

Special Committee on Duval DOGE

October 21, 2025

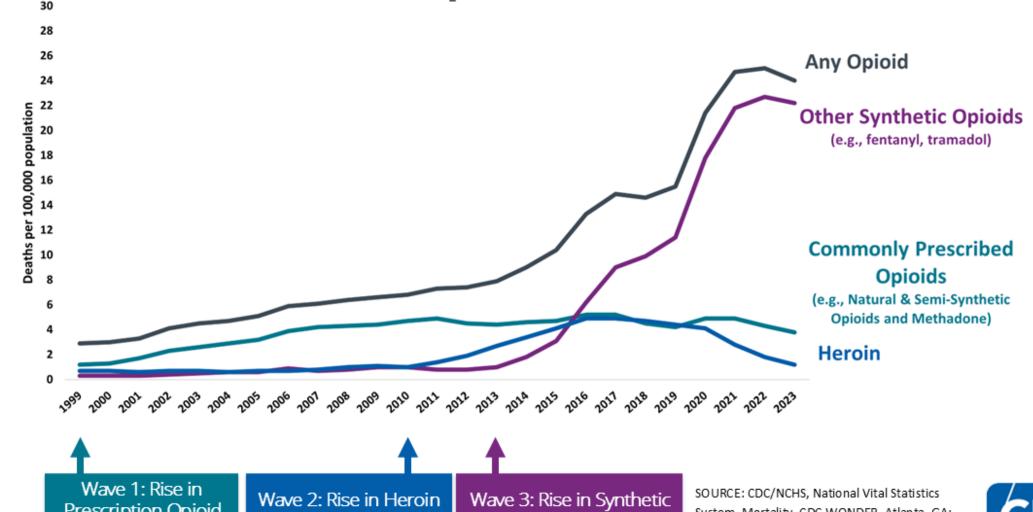




Understanding the Scope of the Opioid Crisis in the United States



Three Waves of Opioid Overdose Deaths



Wave 1: Rise in Prescription Opioid Overdose Deaths Started in the 1990s

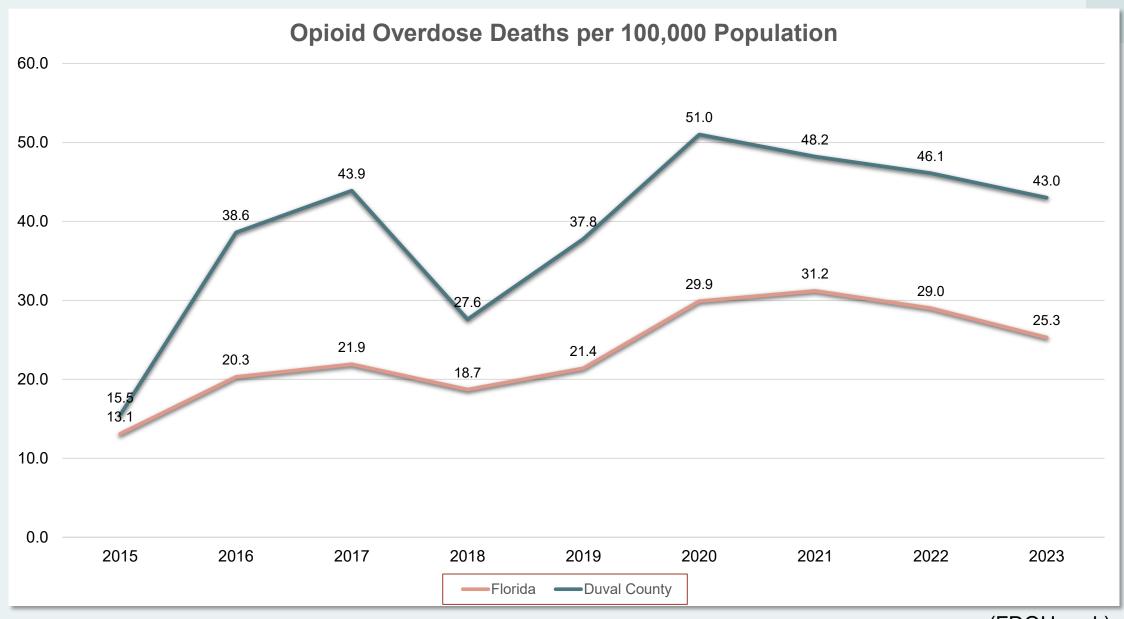
Wave 2: Rise in Heroin Overdose Deaths Started in 2010

