**Opioid Settlement Committee**
**Thursday, September 11th, 2025**

Date: Thursday, September 11th, 2025

Members Present: Beth McCall, Chief Mike Balken, Teresa Stephens, Councilman Ire Bethea Sr, Christy Jergens, Mayor Ben Marciano, Captain Jesse Blaire, Chief Robert Kruger

Excused: Commissioner Kathy Bryant

Absent: Judge Robert Landt, Sheriff Billy Woods

Additional Attendees: Cheryl Martin, Kendall Stephens, Lauren Blaugh, Brittian Schulz, Lizandro Florian, Curt Bromund, Deb Velez, Sarah Ostreicher, Crystal Pfriender, Robin Lanier, Tom Schwartz, Todd Hockert, James Davis, Wendy Kebrdle, Pete Lee, Mounir Bouyounes, Will Sexton, Dana Dammar

| TOPIC | DISCUSSION |
|---|---|
| **Call to Order** | Vice Chair Beth McCall called the meeting to order at 11:00AM. |
| **Pledge** | Vice Chair Beth McCall led the Committee on the Pledge of Allegiance. |
| **Public Notice** | Lauren Blaugh announced the meeting was advertised on September 4th, 2025, in accordance with Florida Sunshine Law. |
| **Roll Call** | The clerk completed a Roll Call for attendance and to establish a quorum. Quorum established. |
| **1. Approval of Minutes** | **Approval of June 12th, 2025, Minutes**<br><br>**Motion: Councilman Bethea**<br>**Second: Chief Robert Kruger**<br>**Action: Approved** |
| **2. Introduction of Teresa Stephens, new MCHD Appointee: Cheryl Butler** | Cheryl announced that Teresa Stephens has been recommended by the Marion County Hospital District to replace Rich Bianculli on the Opioid Settlement Committee Board. |
| **3. Priority Updates: Marion County Hospital District: Deb Velez and Sarah Ostreicher** | ***3.1 Priority Updates***<br>***Women's Residential Treatment Center:***<br>Sarah reported that the primary use of the regional funds to date has been for exterior improvements, including construction of a parking lot, installation of paved sidewalks, and site preparation for a playground. The remaining work to be completed in this phase includes landscaping. |

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| | Robin Lanier provided a program update, stating that the facility currently houses 33 women and 3 infants. The center has a maximum capacity of 45 women, with a maximum length of stay of 6 months.<br><br>***Central Receiving Facility:***<br>No opioid abatement funding has been utilized to date; expenditures are anticipated to begin in October 2025.<br>Construction progress includes near completion of the walls and bathroom facilities. The project continues to track on schedule, with an expected completion date of August 2026.<br>Robin Lanier reported that Phase 1 is expected to be completed by mid-October 2025, at which point the Emergency Services Unit will become operational.<br>Upon completion of all three phases, the facility will expand from 8 to 19 detox beds. Following this expansion, the organization plans to apply for certification as an Addiction Receiving Facility (ARF).<br>Robin Lanier also reported that with the relocation of women into the new residential treatment center, SMA has repurposed an existing building to expand the men's residential program to 45 beds, which is already at full capacity.<br><br>***3.2 Application Updates/Recommendations:***<br><br>**CORE: Deb Velez**<br><br>Deb Velez provided an update regarding project referrals to the Hospital District for recommendations under the opioid settlement plan. She explained that the original goal of the CORE Program was to provide medication-assisted treatment (MAT) in the field. However, the focus has since shifted toward ensuring individuals are connected directly to treatment services.<br>The CORE Program's primary partners include Marion County Hospital District (MCHD), Marion County Fire Rescue (MCFR), Ocala Fire Rescue, and SMA Healthcare. Together, the partners have developed a uniform application process, implemented standardized protocols, and created flowcharts to illustrate workflows within the program.<br>MCHD continues to recommend a $750,000 funding allocation for the CORE Program.<br>Mayor Ben Marciano inquired about the timeframe for utilizing the $750,000.<br>Deb Velez responded that the funds would be expended over the course of one year. She also noted that $250,000 from LSF (Lutheran Services Florida) is allocated specifically for treatment services through SMA Healthcare. |

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| | Additionally, MCHD will allocate funds in the next fiscal year to support peer navigators — individuals with lived experience who assist others on their sobriety journey.<br>Deb further noted that DCF funding is expected to phase out, increasing the need for continued support of CORE operations.<br>Chief Kruger presented a five-year trend report on opioid and Narcan usage in Marion County and distributed data packets. He stated that usage is trending downward. As the county's primary transport agency, MCFR has robust data tracking capabilities — including demographics and time-based data — that feed into state reports. He shared that usage trends showed a pre-COVID baseline, a small spike during COVID, and a decline in current usage levels.<br>Chief Kruger concluded by expressing appreciation to the community and partner agencies for their collective efforts in reducing opioid use and overdose rates in Marion County.<br><br>**Dignity House: Deb Velez and Sarah Ostreicher**<br>The committee reviewed the recommendation packet for Dignity House, a low-barrier shelter that provides state-supported housing and services for men experiencing homelessness, recovery, and behavioral health challenges. The program offers stability through wraparound services that support long-term recovery and help reduce relapse rates and returns to homelessness.<br>The funding request for this project is $193,800 which would support shelter operations and essential services that assist men in stabilizing their lives and moving toward independence.<br><br>**Wendy Kebrdle with Wear Gloves:**<br>The Dignity House low-barrier shelter began accepting single adult men in the first week of June. To date, nine individuals have moved in, with one individual already transitioning to permanent housing. The shelter is both low-barrier and pet-friendly, which has played a critical role in meeting the needs of specific clients.<br>A notable case includes Cameron, who became homeless alongside his wife. While his wife and children were sheltered through Interfaith, Cameron was referred to Dignity House in March. However, as the shelter was not yet open and he could not bring his dog, Luke, to alternative shelters, Cameron chose to remain in a tent for three months until Dignity House opened in June. He has since moved into the shelter with his dog. Cameron is now employed at two jobs and has been approved by DCF for weekend visitation with his wife and children, who meet with him in the shelter's visitor room.<br>Additional program updates include that residents are actively participating in weekly recovery meetings facilitated by Zero Hour Life Center. Intensive trauma therapy is being provided by My Life Counsel, and SMA is present on campus five days a week offering support services. |

**Opioid Settlement Committee**
**Thursday, September 11th, 2025**

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| | Wendy reported a recent police call to the shelter. The individual involved was a man recently released from prison after serving 22 years. He was walking through Ocala in route to Panama City. The Ocala Police Department (OPD) encountered him and contacted Wendy to inquire about bed availability. He was provided overnight accommodation in the shelter's "rookie room." The following day, OPD returned, purchased a bus ticket for the individual, and facilitated his return to his family in Panama City.<br><br>**1. CORE Recommendation**<br>Beth McCall requested a motion to approve the CORE recommendation for submission to the Board of County Commissioners for final approval.<br>• **Motion:** Christy Jergens<br>• **Second:** Teresa Stephens<br>• **Discussion:** None<br>• **Vote:** All in favor; motion carried.<br><br>**2. Dignity House Recommendation**<br>Beth McCall requested a motion to approve the Dignity House recommendation for submission to the Board of County Commissioners for final approval.<br>• **Motion:** Ben Marciano<br>• **Second:** Ire Bethea<br>• **Discussion:** None<br>• **Vote:** All in favor; motion carried. |
| **4. Financial Update: Cheryl Martin** | Staff are currently working with the Hospital District on funding draws related to the Central Recovery Facility, with some draws anticipated in October. |
| **5. Announcements: Cheryl Martin** | Ocala Recovery Festival is September 13th |
| **6. Public Comment** | None |
| **7. Committee Comments** | Beth McCall welcomed Teresa Stephens again as the committee's newest board member. |

**Opioid Settlement Committee**
**Thursday, September 11th, 2025**

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| | Ben Marciano commended SMA for their impactful work and noted the positive results seen through programs such as Dignity House and CORE. He highlighted that lives are being saved and meaningful progress is being made in the community.<br><br>Beth McCall acknowledged SMA as a "game changer" and extended her gratitude to all involved. She noted that the community is beginning to see the positive outcomes of these collective efforts. |
| **Adjournment** | Adjourned at 11:24am. |

