

County Settlement Allocation Reporting

Response was added on 03/13/2024 3:22pm.

As a Pennsylvania county or subdivision receiving monies from the National Opioid Settlement, please answer the following questions regarding use of settlement dollars between August 1, 2022 and December 31, 2023.

Note: This information shall be made public.

This survey is for Bucks County.

Reporting Period Start Date: 08-01-2022

For the Baseline report please use August 1, 2022.

Reporting Period End date: 12-31-2023

For the Baseline report please use December 31, 2023.

According to our records, your county/subdivision has received \$7722666.59 from the Wilmington Trust. Yes
 No

Is this accurate?

What is the total amount of settlement funds remaining from the previous reporting period(s)? (This should be the same amount reported to the Trust Administrator.) 0.00
(Provide exact amount (including cents), do NOT use a comma.)
Note: If this is your first time reporting, enter 0.00.

Participating Subdivisions are required to report any funds not used for opioid remediation to the National Administrators every six (6) months. Has your county or subdivision reported any non-opioid remediation spending during the reporting period? Yes
 No

Are you applying for an extension to expend funds further than the 18-month spending window? Yes
 No

Implemented Remediation Program(s) and Strategy(s)

The following set of questions will ask for information and spending for the remediation program(s) your county/subdivision has implemented. Please answer this set of questions for each remediation program. Once all questions are answered you will be prompted if there are additional remediation efforts you need to report. If there are additional remediation efforts to report, select "yes", and complete the required questions.

This section will ask you to identify which Exhibit E strategy(s) of the National Opioid Settlement documentation most closely matches your remediation effort.

If you are working with other counties/subdivisions on a joint remediation effort, please report your county's/subdivision's dollars spent on the remediation effort. In the notes section, indicate which counties/ subdivisions you are working with on this effort.

If you are a county with disbursements to subdivisions, at this time, you will need to report on subdivision remediation efforts and spending, in addition to county level remediation efforts and spending.

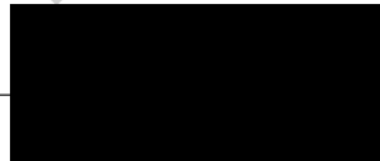
Reference Copy of Schedule A and B

[Attachment: "Exhibit-E-List-of-Opioid-Remediation-Uses.pdf"]

Name of the person completing this survey.

Shannon Kirby

Provide the email address of the person entering the survey data.



Provide the phone number of the person completing this survey.

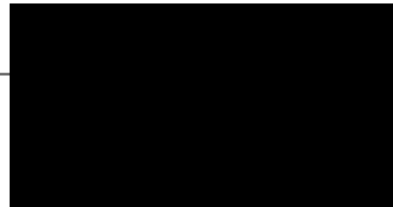
I am certifying that all funds received and distributed were used in accordance with Exhibit E.

- Yes
- No

Name of the county's primary contact for proposals for services/products related to opioid remediation.

Shannon Kirby

County's primary contact email address:



Phone number of the county's primary contact:

Current remediation program #1

Provide the name of the remediation program/strategy.	Treatment Expansion
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	20224.50 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	279775.50 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2000
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Treatment Expansion)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input checked="" type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Treatment Expansion).

- 1. Increase distribution of MAT to individuals who are uninsured or whose insurance does not cover the needed service.
- 2. Provide education to school-based and youth-focused programs that discourage or prevent misuse.
- 3. Provide MAT education and awareness training to healthcare providers, EMTs, law enforcement, and other first responders.
- 4. Provide treatment and recovery support services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication and with other support services.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Treatment Expansion) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Establish a pool of funding to ensure that residents have access to the most appropriate length of all methods of treatment, offering up to 10 days additional treatment, project to be funded on per diem basis.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #2

Provide the name of the remediation program/strategy.	Expanding Recovery Housing
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	9980.78 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	90019.22 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2000
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Expanding Recovery Housing)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input checked="" type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Expanding Recovery Housing).

- 1. Increase distribution of MAT to individuals who are uninsured or whose insurance does not cover the needed service.
- 2. Provide education to school-based and youth-focused programs that discourage or prevent misuse.
- 3. Provide MAT education and awareness training to healthcare providers, EMTs, law enforcement, and other first responders.
- 4. Provide treatment and recovery support services such as residential and inpatient treatment, intensive outpatient treatment, outpatient therapy or counseling, and recovery housing that allow or integrate medication and with other support services.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Expanding Recovery Housing) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Ensure that residents with financial barriers have access to licensed, safe, supportive recovery housing. Will provide per diem funding in recovery houses as well as lease arrangements, as well as an incentive for house owners who have applied for licensure and would be admitted to BC-ROC and BCDAC, Inc. network.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #3

Provide the name of the remediation program/strategy.	Warm Handoff for Individuals Surviving Overdose
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	85134.05 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	64865.95 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2017
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Warm Handoff for Individuals Surviving Overdose)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input checked="" type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Warm Handoff for Individuals Surviving Overdose).

- 1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.
- 2. Expand warm hand-off services to transition to recovery services.
- 3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions.
- 4. Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare.
- 5. Hire additional social workers or other behavioral health workers to facilitate expansions above.

Sometimes programs have multiple sources of funding. Yes
Did you receive any non-settlement funds for this remediation program/strategy? No

Is this remediation (Warm Handoff for Individuals Surviving Overdose) effort still active? Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Ensure that each Bucks County Hospital has coverage to meet with residents with substance use disorders, including those who have survived an opioid overdose. The goal is to provide immediate access to treatment services.