Wave 3: Rise in Synthetic Opioid Overdose Deaths Started in 2013 SOURCE: CDC/NCHS, National Vital Statistics System, Mortality. CDC WONDER, Atlanta, GA: US Department of Health and Human Services, CDC; 2024. https://wonder.cdc.gov/.





- From 1999 to 2023, more than 800,000 people died from an overdose involving prescription and/or illegal opioids (CDC, 2025)
- In the 12 months before June of 2023, ≈113,000 people died from a drug overdose (NVSS, n.d.)
- In 2020 and 2021, opioid overdose was the single leading cause of death among those aged 18-45 (DEA, n.d.)



References

- Centers for Disease Control and Prevention. (2025, June 9). *Understanding the Opioid Overdose Epidemic*. https://www.cdc.gov/overdose-prevention/about/understanding-the-opioid-overdose-epidemic.html
- Florida Department of Health. (n.d.). Substance Use Dashboard (*Drug Overdose Deaths, Florida*) [Data dashboard]. Division of Public Statistics and Performance Management. https://www.flhealthcharts.gov/ChartsDashboards/rdPage.aspx?rdReport=SubstanceUse.Overview
- National Vital Statistics System. (n.d.). Provisional Drug Overdose Death Counts (12 Month-ending Provisional Counts and Percent Change of Drug Overdose Deaths) [Data dashboard]. Centers for Disease Control and Prevention, National Center for Health Statistics. https://www.cdc.gov/nchs/nvss/vsrr/drug-overdose-data.htm
- U.S. Drug Enforcement Agency. (n.d.). *DEA Administrator on Record Fentanyl Overdose Deaths*. https://www.getsmartaboutdrugs.gov/media/dea-administrator-record-fentanyl-overdose-deaths



Jacksonville Fire & Rescue Department Overdose Data

Data Source

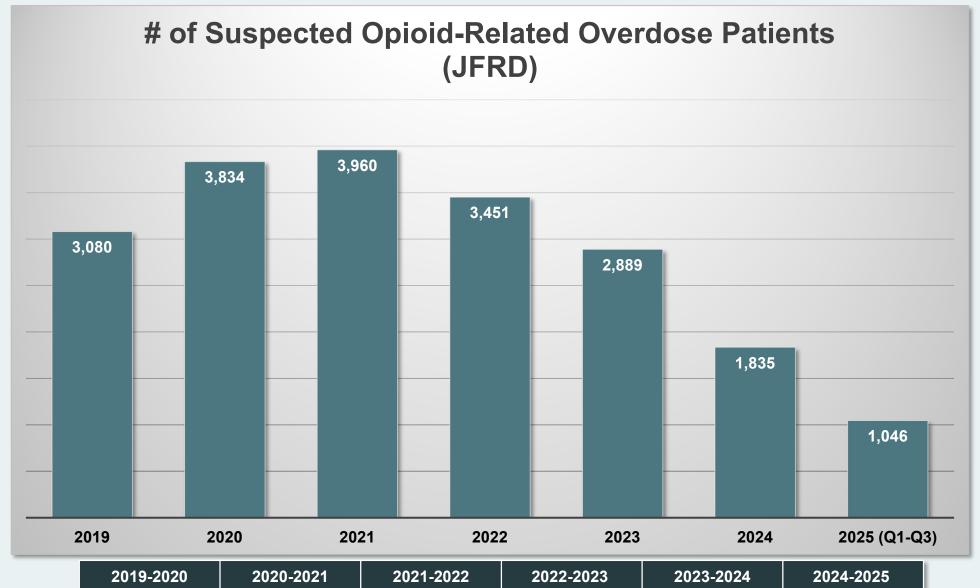
- o Jacksonville Fire & Rescue Department, City of Jacksonville, Florida
- Captain Michael Bernard Office of Information Services (with additional analysis and chart/graph development by Laura Viafora Ray, MPH, CPH, Program Coordinator - Opioid Abatement)