# OPIOID SETTLEMENT
## Agenda

### Committee Members:

**Kathy Bryant**, Marion County Government
**Judge Robert Landt,** Fifth Judicial Circuit
**Teresa Stephens**, Marion County Hospital District
**Capt. Jesse Blaire**, Ocala Fire Dept.
**Christy Jergens**, Marion County Health Dept.
**Sheriff Billy Woods**, Marion County Sheriff's Dept.
**Beth McCall**, Marion County Children's Alliance
**Chief Mike Balken**, Ocala Police Dept.
**Ire Bethea Sr.**, City of Ocala
**Dep. Chief Robert Kruger**, Marion County Fire Dept.
**Ben Marciano**, Active Recovery Representative

**Thursday, September 11, 2025 at 11 a.m.** **Location: 2710 E Silver Springs Blvd. Ocala, FL 34470**

**CALL TO ORDER**
**PLEDGE**
**PUBLIC NOTICE**
**ROLL CALL**

1. **Request Approval of the June 12, 2025 Meeting Minutes – Commissioner Bryant**
2. **Introduction of Teresa Stephens, new MCHD appointee – Cheryl Butler**
3. **Priority Updates – Marion County Hospital District**
   - **3.1 Project Updates**
     - **Women's Residential Treatment Center**
     - **Central Receiving Facility**
   - **3.2 Application Updates/ Recommendations**
     - **CORE**
     - **Dignity House**
4. **Financial Update – Cheryl Butler**
5. **Announcements – Cheryl Butler**
   - **5.1 Recovery Festival (September 13th)**
6. **Public Comment**
7. **Committee Comments**

**ADJOURNMENT**

The next scheduled meeting is on December 11, 2025, located at 2710 E Silver Springs Blvd. Ocala, FL 34470 (Growth Services Training Room).

**Opioid Settlement Committee**
**Thursday, June 12th, 2025**

Date: Thursday, June 12th, 2025

Members Present: Commissioner Kathy Bryant, Beth McCall, Judge Robert Landt, Chief Mike Balken, Rich Bianculli, Councilman Ire Bethea Sr, Christy Jergens, Mayor Ben Marciano, Captain Jesse Blaire

Additional Attendees: Cheryl Martin, Charles Rich, Lauren Blaugh, Kendall Stephens, Brittian Schulz, Sarah Ostreicher, Crystal Pfriender, Robin Lanier, Alina Stoothoff, Tom Schwartz, Jim Hilty, Todd Hockert, James Davis

| TOPIC | DISCUSSION |
|---|---|
| **Call to Order** | Commissioner Kathy Bryant called the meeting to order at 11:00AM. |
| **Pledge** | Commissioner Bryant led the Committee on the Pledge of Allegiance. |
| **Public Notice** | Lauren Blaugh announces the meeting was advertised on June 10th 2025 in accordance to Florida Sunshine Law. |
| **Roll Call** | The clerk completed a Roll Call for attendance and to establish a quorum. Quorum established. |
| **1. Approval of Minutes** | **Approval of April 16th Minutes**<br><br>**Motion: Councilman Bethea**<br>**Second: Mayor Ben Marciano**<br>**Action: Approved** |
| **2. Request Approval of the 2025 – 2026 Marion County Regional Opioid Abatement Plan: Cheryl Martin** | Cheryl announces that the priorities have remained the same, but the format has been updated to align with new state requirements. Attendees were directed to page 3 to review background information on previously approved priorities and related successes with the new women's residential facility.<br><br>On page 5, it was clarified that the strategy formerly titled "transitional housing" is now labeled "recovery/supportive housing". A correction was also made under Total Funding Distribution—the Schedule A allocation should reflect $2,800,000, not $3,280,000. The available funds for existing priorities total $1,608,396.<br><br>Commissioner Bryant reiterated that, while the format has changed to comply with state guidelines, the priorities themselves remain the same.<br><br>**Motion: Beth McCall**<br>**Second: Judge Robert Landt**<br>**Action: Approved** |

**Opioid Settlement Committee**
**Thursday, June 12th, 2025**

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| **3. Priority Updates: Marion County Hospital District** | ***3.1 Priority Updates***<br>***Women's Residential Treatment Center Ribbon Cutting:***<br>Deb Velez provided an update on the new women's residential treatment center located in Marion Oaks, a repurposed two-story assisted living facility. The upper floor will serve single women, while the lower floor will accommodate women with children undergoing treatment. This is the only facility of its kind in Marion County.<br><br>The center will be operated by SMA Healthcare and includes 45 beds, with 29 beds donated by Lutheran Services. Opioid settlement funds contributed $500,000 toward the project, and the Marion County Hospital District is funding a portion of the services provided.<br><br>Land adjacent to the building has been purchased for a playground and fencing. The facility is expected to open soon, pending licensure approval and a final inspection.<br><br>Robin Lanier (SMA) reported that 24 women currently in the program will transition from the 60th Avenue facility to the new women's residential center. This move will also allow individuals from the waiting list to be admitted.<br><br>Once the transition is complete, the existing facility will be repurposed to expand the men's program to 45 beds.<br><br>Initially, the new center will accept infants only, with plans to accommodate children up to six years old. SMA is working to identify and partner with local daycare providers near the new facility.<br><br>Residential treatment will have a minimum and maximum duration of six months. Primary care services, including physicals, will be provided at the Airport Road campus prior to admission, with transportation arranged as needed for other medical appointments. A transporter position has been created to support this effort.<br><br>***Central Receiving Facility:***<br>The project is currently 30% complete, with an estimated completion date of May/June 2026. Construction is being carried out in phases.<br><br>Phase 1 includes the Children's Unit and Emergency Services Unit. Once operational, law enforcement will be able to transfer individuals directly to the facility with proper Baker Act documentation. |

**Opioid Settlement Committee**
**Thursday, June 12th, 2025**

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| | ***3.2 CORE Partner Update***<br>Marion County Hospital District (HD) is in discussions with LSF to ensure that CORE in Marion County operates as a single, comprehensive program. The HD has reviewed CORE funding applications from Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare, noting significant overlap and lack of coordination.<br><br>To address this, a meeting has been scheduled to develop a single application process for opioid abatement funding, as DCF funding is expected to decline annually. A more sustainable, coordinated model is needed for long-term program viability. |
| **4. Financial Update: Cheryl Martin** | Cheryl directed attendees to the financial summary in their packets. The Regional Opioid Fund currently totals $5,935,865, with no significant changes since the last meeting. Approximately $3.7 million has been allocated to the Marion County Hospital District, covering the central receiving facility, CORE, and transitional housing line items.<br><br>Approximately $1.6 million remains available for allocation to the remaining priorities. |
| **5. Announcements: Cheryl Martin** | Cheryl announced that the state has approved Fentanyl Awareness and Education Day for August 21st. A proclamation is being planned for the Board of County Commissioners (BCC) meeting, and all will be invited to attend.<br><br>A Recovery Festival is scheduled for September 13, with additional details forthcoming. |
| **6. Public Comment** | No public comment. |
| **7. Committee Comments** | Christy Jergens shared a copy of the Department of Health's Overdose Data to Action: Data Report for the Marion County Opioid Settlement Committee.<br><br>Kathy Bryant announced that Rich Bianculli will be transitioning off of the Marion County Hospital District board and therefore will be transitioning off of the Regional Opioid Settlement Committee. Rich was recognized for all of his hard work and commitment to both groups. |
| **Adjournment** | Kathy Bryant announces the next meeting will be September 11th, 2025 and adjourned the meeting at 11:32am. |

# OPIOID ABATEMENT FUNDING REQUEST AND RECOMMENDATION

☒ **Recommend** ☐ **Not Recommend** ☐ **Modify**

Received From: **Marion County Unified CORE Network**

Total Funding Request: $749,999.24

Includes:

- SMA Healthcare: $330,000.24
- Marion County Fire Rescue: $200,000
- Ocala Fire Rescue: $199,999
- Shared Outreach Materials: $20,000

Attachments:

- Application
- CORE Budget
- CORE Flow Chart

## Summary:

The Marion County Coordinated Opioid Recovery (CORE) Network is a partnership between Marion County Fire Rescue (MCFR), Ocala Fire Rescue (OFR), and SMA Healthcare. It provides a 24/7 continuum of care for individuals with substance use disorder (SUD), particularly opioid use disorder, with a strong emphasis on Medication Assisted Treatment (MAT), peer recovery support, and warm handoffs from crisis to long-term care.

