

BERGEN COUNTY

2024 OPIOID ABATEMENT REPORT

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| Opioid Settlement Funding Report | | |
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| Sub Division: Bergen County | | |
| | State ID: | NJ10 |
| | County Name: | Bergen |
| | Address: | 1792 Union Valley Rd, West Milford, New Jersey, 08691 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$3,682,195.94 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$176,746.53 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$6,419,348.21 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$88,960.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8 a. | Please provide details about any administrative expenses. | The County is still in the planning phases of these funds and have not expended any funds on administration. |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$6,330,388.21 |
| 10 | Please share brief information on your subdivisions overarching goals and values to | The County is currently in the process of reviewing RFP for providers to perform an array |

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| | provide context for this year's spending decisions | of opioid related services to the County of Bergen Residents. |
| 1 1 | 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 County used our three-year County of Bergen Comprehensive Plan for addiction services survey data to determine the areas of need and outfitted our program to those needs. |
| 1 2 | In this reporting year (7/1/2023 - 6/30/2024), 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 |
| 1 3 | Please describe your public engagement/input efforts? | We opened an RFP request for proposals to all stakeholders in the community in regards to this funding. We also met with all of the County Municipal parties to talk about the funding and uses. We also conducted public survey on priorities and needs for opioid related programs and services. The results of the survey aligned with the County comprehensive plan. |
| 1 4 | Does your county/subdivision have a strategic plan? | No, but we plan to in the future |
| 1 5 | Have you completed a Risk Assessment profile for demographic or geographic impact? | No, but we plan to in the future |
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| 1 6 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | No |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Bergen County Central Municipal Diversion Court |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | No modifications/expansions |
| 3 | 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 |

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| | Reduction in opioid-related incidents: | 0 |
| | Number of harm reduction supplies distributed (e.g naloxone kits, drug disposal packets): | 0 |
| | Number of training/education sessions: | 0 |
| | Number of services provided/encounters: | 0 |
| | Increased community awareness (please describe): | 0 |
| | Number of referrals to treatment | 0 |
| | Other: | contract is encumbered |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | Yes |
| | 4a) If yes, please explain: | The contract is encumbered for \$88,960.00 to the Children's Aid and Family Services. |

| Opioid Settlement Funding Report | | |
|-----------------------------------|---|---|
| Sub Division: Bergenfield Borough | | |
| | State ID: | NJ11 |
| | County Name: | Bergen |
| | Address: | 198 N. Washington Ave, Bergenfield, New Jersey, 07621 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$51,843.01 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$77,831.39 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | No administrative expenses at this time |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$77,831.39 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The Borough has not yet decided the best way to utilize these funds at this time. |

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| 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. | No funds expended at this time. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 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 programs using opioid abatement funds in this reporting year? | No |
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| Opioid Settlement Funding Report | | |
|--------------------------------------|---|---|
| Sub Division: Cliffside Park Borough | | |
| | State ID: | NJ33 |
| | County Name: | Bergen |
| | Address: | 525 Palisade Ave, Cliffside Park, New Jersey, 07010 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$138,621.48 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$184,250.36 |
| 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 (7/1/2023 - 6/30/2024) : | \$11,467.08 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$127,154.40 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$127,154.40 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Expand training for first responders, schools, community groups and families. Provide education to school based and youth focus programs that discourage or prevent misuse. |

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| 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. | Public Health meetings and discussions for opioid misuse and prevention of overdose. Monthly meetings with Bergen County Health Commission. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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: | 1 - 2 years |
| 13 | Please describe your public engagement/input efforts? | Community meetings with a question and answer portion including Police, Fire, Emt's families and Board of Education. |
| 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? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Opioids Settlement |
| 2 | Agency/Funding Recipient Name | Borough of Cliffside park |
| 3 | Agency/Funding Recipient Category | County or Municipality (including Departments and Municipal Alliances) |
| 4 | Primary problem being addressed by this program: | Effects of opioids |
| 5 | Brief program description: | Presentation to HS students and Senior Citizen regarding effects of opioid use |
| 6 | Program target population: | Children and Young Adults - 14-18 (high school aged), Members of the General Public |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 08/31/2022 |
| 8 | Amount of funding for this program. | \$138,621.48 |

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| 8a. | Amount expended: | \$11,467.08 |
| 8b. | Amount encumbered/appropriated: | \$127,154.40 |
| 9 | How often are you disbursing funds to this program? | As required under the program scheduling |
| 10 | Program Launch Date | 12/22/2023 |
| 11 | Please choose the length of time of this program's duration: | 1 year |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 200 |
| 13 | Please state this program's statement of impact. | Able to reach a substantial number of school aged individuals in a group setting that demonstrate the effectiveness of drug use and opioids |
| 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: | 3 |
| 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? | Provide education to school based children to prevent use of opioids. Also education to our Senior Citizen population. |
| 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 |
| 19 | Please select the Schedule B strategy(ies) that fits the primary focus of this program: | 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. | With continued training and education, the adolescents and senior citizens are able to be informed and updated on effects of misusing opioids |
| 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. | As stated in question 20 the consistent training and education will allow our defined population to have a forum to speak out and be heard and helped with any addictions they may have. |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Dumont Borough | | |
| | State ID: | NJ44 |
| | County Name: | Bergen |
| | Address: | 50 Washington Ave, Dumont, New Jersey, 07628 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$33,871.82 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$50,851.59 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$50,851.59 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Funding to be used through LEAD's program to educate community on opioid use. |

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| 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. | Funding to be used through LEAD's program to educate community on opioid use. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Funding to be used through LEAD's program to educate community on opioid use. |
| 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 |
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| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | No |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Edgewater Borough | | |
| | State ID: | NJ51 |
| | County Name: | Bergen |
| | Address: | 55 River Road, Edgewater, New Jersey, 07020 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$44,520.33 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$435.94 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$72,125.31 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$57,173.36 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | None. |

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| 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 (7/1/2023 - 6/30/2024), 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. |
| 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 programs using opioid abatement funds in this reporting year? | No |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Education and Recovery Resources |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | No modifications/expansions |
| 3 | 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: | No program was created and expenditures were made. |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
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| Sub Division: Elmwood Park Borough | | |
| | State ID: | NJ55 |
| | County Name: | Bergen |
| | Address: | 182 Market Street, Elmwood Park, NJ 07407 |
| Fiscal Year: 2024 | | |
| | No Report Received | |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Englewood City | | |
| | State ID: | NJ56 |
| | County Name: | Bergen |
| | Address: | 2-10 north van brunt St, Englewood, New Jersey, 07631 |
| Fiscal Year: 2024 | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$539,314.74 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$809,670.43 |
| 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 (7/1/2023 - 6/30/2024) : | \$2,123.37 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024): | \$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. | \$807,547.06 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Our goal is to further educate the public about opioid use disorder and remediation including prevention efforts and treatment options. |