Does your county/subdivision have additional remediation program/strategies to report? Yes
 No

Current remediation program #4

Provide the name of the remediation program/strategy. Outreach and Mobile Engagement Services (MES)

Provide the name of the organization managing the remediation program/strategy. Bucks County Drug and Alcohol Commission, Inc.

Provide the name of the individual managing the remediation program/strategy. Shannon Kirby

Provide the program/strategy manager's phone number. [Redacted]

Provide the program/strategy manager's email address. [Redacted]

How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? 38505.79 (Provide exact amount (including cents), do NOT use a comma.)

"Spent" is those funds that have been paid for the purposes of this program.

How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? 61494.21 (Provide exact amount (including cents), do NOT use a comma.)

"Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.

Was this remediation program in place prior to receiving the Opioid funding? Yes No

When did this program begin? 01-01-2017

Will you be reporting information on the remediation program/strategy using Schedule A or B? Schedule A Schedule B

Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Outreach and Mobile Engagement Services (MES))? You may select up to 3 options.

- A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses
- B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment
- C. Pregnant & Postpartum Women
- D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS")
- E. Expansion of Warm Hand-off Programs and Recovery Services
- F. Treatment for Incarcerated Population
- G. Prevention Programs
- H. Expanding Syringe Service Programs
- I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State

Select the specific Exhibit E -- Schedule A Approved Remediation (Outreach and Mobile Engagement Services (MES)).

- 1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.
- 2. Expand warm hand-off services to transition to recovery services.
- 3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions.
- 4. Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare.
- 5. Hire additional social workers or other behavioral health workers to facilitate expansions above.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy?

- Yes
 No

Is this remediation (Outreach and Mobile Engagement Services (MES)) effort still active?

- Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis.

- Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Contract with MES provider to expand to another full-time MES worker to engage residents in services.

Does your county/subdivision have additional remediation program/strategies to report?

- Yes
 No

Current remediation program #5

Provide the name of the remediation program/strategy.	Narcan Purchase and Distribution
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	118429.68 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	81570.32 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2015
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Narcan Purchase and Distribution)? You may select up to 3 options.	
<input checked="" type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Narcan Purchase and Distribution).

1. Expand training for first responders, schools, community support groups and families.
 2. Increase distribution to individuals who are uninsured or whose insurance does not cover the needed service.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Narcan Purchase and Distribution) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)
Purchase and disseminate Narcan, the rescue medication for Opioid overdose, to residents.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Approval Pending

Current remediation program #6

Provide the name of the remediation program/strategy.	Community Based Mini-Grants
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	31052.74 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	318947.26 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Community Based Mini-Grants)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input checked="" type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input checked="" type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input checked="" type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Community Based Mini-Grants).

- 1. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.
- 2. Expand warm hand-off services to transition to recovery services.
- 3. Broaden scope of recovery services to include co-occurring SUD or mental health conditions.
- 4. Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare.
- 5. Hire additional social workers or other behavioral health workers to facilitate expansions above.

Select the specific Exhibit E -- Schedule A Approved Remediation (Community Based Mini-Grants).

- 1. Funding for media campaigns to prevent opioid use (similar to the FDA's "Real Cost" campaign to prevent youth from misusing tobacco).
- 2. Funding for evidence-based prevention programs in schools.
- 3. Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing).
- 4. Funding for community drug disposal programs.
- 5. Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy?

- Yes
 No

Is this remediation (Community Based Mini-Grants) effort still active?

- Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis.

- Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

In an effort to ensure that non traditional agencies have opportunity to make an impact on the community and opioid related issues, conduct a Request for Proposals to offer services such as advocacy, prevention, faith based support, support for people in recovery, community services.

Does your county/subdivision have additional remediation program/strategies to report?

- Yes
 No

Current remediation program #7

Provide the name of the remediation program/strategy.	Media Campaigns
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	11730.98 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	138269.02 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Media Campaigns)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input checked="" type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Media Campaigns).

1. Funding for media campaigns to prevent opioid use (similar to the FDA's "Real Cost" campaign to prevent youth from misusing tobacco).
2. Funding for evidence-based prevention programs in schools.
3. Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing).
4. Funding for community drug disposal programs.
5. Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Media Campaigns) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Ensure residents are aware of available resources, are educated on drug trends (such as Fentanyl), medication/syringe returns, diversionary programs, treatment availability.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #8

Provide the name of the remediation program/strategy.	Website with Family Resources
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	469.88 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	2030.12 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Website with Family Resources)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input checked="" type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Website with Family Resources).

- 1. Funding for media campaigns to prevent opioid use (similar to the FDA's "Real Cost" campaign to prevent youth from misusing tobacco).
- 2. Funding for evidence-based prevention programs in schools.
- 3. Funding for medical provider education and outreach regarding best prescribing practices for opioids consistent with the 2016 CDC guidelines, including providers at hospitals (academic detailing).
- 4. Funding for community drug disposal programs.
- 5. Funding and training for first responders to participate in pre-arrest diversion programs, post-overdose response teams, or similar strategies that connect at-risk individuals to behavioral health services and supports.

Sometimes programs have multiple sources of funding.
Did you receive any non-settlement funds for this remediation program/strategy?

- Yes
 No

Is this remediation (Website with Family Resources) effort still active?

- Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis.

- Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Edit current BCDAC, Inc. website to include improved and updated Family Resources.

Does your county/subdivision have additional remediation program/strategies to report?