Lutheran Services Florida funding for CORE initiatives throughout the state of Florida continue to dwindle, with Lutheran Services Florida only allotting $250,000 for Marion County CORE services. The Opioid Abatement Committee had the foresight to ensure that Opioid Abatement Funding was set aside for the continuation of this vital program. Ultimately the Lutheran Services Florida pot of funding was awarded to SMA Healthcare to supplement CORE treatment services, while Opioid Abatement Funds will be used to cover the remaining costs of the program.

Marion County Hospital District engaged Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare in June 2025 to begin gathering information for the Unified Marion County Coordinated Opioid Recovery (CORE) program. Marion County Hospital District compiled information on internal processes which served as the basis for the development

of the Marion County Coordinated Opioid Recovery (CORE) Guidelines (attached to this packet).

The development of the unified CORE process in Marion County has been the result of a strong collaboration between the Marion County Hospital District, Ocala Fire Rescue, Marion County Fire Rescue, and SMA Healthcare. Over the course of several meetings, these partners worked closely to review state guidelines, align best practices, and structure a coordinated response to the opioid crisis. Together, they defined the CORE Network, establishing clear inclusion and exclusion criteria to ensure consistency in service delivery while prioritizing individuals most at risk. This collaborative approach intentionally shifts the focus away from short-term stabilization and symptom management toward long-term treatment and recovery, integrating emergency response, peer navigation, and sustained behavioral health support into a seamless continuum of care. As part of quarterly monitoring, the team will update the CORE Guidelines as needed to improve outcomes and streamline processes.

The proposed CORE Network budget for FY25–26 prioritizes direct service delivery and essential program support. The largest allocation, approximately $409,000, is dedicated to staffing peer specialists, community paramedics, and clinical staff who form the foundation of the program's 24/7 response and recovery network. An additional $209,500 supports employee benefits to ensure workforce stability.

Program operations include $22,511 for travel, primarily for outreach, in-home visits, and follow-ups, and $20,437 for equipment, largely to support Ocala Fire Rescue. To sustain treatment capacity, $3,169 is budgeted for medical and pharmacy needs, including buprenorphine, naloxone, and related supplies. Essential operating supplies account for $31,289 of the overall budget.

Administrative oversight is limited to $30,000, reflecting a lean approach to overhead, while $20,000 is dedicated to unified outreach materials that connect at-risk individuals with CORE services.

## OPIOID ABATEMENT FUNDING REQUEST AND RECOMMENDATION

Overall, the budget reflects a strong investment in frontline staff and direct care services, with modest allocations for equipment, supplies, and administration to ensure accountability, continuity, and measurable impact.

### Recommendation:

Marion County Hospital District respectfully recommends the Marion County Coordinated Opioid Recovery (CORE) Network Program for funding. The initiative is built on an evidence-based design, aligning with best practices for opioid response by integrating EMS, Medication Assisted Treatment (MAT), and peer navigation to support both crisis stabilization and long-term recovery. The program establishes clear, measurable outcomes with time-bound performance goals focused on treatment acceptance, retention, detox completion, and reducing repeat overdoses.

The CORE Network is strengthened by strong community partnerships, with Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare working together to ensure seamless response and continuity of care. Finally, CORE incorporates robust sustainability and monitoring practices, including Mindshare data systems and quarterly reporting, to ensure accountability and continuous improvement.

**MARION COUNTY HOSPITAL DISTRICT**
**OPIOID ABATEMENT FUNDING APPLICATION**

**A) Applicant Information:**

Organization: **Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare Inc.**

Contact Name:_____ Position:_____

Address:_____ City:_____

Zip Code:_____ Telephone:_____

Email:_____

Date of Application:_____

**B) Program/Project General Questions: (attach additional sheets if necessary)**

1. Total Program/Project Cost: **$750,000.00**

2. Amount of funding requested from the Opioid Abatement Settlement **$750,000.00**

3. Describe how the Program/Project will focus on the allowable uses under the CORE & PEER priority list:
**The proposed grant funding will be used to strengthen and expand the Coordinated Opioid Recovery (CORE) Network in Marion County through staffing, service expansion, outreach, and infrastructure enhancements.**

4. Describe your Program/Project and how it will specifically improve health outcomes and health status of people in Marion County.
**The Marion County Coordinated Opioid Recovery (CORE) Network seeks funding to sustain and enhance its comprehensive, evidence-based response to the opioid epidemic for FY25-26. Building on the successful implementation of a 24/7 access continuum, the CORE Network integrates EMS, emergency departments, and behavioral health professionals to ensure individuals with substance use disorder receive timely, compassionate, and sustained care.**

**This proposal requests opioid abatement funding to support personnel**

**(peer navigators, paramedics), medication (buprenorphine), training, and data collection infrastructure needed to maintain and expand CORE services. The CORE Network has already achieved notable outcomes in treatment retention, detox completion, and reductions in repeat overdoses. Continued support will ensure Marion County maintains momentum in reversing the impacts of opioid misuse.**

5. Which community/communities in Marion County will be served?
**Marion County, Florida is experiencing a severe opioid crisis, with high overdose rates and growing demand for immediate treatment and recovery support. In 2024, EMS responded to 2,068 overdose incidents in Marion County. So far this year, an estimated 118 county residents are suspected to have experienced an overdose, underscoring the urgent and ongoing need for comprehensive intervention. The Coordinated Opioid Recovery (CORE) Network plays a vital role in addressing this public health emergency by connecting individuals to lifesaving interventions and long-term recovery support**

**Limited access to primary and behavioral healthcare—especially among uninsured residents—has led to overuse of emergency services for non-urgent needs, many related to substance use and chronic conditions. To address these systemic gaps, the CORE Network offers in-home assessments, hospital discharge follow-ups, homeless outreach, and care coordination, focusing on high-risk and underserved populations.**

**This grant will support an integrated network of services—including Medication Assisted Treatment (MAT), therapy, peer support, and recovery navigation—delivered through a partnership between Marion County Fire Rescue, Ocala Fire Rescue, and SMA Behavioral Healthcare. Their collaborative model, including Florida's first Overdose Alert System, ensures rapid response and timely linkage to detox and outpatient care for those affected by opioid use disorder.**

6. Where will the Program/Project health services be delivered and what format?
**Through a partnership between Ocala Fire Rescue, Marion County Fire Rescue, and SMA Healthcare, the program provides 24/7 response to overdoses, immediate initiation of treatment (including buprenorphine), and connection to long-term care. Services include in-home assessments, care coordination, and linkage to Medication Assisted Treatment (MAT), therapy, peer support, and other health and social services.**

7. Who specifically in your organization will deliver the Program/Project services?

**MAT Treatment (SMA Healthcare)**
**PEER Navigators (SMA Healthcare)**
**Community Paramedics (OFR/MCFR)**
**Medical Oversight (OFR/MCHR/SMA)**

8. Will volunteers be involved? **NO**

9. What is your agencies policy on Level II background screening employees and volunteers? **All agencies require Level II background screening**

11. Are there other collaborators involved in the Program/Project?
**Yes. Lutheran Services Florida has committed $250,000 dollars to the Marion County CORE Network – specifically to funding treatment with SMA Healthcare.**