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| 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. | Evidence based programs were used to host town hall style events re. opioids as well as Narcan training |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Town hall meetings held in faith-based organizations; social media, including Facebook, Instagram |
| 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? | Yes |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Fair Lawn Borough | | |
| | State ID: | NJ60 |
| | County Name: | Bergen |
| | Address: | 8-01 Fair Lawn Ave. , Fair Lawn, New Jersey, 07410 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$23,575.73 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$37,946.47 |
| 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 (7/1/2023 - 6/30/2024) : | \$15,000.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$22,946.47 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Our goals and priorities for this program focus on improving public awareness and education pertaining to opioid abuse. Specifically, we aim to expand awareness of opioid abuse, risks, and available treatment options through various public outreach efforts such as: educational programs about the risks of opioid abuse, training on naloxone administration, providing free naloxone kits to residents, increasing awareness of available and affordable treatment options, etc. |
| 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 public school system requested funding and recommendations for a speaker to provide presentations for students and parents on topics related to building resilience to prevent substance use disorder. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 Borough of Fair Lawn coordinated with their Municipal Alliance/Stigma Free Committee and Public School Administration to gain perspective on their needs. The borough plans to increase their public engagement efforts to better serve all residents. |
| 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? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Educating Students and the Public on SUD |

| | | |
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| 2 | Agency/Funding Recipient Name | Hill Speaks LLC |
| 3 | Agency/Funding Recipient Category | Private/For-profit Organizations |
| 4 | Primary problem being addressed by this program: | Preventing Opioid Abuse and building resilience |
| 5 | Brief program description: | Educate the public which includes parents and minors on substance abuse and misuse inclusive of substance use disorders. |
| 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, Parents |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 06/19/2024 |
| 8 | Amount of funding for this program. | \$15,000.00 |
| 8a. | Amount expended: | \$15,000.00 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | This was a one-time program but we hope to plan more presentations for the upcoming school year. |
| 10 | Program Launch Date | 05/01/2024 |
| 11 | Please choose the length of time of this program's duration: | Three 90-minute presentations: 1.) First Choice & A Second Chance: high school and 2 middle schools 2.) Break the Silence: student-athletes and grade 8 students 3.) Parent /Community Program |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 600 |
| 13 | Please state this program's statement of impact. | An inspiring comeback story and powerful message that will leave your students better educated on mental health and substance use, with practical tools and coping skills to work through challenges, and with a goal-oriented mindset to build a life worth protecting. |
| 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: | 600 |
| | Number of training/education sessions: | 3 |
| 15 | How frequently are you measuring the tracked key performance indicators? | Annually |

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| 16 | What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? | At the end of each session, students will share one positive message, lesson, or take away from Stephen's story. |
| 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) |
| 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. | Educating students, parents, and community members on the dangers of Opioid misuse. |
| 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 order |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Fairview Borough | | |
| | State ID: | NJ61 |
| | County Name: | Bergen |
| | Address: | 59 Anderson Avenue, Fairview, New Jersey, 07022 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$25,334.03 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$58,337.53 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$58,337.53 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Opioid education programs |

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| 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. | Evidence based strategies based on statistical data |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Educating the public on awareness and the pitfalls of opioid use |
| 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: Fort Lee Borough | | |
| | State ID: | NJ64 |
| | County Name: | Bergen |
| | Address: | 309 Main St., Fort Lee, New Jersey, 07024 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$150,452.59 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$185,017.59 |
| 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 (7/1/2023 - 6/30/2024) : | \$3,100.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$175,017.59 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The Borough wants to educate and bring light to the opioid problem at the high school level. We have been working hand in hand with the Borough of Fort Lee Municipal Alliance to educate students in the Borough high school. |

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| 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 Borough felt the best way to use the funds was provide the Municipal Alliance with \$10,000 to have speakers come to the Borough High School to provide education and information about the opioid epidemic. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | By engaging with current high school students through the Municipal Alliance. |
| 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 |
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| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Substance Use Prevention Program |
| 2 | Agency/Funding Recipient Name | Borough of Fort Lee Board of Education - Municipal Alliance |
| 3 | Agency/Funding Recipient Category | Schools, Colleges, Universities |
| 4 | Primary problem being addressed by this program: | Substance Use Prevention Program |
| 5 | Brief program description: | A substance use prevention program was presented to both students and parents at the Fort Lee High School |
| 6 | Program target population: | Children and Young Adults - 14-18 (high school aged), Parents of the students in the high school |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 11/13/2023 |
| 8 | Amount of funding for this program. | \$10,000.00 |
| 8a. | Amount expended: | \$3,100.00 |

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|-----|--|---|
| 8b. | Amount encumbered/appropriated: | \$6,900.00 |
| 9 | How often are you disbursing funds to this program? | One time only |
| 10 | Program Launch Date | 11/13/2023 |
| 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? | 250 |
| 13 | Please state this program's statement of impact. | The program was used by the Borough of Fort Lee Municipal Alliance for drug and substance awareness. |
| 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): | Students of Fort Lee High School are being made aware of the dangers and prevention for use of drugs, including opioids. |
| 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 achieve making high school students aware of the use of opioids and other drugs and their dangers. |
| 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 program will make high school students aware of the dangers of opioid and any other co-occurring substance use. It will provide them with knowledge of the dangers of their use. |
| 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 program was procured by the Borough of Fort Lee Municipal Alliance which works in the Borough of Fort Lee High School. |

| Opioid Settlement Funding Report | | |
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| Sub Division: Franklin Lakes Borough | | |
| | State ID: | NJ65 |
| | County Name: | Bergen |
| | Address: | 490 deKorte drive, Franklin Lakes, New Jersey, 07417 |
| Fiscal Year: 2024 | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$24,777.73 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$34,386.97 |
| 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 (7/1/2023 - 6/30/2024) : | \$12,769.88 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$16,617.09 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | To provide educational and informative programs regarding opioid abuse and prevention to our community. Also providing Naloxone boxes throughout the town in publicly accessible areas. |

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| 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. | Through evidence based practices. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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: | 1 - 2 years |
| 13 | Please describe your public engagement/input efforts? | Engagement with public at the Franklin Lakes R.E.A.C.H meetings (REducing Addiction through Care and Help). |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
| 2024 Fiscal Program List | | |
| 1 | Program Name/Title | Living Lessons |
| 2 | Agency/Funding Recipient Name | Franklin Ave Middle School |
| 3 | Agency/Funding Recipient Category | Schools, Colleges, Universities |
| 4 | Primary problem being addressed by this program: | Substance abuse and prevention |
| 5 | Brief program description: | multiple speakers engaging students about dangers of substance abuse and consequences |
| 6 | Program target population: | Children and Young Adults - 0-13 (through 8th grade) |
| 7 | Date this program was funded (please use MM/DD/YYYY) | 5/15/2024 |
| 8 | Amount of funding for this program. | \$9,800.00 |
| 8a. | Amount expended: | \$9,800.00 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | One time only |
| 10 | Program Launch Date | 5/15/2024 |
| 11 | Please choose the length of time of this program's duration: | 2-3 years |