Definitions

Suspected Opioid-Related (O-R) Overdose (OD) = the following conditions existed: naloxone administered and nature of call at scene is "ingestion/poisoning/OD," <u>OR</u> naloxone administered and clinical impression is "opioid-related," <u>OR</u> overdose reported with the following substances: "Fentanyl, Carfentanil or Heroin," <u>OR</u> overdose reported with naloxone administration, <u>OR</u> treatment protocol = "Overdose-Narcotic/Opioid"

Additional Notes

 A 911 call received as overdose and/or naloxone administration does not necessarily confirm an overdose, opioid use, or opioid misuse



2019-2020	2020-2021	2021-2022	2022-2023	2023-2024	2024-2025 (Q1-Q3)
+24%	+3%	-13%	-16%	-36%	-31%







More Than an Overdose Crisis







- Drug confirmed motor vehicle traffic crashes, injuries, and fatalities
- Drug arrests
- Neonatal Abstinence Syndrome (NAS)
- HIV and Hepatitis C
- Infective endocarditis
- Economic impact

Office of Opioid Abatement

- Lawsuits against manufacturers and distributors of prescription opioids for their roles in the opioid crisis
- Established in 2023
- Manager of Opioid Abatement and Program Coordinator - Opioid Abatement
- Purview
 - o Opioid Settlement Proceeds Grants (OSPG) Program
 - Opioid and Substance Use Disorder (OSUD) Grants Committee
 - Coordinated Opioid Recovery (CORe)
 - o Interlocal agreement
 - o Outreach
 - o Data
 - Reporting

Opioid and Substance Use Disorder (OSUD) Grants Committee

Composition

- Healthcare Professional (2)
- Mental Health Professional (2)
- Peer Specialist (2)
- Health Administrator or Medical Director of the Florida Department of Health, Duval County (1)

Functions & Responsibilities

- Review and assess community needs for programs and services related to the opioid epidemic
- Review, evaluate, and score each eligible OSPG Program application
- Allocate funding to the top-scoring requesting agencies based on the available annual budget

Opioid Settlement Proceeds Grants (OSPG) Program

- Opioid Settlement Proceeds Funded Categories
 - o Prevention
 - o Treatment
 - Recovery Support

Eligibility

- o Providing services in Duval County for Duval County residents
- o In operation for a minimum of three years at time of application
- Providing services related to the prevention, treatment, and/or recovery support for those with opioid use disorder and co-occurring substance use disorder or mental health conditions
- Schedules A and B



- A. Naloxone or other FDA-approved drugs to reverse opioid overdoses
- B. Medication-Assisted Treatment (MAT) distribution and other opioidrelated treatment
- C. Pregnant and Postpartum Women
- D. Expanding Treatment for Neonatal Abstinence Syndrome
- E. Expansion of Warm Hand-off Programs and Recovery Services
- F. Treatment for Incarcerated Populations
- G. Prevention Programs
- H. Expanding Syringe Service Programs

Schedule B Approved Uses of Opioid Settlement Funds

- Evidence-based or evidence-informed programs or strategies that:
 - Support treatment for or recovery from Opioid Use Disorder (OUD) and any co-occurring Substance Use Disorder or Mental Health (SUD/MH) conditions
 - Provide connections to care for people who have - or at risk of developing - OUD and any cooccurring SUD/MH conditions
 - Address the needs of persons with OUD and any co-occurring SUD/MH conditions who are involved in, are at risk of becoming involved in, or are transitioning out of the criminal justice system
 - Address the needs of pregnant or parenting women with OUD and any co-occurring SUD/MH conditions, and the needs of their families, including babies with neonatal abstinence syndrome (NAS)