12. How do you plan to gather your health improvement statistics and measurements results from services you provide under this grant?
**Opioid settlement funds will be used to implement CORE Networks. A required component of the state's opioid settlement is to use an evidence-based data collection process to analyze the effectiveness of substance use abatement. The opioid settlement states that the State and local governments shall receive and report expenditures, service utilization data, demographic information, and national outcome measures. In addition to the Performance Objectives listed below the state will require the following from all recipients of Opioid Abatement Funds:**
   a. **Demographic info on all patients identified as CORE clients**
   b. **Number of individuals served**
   c. **Services provided**
   d. **Diagnosis**
   e. **Cost associated with Service**

## C) Overarching Goals of Program

Performance Objectives for the CORE Network can be found in Appendix B to the Grant Agreement. The Performance Objectives are as follows:

a. **Warm Handoff to Peer Recovery Specialist**
   By June 2026, track and document all SUD-presenting individuals encountered by CORE partners and ensure that at least **80% receive a warm handoff** to a Peer Recovery Specialist at SMA Healthcare within **1 hour of identification**.
b. **Treatment Acceptance Post-Referral**
   By June 2026, develop a tracking system to monitor the number of SUD-presenting individuals

referred by hospitals, EMS, law enforcement, and other CORE partners. Set a target of at least 50% acceptance of treatment services during the initial pilot year, with ongoing adjustments as baseline data is finalized.

c. **Detox/Withdrawal Management Completion**
By June 2026, maintain or improve the current detox/withdrawal management completion rate of 80% (309 out of 377 clients) at SMA Healthcare. Performance will be reviewed quarterly, with a goal of sustaining an 80% or higher completion rate among all individuals entering detox services.

d. **Enrollment and Retention in MAT (Medication-Assisted Treatment)**
By June 2026, sustain the current Medication-Assisted Treatment (MAT) program retention rate of 80% for clients remaining enrolled for 90 days or more at SMA Healthcare. Performance will be monitored quarterly to ensure continued success and to identify any emerging barriers to long-term engagement.

e. **Engagement with PEER RECOVERY Specialists**
By June 2026, maintain or improve the current rate of **64%** of individuals who remain engaged in a lower level of care (including outpatient services, peer support, or community-based recovery programs) for **90 days or more** following higher-intensity treatment. Ongoing efforts will focus on supporting engagement and reducing barriers to continued participation.

f. **Reduction in Repeat EMS/ER Involvement**
Using existing overdose and EMS response data as a baseline, achieve a 15% reduction in repeat EMS calls and emergency room visits involving individuals engaged in recovery services by June 2026.

g. # of calls received to the CORE Overdose Hotline number
h. # of field contacts made
i. # of Emergency Department contacts made
j. # of PEER Contacts
k. # of patients that accept CORE services
l. # of CORE patients that enter Detox
m. # of CORE clients served in MAT
n. # and percentage of repeat field encounters within 6 months and 12 months
o. # and percentage of repeat ER visits related to substance use or overdose
p. Time from referral to MAT and engagement in MAT
q. # of inductions made in the field/Emergency Department

**D) Proposed Budget for your Program. You will also have to complete a Budget Narrative in Mindshare.**
Budget is attached

## E) Required Grant Application attachments

The following documents must be submitted and attached to this grant application:

(a) Your prior year's federal income tax return.

(b) If your organization is exempt from federal taxation, a copy of your IRS determination letter and a copy of your most recent IRS Form 990.

(c) Your most recent year end profit and loss statement and balance sheet for your organization.

(d) Your most recent profit and loss statement and balance sheet for your organization for the current year.

(e) Your organization's conflict of interest policy.

(f) Proof of your organization's active corporate registration status in the State of your incorporation.

(g) The name and address of your primary bank and the wiring instructions in the event your organization is awarded a grant hereunder.

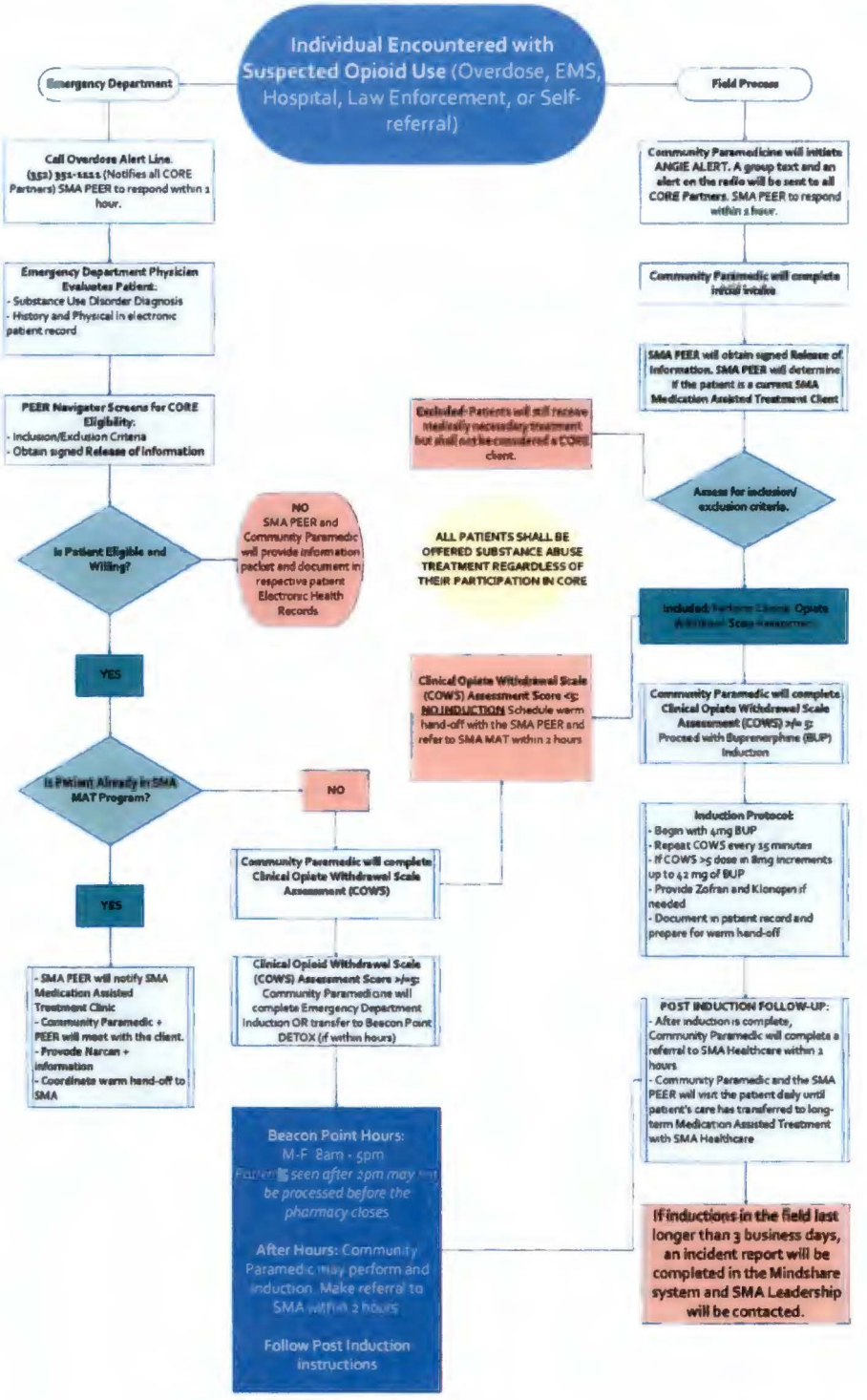
(h) Certificate of Liability Insurance listing the Marion County Hospital District as additional insured.

(i) Disaster plan procedure.

(j) Job descriptions and credentials for personnel included in MCHD budget request.