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| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 385 |
| 13 | Please state this program's statement of impact. | The program brings over 15 keynote speakers into our school for the day to share their inspirational stories and messages. Living Lessons will not only be an innovative and inspirational day for every child at Franklin Avenue Middle School but will actually culminate an entire year-long program that has focused on achieving individual goals and success while touching on the poignant topic of substance abuse and conquering life. |
| 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: | 385 |
| 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? | Speaking with juveniles involved. |
| 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: | Connections to Care, 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. | By providing success stories of those who are affected. |
| 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. | Coordinated by Principal of middle school who submitted a voucher for the program and its cost. |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Garfield City | | |
| | State ID: | NJ71 |
| | County Name: | Bergen |
| | Address: | 111 Outwater Lane, Garfield, New Jersey, 07026 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$71,610.59 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$122,832.63 |
| 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 (7/1/2023 - 6/30/2024) : | \$10,712.47 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$3,006.64 |
| 8a. | Please provide details about any administrative expenses. | Allocation of 5% of settlement funds to reimburse salaries and wages for administering and planning expenditures for grant funds. |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$96,062.33 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Our goal is to effectively and appropriately spend the settlement funds in a way that trains/prepares our public safety officers in responding to opioid overdoses and promote public awareness of the dangers of opioid abuse. |
| 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 are still planning the best strategy to best use the funds. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | We're currently looking into ways on effectively and appropriately spending the funds, including possibly hiring a public speaker for the Garfield schools and sending police officers out for training. |
| 14 | Does your county/subdivision have a strategic plan? | Yes |
| 14a | Can we post your strategic plan online? | |
| 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? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Health Educator/Public Nurse |
| 2 | Agency/Funding Recipient Name | Hackensack Meridian Health |
| 3 | Agency/Funding Recipient Category | Hospital/Healthcare Provider (including Mental Health or Substance Use Treatment Provider) |
| 4 | Primary problem being addressed by this program: | Health education |

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| 5 | Brief program description: | Provide public health services including education, treatment and public health functions as set forth in NJAC 8:52-3.2(a) 1-10. |
| 6 | Program target population: | Members of the General Public |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 01/01/2023 |
| 8 | Amount of funding for this program. | \$10,712.47 |
| 8a. | Amount expended: | \$10,712.47 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | One time only |
| 10 | Program Launch Date | 01/01/2023 |
| 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? | 100 |
| 13 | Please state this program's statement of impact. | Health education, treatment of health including components for alcohol/drug abuse, smoking, nutrition and exercise. |
| 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: | 100 |
| 15 | How frequently are you measuring the tracked key performance indicators? | Nurse keeps track of training sessions provided |
| 16 | What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? | Health education, treatment of health including components for alcohol/drug abuse, smoking, nutrition and exercise. |
| 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: | 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. | Health education, treatment of health including components for alcohol/drug abuse, smoking, nutrition and exercise. |

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| 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. | Contract with Hackensack Meridian for public health nurse. This was an existing program that we applied this grant to. |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | LEAD |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | No modifications/expansions |
| 3 | 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: | 307 |
| | Number of training/education sessions: | 125 |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | Yes |
| | 4a) If yes, please explain: | amend to \$899 expended |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Glen Rock Borough | | |
| | State ID: | NJ73 |
| | County Name: | Bergen |
| | Address: | 1 Harding Plaza, Glen Rock, New Jersey, 07452 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$22,972.24 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$689.17 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$36,771.34 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | NA |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$36,588.27 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The Board of Health is continuing to plan and develop programming for these funds. |

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| 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 Board of Health is continuing to plan and develop programming for these funds. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | NA |
| 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: Hackensack City | | |
| | State ID: | NJ78 |
| | County Name: | Bergen |
| | Address: | 65 Central Ave., Hackensack, New Jersey, 07601 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$214,234.10 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$321,628.56 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$384,017.82 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | We did not expend any funds during the period. We have recently appointed two coordinators to oversee and implement programming in the City of Hackensack. We expect to have a strategic plan and specific programs implemented in the 2024-2025 year. |
| 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 not expend any funds during the period. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 have not conducted public engagement at this time. We plan to conduct a public survey in the next year as a risk assessment and community needs 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? | Yes |
| | | |
| 15a | Can we post your risk assessment online? | |
| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | No |
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| | | |
| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Hackensack City/HUMC Opioid Addiction/Education Partnership |
| 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: | It was decided to not proceed with this program and implement an alternate strategy. |

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| 3 | 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 |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
|---|---|--|
| Sub Division: Hasbrouck Heights Borough | | |
| | State ID: | NJ87 |
| | County Name: | Bergen |
| | Address: | 320 Boulevard, HASBROUCK HEIGHTS, New Jersey, 07604 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$30,266.71 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$2,271.97 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$47,711.22 |
| 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 (7/1/2023 - 6/30/2024) : | \$9,443.26 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$35,995.99 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Outfitting first responders with the tools necessary to respond to overdose incidents. Educate youth on the dangers of opiod drugs and the consequences of abuse utilizing speakers at school assemblies and in classrooms. Engage others in the community (churches, non-profits etc.) to assist and support the Borough's philosophy. Train officers on mental health and drug abuse disorders. |
| 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. | Utilized the list of uses and based on our goals as described above. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Police DARE/LEADS program with juveniles in the community. LEADS officer visits schools to discuss the opioid crisis. |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Officer Awareness and Medical Response |
| 2 | Agency/Funding Recipient Name | Borough of Hasbrouck Heights |
| 3 | Agency/Funding Recipient Category | County or Municipality (including Departments and Municipal Alliances),First Responders, Law Enforcement, and Emergency Services |

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| 4 | Primary problem being addressed by this program: | First Responder awareness training and medical assistance |
| 5 | Brief program description: | Funding for first responder mental health & drug abuse awareness training as well as funding for medical kits and supplies for first responder vehicles to aid victims. |
| 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,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): | 01/01/2024 |
| 8 | Amount of funding for this program. | \$16,500.00 |
| 8a. | Amount expended: | \$9,443.26 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | As needed for training and supply purchases. |
| 10 | Program Launch Date | 01/01/2024 |
| 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? | 1200 |
| 13 | Please state this program's statement of impact. | Assist and train first responders to better understand mental health and drug abuse in order to teach & guide community youth as well as to have the resources available in emergency vehicles to assist those in need during crisis and medical emergency. |
| 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: | |
| | Increased community awareness (please describe): | First responders engaging with community youth in schools and while on patrol. Information communicated internally at Police staff meetings. |