- Yes
 No

Current remediation program #9

Provide the name of the remediation program/strategy.	Drug Test Strip Distribution and Materials
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	22290.00 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	7710.00 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Drug Test Strip Distribution and Materials)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input checked="" type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	
Select the specific Exhibit E -- Schedule A Approved Remediation (Drug Test Strip Distribution and Materials).	
<input checked="" type="checkbox"/> 1. Provide comprehensive syringe services programs with more wrap-around services, including linkage to OUD treatment, access to sterile syringes and linkage to care and treatment of infectious diseases.	

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Drug Test Strip Distribution and Materials) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)
Purchase Drug Test Strips and disseminate among the community, to reduce opioid death.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Approval Pending

Current remediation program #10

Provide the name of the remediation program/strategy.

Project Evaluation, Fiscal Management, Data Dashboard, Reporting, Administrative Costs

Provide the name of the organization managing the remediation program/strategy.

County of Bucks Human Services

Provide the name of the individual managing the remediation program/strategy.

Shannon Kirby

Provide the program/strategy manager's phone number.



Provide the program/strategy manager's email address.



How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period?

114036.46
(Provide exact amount (including cents), do NOT use a comma.)

"Spent" is those funds that have been paid for the purposes of this program.

How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period?

285963.54
(Provide exact amount (including cents), do NOT use a comma.)

"Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.

Was this remediation program in place prior to receiving the Opioid funding?

 Yes
 No

Will you be reporting information on the remediation program/strategy using Schedule A or B?

 Schedule A
 Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the remediation (Project Evaluation, Fiscal Management, Data Dashboard, Reporting, Administrative Costs)? You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved Remediation (Project Evaluation, Fiscal Management, Data Dashboard, Reporting, Administrative Costs). You may select up to 3 options.

1. Statewide, regional, local or community regional planning to identify root causes of addiction and overdose, goals for reducing harms related to the opioid epidemic, and areas and populations with the greatest needs for treatment intervention services, and to support training and technical assistance and other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
2. A dashboard to (a) share reports, recommendations, or plans to spend opioid settlement funds; (b) to show how opioid settlement funds have been spent; (c) to report program or strategy outcomes; or (d) to track, share or visualize key opioid- or health-related indicators and supports as identified through collaborative statewide, regional, local or community processes.
3. Invest in infrastructure or staffing at government or not-for-profit agencies to support collaborative, cross-system coordination with the purpose of preventing overprescribing, opioid misuse, or opioid overdoses, treating those with OUD and any co-occurring SUD/MH conditions, supporting them in treatment or recovery, connecting them to care, or implementing other strategies to abate the opioid epidemic described in this opioid abatement strategy list.
4. Provide resources to staff government oversight and management of opioid abatement programs.
99. Other

Sometimes programs have multiple sources of funding.
Did you receive any non-settlement funds for this remediation program/strategy?

Yes
 No

Is this remediation (Project Evaluation, Fiscal Management, Data Dashboard, Reporting, Administrative Costs) effort still active?

Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis.

Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Hired a Opioid Settlement Program Manager which will be paid partially through OSF and partially through interest accrued, partnered with university level project evaluator, and reporting functions for the opioid settlement funds.

Does your county/subdivision have additional remediation program/strategies to report?

Yes
 No

Current remediation program #11

Provide the name of the remediation program/strategy.	Jail Medication Assisted Treatment
Provide the name of the organization managing the remediation program/strategy.	County of Bucks Human Services
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	150000.00 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	0.00 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2015
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Jail Medication Assisted Treatment)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input checked="" type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Jail Medication Assisted Treatment).

1. Provide evidence-based treatment and recovery support, including MAT for persons with OUD and co-occurring SUD/MH disorders within and transitioning out of the criminal justice system.
2. Increase funding for jails to provide treatment to inmates with OUD.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Jail Medication Assisted Treatment) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Provide payment for Medication Assisted Treatment for inmates with opiate use disorders, at the Department of Corrections.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Approval Pending

Current remediation program #12

Provide the name of the remediation program/strategy.	Co-Responder Program
Provide the name of the organization managing the remediation program/strategy.	County of Bucks Human Services
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	185135.18 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	14864.82 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	11-01-2021
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Co-Responder Program)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input checked="" type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Co-Responder Program).

1. Provide evidence-based treatment and recovery support, including MAT for persons with OUD and co-occurring SUD/MH disorders within and transitioning out of the criminal justice system.
2. Increase funding for jails to provide treatment to inmates with OUD.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

What other source(s) of funding are being used? Organization Municipal County State Federal Other

Check all that apply.

Please enter the amount received from other funding source(s). 600000.00
(Provide exact amount (including cents), do NOT use a comma.)

(This question is voluntary and not required.)

Is this remediation (Co-Responder Program) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If yes, please explain the dual role of the remediation effort.

Address all social services needs for individuals who engage with law enforcement.

What percentage of the funds used in this dual role program are from this opioid settlement funds for this reporting period? 50

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Establish team of Co-Responders to partner with police department to meet social service needs of residents who engage with law enforcement. This project currently exists in several Lower Bucks communities and would expand to an Upper Bucks community.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #13

Provide the name of the remediation program/strategy.	Drug Court Probation Officer
Provide the name of the organization managing the remediation program/strategy.	County of Bucks Human Services
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	127075.92 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	72924.08 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2019
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Drug Court Probation Officer)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input checked="" type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Drug Court Probation Officer).