(k) Organization licensing and accreditation certificates, copies of monitors, corrective action plans if applicable, and resolution of corrective action plan if applicable.

| MARION COUNTY CORE PARTNER 2025/2026 PROJECTED BUDGET | | | |
|---|---|---|---|
| CATEGORY | MARION COUNTY FIRE RESCUE | OCALA FIRE RESCUE | SMA |
| STAFFING | $148,798.40 | $112,053.00 | $115,064.29 |
| BENEFITS | $41,201.31 | $58,507.74 | $105,363.02 |
| TRAVEL | | $9,000.00 | $13,511.00 |
| EQUIPMENT | | $2,500.00 | $0.00 |
| MEDICAL AND PHARMACY | $3,000.00 | | $169.00 |
| OPERATING SUPPLIES | $7,000.00 | $17,937.00 | $24,287.94 |
| OTHER SUPPORT COSTS | | | $41,605.00 |
| ADMINISTRATION | | | $30,000.00 |
| TOTAL | $200,000 | $199,998 | $330,000.24 |


Individual Encountered with Suspected Opioid Use (Overdose, EMS, Hospital, Law Enforcement, or Self-referral)
Emergency Department
Field Process
Call Overdose Alert Line. (352) 351-1111 (Notifies all CORE Partners) SMA PEER to respond within 1 hour.
Community Paramedicine will initiate ANGIE ALERT. A group text and an alert on the radio will be sent to all CORE Partners. SMA PEER to respond within 1 hour.
Emergency Department Physician Evaluates Patient:
- Substance Use Disorder Diagnosis
- History and Physical in electronic patient record
Community Paramedic will complete initial intake
SMA PEER will obtain signed Release of Information. SMA PEER will determine if the patient is a current SMA Medication Assisted Treatment Client
PEER Navigator Screens for CORE Eligibility:
- Inclusion/Exclusion Criteria
- Obtain signed Release of Information
Excluded- Patients will still receive medically necessary treatment but shall not be considered a CORE client.
Assess for inclusion/ exclusion criteria.
Is Patient Eligible and Willing?
NO
SMA PEER and Community Paramedic will provide information packet and document in respective patient Electronic Health Records
ALL PATIENTS SHALL BE OFFERED SUBSTANCE ABUSE TREATMENT REGARDLESS OF THEIR PARTICIPATION IN CORE
Included- Perform Clinical Opiate Withdrawal Scale Assessment
YES
Clinical Opiate Withdrawal Scale (COWS) Assessment Score <5: NO INDUCTION Schedule warm hand-off with the SMA PEER and refer to SMA MAT within 2 hours
Community Paramedic will complete Clinical Opiate Withdrawal Scale Assessment (COWS) >/= 5: Proceed with Buprenorphine (BUP) Induction
Is Patient Already in SMA MAT Program?
NO
Induction Protocol:
- Begin with 4mg BUP
- Repeat COWS every 15 minutes
- If COWS >5 dose in 8mg increments up to 32 mg of BUP
- Provide Zofran and Klonopen if needed
- Document in patient record and prepare for warm hand-off
YES
Community Paramedic will complete Clinical Opiate Withdrawal Scale Assessment (COWS)
- SMA PEER will notify SMA Medication Assisted Treatment Clinic
- Community Paramedic + PEER will meet with the client.
- Provode Narcan + information
- Coordinate warm hand-off to SMA
Clinical Opioid Withdrawal Scale (COWS) Assessment Score >/=5: Community Paramedicine will complete Emergency Department Induction OR transfer to Beacon Point DETOX (if within hours)
POST INDUCTION FOLLOW-UP:
- After induction is complete, Community Paramedic will complete a referral to SMA Healthcare within 2 hours
- Community Paramedic and the SMA PEER will visit the patient daily until patient's care has transferred to long-term Medication Assisted Treatment with SMA Healthcare
Beacon Point Hours: M-F 8am - 5pm
Patients seen after 2pm may not be processed before the pharmacy closes
After Hours: Community Paramedic may perform and induction. Make referral to SMA within 2 hours
Follow Post Induction instructions
If inductions in the field last longer than 3 business days, an incident report will be completed in the Mindshare system and SMA Leadership will be contacted.

# OPIOID ABATEMENT FUNDING REQUEST AND RECOMMENDATION

☒ **Recommend** ☐ **Not Recommend** ☐ **Modify**

Received From: **WEAR GLOVES**

Total Funding Request: $193,800

Includes:

- Administrator $24,000
- Financial Counselor $6,000
- Program Manager $20,000
- House Staff / Security $60,000
- Client Advocate $7,000
- Coach - Addiction & Mental Health $36,000
- Case Management $36,000
- Vehicle insurance, gas, and repairs $4,800

Attachments:

- Initial Proposal
- Follow up Questionnaire
- Data on current clients served
- Financial information and sustainability plan

## Summary:

On May 15, 2025, Wear Gloves submitted their proposal/request for Opiod Abatement dollars to be allocated for staff salaries at their newly opened Dignity House. Marion County Hospital District (MCHD) conducted a site visit and interview on June 2, 2025, to collect more information on the vision and function of this project to determine if it aligns with the "approved uses" of the Opioid Abatement funding.

Per the interview with the Wear Gloves team, Dignity House, a program developed by Wear Gloves, is a transitional, low-barrier male shelter in Marion County focusing on individuals with opioid use disorder (OUD) and co-occurring substance use/mental health (SUD/MH) disorders. The shelter integrates housing with wraparound services, including counseling, peer support, job training, and case management, using the evidence-based "Dignity Pathways" model.

Currently, 100% of residents at Dignity House have SUD/OUD diagnoses, and the program expects to continue serving a majority from this population, with only 15–20% potentially

unaffected. The shelter offers a pet-friendly environment (a unique feature locally) and fills a critical gap in services, especially as the local Salvation Army faces potential closure.

Services are grounded in trauma-informed care, the Stages of Change model, and sober living principles. Licensed clinicians from My Life Counsel provide Medicaid-billable treatment. Peer mentors with lived experience enhance the recovery process.

Dignity House aims to serve 12–20 individuals in year one, approximately 24–32 in year two and reach full capacity (60 beds) by year three. This expansion will significantly increase the region's ability to support individuals in recovery.

Initial funding came from a $1.1M ARPA grant which fully funded the acquisition of the building and partially funded the renovations. More than $300K in funding for renovations came from Wear Gloves. For FY 2025/2026, the operating budget is $390K, with a $193.8K grant request representing 49% of the total budget and 65% of staffing costs. A sustainability plan outlines future diversification through social enterprises (e.g., coffee sales, city contracts) and contingency measures to maintain operations without opioid abatement funding.

When asked about the source(s) of the remaining 51% of funding, Wear Gloves indicated they would apply for additional grants to help close the remaining funding gap for the operating budget. In the meantime, Wear Gloves will cover expenses through a combination of undesignated individual donations and earned revenue from their social enterprises, which include manufacturing partnerships, Dignity Roasters coffee sales, and city beautification contracts.

Based on review of their profit and loss statement for 2025, if the $193,800 Opioid Abatement Funds is approved, Wear Gloves will be able to fully fund Dignity House operations for the year, supported by both their current net revenue and dedicated program income.

### Recommendation:

After reviewing all materials, Dignity House meets urgent community needs, especially for low-barrier transitional housing with integrated recovery services. Its alignment with opioid abatement priorities, use of evidence-based practices, and a clearly defined sustainability plan position it as a strong candidate for funding consideration.

# Wear Gloves Dignity House

### Introduction

The Wear Gloves Dignity House provides safe, recovery-centered transitional housing specifically designed to support individuals experiencing homelessness who are navigating the challenges of Opioid Use Disorder (OUD), Substance Use Disorder (SUD), and co-occurring mental health conditions. Our goal is to foster lasting healing and stability by delivering a comprehensive, trauma-informed residential program that combines safe housing, peer-led recovery support, and workforce development, empowering every guest to reclaim their lives, develop resilience, and achieve long-term independence.

### Recovery-Focused Transitional Housing

We offer a safe, substance-free living environment grounded in empathy and respect. Our program prioritizes personal accountability and empowerment, encouraging residents to take an active role in their recovery journey at a pace that honors their unique experiences and needs. Through daily check-ins and individualized case management, we provide consistent, compassionate support that respects each guest's autonomy and fosters meaningful progress toward sustained wellness. We also allow guests to bring their pets provided they are vaccinated and deemed safe so no one is forced to choose between sobriety and the companionship of a beloved animal.