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| | Other: | Opioid emergency calls are tracked in the CAD (computer aided dispatch) system. This would notate whether naloxone was administered and whether victim was transported to hospital or not. |
| 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 instances of opioid overdose and increase youth awareness to thier danger. Hopefully save a victim of overdose with administration of Narcan and other medical supplies in the emergency vehicle. Review of CAD system statistics will show if any impact is being achieved. |
| 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), First Responders, 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. | Start educating the youth in the community as early as possible on the dangers of these drugs in order to stop the initial use and potential addiction. First responder training will assist in better spotting mental illness in residents that may need assistance so as to avoid substance abuse and possibly overdose or death. |
| 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. | Medical kits were procured from a vendor specializing in these items and first responder training was chosen based on the expertise of the company providing the training. These vendors were sought out based on their relevance to our program. |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Hillsdale Borough | | |
| | State ID: | NJ92 |
| | County Name: | Bergen |
| | Address: | 380 Hillsdale Avenue, Hillsdale, New Jersey, 07642 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$23,736.90 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$25,431.10 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | NA |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$31,452.12 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The overarching goal is to dedicate funds to abate opioid-related harms through preventive interventions and educational program for youth in the Borough |

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| 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. | evidence based and informed practices |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | VIA public meetings of the governing body with public comment sessions |
| 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 programs using opioid abatement funds in this reporting year? | No |
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| Opioid Settlement Funding Report | | |
|------------------------------------|---|--|
| Sub Division: Little Ferry Borough | | |
| | State ID: | NJ114 |
| | County Name: | Bergen |
| | Address: | 215-217 Liberty Street, Little Ferry, New Jersey, 07643 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$24,537.37 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$35,625.14 |
| 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 (7/1/2023 - 6/30/2024): | \$2,744.9 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$32,681.29 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | To provide education and materials to the youth members of our community on the effects of substance use and abuse and engaging families, the community as a whole |

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| | | along with local government agencies to achieve the program's objectives. |
| 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. | During the reporting year, the Borough held a public outreach seminar for the youth and their parents. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Education outreach at this time. |
| 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 |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Borough of Little Ferry |
| 2 | Agency/Funding Recipient Name | Borough of Little Ferry |
| 3 | Agency/Funding Recipient Category | County of Municipality (including Departments and Municipal Alliances) |
| 4 | Primary problem being addressed by this program: | Opioid Use and Abuse |
| 5 | Brief program description: | Education and materials to youth and families |
| 6 | Program target population: | Children and Young Adults - 14-18 (high school aged) |
| 7 | Date this program was funded (please use MM/DD/YYYY) | 6/1/2023 |
| 8 | Amount of funding for this program. | \$2,744.90 |
| 8a. | Amount expended: | \$2,744.90 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | Other |
| | Other (please specify) | As needed |

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| 10 | Program Launch Date | 6/1/2023 |
| 11 | Please choose the length of time of this program's duration: | 1 year |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 400 students |
| 13 | Please state this program's statement of impact. | Education on opioids |
| 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: | 400 |
| | Number of training/education sessions: | 1 |
| 15 | How frequently are you measuring the tracked key performance indicators? | Other |
| | Other (please specify) | As needed |
| 16 | What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? | Educate young adults on the effects of substance use and abuse, and provide them with literature and materials to increase their awareness. Impact would be measured through feedback from participants and from presenter |
| 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 |
| 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. | Presenter will speak about his real-life battle with opioids and how he was able to recover from his addiction and now dedicates his life by telling his story in hopes to help people that may have a substance abuse 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. | The Borough utilizes the State of NJ's procurement laws as well as the requirements of the Borough for purchasing to procure goods and services for this program. |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Lodi Borough | | |
| | State ID: | NJ116 |
| | County Name: | Bergen |
| | Address: | 1 Memorial Drive, Lodi, New Jersey, 07644 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$108,211.82 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$126,935.32 |
| 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 (7/1/2023 - 6/30/2024) : | \$6,750.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$101,461.82 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | CONDUCTED 2 TRAINING SEMINARS FOR MIDDLE AND HIGH SCHOOL STUDENTS ABOUT THE EFFECTS OF OPIOIDS. |

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| 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. | SEE ABOVE |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | OUTREACH TO THE MIDDLE & HIGH SCHOOLS IN THE BOROUGH |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Education Awareness Seminar |
| 2 | Agency/Funding Recipient Name | Borough of Lodi |
| 3 | Agency/Funding Recipient Category | Private Speaker |
| 4 | Primary problem being addressed by this program: | Education awareness Opioid Reduction |
| 5 | Brief program description: | Education Seminar to Middle and High School Students |
| 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): | 03/25/2024 |
| 8 | Amount of funding for this program. | \$6,750.00 |
| 8a. | Amount expended: | \$6,750.00 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |

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| 9 | How often are you disbursing funds to this program? | One time only |
| 10 | Program Launch Date | 03/25/2024 |
| 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? | 225 |
| 13 | Please state this program's statement of impact. | Educational Awareness |
| 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: | 225 |
| 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? | Reduce and educate |
| 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 |
| 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. | Educational awareness of the opioid pandemic and the outcomes and effects, training used as a deterrent |
| 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. | Word of Mouth |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Lyndhurst Township | | |
| | State ID: | NJ120 |
| | County Name: | Bergen |
| | Address: | 367 Valley Brook Ave, Lyndhurst, New Jersey, 07071 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$69,894.47 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$97,029.84 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$97,029.84 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Substance abuse and mental health awareness |

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| 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. | Municipal Alliance - needs assessment |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | 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 programs using opioid abatement funds in this reporting year? | No |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Mahwah Township | | |
| | State ID: | NJ122 |
| | County Name: | Bergen |
| | Address: | 475 Corporate Dr, Mahwah, New Jersey, 07430 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$55,438.07 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$85,788.02 |
| 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 (7/1/2023 - 6/30/2024) : | \$34,222.62 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$13,651.51 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | na |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$27,373.89 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Continuous care and training for our K-9 is a small portion of the allocation. The primary use for this years allocation is to partner with the Mahwah Municipal Alliance to have community outreach programs and provide education to prevent and combat drug 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. | Council and Administration spoke with the Mahwah Chief of police who had contact with the head of the Mahwah Municipal Alliance. Conversations were also had directly with the head of the Mahwah Municipal Alliance. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | MMA |
| 2 | Agency/Funding Recipient Name | Mahwah Municipal Alliance |
| 3 | Agency/Funding Recipient Category | County or Municipality (including Departments and Municipal Alliances) |
| 4 | Primary problem being addressed by this program: | Education and outreach for community |
| 5 | Brief program description: | The Mahwah Municipal Alliance is providing education to younger generations within the community in hopes to take a preventative stance against drug use |