Schedule B Approved Uses of Opioid Settlement Funds Continued

- Support efforts to prevent overprescribing and ensure appropriate prescribing and dispensing of opioids
- Support efforts to discourage or prevent misuse of opioids
- Support efforts to prevent or reduce overdose deaths or other opioid-related harms
- Support efforts to provide leadership, planning, coordination, facilitation, training and technical assistance to abate the opioid epidemic
- Support training to abate the opioid epidemic
- Support opioid abatement research



- The City of Jacksonville is responsible for programmatic and financial reporting to the State
- Every expenditure must be directly tied to at least one item in Schedules A or B to comply with the Florida Opioid Allocation and Statewide Response Agreement
- Non-compliance puts the city at the risk of losing access to these funds

Application Process

- Mandatory Application Workshops
- Eligibility Documents
- Application Contents
- Courtesy Reviews
- Notifications of Eligibility/Ineligibility
- OSPG Appeals Board



Allocation of Funding

- Awarding of OSPG Program grants
 - Percentage allocations by the three funded categories
 - Outliers and tie scores
 - o Ranking by average score
 - o Tentative and final rankings and funding allocations



Post-Award Activities



- Contracts and Purchase Orders
- Financial Reporting
- Quarterly Progress Reports
- Site Monitoring and Visits

OPIOID SETTLEMENT PROCEEDS GRANT/CITY GRANT PROGRAM QUARTERLY PROGRAMMATIC REPORT 2024-2025

Name of Agency: I.M. Sulzbacher Center for the Homeless, Inc.	
Program Title: Sulzbacher Substance Abuse Recovery Program	
Funded Category: Recovery Support	
Fiscal Year: 10/1/2024-9/30/2025	Reporting Period: Q3 Apr25-Jun25

Goal #1: Within one year, Sulzbacher will continue to develop and implement a person-centered, high-quality outpatient substance abuse program to serve at least 75 individuals in 12 months, providing them with wraparound, holistic, equitable care, to include peer support and case management services, as well as housing.

	Activities	Data Source	Baseline	First Quarter (Q1)	Second Quarter (Q2)	Third Quarter (Q3)	Fourth Quarter (Q4)	Year to Date (YTD)
Objective(s)	(Be specific)	(Be specific)	(Be specific about the timeframe the baseline data comes from)	10/1/2024-12/31/2024	1/1/2025-3/31/2025	4/1/2025-6/30/2025	7/1/2025-9/30/2025	Q1: 10/1/2024-12/31/2024 Q2: 10/1/2024-3/31/2025 Q3: 10/1/2024-6/30/2025 Q4: 10/1/2024-9/30/2025
								Q1: Objective nearly met - training remains
Objective 1.1: Within six months into the grant period, 1 FTE Case Manager will be hired and trained, with a	Certificates Uploaded	Agency training checklist	In FY23-24, all recovery program staff were in place within 7 months.	All Recovery staff remain in place.	All staff have completed SIBRT Training and Motivational Interviewing	All staff have completed SIBRT Training and Motivational Interviewing		Q2: Objective met
specific focus on motivational interviewing and SBIRT.								Q3: Objective met in Q2
								Q4:
Objective 1.2: Within 3 months into the	Objective met	Agency SharePoint site	In FY23-24, policies and procedures were completed within 1 month.		All policies and procedures remain approved in Sharepoint.	All policies and procedures remain approved in Sharepoint.		Q1: Objective met
grant period, policies and procedures will be updated to include the focus on housing. Community partners and				All policies and procedures remain				Q2: Objective met in Q1
nousing. Community partners and Sulzbacher staff will be educated and encouraged to refer individuals to the program.				approved in Charanaint				Q3: Objective met in Q1
								Q4:
Objective 1.3: By the end of the grant					on insurance insurance. Also see	clients to sign up for insurance. Also see		Q1:
period, plans for sustainability to ensure delivery after city funds end will be developed and implemented by the health services team, in conjunction with Sulzbacher's health services team.	Please see "Activities as	Agency funding plan N/A	N/A - new activity	Working to increase				Q2:
	Reported in Q2 and Q3"			and billing of insurance.				Q3:
								Q4:

