspiring action.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Increased community awareness (please describe):	During this program half of the student body was able to participate. The next time we will be able to provide it to the entire student body. We hope to see an increase in students reaching out to the SAC for guidance.
15	How frequently are you measuring the tracked key performance indicators?	Annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Increase awareness and decrease stigma. While prevention is hard to track, by keeping tabs on how many students have seen the project we can eventually keep track of any involved in the criminal justice system. We also can keep track of how many additional referrals the SAC at the high school receives.
17	Primary Category:	Harm Reduction and Overdose Prevention

18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The project changes the public's perception by putting a human face to addiction, making it clear that overdose victims are not "just statistics" but individuals from loving families. The display serves as a gut-wrenching but powerful memorial for families, allowing them to channel their grief into a positive force for change. Attendees often leave with a deeper sense of empathy and a commitment to doing more. For many who witness the exhibit, the experience shifts their perspective on addiction, moving it from an abstract news story to a personal and serious issue.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	The prevention coalition of monmouth county puts on a huge display for the public. We wanted to target our specific community with the idea that prevention and education needs to start early, however the impact of the program would be intense for younger students. Counselors are available during the program if any student needs assistance.

	Opioid Settlement Funding Report		
	Sub Division: Holmdel Township		
	State ID:	NJ95	
	County Name:	Monmouth	
	Address:	4 Crawfords Corner Road, Holmdel, New Jersey, 07733	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$51,084.27	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$205,430.09	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$51,084.27	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	We did not spend any funds yet so there are no expenses to report.	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$205,430.09	

10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Although we haven't spent any of our opioid funds. Our goal as a township is to implement opioid remediation, which are programs/supplies designed to address treatment and recovery efforts.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We have yet to use opioid funds but have talked with first responders (police, ems, etc) in town to discuss needs for the future.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	Currently we do not have any public engagement/input efforts but will have a panel in the future to discuss needs.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report		
	Sub Division: Howell Township		
	State ID:	NJ98	
	County Name:	Monmouth	
	Address:	4567 Route 9 North, Howell Township, Floor 2, Howell, New Jersey, 07731	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$101,575.54	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$361,927.92	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$21,870.06	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$5,000.00	
8a.	Please provide details about any administrative expenses.	The \$5,000 administrative expenses includes keeping track of incoming settlement agreement deposits and expenditures, keeping abreast of new settlement agreements and opting in, ensuring Approved Use expenditure compliance, collaborating with internal departments and external organizations/individuals on programming ideas, and keeping township leaders	

8a. cont.	Please state the amount of unspent and/or uncommitted opioid abatement funds from any	and the public apprised of our funding and spending. It also covers time spent on new and expanding opioid settlement agreement funds programs. These expand existing programs or are new programs (no supplanting with opioid funds) Approved Uses Compliance: Part II: PREVENTION G. Prevent misuse of opioids: #1, 3, 6: expanding public education prevention messaging and outreach through Christa's public relations certification completed 4-2025 #10, 11, 12: expanding and starting community-based education programs focused on substance use prevention education, stigma reduction, mental well-being, and resilience strategies, as well as increased dissemination of behavioral health support resources in coordination with police department; quarterly senior center prevention and behavioral health-related presentations; creation and coordination of uninsured students' behavioral health treatment scholarships in coordination with Howell School District and Howell High School SACs (program is still being planned and coordinated, as there are a lot of moving parts and legal considerations before we launch it this school year); creation and coordination of senior center weekly group and individual behavioral health specialists Part III: OTHER STRATEGIES J. Leadership planning and coordination: #4: provide resources to staff government oversight and management of opioid abatement programs L. Research: #1: monitor, survey, evaluate programs and strategies
	uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	To report at council meetings on settlement agreement so Howell is transparent with funding and spending; many people and families were impacted by the opioid epidemic's tragedy, and they should know how the money is being spent; to provide benefit to those impacted by opioid misuse and abuse epidemic; to implement

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10 cont.	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions cont.	targeted, effective, and evidence-based opioid misuse and abuse prevention programs across community populations (from pre-schoolers to seniors) through school, police, other organizations, and community partnerships; to work with Howell Police to assist populations vulnerable to substance use and mental health issues and recidivism, with consideration to the substance use disorder and criminal activity intersection; to work with Howell Public Schools Pre-K-to-8 and Howell High School to reach students and parents for prevention and life skills programs and to provide access to youth behavioral health support services (without this partnership, it is almost impossible to educate and impact youth and families); to collaborate with community organizations and professionals to implement in-house Alliance prevention programs tailored to our specific community mental health and substance use needs; to collect and analyze data to gauge programs' effectiveness over time; to solicit program suggestions from community members, organizations, and professionals that comply with Approved Use spending criteria in support of those affected by the opioid epidemic and in support of prevention opioid misuse, abuse, and overdoses.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	Quantitative and qualitative information and data analysis at township, county, state, and national levels; trends analysis at township, county, state, and national levels; partnering with school SACs and police department to discuss their needs assessments through school and police qualitative and quanititative data; researching and exploring evidence-based programs; collaboration with county and other municipalities on opioid settlement agreement-funded strategies (to avoid supplantation and duplication and to get new ideas); launching forms for internal (cross-departments at Howell Township) and external/public (community members, behavioral health professionals

11 cont.	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain. cont.	in the community, and community civic organizations) opioid abatement-funded program ideas to ensure collaboration, cross-demographic input, fair spending that addresses all populations' needs, and inclusion of all community members at risk for opioid misuse, substance use, and overdose prevention and other behavioral health issues that can lead to substance use disorder
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding
13	Please describe your public engagement/input efforts?	We engage the public in an on-going fashion at town council meetings and Alliance meetings. We engage the public by reporting on strategic planning, programs implemented, and available/spent funding at town council meetings and quarterly Alliance meetings (open to the public); we also developed internal and external/public forms to encourage public input and collaboration across township demographics and populations (see #10 for more details on the forms)
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No
	2024 Fiscal Program #1	
1	Program Name/Title	Community and Police Engagement
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, modification to funding amount