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| 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) |
| 7 | Date this program was funded (please use MM/DD/YYYY) | 06/26/2024 |
| 8 | Amount of funding for this program. | \$23,000.00 |
| 8a. | Amount expended: | \$23,000.00 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | 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? | 2000 |
| 13 | Please state this program's statement of impact. | By providing education to children and teens within Mahwah through the Municipal Alliance we are taking a preventative stance and hopefully corrective stance in regards to opioid usage within our 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)? | |
| | Increased community awareness (please describe): | Municipal Alliance was established to provide increase community awareness to school aged children in the district |
| 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? | Reduction in the amount of people that abuse 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). | 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 |

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| 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. | Education and social awareness |
| 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. | NA |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Opioid K-9 |
| 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: | Continued training and care of opioid K-9 in the amount of \$11,222.62 is allocated/expended. |
| 3 | 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: | |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
|-----------------------------------|---|--|
| Sub Division: New Milford Borough | | |
| | State ID: | NJ154 |
| | County Name: | Bergen |
| | Address: | 930 River Road, New Milford, New Jersey, 07646 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$30,903.97 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$46,395.97 |
| 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 (7/1/2023 - 6/30/2024) : | \$2,617.62 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$51,807.30 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | To support DEA drug takeback initiatives |

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| 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 used the money for programs we already participate in to offset expenses. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | We haven't specifically but we do have awareness events throughout the year. |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | DEA Drug Takeback |
| 2 | Agency/Funding Recipient Name | Borough of New Milford |
| 3 | Agency/Funding Recipient Category | First Responders, Law Enforcement, and Emergency Services |
| 4 | Primary problem being addressed by this program: | Getting unused prescription drugs out of circulation |
| 5 | Brief program description: | A day where residents can bring in their unused prescription drugs |
| 6 | Program target population: | Members of the General Public |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 04/27/2024 |
| 8 | Amount of funding for this program. | \$691.08 |
| 8a. | Amount expended: | \$691.08 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | Whenever the program is offered by the DEA |

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| 10 | Program Launch Date | 04/27/2024 |
| 11 | Please choose the length of time of this program's duration: | As often as it is offered |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 100 |
| 13 | Please state this program's statement of impact. | Reduce the amount of prescription drugs in circulation |
| 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): | Reminding residents of the importance of properly disposing of unused prescription drugs |
| 15 | How frequently are you measuring the tracked key performance indicators? | When the program is offered |
| 16 | What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? | Reminding residents of the importance of properly disposing of unused prescription drugs |
| 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) |
| 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. | Taking unused prescription drugs out of circulation |
| 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. | N/A |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Police Participation in Municipal Alliance |
| 2 | Agency/Funding Recipient Name | Borough of New Milford |
| 3 | Agency/Funding Recipient Category | County or Municipality (including Departments and Municipal Alliances) |
| 4 | Primary problem being addressed by this program: | Awareness |

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| 5 | Brief program description: | The Municipal Alliance meets regularly to plan various awareness events throughout the calendar year |
| 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 |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 12/06/2023 |
| 8 | Amount of funding for this program. | \$1,926.54 |
| 8a. | Amount expended: | \$1,926.54 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | As Submitted by PD |
| 10 | Program Launch Date | 01/01/2023 |
| 11 | Please choose the length of time of this program's duration: | ongoing it is a permanent committee |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 250 |
| 13 | Please state this program's statement of impact. | Awareness |
| 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): | through various programs throughout the year |
| 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 |
| 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 |

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| 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. | Increasing awareness |
| 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. | none |

| Opioid Settlement Funding Report | | |
|---------------------------------------|---|--|
| Sub Division: North Arlington Borough | | |
| | State ID: | NJ157 |
| | County Name: | Bergen |
| | Address: | 214 Ridge Rd, North Arlington, New Jersey, 07031 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$34,809.49 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$39,933.70 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$43,206.40 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Plans are underway for informative sessions with Board of Education. Group sessions will be in conformity to grant guidelines. |

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| 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. | Strategic planning, |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Municipality is working in conjunction with Board of Education |
| 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 |
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| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | No |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Oakland Borough | | |
| | State ID: | NJ162 |
| | County Name: | Bergen |
| | Address: | 1 Municipal Plaza, Oakland, New Jersey, 07436 |
| Fiscal Year: 2024 | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$24,446.02 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$38,550.54 |
| 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 (7/1/2023 - 6/30/2024) : | \$6,881.59 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$26,507.75 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The overarching goal of this program is to dedicate funds to abate opioid-related harms through education and preventive programs aimed at the youth of the Borough. |
| 11 | How did you decide the best way to use the opioid abatement funds your subdivision received this reporting year? For example, did | informed practices and strategies |

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| | 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. | |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | discussion at open to the public meetings of the governing body |
| 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 programs using opioid abatement funds in this reporting year? | Yes |

| Opioid Settlement Funding Report | | |
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| Sub Division: Palisades Park Borough | | |
| | State ID: | NJ168 |
| | County Name: | Bergen |
| | Address: | 275 broad ave, Palisades Park, New Jersey, 07650 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$10,511.07 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$37,136.69 |
| 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 (7/1/2023 - 6/30/2024) : | \$4,161.18 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$40,302.23 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Our goal is to make sure emergency overdose kits are available at all public schools and borough owned buildings. |

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| 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 not use any reports at this time. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 meet with public school staff members and borough workers and educated them on the use of naran. |
| 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 programs using opioid abatement funds in this reporting year? | No |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Opioid education and prevention |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | Yes, other modifications/expansions |
| | 2a) If yes, please explain: | Placement of emergency overdose kits in the public schools and all borough own buildings. |
| 3 | 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): | 10 |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Paramus Borough | | |
| | State ID: | NJ169 |
| | County Name: | Bergen |
| | Address: | 1 Jockish Square, Paramus, New Jersey, 07652 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$80,228.24 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$2,250.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$127,601.38 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | Working on a presentation on the dangers of opioids |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$127,601.38 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Working on a presentation on the dangers of opioids |