Goal #2: Improve the quality of life and functioning for at least 75 program participants within 12 months.									
Objective(s)	Activities	Data Source	Baseline	First Quarter (Q1)	Second Quarter (Q2)	Third Quarter (Q3)	Fourth Quarter (Q4)	Year to Date (YTD)	
	(Be specific)	(Be specific)	(Be specific about the timeframe the baseline data comes from)	10/1/2024-12/31/2024	1/1/2025-3/31/2025	4/1/2025-6/30/2025	7/1/2025-9/30/2025	Q1: 10/1/2024-12/31/2024 Q2: 10/1/2024-3/31/2025 Q3: 10/1/2024-6/30/2025 Q4: 10/1/2024-9/30/2025	
Objective 2.1: Within one year (by 9/30/2025), at least 75 clients will be enrolled in the Recovery Program.	Please see "Activities as Reported in Q2 and Q3"	AthenaHealth (Agency EHR) and client roster	54 participants from 2/1/2024-9/30/2024	19 Participants enrolled from 10/1/2024- 12/31/2024	14 Participants enrolled from 1/1/2025-3/31/2025	36 Participants enrolled from 4/1/2025-6/30/2025		Q1: 19/75 = 25.33% of objective (25% would be on track) Q2: 19+14 = 33/75 = 44% of objective (50% would be on track) Q3: 33+36 = 69/75 = 92% of objective Q4:	

FY 2024-2025 OSPG Program

- \$5.069 million budget
 - Individual program budgets ranged from ~ \$122,000 to \$500,000
- 14 programs across 9 agencies:
 - o Prevention (6)
 - o Treatment (4)
 - Recovery Support (4)
- 8 programs re-awarded from FY 23-24, and 6 were newly awarded

OSPG Programs Scope of Services - Prevention Examples

Youth	Domestic Violence	Resource Campaign
After-school program to help young people develop healthy decision-making attitudes and skills and enhance their knowledge to prevent substance misuse, implemented across 45 sites, reaching more than 2,750 unduplicated youth	Enrolled 150+ adult victims of domestic violence in individual and group counseling, 12 staff members in substance abuse training	Distributed 4,000+ Narcan kits and 10,500+ Deterra kits in Duval County, assisted 400+ individuals with sober living rental assistance, and launched CredibleMind online platform

OSPG Programs Scope of Services - Treatment Examples

Pregnant and Postpartum Women	Uninsured	Unhoused/Housing Insecure
Connecting 68 women with OUD/SUD to peer support specialists to support sobriety	Provided 300+ uninsured patients with Medications for Opioid Use Disorder (MOUD)	69+ received MOUD and were connected to case management services and linked to resources such as primary care, health insurance, Medicaid, and SSI/SSD

OSPG Programs Scope of Services - Recovery Support Examples

Transportation	Justice-Involved	Supportive Housing
Treatment center utilized UberHealth to provide transportation to MOUD treatment and counseling appointments 400+ patients	Provided workforce development, job placement services, and other recovery support services to 1,400+ justice-involved individuals 150 clients also received recovery support housing	Multiple programs provided recovery or transitional housing support in conjunction with other recovery support services Many housing programs staffed by Certified Recovery Peer Specialists

OSPG PROGRAM DATA



Zip Code of Residence of Unduplicated Program Participants/Clients/Patients, 2/1/24-6/30/25