### Wraparound Recovery Services

Wear Gloves recognizes that opioid and substance use disorders (OUD/SUD) often coexist with trauma, mental health challenges, and socioeconomic barriers. Our approach at the Dignity House is person-centered, designed to meet each guest's unique needs through coordinated, trauma-informed support.

Our wraparound services include:

- On-site mental health counseling coordinated through SMA Healthcare, ensuring seamless access to integrated behavioral health support.
- Peer advocacy and mentorship led by a Client Advocate with lived experience, offering genuine understanding, encouragement, and tailored guidance rooted in shared recovery journeys.

- Relapse prevention and group support facilitated by trained Addiction Recovery Coaches, creating a nurturing community where residents grow and build resilience.

- Individualized recovery planning and service navigation delivered by a professional Case Manager who collaborates closely with each resident to identify and overcome barriers to success.

- A structured, trigger-reducing environment that safeguards sobriety while promoting personal growth and emotional safety.

**Transportation Support**
Recognizing transportation as a critical barrier, we provide dependable transit for medical appointments, counseling sessions, recovery meetings, job interviews, and daily access to workforce training. This support ensures guests maintain continuous engagement with essential services and opportunities critical to their healing and self-sufficiency.

**Education & Workforce Development**
Because sustained recovery is often tied to economic stability, Wear Gloves integrates workforce development, financial planning, and life skills development through:

- Hands-on job training, experience, and placement support through the Wear Gloves Dignity Center and community partners.

- Educational workshops covering digital literacy, GED preparation, financial literacy, and industry-relevant certifications such as food safety and forklift operation.

- Practical life skills coaching in cooking, cleaning, time management, and home safety to support self-care and independent living.

- Regular meetings with a financial counselor to provide personalized budgeting guidance, debt management strategies, and long-term financial planning to empower guests toward economic self-sufficiency.

- Personalized career coaching that helps guests set realistic, long-term employment goals and navigate their chosen career paths with confidence.

**Emergency Shelter & 24/7 Staffing**
To meet immediate community needs, Wear Gloves provides emergency shelter for individuals deferred by law enforcement and maintains on-site staff 24/7. All of our staff members are

Narcan and CPR/First Aid certified and trained in de-escalation techniques. Emergency shelter guests do not interface with primary program residents until they have completed the formal intake process and are fully enrolled in the program.

**Funding Request**

Wear Gloves respectfully requests $193,800 in opioid settlement funds to fund recovery-specific transitional housing and wraparound support at the Dignity House. These funds will directly serve adult men in Marion County impacted by OUD, SUD, and related mental health conditions, providing low-barrier access to stability, recovery, and long-term reintegration.

Grant funds will help cover:

- Staffing for case management, peer support, and recovery coaching
- Transportation to recovery appointments, employment services, and group sessions
- Recovery supplies and participant support items
- Workforce development and training resources

**Conclusion**

The Dignity House serves as a vital resource for individuals recovering from the effects of opioid addiction, substance use disorder, and other related challenges. This funding will allow Wear Gloves to maintain a trauma-informed, recovery-focused housing program that reduces relapse risk and creates lasting stability in the lives of our guests. With your support, we can continue to provide this safe and empowering space for vulnerable members of our community.

# PROJECT PROPOSAL: TRANSITIONAL HOUSING

## Initial Interview Questionnaire

| | |
|---|---|
| **Project Title:** | **DIGNITY HOUSE** |
| **Agency/Organization:** | WEAR GLOVES |
| **Applicant:** | WENDY KEBRDLE |

**PROJECT FOCUS:**

1. Does your project focus on allowable uses under the transitional housing priority list? *(Please select all that are applicable)*

   ☒ Provide comprehensive wrap around services to individuals with Opioid Use Disorder (OUD) and/or co-occurring Substance Use Disorder/Mental Health (SUD/MH) conditions, including housing, transportation, education, job placement, job training, or childcare.

   ☒ Provide access to housing for individuals with OUD and/or 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.

   ☐ Substance Exposed Newborn services/facilities.
2. Please explain how this project will specifically engage/support individuals affected by opioid used disorder and/or co-occurring substance use/mental health disorders? **DIGNITY HOUSE is a housing first program developed by Wear Gloves. Wear Gloves was established in 2009 to empower individuals in Marion County experiencing hardship by equipping them with tools to regain self-sufficiency through their programs such as Dignity Roasters and Dignity Center. According to Ms. Kebrdle, most of the clients served at Wear Gloves are experiencing substance use and/or opioid use disorders. All three clients currently housed at DIGNITY HOUSE, are assessed to have substance use disorder and/or opioid use disorder. DIGNITY HOUSE will utilize the same 12 month "Dignity Pathways" model that has been successful in their other programs. As part of their proposal, Wear Gloves provided their Dignity Pathways overview and sample case plan.**
3. Does the project include evidence-based treatment modalities? **DIGNITY HOUSE utilizes counseling from My Life Counsel. DIGNITY HOUSE also employes the peer model as many of their staff have lived experience with substance use and homelessness and have successfully completed the Wear Gloves programming. Their Dignity Pathways are based on evidenced-based practices such as Trauma-informed care, Stages of Change, and Sober Living principles.**
4. Does the project include Methadone treatments? **NO**
5. Does the project include unconventional treatments (e.g., Ketamine, hallucinogenic substances)? **NO**

# PROJECT PROPOSAL: TRANSITIONAL HOUSING

## Initial Interview Questionnaire

6. Does the project focus on interventions widely accepted as billable treatments through DCF funding? **My Life Counsel accepts and can bill Medicaid.**
7. What outcomes have you identified to measure the success of the project? **Wear Gloves will measure success of the DIGNITY HOUSE residents by their progress through the milestones of Dignity Pathways and they're demonstrating sobriety and self-sufficiency. A guest in the Dignity Pathways Program demonstrates sobriety through consistent participation in recovery-focused activities such as NA/AA meetings, therapy, and maintaining a sober living commitment. Guests are expected to refrain from using any mind-altering substances and may be subject to drug screening at the discretion of Wear Gloves staff. Self-sufficiency is shown by gradually building skills in budgeting, job readiness, household management, and securing employment and stable housing. Throughout the 12-month program, guests work with case managers and peer mentors to achieve personalized milestones, including educational advancement, health care engagement, and community involvement. Successful completion is marked by the guest securing independent housing, demonstrating competence in life and job skills, establishing future goals, and connecting with ongoing support systems. The program concludes with a final self-assessment and celebration of the guest's progress and readiness for independent living.**
8. Does this project / position currently fill a service need in the community? **Yes. DIGNITY HOUSE is a low-barrier male shelter. With the potential closure of Salvation Army, there will be no other low-barrier shelter in Marion County. Additionally, DIGNITY HOUSE accepts pets in their shelter which no other shelter in Marion county does. This is possible through their partnership with VOCAL.**

### SERVICE PROVIDER:

1. Does your organization have the capacity, experience, efficacy, and track record to provide the proposed services and education? **YES. Wear Gloves has served the homeless community in Ocala for over 10 years. Since its inception, the organization has scaled significantly – employing over 500 individuals through its Dignity Center in 2023 and 2024 alone, by offering job readiness training, certification, and paid work. Wear Gloves is further expanding its reach by opening Dignity House, a 60-bed shelter made possible through community support.**
2. Are clinicians, therapists, or counselors involved in your project currently credentialed and under oversight by a state agency or its managing entity (e.g., LSF)? **YES. Clinicians are provided by My Life Counsel.**

# PROJECT PROPOSAL: TRANSITIONAL HOUSING

## Initial Interview Questionnaire

3. Does your project include professional oversight by a clinical leadership team (e.g., a qualified Chief Medical Officer)? **YES. Clinicians are provided by My Life Counsel.**