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| 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. | Working on a presentation on the dangers of opioids with medical professionals. Addiction experts |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 a presentation on the dangers of opioids |
| 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 programs using opioid abatement funds in this reporting year? | No |
| | | |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Ramsey Borough | | |
| | State ID: | NJ189 |
| | County Name: | Bergen |
| | Address: | 33 North Central Avenue, Ramsey, New Jersey, 07446 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$33,762.55 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$874.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$50,713.15 |
| 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 (7/1/2023 - 6/30/2024) : | \$8,500.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$42,213.15 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Borough is taking a multi layered approach with goals of community engagement, education, prevention and counseling. To achieve those goals our Police Department has partnered with Center for Drug and Alcohol Resources to provide officer training as well as counselors who can respond to overdoses or situations where the police encounter those struggling with addiction. Our Municipal Alliance Committee has worked with the school district on community engagement activities and speaker programs. We have also obtained and trained a narcotics canine which will help prevent future overdoses and drug detection. Also, though K9 Jack is an essential member of our community engagement team as he attracts many people who may otherwise be reluctant to interact to come see him and interact and engage in conversation they normally would not have. |
| 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. | Basically evidence based |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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: | 1 - 2 years |
| 13 | Please describe your public engagement/input efforts? | Community stakeholders |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Narcotics Detection Dog |
| 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 \$8,500 spent in the reporting period was all for this program |
| 3 | 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: | Reduction in opioid-related incidents |
| | Increased community awareness (please describe): | The Borough's Narcotics Detection Dog 'Jack' has been utilized not only by the police for prevention but also at numerous community events, such as weekly Farmers Market, Ramsey Day and other educational events to increase awareness. |
| | Other: | Narcotics Dog has been successful in detection and seizures of narcotics preventing these from being distributed through our community and others around us. |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
|----------------------------------|--------------------|---------------------------------------|
| Sub Division: Ridgefield Borough | | |
| | State ID: | NJ194 |
| | County Name: | Bergen |
| | Address: | 700 Shaler Blvd, Ridgefield, NJ 07657 |
| Fiscal Year: 2024 | | |
| | No Report Received | |

| Opioid Settlement Funding Report | | |
|---------------------------------------|---|--|
| Sub Division: Ridgefield Park Village | | |
| | State ID: | NJ195 |
| | County Name: | Bergen |
| | Address: | 234 Main Street, Ridgefield Park, New Jersey, 07660 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$23,879.80 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$300.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$33,351.11 |
| 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 (7/1/2023 - 6/30/2024) : | \$2,500.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8 a. | 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. | \$34,375.00 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Funds usage will mostly focus on educating the Ridgefield Park Village Police in the Education and Prevention of Opioid usage. Obtained education will be delivered to Schools and the Elderly population, providing the cautious use, negative and lasting impact of Opioid usage. |
| 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 are fortunate we have a minimal number opioid related incidents we respond to, since we don't spend money on medicine per say, we try and keep public informed through training or events, as well as trying to provide training to the officers who are tasked with response to such incidents. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | We utilize social media, and tapped into the school community with a training campaign this year. |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Ridgefield Park Drug Prevention & Education |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | No modifications/expansions |
| 3 | 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): | Funds usage will mostly focus on education. |

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| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | Yes |
| | 4a) If yes, please explain: | The village spent \$2,500.00 on a speaking engagement to educate the Ridgefield Park Village Police on Opioid usage. |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Ridgewood Village | | |
| | State ID: | NJ196 |
| | County Name: | Bergen |
| | Address: | 131 N Maple Avenue, Ridgewood, New Jersey, 07450 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$53,727.21 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$100.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$113,423.51 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$113,423.51 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Currently creating a plan to implement abatement programs |

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| 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. | none |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | In progress |
| 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 |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: River Edge Borough | | |
| | State ID: | NJ198 |
| | County Name: | Bergen |
| | Address: | Borough of River Edge, 705 Kinderkamack Road, River Edge, New Jersey, 07661 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$19,066.57 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$30,253.54 |
| 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 (7/1/2023 - 6/30/2024) : | \$5,000.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8 a. | Please provide details about any administrative expenses. | N/A - funds were used for a speaker to address high schoolers. No funds were used 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. | \$28,503.14 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The goals for this year's spending of the opioid settlement funds are focused on addressing the opioid crisis by expanding access to treatment and recovery services, supporting harm reduction strategies, and enhancing prevention programs. Additionally, we aim to strengthen community-based initiatives that provide support to individuals and families affected by opioid misuse. |
| 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. | From first-hand experience. Our community has experienced the loss of community members both young and old from addiction and want to be able to provide resources and services to those that need, while also providing education to our youth to never try it. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | In this year we worked with our Local and Regional School District and our Municipal Alliance along with Law Enforcement, to direct the money toward preventative programming and supplying resources to individuals who need them. We also have tables and support programming at parent-focused events throughout the school year e.g., back-to-school nights, PTO meetings; We also participate in events held in town throughout the year such as River Edge Day and other community education events throughout year. |
| 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 programs using opioid abatement funds in this reporting year? | Yes |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Overcome: The Matthew Bocchi Story |

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| 2 | Have there been any modifications or expansions to this program since the initial report? : | No, Program was a one-time event |
| 3 | 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: | 1 |
| | Other: | The participants were the students of River Dell High School from 9th to 12th grade. |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | Yes |
| | 4a) If yes, please explain: | <p>In this reporting period, \$5,000 was spent on this program.</p> <p>According to Lt. Zemaite who attended the presentation, he stated that can only describe the presentation as moving, gripping, and relatable. In his words: "Students were dismissed, and those that wished to speak to him after, privately, were invited to do so. I was shocked to see the amount of our students that thanked him for sharing his story, students that became emotional because they could identify similarities in their own life from his personal experiences, and those that just wanted to talk to him.</p> <p>We had him stay around at lunch, where several students grabbed his ear and wanted to speak to him about their current situation, what they have experienced in life, or pick his brain further. The school sent a follow up email home to the parents with contact information for him. Matt told me he had an engagement in another town a few days prior and was still receiving Instagram DM's and emails from students that had more time to process his experiences and narrative, and wanted to reach out.</p> <p>I said to Matt, along with the school administration, you never know what you are going to get with an "unknown" speaker. We all had the same opinion after Matt spoke, including the students, that this was a valuable</p> |

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| | | and engaging presentation that allowed students a takeaway to use or address issue in their current life or down the road." |
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| Opioid Settlement Funding Report | | |
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| Sub Division: Rutherford Borough | | |
| | State ID: | NJ204 |
| | County Name: | Bergen |
| | Address: | 176 Park Avenue, Rutherford, New Jersey, 07070 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$39,538.47 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$57,903.90 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$57,903.90 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The goal was to provide education and information on resources available to the community through community engagement events and partnerships with local and county Civic Organizations. |
| 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. | Funds used during the 2024 fiscal year focused on efforts to provide information and education to our community through community engagement events, the creation of our own anti-drug slogan and associated materials, L.E.A.D. education programs, and partnerships with local and county civic organizations such as Bergen County's Hope 1 Mobile Recovery van. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | The Rutherford Police Department hosted a National Night Out Event which included over 30 local and county civic organizations, county health professionals and drug prevention and rehabilitation services. The Rutherford Police Department promoted their anti-drug slogan at the event to elicit conversations and educate the public on the opioid dangers and the resources available to help those in need. The Rutherford Police department also has created a partnership with Bergen County Hope 1 Mobile Recovery van where information, Narcan, counseling services, and materials with our anti-drug slogan are distributed. |
| 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 |
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| Opioid Settlement Funding Report | | |
|-------------------------------------|---|---|
| Sub Division: Saddle Brook Township | | |
| | State ID: | NJ205 |
| | County Name: | Bergen |
| | Address: | 55 Mayhill Street, Saddle Brook, New Jersey, 07663 |
| Fiscal Year: 2024 | | |
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| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$33,414.97 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$52,820.39 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$53,913.41 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The Township is scheduling meetings with the Superintendent of Schools, administration and police department to develop a plan for residents, students, and parents |