	2a) If yes, please explain:	Purchased interactive button making machine for youth to engage with police officers and the Alliance at community events while creating their own personalized positive decision-making and health- and prevention-oriented messages.
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$722.95
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Increased community awareness (please describe):	Positive decisions and healthy behaviors
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/12/2025
	2024 Fiscal Program #2	
1	Program Name/Title	Student and parent education
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, other modifications/expansions
	2a) If yes, please explain:	Funded additional presentations for Howell High School students by Matthew Bellace (Red Ribbon Week) and After the Fire by Simon Says, LLC on situational awareness, substance use, resiliency, decision-making, and consequences for adulthood and college prep. Purchased Human Relations Media Center on-demand, age- and subject-tailored behavioral health, substance use prevention, life skills, and decision-making videos for individual/class student education use by Howell Pre-K to 8 Schools, Howell High School, police department, and Alliance staff. Funded annual Hooked on Fishing, Not on Drugs participant prizes, event signage, and youth give-aways. Funded annual Law Enforcement Against Drugs (L.E.A.D.) program 5th-grade graduations after completing 8-month curriculum, including participation incentives,

cont.	2a) If yes, please explain: cont.	parent info cards, and student give-aways as reminders for middle school positive choices, healthy relationships, substance use prevention, and peer refusal skills.
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$10,812.14
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	10000
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program?:	Yes
	5a) If yes, please explain:	Hooked on Fishing, Not on Drugs and L.E.A.D. are excellent annual programs accomplishing our goals of community education, interaction, and outreach that prevent substance use and harmful behaviors.
6	Last Updated Date :	08/12/2025
	2024 Fiscal Program #3	
1	Program Name/Title	Community behavioral health education & outreach
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, other modifications/expansions
	2a) If yes, please explain:	We implemented 2 more mental health support presentations for community members throughout the year and revamped our presentations to also include physical and emotional wellness to encourage participation. We also funded our Alliance coordinator to complete an intensive public relations certification to improve substance use, mental health, and general community wellness communication strategy, press releases, messaging, engagement, audience reach, and analytics to achieve better community outreach across media and populations. Community transparency and timely dissemination of fact-based, accurate information is critical to community engagement and well-being,

cont.	2a) If yes, please explain: cont.	especially for health-related topics and safety concerns.
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$4,666.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of training/education sessions:	2
	Increased community awareness (please describe):	See 1 a. regarding public relations improvements
	Other:	The number of participants served by our public relations efforts and announcement of our mission, events, programs, support resources, and services has an average Facebook post reach of 2,000 and max. Facebook post reach of 12,000; this does not include our reach through print and other online media outlets and platforms.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/12/2025
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	2023 Fiscal Program #1	
1	2023 Fiscal Program #1 Program Name/Title	Tackling Opioids Through Prevention
1 2		Tackling Opioids Through Prevention Yes - Program has ended/will not be continued
	Program Name/Title Have there been any modifications or expansions	
2	Program Name/Title Have there been any modifications or expansions to this program since the initial report?: Amount expended in this reporting period	Yes - Program has ended/will not be continued
3	Program Name/Title Have there been any modifications or expansions to this program since the initial report?: Amount expended in this reporting period (7/1/2023 - 6/30/ 2024) What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people	Yes - Program has ended/will not be continued
3	Program Name/Title Have there been any modifications or expansions to this program since the initial report?: Amount expended in this reporting period (7/1/2023 - 6/30/ 2024) What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	Yes - Program has ended/will not be continued \$0.00

	2023 Fiscal Program #2	
1	Program Name/Title	Substance Use/Mental Health Support Services for People Engaging in Criminal Activity
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	We are presently working on an ancilliary program to connect people in contact with law enforcement with treatment and recovery resources, including 24/7 access to recovery coaches through a county opioid settlement agreement-funded program and NJ State Police's Operation RISE. More to follow FY 2026it may wind up being a separate program because it will cast a much wider net and reach a more extensive population than those engaged in criminal activity.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/12/2025
	2023 Fiscal Program #3	
1	Program Name/Title	Pre-K to 8, High School & Town Buildings Substance Use Prevention and Potential Overdose Mitigation
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, modification to funding amount
	2a) If yes, please explain:	Completed purchase and installation of middle school vape detectors in bathrooms for additional \$10,248.00 in funding during FY 2024
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00

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4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	\$10,248.00 additional funds expended for FY 2024
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	Yes
	5a) If yes, please explain:	There was an error in our FY 2023 report regarding a -\$1,000 mistake in deducting funds; this was corrected in the amended FY 2023 report submitted 11-14-24
6	Last Updated Date :	11/14/2024
	2023 Fiscal Program #4	
1	Program Name/Title	Unwanted Medication Disposal
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, modification to funding amount
	2a) If yes, please explain:	New purchase of DisposeRx prescription disposal packets for community distribution.
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$668.97
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets):	DisposeRx at-home, on-demand safe prescription disposal packets distributed to community members for free via town hall Alliance display, at senior center, and at community events, as well as upon request by a community member.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/12/2025

	Opioid Settlement Funding Report		
	Sub Division: Long Branch City		
	State ID:	NJ117	
	County Name:	Monmouth	
	Address:	344 Broadway, City of Long Branch, Long Branch, New Jersey, 07740	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$128,308.96	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$837,337.24	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$769,965.52	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	N/A	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$162,089.63	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	We have begun construction on our new \$15M Health and Wellness Center and purchased a trailer for mobile outreach.	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	The main goal was to bring existing services to our residents to overcome the barrier of travel and inconvenience.
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding
13	Please describe your public engagement/input efforts?	Monies were spent in accordance with the NJ Public Contracts Law, and all items were made public for review and comment.
14	Does your county/subdivision have a strategic plan?	No
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No
	2025 Fiscal Program #1	
1	Program Name/Title	Health & Technology Center
2	Agency/Funding Recipient Name	City of Long Branch
3	Agency/Funding Recipient Category	Community Based Organizations/Non-Governmental Organizations; County or Municipality (including Departments and Municipal Alliances); First Responders, Law Enforcement, and Emergency Services; Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider); Private/For-profit Organizations; Schools, Colleges, Universities
4	Primary problem being addressed by this program:	Transportation divide to existing programs