1. Provide evidence-based treatment and recovery support, including MAT for persons with OUD and co-occurring SUD/MH disorders within and transitioning out of the criminal justice system.
2. Increase funding for jails to provide treatment to inmates with OUD.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Drug Court Probation Officer) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Provide funding for one full-time Probation Officer assigned to Drug Court, a position currently funded by BCDAC, Inc., which would allow BCDAC, Inc. to expand their project management in lieu of Drug Court funding.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Approval Pending

Current remediation program #14

Provide the name of the remediation program/strategy.	Women's and Children's Housing Services
Provide the name of the organization managing the remediation program/strategy.	County of Bucks Human Services
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	25055.07 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	174944.93 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input checked="" type="radio"/> Yes <input type="radio"/> No
When did this program begin?	01-01-2022
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the remediation (Women's and Children's Housing Services)? You may select up to 3 options.	
<input type="checkbox"/> A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses <input type="checkbox"/> B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment <input checked="" type="checkbox"/> C. Pregnant & Postpartum Women <input type="checkbox"/> D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS") <input type="checkbox"/> E. Expansion of Warm Hand-off Programs and Recovery Services <input type="checkbox"/> F. Treatment for Incarcerated Population <input type="checkbox"/> G. Prevention Programs <input type="checkbox"/> H. Expanding Syringe Service Programs <input type="checkbox"/> I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State	

Select the specific Exhibit E -- Schedule A Approved Remediation (Women's and Children's Housing Services).

1. Expand Screening, Brief Intervention, and Referral to Treatment ("SBIRT") services to non-Medicaid eligible or uninsured pregnant women.
2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for women with co-occurring Opioid Use Disorder ("OUD") and other Substance Use Disorder ("SUD")/Mental Health disorders for uninsured individuals for up to 12 months postpartum.
3. Provide comprehensive wrap-around services to individuals with OUD, including housing, transportation, job placement/training, and childcare.

Sometimes programs have multiple sources of funding. Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Women's and Children's Housing Services) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Establish one identified cottage for women with substance use disorders, to received housing and case management support, along with their children.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #15

Provide the name of the remediation program/strategy.	Transportation for D&A Services
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	295.43 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	74704.57 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the remediation (Transportation for D&A Services)? You may select up to 3 options.	
<input type="checkbox"/> A. Treat Opioid Use Disorder (OUD) <input checked="" type="checkbox"/> B. Support People in Treatment and Recovery <input type="checkbox"/> C. Connect People Who Need Help to the Help They Need (Connections to Care) <input type="checkbox"/> D. Address the Needs of Criminal Justice-Involved Persons <input type="checkbox"/> E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome <input type="checkbox"/> F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids <input type="checkbox"/> G. Prevent Misuse of Opioids <input type="checkbox"/> H. Prevent Overdose Deaths and Other Harms (Harm Reduction) <input type="checkbox"/> I. First Responders <input type="checkbox"/> J. Leadership, Planning and Coordination <input type="checkbox"/> K. Training <input type="checkbox"/> L. Research	

Select the specific Exhibit E -- Schedule B Approved Remediation (Transportation for D&A Services). You may select up to 3 options.

- 1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare.
- 2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.
- 3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions.
- 4. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved medication with other support services.
- 5. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.
- 6. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.
- 7. Provide or support transportation to treatment or recovery programs or services for persons with OUD and any co-occurring SUD/MH conditions.
- 8. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions.
- 9. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of high-quality programs to help those in recovery.
- 10. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to support the person with OUD in the family.
- 11. Provide training and development of procedures for government staff to appropriately interact and provide social and other services to individuals with or in recovery from OUD, including reducing stigma.
- 12. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment.
- 13. Create or support culturally appropriate services and programs for persons with OUD and any co-occurring SUD/MH conditions, including new Americans.
- 14. Create and/or support recovery high schools.
- 15. Hire or train behavioral health workers to provide or expand any of the services or supports listed above.
- 99. Other

Sometimes programs have multiple sources of funding.
Did you receive any non-settlement funds for this remediation program/strategy?

- Yes
 No

Is this remediation (Transportation for D&A Services) effort still active?

- Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis.

- Yes
 No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Ride agents will be identified in each treatment/recovery support organization, and Danny's Ride will ensure payment to rideshare groups such as LYFT and Uber. Number of sessions/rides to be determined, and transportation will be provided for all levels of drug/alcohol treatment.

Does your county/subdivision have additional remediation program/strategies to report?

- Yes
 No

Current remediation program #16

Provide the name of the remediation program/strategy.	Alternative Activites
Provide the name of the organization managing the remediation program/strategy.	Bucks County Drug and Alcohol Commission, Inc.
Provide the name of the individual managing the remediation program/strategy.	Shannon Kirby
Provide the program/strategy manager's phone number.	[REDACTED]
Provide the program/strategy manager's email address.	[REDACTED]
How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period? "Spent" is those funds that have been paid for the purposes of this program.	7475.00 (Provide exact amount (including cents), do NOT use a comma.)
How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period? "Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.	42525.00 (Provide exact amount (including cents), do NOT use a comma.)
Was this remediation program in place prior to receiving the Opioid funding?	<input type="radio"/> Yes <input checked="" type="radio"/> No
Will you be reporting information on the remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B
Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the remediation (Alternative Activites)? You may select up to 3 options.	
<input type="checkbox"/> A. Treat Opioid Use Disorder (OUD) <input type="checkbox"/> B. Support People in Treatment and Recovery <input type="checkbox"/> C. Connect People Who Need Help to the Help They Need (Connections to Care) <input type="checkbox"/> D. Address the Needs of Criminal Justice-Involved Persons <input type="checkbox"/> E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome <input type="checkbox"/> F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids <input checked="" type="checkbox"/> G. Prevent Misuse of Opioids <input type="checkbox"/> H. Prevent Overdose Deaths and Other Harms (Harm Reduction) <input type="checkbox"/> I. First Responders <input type="checkbox"/> J. Leadership, Planning and Coordination <input type="checkbox"/> K. Training <input type="checkbox"/> L. Research	

Select the specific Exhibit E -- Schedule B Approved Remediation (Alternative Activites). You may select up to 3 options.