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| 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. | no decision made at this time |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 are planning to work with the schools to implement programs for parents and students |
| 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 |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Teaneck Township | | |
| | State ID: | NJ223 |
| | County Name: | Bergen |
| | Address: | 818 Teaneck Road, Teaneck, New Jersey, 07666 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$53,919.12 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$617.74 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$66,357.07 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | None at this time |
| 9 | Please state the amount of unspent and/or uncommitted opioid abatement funds from any reporting year that your subdivision has on hand. | \$66,357.07 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Community outreach and education, prevention, assistance with rehab programs. |

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| 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. | Consultation with Health Officer and municipal drug alliance commission |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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 but plans are in the works |
| 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 |
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| Opioid Settlement Funding Report | | |
|----------------------------------|---|---|
| Sub Division: Tenaflly Borough | | |
| | State ID: | NJ224 |
| | County Name: | Bergen |
| | Address: | 100 Riveredge Road, Tenaflly, New Jersey, 07670 |
| Fiscal Year: 2024 | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$37,804.61 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$56,755.86 |
| 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 (7/1/2023 - 6/30/2024) : | \$5,500.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$18,956.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$51,255.86 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | The Borough of Tenaflly has a goal of reducing the number of opioid related deaths and overdoses. The objectives include education and self-efficacy of students and individuals across the lifespan to mitigate risk and prevent opioid related overdoses and deaths. Train first responders and community |

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| | | stakeholders on administering naloxone, fentanyl test strips, and identifying risk factors and appropriate methods of response. Procure harm reduction equipment (naloxone kits and fentanyl test strips), which would assist with desired outcomes of opioid-related overdoses reversed through naloxone administration. |
| 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 attended a Town Hall offered by the County of Bergen, reviewed data obtained from various sources such as the Mid-Bergen Regional Health Commission and other resources to implement our owned practices and strategies which are presently being defined. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | A presentation was done at the Tenaflly High School for parents and students to educate the population on drug addiction. |
| 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: Waldwick Borough | | |
| | State ID: | NJ237 |
| | County Name: | Bergen |
| | Address: | 63 Franklin Turnpike, Waldwick, New Jersey, 07463 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$35,376.93 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$54,324.18 |
| 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 (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$63,413.66 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | We plan to begin distributing money to our regional health commission for approved programming, appropriating a small portion to our Police Department for educational and outreach purposes and then plan to setup an agreement with the County for the rest of the funds. We also plan to utilize funds for our annual Warrior Night Out event again in the fall of 2024 |
| 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 (7/1/2023 - 6/30/2024), 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? | N/A |
| 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 programs using opioid abatement funds in this reporting year? | No |
| | | |

| Opioid Settlement Funding Report | | |
|----------------------------------|---|--|
| Sub Division: Wallington Borough | | |
| | State ID: | NJ239 |
| | County Name: | Bergen |
| | Address: | 24 Union Blvd., Wallington, New Jersey, 07057 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$21,409.68 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$1,099.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$34,726.87 |
| 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 (7/1/2023 - 6/30/2024) : | \$25,999.40 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 8a. | Please provide details about any administrative expenses. | N/A. No administrative expenses incurred. |
| 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 |

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| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | <p>The Borough of Wallington is committed to improving public health and reducing the presence of addiction in our community. To that end, we have sought to use some of our allocations from the Opioid Settlement Fund to purchase a new outdoor signage for outside of our Borough Hall. This outdoor LED sign will include a programmable message board, enabling us to utilize the sign for broad communication with the public. We will use this sign to produce messaging that engages the community with messaging related to opioid addiction, with the goal of connecting people who are struggling to the help and resources they need, thereby providing connections to community members who would not otherwise have them. This sign would post messaging advertising about the health hazards and risks of misusing opioids; post messages aimed at supporting pregnant and parenting women; and provide information on addiction treatment centers and other addiction assistance resources; and connect people with the resources they need for help and addiction treatment.</p> |
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| 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 Borough of Wallington analyzed cost-effective ways to utilize opioid abatement funds that would also benefit a wide variety of residents. The Borough was in need of an outdoor LED sign at the Borough Hall to program customizable messages for the residents of the Borough, with a focus on messaging that would improve public health and safety for our residents. We decided to utilize the sign to create outreach and messaging to raise awareness of the risks of opioid addiction, with the goal of connecting people who are struggling to the help and resources they need, thereby providing connections to community members who would not otherwise have them. This sign would post messaging advertising about the health hazards and risks of misusing opioids; post messages aimed at supporting pregnant and parenting women; and provide information on addiction treatment centers and other addiction assistance resources; and connect people with the resources they need for help and addiction treatment. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Advertisement was posted in the Borough newspaper regarding the purchase of the sign. |
| 14 | Does your county/subdivision have a strategic plan? | Yes |
| 14a | Can we post your strategic plan online? | |
| 15 | Have you completed a Risk Assessment profile for demographic or geographic impact? | No |
| | | |
| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |

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| 1 | Program Name/Title | Borough of Wallington Opioid Related Messaging |
| 2 | Agency/Funding Recipient Name | Borough of Wallington |
| 3 | Agency/Funding Recipient Category | County or Municipality (including Departments and Municipal Alliances) |
| 4 | Primary problem being addressed by this program: | Lack of Opioid Related Messaging |
| 5 | Brief program description: | Purchasing and installing an LED sign with programmable message board at Borough Hall. |
| 6 | Program target population: | 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 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024) | \$45,461.00 |
| 8 | Amount of funding for this program. | \$25,999.40 |
| 8a. | Amount expended: | \$25,999.40 |
| 8b. | Amount encumbered/appropriated: | \$0.00 |
| 9 | How often are you disbursing funds to this program? | One time only |
| 10 | Program Launch Date | 06/30/2024 |
| 11 | Please choose the length of time of this program's duration: | The purchase of the LED sign will be a 1-time capital purchase. Opioid related messaging will be posted on the sign on a regular basis continuing indefinitely into the future to reduce addiction and connect struggling individuals with help and resources. |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 11868 |