5	Brief program description:	To bring existing programs within walking distance to all Long Branch residents this is a 15M dollar project that will be supplemented by opioid funds.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade); Children and Young Adults - 14-18 (high school aged); Children and Young Adults - 19-24 (post-grad through college); First Responders, Law Enforcement and other Emergency Responders; Healthcare Personnel and Workforce; Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public; Pregnant and Parenting Individuals and their Families, including Babies with Neonatal Abstinence Syndrome
6(a).	Program target population: - Others	
7	Date this program was funded (please use MM/DD/YYYY)	04/01/2025
8	Amount of funding for this program.	\$769,965.52
8a.	Amount expended:	\$769,965.52
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Quarterly
10	Program Launch Date	12/31/2026
11	Please choose the length of time of this program's duration:	5+ years
12	What is the anticipated number of unduplicated clients this program will reach annually?	5000
13	Please state this program's statement of impact.	This facility will make existing programs unavailable due to their location available to over 40,000 residents.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	

	Other:	Unknown
15	How frequently are you measuring the tracked key performance indicators?	Semi-annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Connect the transportation divide.
17	Primary Category:	Wraparound and Connected Care Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Diversion and Re-entry Support; Harm Reduction and Overdose Prevention; Housing; Primary Prevention, Education, and Training; Recovery Supports; Treatment; Workforce Development and Capacity Building
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Support People in Treatment and Recovery, Connections to Care, Address the Needs of Criminal Justice-Involved Persons, Address the Needs of Pregnant or Parenting Women and their Families, including Babies with Neonatal Abstinence Syndrome, Appropriate Opioid Prescribing and Dispensing, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction), First Responders, Leadership, Planning and Coordination, Training
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Providing services otherwise unavailable to our residents.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	This building is possible through State Grants, Federal Grants, Opioid Funds and local funding.

	Opioid Settlement Funding Report		
	Sub Division: Manala	apan Township	
	State ID:	NJ123	
	County Name:	Monmouth	
	Address:	120 Freehold Road, Manalapan Township, New Jersey, 07726	
	Fiscal Year:	2025	
	1		
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$230,792.22	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$396,812.31	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	We have not utilized any of the funding	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$230,792.22	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	We are reaching out to our neighboring municipalities to share ideas on usage of teh funds and working with our Police Department.	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We have not utilized any funding
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	None at this time
14	Does your county/subdivision have a strategic plan?	No
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report		
	Sub Division: Marlboro Township		
	State ID:	NJ129	
	County Name:	Monmouth	
	Address:	1979 Township Drive, Marlboro, New Jersey, 07746	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$78,024.22	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$278,011.25	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$5,079.75	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$78,024.22	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$198,011.25	

10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	The Township is home to New Hope Integrated Behavioral Health Care and Discovery Institute for Addictive Disorders, two large private not-for-profit treatment facilities with approximately 260 beds collectively. The Township has directed the use of settlement funds to support transportation to treatment or recovery programs or services sponsored by these two facilities for persons with OUD and any co-occurring SUD/MH conditions.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	The Township consulted with both clinical and administrative staff at the two facilities as well as emergency management services personnel affiliated with the volunteer first aid organizations operating within its borders regarding the need to supplement transport services for persons with OUD and any co-occurring SUD/MH conditions.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	None in the fiscal year ending 6/30/2025.
14	Does your county/subdivision have a strategic plan?	No
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No
	2024 Fiscal Program #1	
1	Program Name/Title	Assistance to Discovery Institute for Addictive Disorders
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions

3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$5,079.75
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of services provided/encounters:	13
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	09/15/2025
	2023 Fiscal Program #1	
1	Program Name/Title	Education of police officers
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, modification to funding amount
	2a) If yes, please explain:	No funds were encumbered or expended on this program. After engaging the public, funds will be used for the 2024 program.
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Program was not funded.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	07/23/2024

	Opioid Settlement Funding Report		
	Sub Division: Middlet	town Township	
	State ID:	NJ136	
	County Name:	Monmouth	
	Address:	1 Kings Highway , Middletown, New Jersey, 07748	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$161,779.09	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$576,441.67	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$31,030.68	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$116,700.30	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$31,030.68	
8a.	Please provide details about any administrative expenses.	Consisted of program consultants, program coordination and facilitation, program/presentation/one-time event supplies and materials.	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$446,150.29	

10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Our goal was to decrease stigma around OUD/SUD/MH, increase public knowledge of ATOD and overdose prevention and harm reduction strategies through youth and parent programs/presentations/tabling events, reduce overdoses, and brainstorm ways to improve transportation to treatment and drug court.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We utilized the list of approved uses and county recommendations. We also advised county/coalition lists of evidence-based programs/presentations.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	We disseminated information via website, social media, newsletters, and PSAs. We surveyed parents on program/presentation topics that they are most interested in attending. In 2026 Alliance Coordinator and Senior Health Planner will review Monmouth County public survey on how citizens want funds to be spent, as well as conduct a community health assessment.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report		
	Sub Division: Millstone Township		
	State ID:	NJ138	
	County Name:	Monmouth	
	Address:	470 Stage Coach Road, Millstone Township, New Jersey, 08510	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$1,901.42	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$6,206.77	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$1,986.40	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$4,696.18	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Our Municipal Drug Alliance is currently working on implementing a plan with the County on spending appropriations.	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	The Municipal Drug Alliance Committee met with other committees and the county on establishing a plan.
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding
13	Please describe your public engagement/input efforts?	The committee met with multiple sources through out the county.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Vaping Detection System
2	Agency/Funding Recipient Name	Upper Freehold Board of Education
3	Agency/Funding Recipient Category	Schools, Colleges, Universities
4	Primary problem being addressed by this program:	High School students vaping in schools
5	Brief program description:	To help prevent students using vapes in schools.
6	Program target population:	Children and Young Adults - 14-18 (high school aged)
7	Date this program was funded (please use MM/DD/YYYY)	12/04/2024
8	Amount of funding for this program.	\$1,986.40
8a.	Amount expended:	\$1,986.40
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only

10	Program Launch Date	10/01/2024
11	Please choose the length of time of this program's duration:	One time only
12	What is the anticipated number of unduplicated clients this program will reach annually?	300
13	Please state this program's statement of impact.	N/A
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	300
15	How frequently are you measuring the tracked key performance indicators?	Semi-annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Reduce the amount of high school students participating in the use of illegal drug use.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The rise in fentanyl-laced vapes poses a significant public health risk, particularly among high school students. Vaping detectors should help with prevention.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	The Board of Education is a public entity and must follow specific procurement methods.