**FUNDING SCOPE:**

1. Does your proposed project or program draw new funding from outside Marion County? **The current programming at Wear Gloves is paid for by manufacturing partnerships, city and county contracts, monthly donors and individual supporters, chuch and business sponsorships, coffee sales, and in-kind donations. Outlined in the Wear Gloves' Sustainability Plan are strategies to secure funding which could exceed the confines of the county including contracting with vendors outside Marion County.**
2. What other funders have already committed to your proposed project, if any (please list): **The ARPA Grant ($1.1 million) fully funded the acquisition and partially funded the renovation of the Dignity House facility. Wear Gloves infused the renovation project with more than $300,000 dollars of its own revenue. Only $15,000 in additional revenue in 2025/2026 fiscal year is projected from the SECO Foundation and individual donations. To ensure uninterrupted services and operations at Dignity House, Wear Gloves intends to continue to supplement the Dignity House Budget through a combination of undesignated individual donations and earned revenue from our social enterprises, which include our manufacturing partnerships, Dignity Roasters coffee sales, and city beautification contracts.**
3. Does your project include a sustainable funding plan that will allow your project to stand on its own without Opioid Abatement Funding? **Included in Wear Gloves' supporting documentation was a Sustainability Plan. The Wear Gloves 2025 Sustainability Plan outlines strategies to ensure long-term financial and operational stability while upholding its mission of empowering underserved individuals with dignity. The plan focuses on diversifying and strengthening income sources—including manufacturing partnerships, social enterprise ventures like coffee sales, and donor engagement—while maintaining efficiency through cost controls and data-driven decision-making. In the event of lost funding (such as OAF), contingency measures include reallocating resources, expanding fundraising, and optimizing operations. Long-term goals include growing reserves, expanding social enterprises, and sustaining**

**balanced revenue streams. The organization emphasizes transparency, stakeholder engagement, and evidence-based service models to support continuous improvement and resilience.**

4. Does your project add capacity to a current service being provided in the community or does your project fill a gap in services within in the community? **Yes. DIGNITY HOUSE is a low-barrier male shelter. With the potential closure of Salvation Army, there will be no other low-barrier shelter in Marion County. Additionally, DIGNITY HOUSE accepts pets in their shelter which no other shelter in Marion county does. This is possible through their partnership with VOCAL.**
5. What is the anticipated starting year / ending year of this project? **July 2025 / 2026. While Wear Gloves' proposal requests a two-year grant, it was explained during the initial interview that the grant would be awarded annually, and Wear Gloves would need to reapply in 2026 for additional funding.**

## COMMUNITY IMPACT:

1. Will the proposed project allow your program to serve additional citizens beyond what the current system supports? **YES**
2. How many individuals does this project anticipate serving? **Minimum 12 – 20 in the first year with an anticipated increase in bed capacity to approximately 24 – 32 in year two and will reach full capacity (60) by year 3.**
3. Do you anticipate this project serving individuals unaffected by opioid used disorder and/or co-occurring substance use/mental health disorders? **Yes. It is anticipated that DIGNITY HOUSE will support individuals without OUD/SUD, but it is only projected to be about 15-20% of their clients served. The current population at DIGNITY HOUSE is 100% OUD/SUD clients. The population served at Wear Gloves is currently 74% OUD/SUD clients. Therefore, it is anticipated and projected for DIGNITY HOUSE to serve a majority of clients in treatment/recovery for OUD/SUD.**
4. What makes your organization uniquely qualified to execute this project? *(Provide a brief explanation).* **Wear Gloves believes that they have been very successful in the last 16 years of service, supporting individuals struggling with substance use disorder through their recovery and journey to sobriety and self-sufficiency.**

# **Dignity Pathways:** Program Description

*A 12-month transitional housing program at the Wear Gloves Dignity House, providing safe shelter and effective support for recovery, personal growth, and long-term stability.*

**Overview**
Dignity Pathways is a structured 12-month transitional housing program designed to support individuals facing barriers such as substance use disorder (SUD), behavioral health challenges, homelessness, and other complex life circumstances. Rooted in trauma-informed care, the program offers stable housing, job readiness training, life skills development, and wraparound recovery support.

**Background in Serving Vulnerable Populations**
The program was developed by professionals with experience supporting individuals facing homelessness, addiction, and other complex life barriers. Their approach is grounded in dignity, empathy, and evidence-based strategies that promote long-term stability and growth.

**Peer-Based Support System**
Peer mentors with long-term recovery experience provide daily relational support, model stability, and guide guests through early recovery. Case managers collaborate with guests to create and manage individualized plans for housing, recovery, employment, and health. This support network delivers personalized guidance, ensuring that guests feel understood, supported, and accountable as they work toward lasting change.

**Licensed Clinical Oversight**
Dignity Pathways connects guests to licensed professionals through trusted community partnerships, with many providers utilizing on-site space at the Dignity House. Guests have access to a licensed nurse for basic health support, and all staff are certified in CPR, first aid, and Narcan administration. Available services include:

- Individualized recovery and mental health planning tailored to each guest's needs
- Trauma-informed therapy sessions delivered by licensed professionals
- Support for co-occurring disorders and complex behavioral health challenges
- Referrals and transportation to specialized medical, psychiatric, or detoxification services
- Coordination with case management for ongoing progress monitoring and adjustment

## **Dignity Pathways:** Evidence-Based Recovery Models

| Model | How It's Applied in Dignity Pathways |
|---|---|
| **Recovery-Oriented Systems of Care** | Holistic, individualized plans emphasizing recovery and personal goals |
| **Peer Support Services (SAMHSA)** | Peer mentors lead by example and provide non-clinical guidance and stability |
| **Trauma-Informed Care** | All staff and programming are trained to prioritize safety, freedom, and dignity |
| **Stages of Change (Prochaska/DiClemente)** | Program design follows progressive behavioral readiness, from stabilization to long-term planning |
| **Sober Living Principles** | Guests commit to maintaining sobriety, participating in recovery programming, and contributing to community accountability |

# Wear Gloves Dignity House Shelter 2025/2026 Budget and Propsed Grant Funding

| Category | Line Item | Annual Cost | Grant Amount Funded | % Funded by Grant | % Time with OUD/SUD Clients |
|---|---|---|---|---|---|
| **Facility Expenses** | Utilities | $36,000 | $0 | 0% | |
| | Supplies/Bank charges | $3,000 | $0 | 0% | |
| | Insurance | $24,000 | $0 | 0% | |
| | Phone, Internet, Security | $6,000 | $0 | 0% | |
| | Repairs/Maintenance | $6,000 | $0 | 0% | |
| **Employee Costs** | Administrator | $42,000 | $24,000 | **57%** | **10%** |
| | Financial Counselor | $6,000 | $6,000 | **100%** | **100%** |
| | Program Manager | $38,400 | $20,000 | **52%** | **75%** |
| | House Staff / Security (4) | $108,000 | $60,000 | **57%** | **70%** |
| | Client Advocate | $12,000 | $7,000 | **59%** | **90%** |
| | Coach - Addiction & Mental Health | $36,000 | $36,000 | **100%** | **100%** |
| | Case Management | $36,000 | $36,000 | **100%** | **90%** |
| | Payroll Expenses | $14,400 | $0 | 0% | 0% |
| **Projected Living Expenses** | Food | $12,000 | $0 | 0% | |
| | Personal Supplies | $1,800 | $0 | 0% | |
| | Vehicle Insurance, Gas & Repairs | $4,800 | $4,800 | **100%** | N/A |
| | Training Classes & Certifications | $3,600 | $0 | 0% | |
| **Totals** | | **$390,000** | **$193,800** | **49%** | |