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| 13 | Please state this program's statement of impact. | The Borough of Wallington is committed to improving public health and reducing the presence of addiction in our community. To that end, we have sought to use some of our allocations from the Opioid Settlement Fund to purchase a new outdoor signage for outside of our Borough Hall. This outdoor LED sign will include a programmable message board, enabling us to utilize the sign for broad communication with the public. We will use this sign to produce messaging that engages the community with messaging related to opioid addiction, with the goal of connecting people who are struggling to the help and resources they need, thereby providing connections to community members who would not otherwise have them. This sign would post messaging advertising about the health hazards and risks of misusing opioids; post messages aimed at supporting pregnant and parenting women; and provide information on addiction treatment centers and other addiction assistance resources; and connect people with the resources they need for help and addiction treatment. |
| 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): | The LED sign will increase community awareness of opioid addiction and expand access to treatment by publicly posting information about treatment centers, addiction assistance, and related resources. |
| | Number of referrals to treatment | |
| 15 | How frequently are you measuring the tracked key performance indicators? | The performance indicators will be measured on an ongoing basis. |

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| 16 | What outcomes or impact does the program aim to achieve? How do you plan to measure or track that impact? | The goal of this project is to connect people who are struggling with opioid addiction to the help and resources they need, thereby providing connections to community members who would not otherwise have them. This sign would post messaging advertising about the health hazards and risks of misusing opioids; post messages aimed at supporting pregnant and parenting women; and provide information on addiction treatment centers and other addiction assistance resources; and connect people with the resources they need for help and addiction treatment. We can measure these impacts through statistics, such as a reduction in police responses to overdose calls, and an increase in utilization of addiction assistance resources. |
| 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, 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 Pregnant or Parenting Women and their Families, including Babies with Neonatal Abstinence Syndrome, Prevent Misuse of Opioids, Prevent Overdose Deaths and Other Harms (Harm Reduction) |

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| 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 Borough of Wallington is committed to improving public health and reducing the presence of addiction in our community. To that end, we have sought to use some of our allocations from the Opioid Settlement Fund to purchase a new outdoor signage for outside of our Borough Hall. This outdoor LED sign will include a programmable message board, enabling us to utilize the sign for broad communication with the public. We will use this sign to produce messaging that engages the community with messaging related to opioid addiction and treatment. The investment in a programmable sign for messaging addresses the lack of opioid related messaging in the community by providing an efficient and free way to connect community members struggling with addiction to the resources that can benefit them. |
| 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. | 0 |

| Opioid Settlement Funding Report | | |
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| Sub Division: Westwood Borough | | |
| | State ID: | NJ256 |
| | County Name: | Bergen |
| | Address: | 101 Washington Avenue, Westwood, New Jersey, 07675 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$27,726.29 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$35,214.65 |
| 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 (7/1/2023 - 6/30/2024) : | \$8,250.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$22,726.29 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$26,964.65 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | To provide educational information to schools. |

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| 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 list of Opioid Remediation uses |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Police/school outreach. |
| 14 | Does your county/subdivision have a strategic plan? | No |
| 15 | Have you completed a Risk Assessment profile for demographic or geographic impact? | No |
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| 16 | Did your subdivision fund any programs using opioid abatement funds in this reporting year? | Yes |
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| | 2024 Fiscal Program List | |
| 1 | Program Name/Title | Opioid Awareness |
| 2 | Agency/Funding Recipient Name | Westwood Regional School System |
| 3 | Agency/Funding Recipient Category | Schools, Colleges, Universities |
| 4 | Primary problem being addressed by this program: | Opioid Awareness |
| 5 | Brief program description: | Speaker for High School Students |
| 6 | Program target population: | Children and Young Adults - 14-18 (high school aged) |
| 7 | Date this program was funded (please use MM/DD/YYYY): | 03/12/2024 |
| 8 | Amount of funding for this program. | \$35,726.29 |
| 8a. | Amount expended: | \$8,250.00 |
| 8b. | Amount encumbered/appropriated: | \$8,250.00 |
| 9 | How often are you disbursing funds to this program? | Annually |
| 10 | Program Launch Date | 04/01/2024 |

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| 11 | Please choose the length of time of this program's duration: | 4-5 years |
| 12 | What is the anticipated number of unduplicated clients this program will reach annually? | 250 |
| 13 | Please state this program's statement of impact. | To bring awareness of the dangers of opioids to 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 training/education sessions: | 5 |
| | Increased community awareness (please describe): | Increase community awareness by educating students on the dangers of opioids. |
| 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 number of opioid emergencies. |
| 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) |
| 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. | Educating students at a young age is proven to be effective in effecting behavior. |
| 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 services were procured through the Borough's purchase order procurement process. |
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| | 2023 Fiscal Program List | |
| 1 | Program Name/Title | Borough of Westwood - Opioid Education/Prevention Program |
| 2 | Have there been any modifications or expansions to this program since the initial report? : | No modifications/expansions |

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| 3 | 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: | |
| 4 | Is there anything else you would like to share or highlight regarding the progress and impact of this program? : | No |

| Opioid Settlement Funding Report | | |
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| Sub Division: Wyckoff Township | | |
| | State ID: | NJ262 |
| | County Name: | Bergen |
| | Address: | 340 Franklin Ave, Wyckoff, New Jersey, 07481 |
| Fiscal Year: 2024 | | |
| | | |
| 1 | Please tell us the full amount of opioid abatement funds you received between 7/1/2023 and 6/30/2024 | \$24,883.44 |
| 2 | Please tell us the total amount of interest accrued on opioid abatement funds your subdivision has received since the distribution commenced in 2022: | \$0.00 |
| 3 | Please tell us the total amount of opioid abatement funds your subdivision has received since the distribution commenced in 2022. | \$37,357.36 |
| 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 transferred some of our funds to the county |
| 5 | What amount of your opioid abatement funds did you transfer to the county? | \$16,097.36 |
| 6 | Please tell us the amount of opioid abatement funds you have expended in this reporting period (7/1/2023 - 6/30/2024) : | \$0.00 |
| 7 | Please tell us the amount of opioid abatement funds you have appropriated/encumbered but not yet spent in this reporting period (7/1/2023 - 6/30/2024). | \$0.00 |
| 8 | Please tell us the amount of opioid abatement funds that was spent on program administrative expenses in this reporting period (7/1/2023 - 6/30/2024) : | \$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. | \$28,506.56 |
| 10 | Please share brief information on your subdivisions overarching goals and values to provide context for this year's spending decisions | Transfer settlement funds to the county where they will be used as part of a robust opioid remediation, rehabilitation, and education program that will benefit our municipality as well as our neighboring communities. |

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| 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. | Needs assessment through meetings with governing body, administration and public safety/police department. |
| 12 | In this reporting year (7/1/2023 - 6/30/2024), 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? | Public safety/police department engages with public as part of their regular community outreach programs. |
| 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 programs using opioid abatement funds in this reporting year? | No |
| | | |