1. Funding media campaigns to prevent opioid misuse.
2. Corrective advertising or affirmative public education campaigns based on evidence.
3. Public education relating to drug disposal.
4. Drug take-back disposal or destruction programs.
5. Funding community anti-drug coalitions that engage in drug prevention efforts.
6. Supporting community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction-including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration ("SAMHSA").
7. Engaging non-profits and faith-based communities as systems to support prevention.
8. Funding evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent teacher and student associations, and others.
9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
10. Create or support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.
11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or another drug misuse.
99. Other

Sometimes programs have multiple sources of funding.
Did you receive any non-settlement funds for this remediation program/strategy? Yes No

Is this remediation (Alternative Activites) effort still active? Yes No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes No

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

Provide non traditional support to youth with families where substance use is prevalent, including but not limited to summer camps, adventure experiences, recreational activities, all with substance use and supportive theme.

Does your county/subdivision have additional remediation program/strategies to report? Yes No

Current remediation program #17

Provide the name of the remediation program/strategy.

24/7 Crisis Stablization Unit

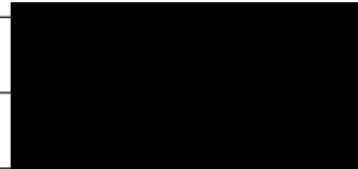
Provide the name of the organization managing the remediation program/strategy.

County of Bucks

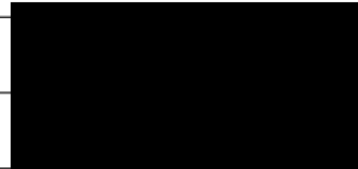
Provide the name of the individual managing the remediation program/strategy.

Shannon Kirby

Provide the program/strategy manager's phone number.



Provide the program/strategy manager's email address.



How much of your county's/subdivision's total allocation was spent on this remediation during this reporting period?

16400.00
(Provide exact amount (including cents), do NOT use a comma.)

"Spent" is those funds that have been paid for the purposes of this program.

How much of your county's/subdivision's total allocation was committed to this remediation during this reporting period?

883600.00
(Provide exact amount (including cents), do NOT use a comma.)

"Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent. Do not include spent funds in this amount.

Was this remediation program in place prior to receiving the Opioid funding?

 Yes
 No

Will you be reporting information on the remediation program/strategy using Schedule A or B?

 Schedule A
 Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the remediation (24/7 Crisis Stablization Unit)? You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved Remediation (24/7 Crisis Stabilization Unit). You may select up to 3 options.

- 1. Expand availability of treatment for OUD and any co-occurring SUD/MH conditions, including all forms of Medication-Assisted Treatment ("MAT") approved by the U.S. Food and Drug Administration.
- 2. Support and reimburse evidence-based services that adhere to the American Society of Addiction Medicine ("ASAM") continuum of care for OUD and any co-occurring SUD/MH conditions.
- 3. Expand telehealth to increase access to treatment for OUD and any co-occurring SUD/MH conditions, including MAT, as well as counseling, psychiatric support, and other treatment and recovery support services.
- 4. Improve oversight of Opioid Treatment Programs ("OTPs") to assure evidence-based or evidence-informed practices such as adequate methadone dosing and low threshold approaches to treatment.
- 5. Support mobile intervention, treatment, and recovery services, offered by qualified professionals and service providers, such as peer recovery coaches, for persons with OUD and any co-occurring SUD/MH conditions and for persons who have experienced an opioid overdose.
- 6. Provide treatment of trauma for individuals with OUD (e.g., violence, sexual assault, human trafficking, or adverse childhood experiences) and family members (e.g., surviving family members after an overdose or overdose fatality), and training of health care personnel to identify and address such trauma.
- 7. Support evidence-based withdrawal management services for people with OUD and any co-occurring mental health conditions.
- 8. Provide training on MAT for health care providers, first responders, students, or other supporting professionals, such as peer recovery coaches or recovery outreach specialists, including telementoring to assist community-based providers in rural or underserved areas.
- 9. Support workforce development for addiction professionals who work with persons with OUD and any co-occurring SUD/MH conditions.
- 10. Offer fellowships for addiction medicine specialists for direct patient care, instructors, and clinical research for treatments.
- 11. Offer scholarships and supports for behavioral health practitioners or workers involved in addressing OUD and any co-occurring SUD/MH or mental health conditions, including, but not limited to, training, scholarships, fellowships, loan repayment programs, or other incentives for providers to work in rural or underserved areas.
- 12. Provide funding and training for clinicians to obtain a waiver under the federal Drug Addiction Treatment Act of 2000 ("DATA 2000") to prescribe MAT for OUD, and provide technical assistance and professional support to clinicians who have obtained a DATA 2000 waiver.
- 13. Disseminate of web-based training curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service-Opioids web-based training curriculum and motivational interviewing.
- 14. Develop and disseminate new curricula, such as the American Academy of Addiction Psychiatry's Provider Clinical Support Service for Medication-Assisted Treatment.
- 99. Other

Sometimes programs have multiple sources of funding.
Did you receive any non-settlement funds for this remediation program/strategy?