	Opioid Settlement Funding Report		
	Sub Division: Neptune Township		
	State ID:	NJ152	
	County Name:	Monmouth	
	Address:	25 Neptune Blvd, Neptune, New Jersey, 07753	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$120,383.18	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$428,942.21	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$18,790.12	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$101,593.06	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$401,909.29	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	This year was focused on sending our First Responders to Training. We had 21 Police and EMS personnel receive certificates from Seton Hall on "Operational Readiness for First	

10 cont.	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions cont.	Responders: Practical Strategies for Addressing Opioid Use Disorder and Co-occurring Conditions". We also continued our EMS Substance Abuse Outreach Program. We achieved 4 positive outreach visits with patients who experienced a medical issue from opioid use.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We did a small group needs assessment and invited them to Town Hall round table. We have a paramedic on duty that his main job is focused on outreach and assistance after the initial medical call.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	We invited a small focus group, of the local community, that included the hospital and rehabilitation programs to brainstorm the best use of the funds.
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Training for First Responders
2	Agency/Funding Recipient Name	Neptune Township EMS Department and Police Department
3	Agency/Funding Recipient Category	First Responders, Law Enforcement, and Emergency Services
4	Primary problem being addressed by this program:	Training for First Responders for two classes to abate the Opioid

5	Brief program description:	We sent several EMS and PD officers to class to help abate the Opioid epidemic. Funds paid for 30 attendees to train on practical strategies for addressing opioid use disorder and co-occurring disorders.
6	Program target population:	First Responders, Law Enforcement and other Emergency Responders; Individuals who Use Drugs
6(a).	Program target population: - Others	
7	Date this program was funded (please use MM/DD/YYYY)	07/01/2024
8	Amount of funding for this program.	\$15,174.45
8a.	Amount expended:	\$15,174.45
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Annually
10	Program Launch Date	07/01/2024
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	When training is available, we will send First Responders to the qualifying programs. We will make sure they are an approved use of funds.
12	What is the anticipated number of unduplicated clients this program will reach annually?	10
13	Please state this program's statement of impact.	Our First Responders all completed the required 4-hour class. Strategies that they can use to de-escalate situations, connect individuals to the appropriate resources, and minimize risk to both officers and their communities. They are the first to encounter individuals in crisis and need to right knowledge and tools to respond safely and effectively.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Hope that they will have the tools they need to de-escalate the situation with the training they learned. Hard to determine the number at this time.
15	How frequently are you measuring the tracked key performance indicators?	Annually

16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Apply effective handling of OUD and mental health situations to strengthen trust and cooperation within the community.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Connections to Care, First Responders, Leadership, Planning and Coordination, Training
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	We can ensure that our officers are prepared to handle the challenges posed by the opioid crisis by giving them the skills needed to best handle the interactions.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	This training will empower officers to handle complex situations. We hope overall our First Responders will make an impact in the community and provide patients with the appropriate avenues for treatment. We hope that we have less overdoses in our community.
	2024 Fiscal Program #1	
1	Program Name/Title	EMS Substance Abuse Outreach
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$3,615.67
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	31
	Reduction in opioid-related incidents:	Local hospital declines to share information.
	Number of services provided/encounters:	10
	Number of referrals to treatment	4

5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	Yes
	5a) If yes, please explain:	We are happy that we had 4 successful encounters with this program. The rate of naloxone administrations decreased in Neptune Township since 2023. We hope to expand our program next year.
6	Last Updated Date :	08/22/2025

	Opioid Settlement Funding Report		
	Sub Division: Ocean Township, Monmouth County		
	State ID:	NJ165	
	County Name:	Monmouth	
	Address:	601 Deal Road, Ocean, New Jersey, 07712	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$63,616.52	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$238,306.81	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$16,133.31	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.	"N/A"	
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$170,584.49	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	Our goals focus primarily on mental health services, prevention & education, and workforce development for conditions related to Opioid Use Disorder and any co-occurring substance	

10 cont.	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions cont.	use disorder/Mental Health conditions across age groups.
11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	We rely on evidence-based practices and strategies of Griffin & Botvin, Shapiro, Patricia Conrod/Venture Lab, Merton Strommen/Search Institute and Jonathan Haidt as well as the list of Opioid Remediation uses. We also considered information provided by the county regarding their risk assessment profile.
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for one year funding
13	Please describe your public engagement/input efforts?	Residents with a personal or professional interest in Opioid Use Disorder and any co-occurring substance use disorder/Mental Health conditions across age groups were asked to share their input.
14	Does your county/subdivision have a strategic plan?	No
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Support in Treatment and Recovery
2	Agency/Funding Recipient Name	Township of Ocean
3	Agency/Funding Recipient Category	County or Municipality (including Departments and Municipal Alliances)
4	Primary problem being addressed by this program:	childcare

5	Brief program description:	This program supports individuals undergoing treatment or in recovery by providing free summer camp and/or after-school care for their children. Eligible participants may be referred by counseling staff or school administrators.
6	Program target population:	Individuals in Recovery;Individuals in Treatment;Others
6(a).	Program target population: - Others	School age youth.
7	Date this program was funded (please use MM/DD/YYYY)	03/26/2025
8	Amount of funding for this program.	\$1,230.00
8a.	Amount expended:	\$1,230.00
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	When indicated.
10	Program Launch Date	01/02/2025
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	This initiative will remain in place to meet the childcare needs of individuals in treatment and recovery, contingent upon the availability of funding
12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	To ensure access to safe and high-quality childcare for Ocean Township residents undergoing treatment and recovery who might not otherwise have the means to obtain such support.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Number of hours of childcare provided.
15	How frequently are you measuring the tracked key performance indicators?	Annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	To provide high-quality and safe childcare that benefits families by providing support to parents/guardians and a positive experience to our youth. Satisfaction survey upon completion of program

17	Primary Category:	Recovery Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Providing free childcare to parents/guardians in treatment or recovery from SUD, OUD and co-occurring conditions removes a critical barrier to care, increasing access, engagement, and retention in treatment and work life. This support aligns with evidence-based practices by reducing stressors that contribute to relapse, promoting family stability, and enabling participation in therapies such as MAT, CBT, and trauma-informed care. By addressing a key social determinant of health, the program supports improved recovery outcomes and whole-family wellness.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Vendor is specific to this purpose. Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #2	
1	Program Name/Title	Mental Health & Substance Abuse Treatment
2	Agency/Funding Recipient Name	Simple Practice, LLC
3	Agency/Funding Recipient Category	Private/For-profit Organizations
4	Primary problem being addressed by this program:	Substance use disorders and mental health disorders
5	Brief program description:	Program provides mental health and substance abuse treatment
6	Program target population:	Individuals in Recovery;Individuals in Treatment;Individuals involved with the Criminal Justice System;Individuals who Use Drugs;Others
6(a).	Program target population: - Others	Licensed therapists provide free counseling and Level 1 substance abuse treatment to Ocean Township residents ages 8-100.