Health Zone/Description	Prevention Programs	Treatment Programs	Recovery Support Programs	TOTAL ALL PROGRAMS	% ALL PROGAMS	JFRD Data (O-R OD)
1/Urban Core	2,435	353	1,237	4,025	33%	27%
2/Greater Arlington Area	2,506	201	602	3,309	27%	24%
3/Southeast	734	77	164	975	8%	9%
4/Southwest	1,728	178	368	2,274	19%	24%
5/Outer Rim	861	97	238	1,196	10%	13%
6/Beaches	253	69	105	427	3%	3%
TOTAL	8,517	975	2,714	12,206		

OSPG Program Data Notes

• The counts on the previous slide do not represent the full scope of individuals reached through OSPG Program efforts, just those for which zip code of residence data was collected and reported from 2/1/24 to 6/30/25; 2/1/24 is the effective date of the Fiscal Year 23-24 OSPG-funded programs; 6/30/25 is the end of Quarter 3 of the Fiscal Year 24-25 OSPG-funded programs (the most recent data available)

Health Zone Zip Codes

- o 1/Urban Core = 32202, 32204, 32206, 32208, 32209, 32254
- o 2/Greater Arlington Area = 32207, 32211, 32216, 32224, 32225, 32246
- 3/Southeast = 32217, 32223, 32256, 32257, 32258
- 4/Southwest = 32205, 32210, 32212, 32221, 32222, 32244
- o 5/Outer Rim = 32218, 32219, 32220, 32226, 32234
- o 6/Beaches = 32227, 32228, 32233, 32250, 32266

JFRD Data (O-R OD)

- Data Source = Jacksonville Fire & Rescue Department
- o Based on the measure "Suspected Opioid-Related Overdose" by patient zip code of residence, from 2/1/24 to 6/30/25
- o Questions about this data can be directed to opioidabatement@coj.net

Race and Gender of Unduplicated Program Participants/Clients/Patients, 2/1/24-6/30/25

Race, Gender	Prevention Programs	Treatment Programs	Recovery Support Programs	TOTAL ALL PROGRAMS	% ALL PROGAMS	JFRD Data (O-R OD)
Black or African American, Male	1,622	109	660	2,391	20%	19%
Black or African American, Female	2,450	138	324	2,912	24%	8%
Hispanic or Latino, Male	154	35	95	284	2%	3%
Hispanic or Latino, Female	225	38	58	321	3%	<1%
White, Male	1,040	296	957	2,293	19%	41%
White, Female	1,901	290	606	2,797	23%	26%
Other or Unknown, Male	345	44	61	450	4%	2%
Other or Unknown, Female	502	39	51	592	5%	1%
TOTAL	8,239	989	2,812	12,040		