- Yes
 No

What other source(s) of funding are being used?

- Organization
 Municipal
 County
 State
 Federal
 Other

Check all that apply.

Please enter the amount received from other funding source(s).

16000000.00
(Provide exact amount (including cents), do NOT use a comma.)

(This question is voluntary and not required.)

Is this remediation (24/7 Crisis Stabilization Unit) effort still active?

- Yes
 No

Does this effort have a dual role? For example, does the remediation target treating opioid use and treatment of a mental health diagnosis. Yes
 No

If yes, please explain the dual role of the remediation effort.

Serving all individuals who are in crisis.

What percentage of the funds used in this dual role program are from this opioid settlement funds for this reporting period? 50

If able, please upload any relevant background information about this program such as a brief description, RFP (Request for Proposal), or other informative materials.

Provide any other notes or comments about this remediation program/strategy. (For example, a link to a URL.)

The Stabilization Unit is intended to provide an immediate location where individuals can go when experiencing a behavioral health crisis so that the proper services and supports can be offered. Part of the goal in establishing a Stabilization Unit in Bucks County is to decrease barriers in accessing immediate treatment. Includes evening/off hours peer support and relapse prevention drop in and assessment services. Facility to be located on the grounds of Doylestown Hospital and managed by Lenape Valley Foundation along with various providers. Doors opening are expected in 2025.

Does your county/subdivision have additional remediation program/strategies to report? Yes
 No

Approval Pending

Total Amounts from settlement funds on confirmed remediation programs

The Total Amount spent from settlement funds on all remediation programs that you have entered is \$963291.46. Please review and indicate whether you agree that this is the total spent.

- Yes
- No

Spent funds are those funds that have been paid for the purposes of these programs.

Please enter an alternate spent total if you disagree:

(Provide exact amount (including cents), do NOT use a comma.)

The Total Amount committed from settlement funds to all remediation programs that you have entered is \$2594208.54. Please review and indicate whether you agree that this is the total committed.

- Yes
- No

"Committed" is those funds that have a signed or awarded contract or memorandum of understanding but not yet spent.

Please enter an alternate committed total if you disagree:

(Provide exact amount (including cents), do NOT use a comma.)

Approval Pending

Future Plans #1

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Does your county/subdivision have any future plans or ideas on approaches to spend settlement monies that have not been implemented to date?

Yes
 No

Name of Future Plan:

Grief Support Groups

What is the total budgeted cost of the future remediation program/strategy?

100000.00
(Provide exact amount (including cents), do NOT use a comma.)

Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?

Yes
 No

Will you be reporting information on a future remediation program/strategy using Schedule A or B?

Schedule A
 Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the future remediation?

You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved future Remediation. You may select up to 3 options.

- 1. Provide comprehensive wrap-around services to individuals with OUD and any co-occurring SUD/MH conditions, including housing, transportation, education, job placement, job training, or childcare.
- 2. Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/MH conditions, including supportive housing, peer support services and counseling, community navigators, case management, and connections to community-based services.
- 3. Provide counseling, peer-support, recovery case management and residential treatment with access to medications for those who need it to persons with OUD and any co-occurring SUD/MH conditions.
- 4. Provide access to housing for people with OUD and any co-occurring SUD/MH conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved medication with other support services.
- 5. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.
- 6. Provide community support services, including social and legal services, to assist in deinstitutionalizing persons with OUD and any co-occurring SUD/MH conditions.
- 7. Provide or support transportation to treatment or recovery programs or services for persons with OUD and any co-occurring SUD/MH conditions.
- 8. Provide employment training or educational services for persons in treatment for or recovery from OUD and any co-occurring SUD/MH conditions.
- 9. Identify successful recovery programs such as physician, pilot, and college recovery programs, and provide support and technical assistance to increase the number and capacity of high-quality programs to help those in recovery.
- 10. Engage non-profits, faith-based communities, and community coalitions to support people in treatment and recovery and to support family members in their efforts to support the person with OUD in the family.
- 11. Provide training and development of procedures for government staff to appropriately interact and provide social and other services to individuals with or in recovery from OUD, including reducing stigma.
- 12. Support stigma reduction efforts regarding treatment and support for persons with OUD, including reducing the stigma on effective treatment.
- 13. Create or support culturally appropriate services and programs for persons with OUD and any co-occurring SUD/MH conditions, including new Americans.
- 14. Create and/or support recovery high schools.
- 15. Hire or train behavioral health workers to provide or expand any of the services or supports listed above.
- 99. Other

Does your county/subdivision have additional future remediation program/strategies to report?

- Yes
 No

Future Plans #2

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Name of Future Plan:	Peer Support and Case Management
What is the total budgeted cost of the future remediation program/strategy?	200000.00 (Provide exact amount (including cents), do NOT use a comma.)
Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Will you be reporting information on a future remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the future remediation?

You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved future Remediation.

You may select up to 3 options.