7	Date this program was funded (please use MM/DD/YYYY)	12/12/2024
8	Amount of funding for this program.	\$1,665.00
8a.	Amount expended:	\$1,665.00
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	Monthly
10	Program Launch Date	12/13/2024
11	Please choose the length of time of this program's duration:	Others
11 (a).	Please choose the length of time of this program's duration: - Others	This HIPAA-compliant electronic record will be maintained for the duration of counseling services.
12	What is the anticipated number of unduplicated clients this program will reach annually?	195
13	Please state this program's statement of impact.	These funds will be used to provide a HIPAA-compliant electronic record for clients presenting with SUD, co-occurring SUD/MC, and mental health conditions.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Proper maintenance of client records.
15	How frequently are you measuring the tracked key performance indicators?	Quarterly
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	This funding will enable the counseling program to continue by supporting the cost of a HIPAA-compliant electronic record system, which would otherwise be unaffordable due to budget constraints.
17	Primary Category:	Treatment
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Harm Reduction and Overdose Prevention
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	

19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Treat Opioid Use Disorder (OUD), Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	We utilize empirically validated therapies and techniques, including Motivational Enhancement (ME), Cognitive Behavioral Therapy (CBT), and Eye Movement Desensitization and Reprocessing (EMDR), in our work with clients.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Vendor is specific to this purpose. Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #3	
1	Program Name/Title	L.E.A.D Program
2	Agency/Funding Recipient Name	JCMS Associates, LLC
3	Agency/Funding Recipient Category	Private/For-profit Organizations
4	Primary problem being addressed by this program:	Adolescent substance use
5	Brief program description:	An anti-drug curriculum facilitated by law enforcement officers for sixth grade students.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade)
7	Date this program was funded (please use MM/DD/YYYY)	03/24/2025
8	Amount of funding for this program.	\$1,827.50
8a.	Amount expended:	\$1,827.50
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	09/05/2024
11	Please choose the length of time of this program's duration:	Less than 1 year
12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	To strengthen the relationship between local law enforcement and youth, while empowering students to resist substance use and violence and promoting a positive, supportive school culture.

14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	215
	Number of training/education sessions:	100
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	Measured by skill attainment and behavioral skills demonstrated by students.
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	The objectives of the L.E.A.D. program include refusal skills, fostering leadership skills, promoting character development, and enhancing social and emotional learning.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This national program aligns itself with evidence-based public health (EBPH) approaches.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #4	
1	Program Name/Title	You Don't Know Me Until You Know Me
2	Agency/Funding Recipient Name	Dr. Michael Fowlin
3	Agency/Funding Recipient Category	Private/For-profit Organizations
4	Primary problem being addressed by this program:	Adolescent substance use and the risk factors that increase the likelihood of substance abuse, including bullying and low self-esteem.
5	Brief program description:	A solo performance exploring substance abuse, mental wellness, biases, bullying, and self-esteem.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade)

7	Date this program was funded (please use MM/DD/YYYY)	12/19/2024
8	Amount of funding for this program.	\$4,000.00
8a.	Amount expended:	\$4,000.00
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	01/10/2025
11	Please choose the length of time of this program's duration:	One time only
12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	Increase student awareness of the harms of substance use, the effects of biases, and the importance of knowing they are not alone in their challenges.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	900
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	School administration received verbal feedback from the students and staff following the presentation.
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	"The presentation aimed to increase awareness of the negative impacts of substance use and biases while promoting a healthy school culture. Following the session, school administration received verbal feedback from both students and staff."
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Prevent Misuse of Opioids
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This program explores the negative effects of substance use and how personal biases can affect the emotional well-being of others. It empowers at-risk students by showing them they are not alone in their struggles and

20 cont.	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies. cont.	encourages them to seek support from caring adults and peers. (Merton Strommen/Search Institute – Developmental Assets)
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Vendor specific training. Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #5	
1	Program Name/Title	Ocean High on LifeNot Drugs campaign @ Fall Fest
2	Agency/Funding Recipient Name	Fire Safety Education
3	Agency/Funding Recipient Category	Others
3(a).	Agency/Funding Recipient Category - Others	Non-profit provides prevention and treatment promotional materials.
4	Primary problem being addressed by this program:	Misinformation, avoidance, and limited communication or understanding when discussing drugs and alcohol within families.
5	Brief program description:	Provide easy-to-understand educational materials to help parents discuss the risks of opioid and substance use disorders with their children, while promoting healthy alternatives."
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade);Children and Young Adults - 14-18 (high school aged);Children and Young Adults - 19-24 (post-grad through college);Individuals in Recovery;Individuals in Treatment;Individuals who Use Drugs;Members of the General Public
7	Date this program was funded (please use MM/DD/YYYY)	09/05/2024
8	Amount of funding for this program.	\$1,785.97
8a.	Amount expended:	\$1,785.97
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	09/28/2024
11	Please choose the length of time of this program's duration:	One time only
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12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	Engage families in informed conversations about the risks of opioid and substance use disorders and promote healthy alternatives.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Fall Fest 2024 was unfortunately cancelled due to weather. These materials will be used at Fall Fest 2025, at which time we will record the number of participants who receive them.
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	During the event as materials are distributed to the public.
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	This program aims to raise awareness and encourage family discussions about the harmful effects of substance use including opioids.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	This campaign reflects research and concepts of Conrod/Venture Lab, Merton Strommen/Search Institute and Jonathan Haidt.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Vendor specific products. Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #6	
1	Program Name/Title	Anxious Generation- How to Help Youth
2	Agency/Funding Recipient Name	Barnes and Nobles
3	Agency/Funding Recipient Category	Private/For-profit Organizations
4	Primary problem being addressed by this program:	Rising prevalence of anxiety and depression among youth.