OSPG Program Data Notes

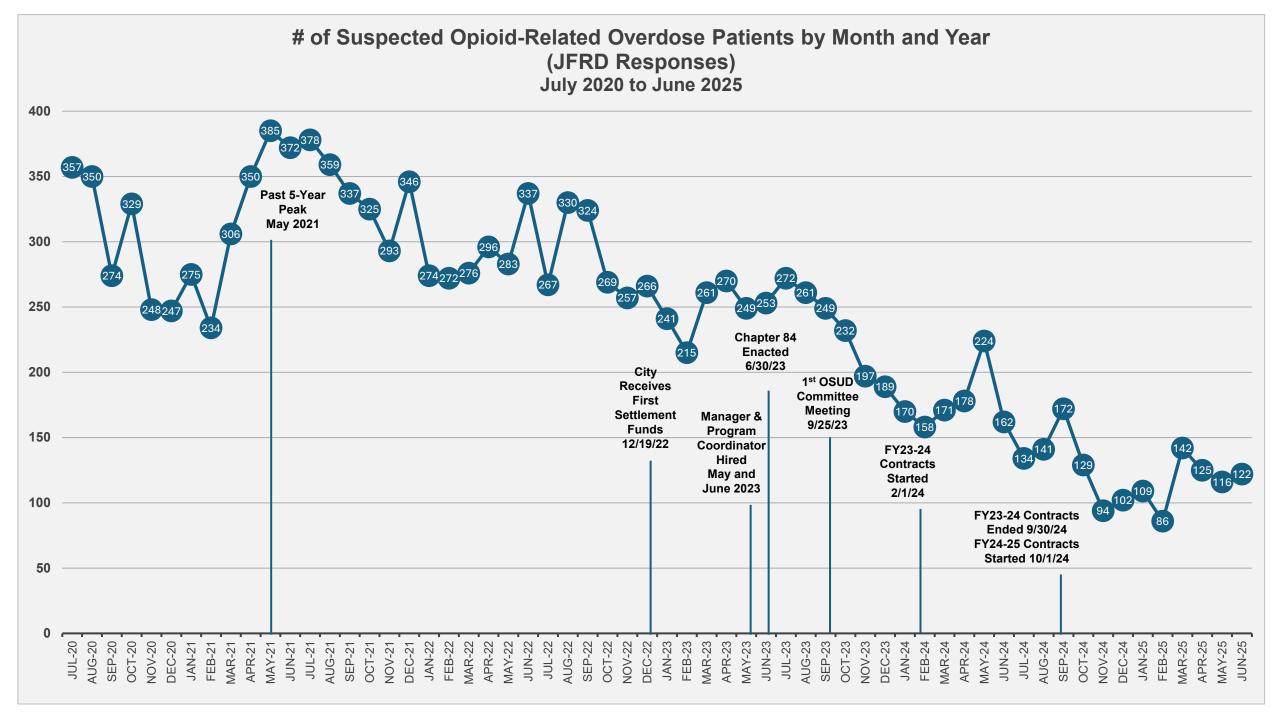
• The counts on the previous slide do not represent the full scope of individuals reached through OSPG Program efforts, just those for which race and gender data was collected and reported from 2/1/24 to 6/30/25; 2/1/24 is the effective date of the Fiscal Year 23-24 OSPG-funded programs; 6/30/25 is the end of Quarter 3 of the Fiscal Year 24-25 OSPG-funded programs (the most recent data available)

Race

o "Other" includes American Indian or Alaska Native, Asian, Native Hawaiian or Other Pacific Islander, or Other

JFRD Data (O-R OD)

- Data Source = Jacksonville Fire & Rescue Department
- Based on the measure "Suspected Opioid-Related Overdose" by patient race and gender, from 2/1/24 to 6/30/25
- Questions about this data can be directed to <u>opioidabatement@coj.net</u>



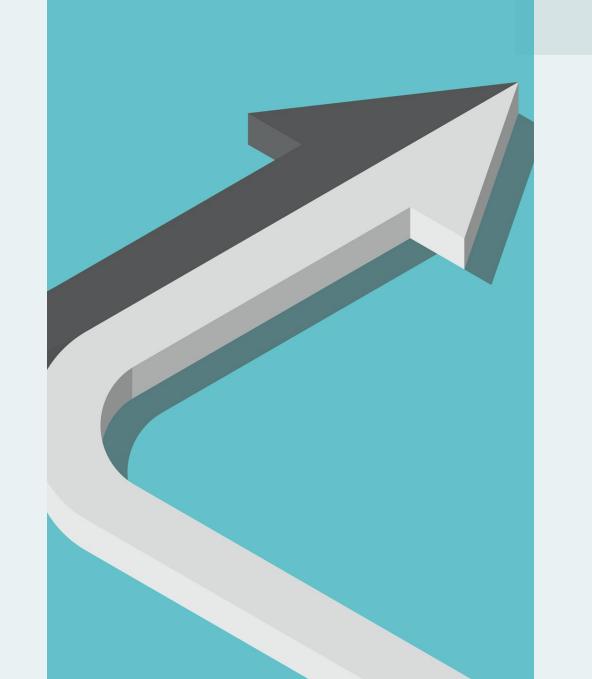
Goals & Priorities

Improving OSPG Program processes

Sustainability and viability of OSPG Program

Identifying gaps in services needed in the community and underserved populations

Transparency and accountability to stakeholders





Thank You

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