- 1. Ensure that health care providers are screening for OUD and other risk factors and know how to appropriately counsel and treat (or refer if necessary) a patient for OUD treatment.
- 2. Fund SBIRT programs to reduce the transition from use to disorders, including SBIRT services to pregnant women who are uninsured or not eligible for Medicaid.
- 3. Provide training and long-term implementation of SBIRT in key systems (health, schools, colleges, criminal justice, and probation), with a focus on youth and young adults when transition from misuse to opioid disorder is common.
- 4. Purchase automated versions of SBIRT and support ongoing costs of the technology.
- 5. Expand services such as navigators and on-call teams to begin MAT in hospital emergency departments.
- 6. Provide training for emergency room personnel treating opioid overdose patients on post-discharge planning, including community referrals for MAT, recovery case management or support services.
- 7. Support hospital programs that transition persons with OUD and any co-occurring SUD/MH conditions, or persons who have experienced an opioid overdose, into clinically appropriate follow-up care through a bridge clinic or similar approach.
- 8. Support crisis stabilization centers that serve as an alternative to hospital emergency departments for persons with OUD and any co-occurring SUD/MH conditions or persons that have experienced an opioid overdose.
- 9. Support the work of Emergency Medical Systems, including peer support specialists, to connect individuals to treatment or other appropriate services following an opioid overdose or other opioid-related adverse event.
- 10. Provide funding for peer support specialists or recovery coaches in emergency departments, detox facilities, recovery centers, recovery housing, or similar settings; offer services, supports, or connections to care to persons with OUD and any co-occurring SUD/MH conditions or to persons who have experienced an opioid overdose.
- 11. Expand warm hand-off services to transition to recovery services.
- 12. Create or support school-based contacts that parents can engage with to seek immediate treatment services for their child; and support prevention, intervention, treatment, and recovery programs focused on

young people.

- 13. Develop and support best practices on addressing OUD in the workplace.
- 14. Support assistance programs for health care providers with OUD.
- 15. Engage non-profits and the faith community as a system to support outreach for treatment.
- 16. Support centralized call centers that provide information and connections to appropriate services and supports for persons with OUD and any co-occurring SUD/MH conditions.
- 99. Other

Does your county/subdivision have additional future remediation program/strategies to report?

- Yes
- No

Approval Pending

Future Plans #3

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Name of Future Plan:	Grand Family Resources
What is the total budgeted cost of the future remediation program/strategy?	50000.00 (Provide exact amount (including cents), do NOT use a comma.)
Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Will you be reporting information on a future remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the future remediation?

You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved future Remediation.

You may select up to 3 options.

- 1. Support evidence-based or evidence-informed treatment, including MAT, recovery services and supports, and prevention services for pregnant women-or women who could become pregnant-who have OUD and any co-occurring SUD/MH conditions, and other measures to educate and provide support to families affected by Neonatal Abstinence Syndrome.
- 2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for uninsured women with OUD and any co-occurring SUD/MH conditions for up to 12 months postpartum.
- 3. Provide training for obstetricians or other healthcare personnel who work with pregnant women and their families regarding treatment of OUD and any co-occurring SUD/MH conditions.
- 4. Expand comprehensive evidence-based treatment and recovery support for NAS babies; expand services for better continuum of care with infant-need dyad; and expand long-term treatment and services for medical monitoring of NAS babies and their families.
- 5. Provide training to health care providers who work with pregnant or parenting women on best practices for compliance with federal requirements that children born with NAS get referred to appropriate services and receive a plan of safe care.
- 6. Provide child and family supports for parenting women with OUD and any co-occurring SUD/MH conditions.
- 7. Provide enhanced family support and child care services for parents with OUD and any co-occurring SUD/MH conditions.
- 8. Provide enhanced support for children and family members suffering trauma as a result of addiction in the family; and offer trauma-informed behavioral health treatment for adverse childhood events.
- 9. Offer home-based wrap-around services to persons with OUD and any co-occurring SUD/MH conditions, including, but not limited to, parent skills training.
- 10. Provide support for Children's Services-Fund additional positions and services, including supportive housing and other residential services, relating to children being removed from the home and/or placed in foster care due to custodial opioid use.
- 99. Other

Does your county/subdivision have additional future remediation program/strategies to report?

- Yes
- No

Approval Pending

Future Plans #4

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Name of Future Plan:	Mobile Prevention Unit
What is the total budgeted cost of the future remediation program/strategy?	50000.00 (Provide exact amount (including cents), do NOT use a comma.)
Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Will you be reporting information on a future remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the future remediation?

You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved future Remediation.

You may select up to 3 options.

- 1. Funding media campaigns to prevent opioid misuse.
- 2. Corrective advertising or affirmative public education campaigns based on evidence.
- 3. Public education relating to drug disposal.
- 4. Drug take-back disposal or destruction programs.
- 5. Funding community anti-drug coalitions that engage in drug prevention efforts.
- 6. Supporting community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction-including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration ("SAMHSA").
- 7. Engaging non-profits and faith-based communities as systems to support prevention.
- 8. Funding evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent teacher and student associations, and others.
- 9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
- 10. Create or support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.
- 11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
- 12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or another drug misuse.
- 99. Other

Does your county/subdivision have additional future remediation program/strategies to report?

- Yes
- No

Approval Pending

Future Plans #5

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Name of Future Plan:	Nurse Family Partnership
What is the total budgeted cost of the future remediation program/strategy?	175000.00 (Provide exact amount (including cents), do NOT use a comma.)
Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Will you be reporting information on a future remediation program/strategy using Schedule A or B?	<input checked="" type="radio"/> Schedule A <input type="radio"/> Schedule B

Select which of the Exhibit E -- Schedule A Approved Uses categories mostly closely describes the future remediation? You may select up to 3 options.