5	Brief program description:	Distribute The Anxious Generation to the Ocean School District Faculty and Board of Education to share research on the harmful effects of a phone-based childhood and provide strategies for support.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade);Children and Young Adults - 14-18 (high school aged);Children and Young Adults - 19-24 (post-grad through college);Members of the General Public;Others
6(a).	Program target population: - Others	School faculty and concerned adults
7	Date this program was funded (please use MM/DD/YYYY)	08/20/2024
8	Amount of funding for this program.	\$1,052.10
8a.	Amount expended:	\$1,052.10
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	06/18/2024
11	Please choose the length of time of this program's duration:	One time only
12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	Educate school district members and concerned parents on the harmful effects of a phone-based childhood to support efforts in reducing anxiety, depression, and substance use among students.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	70
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	This program supports the school district's broader plan to reduce the harmful effects of cell phones and social media on students. Throughout the year, the school will hold multiple meetings with faculty and parents to review and assess progress.

16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	Through education, this program seeks to improve students' mental well-being, increase school engagement, and promote a more positive school climate as reported by staff and students.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction)
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The Anxious Generation provides research and strategies to guide the development of a school-based initiative aimed at reducing the harmful effects of screens and social media on students. This effort focuses on lowering anxiety sensitivity and impulsiveness—two traits that increase youth's risk for addiction.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Purchase time sensitive. Vendor could deliver on time. Followed our Ocean Township accounting policies and procedures.
	2025 Fiscal Program #7	
1	2025 Fiscal Program #7 Program Name/Title	Ocean High on LifeNot Drugs Campaign @ National Night Out
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	Program Name/Title	Campaign @ National Night Out
2	Program Name/Title Agency/Funding Recipient Name	Campaign @ National Night Out Target
2	Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category	Campaign @ National Night Out Target Private/For-profit Organizations
2 3 4	Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program:	Campaign @ National Night Out Target Private/For-profit Organizations youth substance use Raise awareness of healthy alternatives to SU for
2 3 4 5	Program Name/Title Agency/Funding Recipient Name Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description:	Campaign @ National Night Out Target Private/For-profit Organizations youth substance use Raise awareness of healthy alternatives to SU for sensation-seeking youth Children and Young Adults - 0-13 (through 8th grade);Children and Young Adults - 14-18 (high

8a.	Amount expended:	\$458.46
8b.	Amount encumbered/appropriated:	\$0.00
9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	08/06/2024
11	Please choose the length of time of this program's duration:	One time only
12	What is the anticipated number of unduplicated clients this program will reach annually?	0
13	Please state this program's statement of impact.	To strengthen relationships between local law enforcement and youth, address risk factors, and promote healthy alternatives to substance use through a targeted campaign.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	0
	Other:	Unfortunately, National Night Out 2024 was cancelled due to weather.
15	How frequently are you measuring the tracked key performance indicators?	Others:
15 (a).	How frequently are you measuring the tracked key performance indicators? - Others	Once, date of event
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	The program aims to raise awareness of healthy alternatives to substance use, highlight available community resources, and strengthen connections between our department, local law enforcement, and the community.
17	Primary Category:	Primary Prevention, Education, and Training
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	None of the above
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Prevent Misuse of Opioids
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	Materials distributed incorporate research and concepts from Conrod/Venture Lab, Merton Strommen/Search Institute, and Jonathan Haidt.

21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	Vendor specific products. We followed our Ocean Township accounting policies and procedures.
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	2024 Fiscal Program #1	
1	Program Name/Title	Anxious Generation- How to Help Youth
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$1,680.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	70
	Other:	This program supports the school district's broader plan to reduce the harmful effects of cell phones and social media on students. Throughout the year, the school will hold meetings with faculty & parents to review and assess progress.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/28/2025
	2024 Fiscal Program #2	
1	Program Name/Title	Professional Training Seminars & Education Programs On OUD & SUD/MH COnditions
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$1,417.90
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	150
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	Number of training/education sessions:	2
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/28/2025
	2024 Fiscal Program #3	
1	Program Name/Title	Mental Health & Substance Abuse Treatment
2	Have there been any modifications or expansions to this program since the initial report?:	Yes, modification to funding amount
	2a) If yes, please explain:	The modification to this funding amount is \$0.00 due to a complete refund of \$2,250.
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Other:	Funding for this item was refunded.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/28/2025
	2024 Fiscal Program #4	
1	Program Name/Title	Cell Phone Social Media Task Force
2	Have there been any modifications or expansions	No modifications/expansions
3	to this program since the initial report?: Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$882.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	46
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
	program:	

	2024 Fiscal Program #5	
1	Program Name/Title	Opioid Medication and Seniors
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$84.06
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	34
	Increased community awareness (please describe):	Provided information to senior on opioid use.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/28/2025
	2024 Fiscal Program #6	
1	Program Name/Title	Older Adults Part 1 & 2 Substance abuse training
2	Have there been any modifications or expansions to this program since the initial report? :	No modifications/expansions
3	Amount expended in this reporting period (7/1/2024 - 6/30/ 2025)	\$50.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	50
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/28/2025

1	Program Name/Title	Ocean High on LifeNot Drugs Campaign @ National Night Out
2	Have there been any modifications or expansions to this program since the initial report? :	Yes, modification to funding amount
	2a) If yes, please explain:	Original cost budgeted for \$2,489.91. Additional items for event totaled \$36.97. Total cost of event \$2,526.88.
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	875
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	Yes
	5a) If yes, please explain:	Families received info on how to talk to kids about healthy alternatives to substance use via literature & promotions.
6	Last Updated Date :	08/30/2024
	2023 Fiscal Program #2	
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1	Program Name/Title	2 Day Seminar: EMDR: A Rapid, Safe and proven Treatment for Trauma
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	Program Name/Title Have there been any modifications or expansions	Treatment for Trauma
	Program Name/Title Have there been any modifications or expansions to this program since the initial report?:	Treatment for Trauma Yes, modification to funding amount Original vendor cost budgeted for this 2-day training \$16,750. Final vendor cost \$13,000. Additional items for initial seminar program set up and actual event \$3,807.30. Total cost of event:
2	Program Name/Title Have there been any modifications or expansions to this program since the initial report?: 2a) If yes, please explain: Amount expended in this reporting period	Treatment for Trauma Yes, modification to funding amount Original vendor cost budgeted for this 2-day training \$16,750. Final vendor cost \$13,000. Additional items for initial seminar program set up and actual event \$3,807.30. Total cost of event: \$16,807.31.
3	Program Name/Title Have there been any modifications or expansions to this program since the initial report?: 2a) If yes, please explain: Amount expended in this reporting period (7/1/2023 - 6/30/ 2024) What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people	Treatment for Trauma Yes, modification to funding amount Original vendor cost budgeted for this 2-day training \$16,750. Final vendor cost \$13,000. Additional items for initial seminar program set up and actual event \$3,807.30. Total cost of event: \$16,807.31.

	Other:	2-Day workforce Development to enhance provision of trauma-informed care to individuals with OUD and SUD/MH & their families.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/30/2024
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	2023 Fiscal Program #3	
1	Program Name/Title	Trauma, Addiction and Men: Create Connection, Increase Vulnerability and Improve Treatment Outcomes
2	Have there been any modifications or expansions to this program since the initial report? :	No, Program was a one-time event
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00
4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	39
	Number of training/education sessions:	1
	Other:	Total Cost of Program: \$7500 Workforce Development to enhance provision of trauma-informed care to individuals with OUD and SUD/MH & their families.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	08/30/2024
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	2023 Fiscal Program #4	
1	Program Name/Title	Matt Bellace, Ph.D, Motivational Speaker and Comedian
2	Have there been any modifications or expansions to this program since the initial report? :	No, Program was a one-time event
3	Amount expended in this reporting period (7/1/2023 - 6/30/ 2024)	\$0.00

4	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	1645
	Number of training/education sessions:	4
	Increased community awareness (please describe):	Yes, parents, students and school faculty.
	Other:	Total cost of program: \$5,000.
5	Is there anything else you would like to share or highlight regarding the progress and impact of this program? :	No
6	Last Updated Date :	09/24/2024

Opioid Settlement Funding Report		
Sub Division: Red Bank Borough		
	State ID:	NJ193
	County Name:	Monmouth
	Address:	90 Monmouth Street, Red Bank, New Jersey, 07701
	Fiscal Year:	2025
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$69,794.40
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$248,687.26
4	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
5	What amount of your opioid abatement funds did you transfer to the county?	
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$46,799.23
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$47,853.12
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00
8a.	Please provide details about any administrative expenses.	All Expenses are being charged to the social worker services with Pulsse Services.
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$89,741.91
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	All future available funds will be spent on our social workers with Pulsse Services or another vendor

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	Borough manager and governing body decided on this based on evidence informed practices
12	In this reporting year (7/1/2024 - 6/30/2025), 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, for multiple year funding
12a	Please select years range:	3 - 5 years
13	Please describe your public engagement/input efforts?	The governing body had discussions about the program and listened to the public for feedback
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
	.	
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Social Worker Services
2	Agency/Funding Recipient Name	Borough of Red Bank
3	Agency/Funding Recipient Category	County or Municipality (including Departments and Municipal Alliances)
4	Primary problem being addressed by this program:	Substance Abuse
5	Brief program description:	Social Worker services available for individuals with substance abuse.
6	Program target population:	Children and Young Adults - 0-13 (through 8th grade); Children and Young Adults - 14-18 (high school

6 cont.	Program target population: cont.	Individuals experiencing Homelessness; Individuals in Recovery; Individuals in Treatment; Individuals involved with the Criminal Justice System; Individuals who Use Drugs; Members of the General Public; Pregnant and Parenting Individuals and their Families, including Babies with Neonatal Abstinence Syndrome
7	Date this program was funded (please use MM/DD/YYYY)	10/01/2023
8	Amount of funding for this program.	\$131,240.00
8a.	Amount expended:	\$46,799.23
8b.	Amount encumbered/appropriated:	\$47,853.12
9	How often are you disbursing funds to this program?	Others
9(a).	How often are you disbursing funds to this program? - Others	Paid when billed
10	Program Launch Date	10/01/2023
11	Please choose the length of time of this program's duration:	2-3 years
12	What is the anticipated number of unduplicated clients this program will reach annually?	35
13	Please state this program's statement of impact.	To Assist the community
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Reduction in opioid-related incidents:	35
15	How frequently are you measuring the tracked key performance indicators?	Annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	The primary outcome of PULSSE Services is to connect individuals presenting with mental health, substance abuse, housing issues to feasible community based resources in an effort to reduce the frequency of police responses for matters relating to those same issues. The program's primary goal is to reduce the impact of opioid use disorder (OUD), co-occurring substance use, and mental health conditions in the community by bridging public safety

16	What outcomes or impact does the program aim	and public health through a community policing
cont.	to achieve? How do you plan to measure or track that impact? cont.	model. By embedding social workers within the police department, the program aims to humanize interactions, divert individuals from the justice system into treatment, and strengthen trust between law enforcement and the community.
17	Primary Category:	Wraparound and Connected Care Supports
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Housing; Workforce Development and Capacity Building
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	Support People in Treatment and Recovery, Connections to Care
20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	As social workers embedded within the police department, our program addresses opioid use disorder (OUD), co-occurring substance use, and mental health conditions through a community policing framework that prioritizes collaboration, prevention, and connection to care. Community policing emphasizes building trust between law enforcement, service providers, and residents, and this program applies that philosophy to the public health crisis of substance use. Using evidence-based practices, our social workers, with law enforcement assistance, identify individuals struggling with OUD and related conditions. Rather than relying solely on enforcement, we engage people through trauma-informed care and motivational interviewing to reduce stigma and encourage treatment readiness. We apply assessment/screening, outreach, referrals to resources during field contacts, at follow-up visits, and within community settings to quickly identify needs and connect individuals to appropriate supports. Through partnerships with treatment providers, recovery coaches, and mental health professionals, we ensure that individuals are referred to evidence-based services such as medication-assisted treatment (MAT), counseling, and peer support networks. Our approach includes "warm handoffs," where social workers accompany or directly link individuals

20 cont.	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies. cont.	to care, improving engagement.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	By applying a community policing model, our program shifts the focus from punitive responses to collaborative solutions. Social workers and officers in conjunction with one another to address the root causes of substance use, reduce repeat encounters with law enforcement, and build healthier, safer neighborhoods. This integrated strategy not only addresses the immediate risks of OUD and co-occurring conditions but also strengthens long-term recovery and resilience across the community.