- A. Naloxone or other FDA-Approved Drug to Reverse Opioid overdoses
- B. Medication-assisted Treatment ("MAT") Distribution and other Opioid-Related Treatment
- C. Pregnant & Postpartum Women
- D. Expanding Treatment for Neonatal Abstinence Syndrome ("NAS")
- E. Expansion of Warm Hand-off Programs and Recovery Services
- F. Treatment for Incarcerated Population
- G. Prevention Programs
- H. Expanding Syringe Service Programs
- I. Evidence-based Data Collection and Research Analyzing the Effectiveness of the Abatement Strategies within the State

Select the specific Exhibit E -- Schedule A Approved future Remediation.

- 1. Expand Screening, Brief Intervention, and Referral to Treatment ("SBIRT") services to non-Medicaid eligible or uninsured pregnant women.
- 2. Expand comprehensive evidence-based treatment and recovery services, including MAT, for women with co-occurring Opioid Use Disorder ("OUD") and other Substance Use Disorder ("SUD")/Mental Health disorders for uninsured individuals for up to 12 months postpartum.
- 3. Provide comprehensive wrap-around services to individuals with OUD, including housing, transportation, job placement/training, and childcare.

Does your county/subdivision have additional future remediation program/strategies to report?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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Future Plans #6

Note: Program information listed in this section is for reference only. This information will be reviewed by the Trust and will not be made public.

Name of Future Plan:	Prevention Programs for Children
What is the total budgeted cost of the future remediation program/strategy?	125000.00 (Provide exact amount (including cents), do NOT use a comma.)
Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Will you be reporting information on a future remediation program/strategy using Schedule A or B?	<input type="radio"/> Schedule A <input checked="" type="radio"/> Schedule B

Select which of the Exhibit E -- Schedule B Approved Uses categories mostly closely describes the future remediation?

You may select up to 3 options.

- A. Treat Opioid Use Disorder (OUD)
- B. Support People in Treatment and Recovery
- C. Connect People Who Need Help to the Help They Need (Connections to Care)
- D. Address the Needs of Criminal Justice-Involved Persons
- E. Address the Needs of Pregnant or Parenting Women and Their Families, Including Babies with Neonatal Abstinence Syndrome
- F. Prevent Over-Prescribing and Ensure Appropriate Prescribing and Dispensing of Opioids
- G. Prevent Misuse of Opioids
- H. Prevent Overdose Deaths and Other Harms (Harm Reduction)
- I. First Responders
- J. Leadership, Planning and Coordination
- K. Training
- L. Research

Select the specific Exhibit E -- Schedule B Approved future Remediation.

You may select up to 3 options.

- 1. Funding media campaigns to prevent opioid misuse.
- 2. Corrective advertising or affirmative public education campaigns based on evidence.
- 3. Public education relating to drug disposal.
- 4. Drug take-back disposal or destruction programs.
- 5. Funding community anti-drug coalitions that engage in drug prevention efforts.
- 6. Supporting community coalitions in implementing evidence-informed prevention, such as reduced social access and physical access, stigma reduction-including staffing, educational campaigns, support for people in treatment or recovery, or training of coalitions in evidence-informed implementation, including the Strategic Prevention Framework developed by the U.S. Substance Abuse and Mental Health Services Administration ("SAMHSA").
- 7. Engaging non-profits and faith-based communities as systems to support prevention.
- 8. Funding evidence-based prevention programs in schools or evidence-informed school and community education programs and campaigns for students, families, school employees, school athletic programs, parent teacher and student associations, and others.
- 9. School-based or youth-focused programs or strategies that have demonstrated effectiveness in preventing drug misuse and seem likely to be effective in preventing the uptake and use of opioids.
- 10. Create or support community-based education or intervention services for families, youth, and adolescents at risk for OUD and any co-occurring SUD/MH conditions.
- 11. Support evidence-informed programs or curricula to address mental health needs of young people who may be at risk of misusing opioids or other drugs, including emotional modulation and resilience skills.
- 12. Support greater access to mental health services and supports for young people, including services and supports provided by school nurses, behavioral health workers or other school staff, to address mental health needs in young people that (when not properly addressed) increase the risk of opioid or another drug misuse.
- 99. Other

Does your county/subdivision have additional future remediation program/strategies to report?

- Yes
- No

Approval Pending

Future Plans #7

Name of Future Plan: Mobile Prevention Unit for Countywide D/A and MH Education

Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan? Yes No

Will you be reporting information on a future remediation program/strategy using Schedule A or B? Schedule A Schedule B

Approval Pending

Future Plans #9

Name of Future Plan: Alternative Activities Including Summer Camp with SUD Focus

Does your county/subdivision have sufficient information to complete a Schedule A or B report for future plan? Yes
 No

Will you be reporting information on a future remediation program/strategy using Schedule A or B? Schedule A
 Schedule B

Approval Pending

This is the final page; please remember to click "Submit" (if you are finished) or "Save & Return" (if you wish to return later).

A summary of your totals follows. You may wish to print this page for your records.

According to our records, your county/subdivision has received = \$7722666.59

You specified an alternate amount received = \$ _____

Amount of funds remaining from previous period = \$0.00

Amount of non-opioid remediation spending reported = \$0

The calculated total spent on all remediation programs = \$963291.46

You specified an alternate total spent = \$ _____

The calculated total committed to all remediation programs = \$2594208.54

You specified an alternate total committed = \$ _____

This is the amount left over from your allocation = \$4165166.59

Total budgeted for all future plans entered = \$700000

Approval Pending