	Opioid Settlement Funding Report Sub Division: Tinton Falls Borough		
	State ID:	NJ225	
	County Name:	Monmouth	
	Address:	566 Tinton Avenue, Tinton Falls, New Jersey, 07724	
	Fiscal Year:	2025	
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$43,314.07	
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00	
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$154,334.11	
4	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	
5	What amount of your opioid abatement funds did you transfer to the county?		
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$0.00	
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00	
8a.	Please provide details about any administrative expenses.		
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$154,334.11	
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	The Borough is implementing a Drug Alliance Committee to determine goals for the future	

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	N/A
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	N/A
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	No

	Opioid Settlement Funding Report				
Sub Division: Wall Township					
	State ID:	NJ238			
	County Name:	Monmouth			
	Address:	2700 Allaire Rd, Wall, New Jersey, 07719			
	Fiscal Year: 2025				
1	Please tell us the full amount of opioid abatement funds you received between 7/1/2024 and 6/30/2025	\$81,104.45			
2	Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received between 7/1/2024 and 6/30/2025	\$0.00			
3	The total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022 (Total amount including Interest Accrued):	\$288,986.51			
4	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			
5	What amount of your opioid abatement funds did you transfer to the county?				
6	Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2024 - 6/30/2025):	\$30,658.50			
7	Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2024 - 6/30/2025).	\$3,288.00			
8	Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2024 - 6/30/2025):	\$0.00			
8a.	Please provide details about any administrative expenses.	None			
9	Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand.	\$255,040.01			
10	Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions	This year's spending focused on mental health of first responders dealing with opioid encounters.			

11	How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did you rely on evidence-based or evidence-informed practices or strategies, the list of Opioid Remediation uses, a needs assessment, a strategic plan, or an epidemiological analysis? If yes, please explain.	Relied on the list of Opioid Remediation uses regarding mental health of first responders.
12	In this reporting year (7/1/2024 - 6/30/2025), 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?	Still to be formulated
14	Does your county/subdivision have a strategic plan?	No, but we plan to in the future
15	Have you completed a Risk Assessment profile for demographic or geographic impact?	No, but we plan to in the future
16	Did your subdivision fund any new programs using opioid abatement funds in this reporting year?	Yes
	2025 Fiscal Program #1	
1	Program Name/Title	Police Wellness
2		
3	Agency/Funding Recipient Name	Township of Wall
	Agency/Funding Recipient Name Agency/Funding Recipient Category	Township of Wall First Responders, Law Enforcement, and Emergency Services
4		First Responders, Law Enforcement, and
4 5	Agency/Funding Recipient Category	First Responders, Law Enforcement, and Emergency Services
	Agency/Funding Recipient Category Primary problem being addressed by this program:	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health
5	Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description:	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health Provide a gym/wellness space for first responders First Responders, Law Enforcement and other
5	Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description: Program target population:	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health Provide a gym/wellness space for first responders First Responders, Law Enforcement and other
5 6 6(a).	Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description: Program target population: Program target population: - Others Date this program was funded (please use	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health Provide a gym/wellness space for first responders First Responders, Law Enforcement and other Emergency Responders
5 6 6(a). 7	Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description: Program target population: Program target population: - Others Date this program was funded (please use MM/DD/YYYY)	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health Provide a gym/wellness space for first responders First Responders, Law Enforcement and other Emergency Responders 04/09/2025
5 6 6(a). 7	Agency/Funding Recipient Category Primary problem being addressed by this program: Brief program description: Program target population: Program target population: - Others Date this program was funded (please use MM/DD/YYYY) Amount of funding for this program.	First Responders, Law Enforcement, and Emergency Services First Responder Mental Health Provide a gym/wellness space for first responders First Responders, Law Enforcement and other Emergency Responders 04/09/2025 \$33,946.50

9	How often are you disbursing funds to this program?	One time only
10	Program Launch Date	04/09/2025
11	Please choose the length of time of this program's duration:	5+ years
12	What is the anticipated number of unduplicated clients this program will reach annually?	70
13	Please state this program's statement of impact.	Provision of wellness and support services for first responders and others who experience secondary trauma associated with opioid related emergency events.
14	What key performance indicators are you tracking to ensure success of the program (for example, # of services provided, # of people served, # of naloxone kits distributed)?	
	Number of participants served:	70
	Number of training/education sessions:	1
	Number of services provided/encounters:	1
	Other:	Tracking number of opioid related incidents officers respond to and how it correlates to the use of the wellness center.
15	How frequently are you measuring the tracked key performance indicators?	Annually
16	What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact?	The program aims to improve officer wellness, resilience and mental health while reducing risk factors associated with substance misuse. Expected outcomes include decreased stress, healthier coping strategies and improved physical fitness. Impact will be tracked through participation rates, employee wellness surveys, fitness assessments and monitoring of sick time, EAP referrals and other wellness indicators over time.
17	Primary Category:	Workforce Development and Capacity Building
18	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above).	Others
18 (a).	The following are other categories that may apply (include all categories with the exception of the Primary category you chose above) Others	Mental Health and Wellness
19	Please select the Schedule B strategy(ies) that fits the primary focus of this program:	First Responders

20	Please explain how this program will address opioid use disorder and any co-occurring substance use disorders or mental health conditions through evidence-based or evidence-informed practices or strategies.	The wellness program will address opioid use disorder, co-occurring substance use and mental health conditions by providing officers with a wellness space that promotes evidence-informed practices such as exercise and stress reduction. Research shows physical activity reduces risk factors for opioid use disorder and other mental health issues by improving mood, resilience and coping skills while lowering symptoms of anxiety, depression and PTSD. By embedding wellness into the daily routine of officers, the program supports prevention, healthier coping strategies and early intervention for substance misuse and mental health challenges.
21	Please identify the procurement method utilized for this program, describe the procurement process, and explain why the procurement method identified was used for this program.	The program utilized the New Jersey State Contract/Cooperative Purchasing system, which allowed our department to procure equipment and services from pre-approved vendors who have already met state bidding and compliance requirements. This method streamlined the procurement process, ensured compliance with state law and provided competitive pricing with guaranteed transparency, efficiency and responsible use of opioid settlement funds.