# Wear Gloves Inc.

## Profit and Loss

January 1 - June 10, 2025

| | TOTAL | |
|---|---|---|
| | JAN 1 - JUN 10, 2025 | JAN 1 - JUN 10, 2025 (YTD) |
| Revenue | | |
| 25 All Revenue | 1.11 | 1.11 |
| 25 DH Donations | 58,763.09 | 58,763.09 |
| 25 DH Grants | 323,389.65 | 323,389.65 |
| 25 Donations | 158,847.02 | 158,847.02 |
| 25 Grants | 7.43 | 7.43 |
| 25 Interest | 63.20 | 63.20 |
| 25 Social Enterprise Revenue | 567,934.27 | 567,934.27 |
| **Total 25 All Revenue** | **1,109,005.77** | **1,109,005.77** |
| Program Service Revenue | | |
| Services | 72,546.80 | 72,546.80 |
| **Total Program Service Revenue** | **72,546.80** | **72,546.80** |
| **Total Revenue** | **$1,181,552.57** | **$1,181,552.57** |
| GROSS PROFIT | **$1,181,552.57** | **$1,181,552.57** |
| Expenditures | | |
| 25 All Expenses | 1,194.50 | 1,194.50 |
| 25 Advertising & Marketing | 1,748.23 | 1,748.23 |
| 25 Bank Charges/Fees | 1,787.98 | 1,787.98 |
| 25 Client Payroll | 425,136.98 | 425,136.98 |
| 25 Payroll Taxes | 33,316.77 | 33,316.77 |
| 25 Workers Comp | 1,500.00 | 1,500.00 |
| **Total 25 Client Payroll** | **459,953.75** | **459,953.75** |
| 25 DH Admin Expense | 985.79 | 985.79 |
| 25 DH Office Expenses | 26.32 | 26.32 |
| 25 DH Repairs & Maintenance | 379,783.96 | 379,783.96 |
| 25 DH Utilities | 3,747.19 | 3,747.19 |
| 25 DH Vehicle Expense | 4,759.40 | 4,759.40 |
| 25 Health Insurance | 13,623.26 | 13,623.26 |
| 25 Interest Paid (CC's) | 325.18 | 325.18 |
| 25 Job Supplies | 39,452.11 | 39,452.11 |
| 25 Legal & Professional Services | 49,708.88 | 49,708.88 |
| 25 Management & General | 2,900.85 | 2,900.85 |
| 25 Meals & Entertainment | 140.98 | 140.98 |
| 25 Office Supplies | 4,160.38 | 4,160.38 |
| 25 Other Business Expenses | 10,192.30 | 10,192.30 |
| 25 Repairs & Maintenance | 15,266.89 | 15,266.89 |
| 25 Vehicle Expenses (Insurance, Gas, Repairs) | 19,178.83 | 19,178.83 |
| 25 WG Admin Expenses | 1,108.46 | 1,108.46 |
| 25 WG Taxes | 11,939.71 | 11,939.71 |

# Wear Gloves Inc.

## Profit and Loss

January 1 - June 10, 2025

| | TOTAL | |
|---|---|---|
| | JAN 1 - JUN 10, 2025 | JAN 1 - JUN 10, 2025 (YTD) |
| 25 WG Utilities | 6,747.25 | 6,747.25 |
| **Total 25 All Expenses** | **1,028,732.20** | **1,028,732.20** |
| Dignity House Expenses | | |
| DH Repairs & Maintenance | 2,201.96 | 2,201.96 |
| **Total Dignity House Expenses** | **2,201.96** | **2,201.96** |
| Functional Expenses | | |
| Management & General | | |
| Advertising & Marketing | 70.00 | 70.00 |
| Payroll Expenses | | |
| Taxes | 1,711.62 | 1,711.62 |
| **Total Payroll Expenses** | **1,711.62** | **1,711.62** |
| **Total Management & General** | **1,781.62** | **1,781.62** |
| Program Expenses | | |
| Client Needs | 18,387.68 | 18,387.68 |
| **Total Program Expenses** | **18,387.68** | **18,387.68** |
| **Total Functional Expenses** | **20,169.30** | **20,169.30** |
| QuickBooks Payments Fees | 199.29 | 199.29 |
| **Total Expenditures** | **$1,051,302.75** | **$1,051,302.75** |
| NET OPERATING REVENUE | **$130,249.82** | **$130,249.82** |
| NET REVENUE | **$130,249.82** | **$130,249.82** |

# *Opioid Settlement Committee*

| *Opioid Funding Projections* | Year 1 | Year 2 | Year 3 | Total Received Through Years 1-3 |
|---|---|---|---|---|
| Regional Funding | $ 2,882,761.00 | $ 1,361,107.00 | $ 1,691,997.00 | $ 5,935,865.00 |

| *Approved Projects* | Total ($5,935,866) | Total Expended | Remaining | % Spent |
|---|---|---|---|---|
| Centralized Receiving Facility | $ 2,300,000.00 | $ - | $ 2,300,000.00 | 0% |
| CORE and Peer Programs | $ 750,000.00 | $ - | $ 750,000.00 | 0% |
| SENP Transitional Housing | $ 500,000.00 | $ 500,000.00 | $ - | 100% |
| Additional Transitional Housing | $ 480,676.00 | $ - | $ 480,676.00 | 0% |
| Admin | $ 296,793.00 | $ 79,787.98 | $ 217,005.02 | 27% |
| Remaining for Additional Priorities | $ 1,608,396.00 | $ - | $ 1,608,396.00 | 0% |

MARION COUNTY CHILDREN'S ALLIANCE

CCASA
COMMUNITY COUNCIL AGAINST SUBSTANCE ABUSE

MCHD
Marion County Hospital District

8TH ANNUAL

# OCALA RECOVERY FESTIVAL

## CELEBRATE. REMEMBER. TAKE ACTION.

IN PARTNERSHIP WITH THE MARION COUNTY HOSPITAL DISTRICT

FREE COMMUNITY EVENT!

## SATURDAY, SEPTEMBER 13, 2025
## 10AM - 3PM | TUSCAWILLA PARK

DON'T MISS THE PRESENTATION OF THE ANNUAL RECOVERY CHAMPION AWARD!

FEATURING:
- EXHIBITOR BOOTHS
- RECOVERY RESOURCES
- ENTERTAINMENT
- KIDS ZONE
- FOOD
- SWAG + GIVEAWAYS

SCAN FOR EXHIBITOR & SPONSOR INFO

MCCA@MCCHILDRENSALLIANCE.ORG | (352) 438-5990

### Search Parameters

**Date Field:** Event Local Date

**Date Range:** Last 5 Years (09/11/2020 to 09/11/2025)

**Date Bin:** Partial Month

**Data Types:** EMS

**States:** Florida

**Counties:** Marion

**Agencies:** Marion County Fire Rescue Service

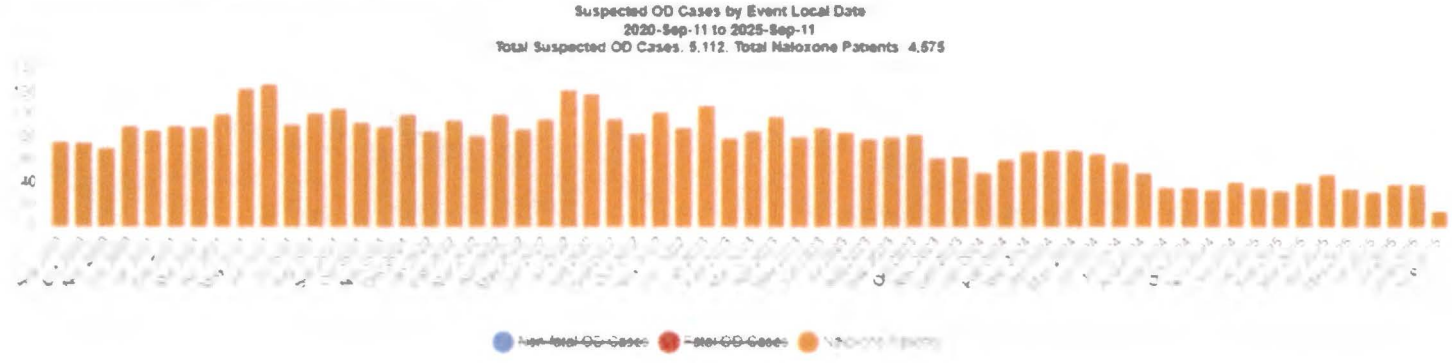
**Syndromes:** Opioid (FL ESOOS)

**Minimum Alert Threshold:** Moderate

| Suspected Overdoses | Fatalities | Incident States | Incident Counties |
|---|---|---|---|
| 5,112 | 18 | 1 | 1 |
| **2025 YTD:** 347 | **2025 YTD:** 2 | **2025 YTD:** 1 | **2025 YTD:** 1 |

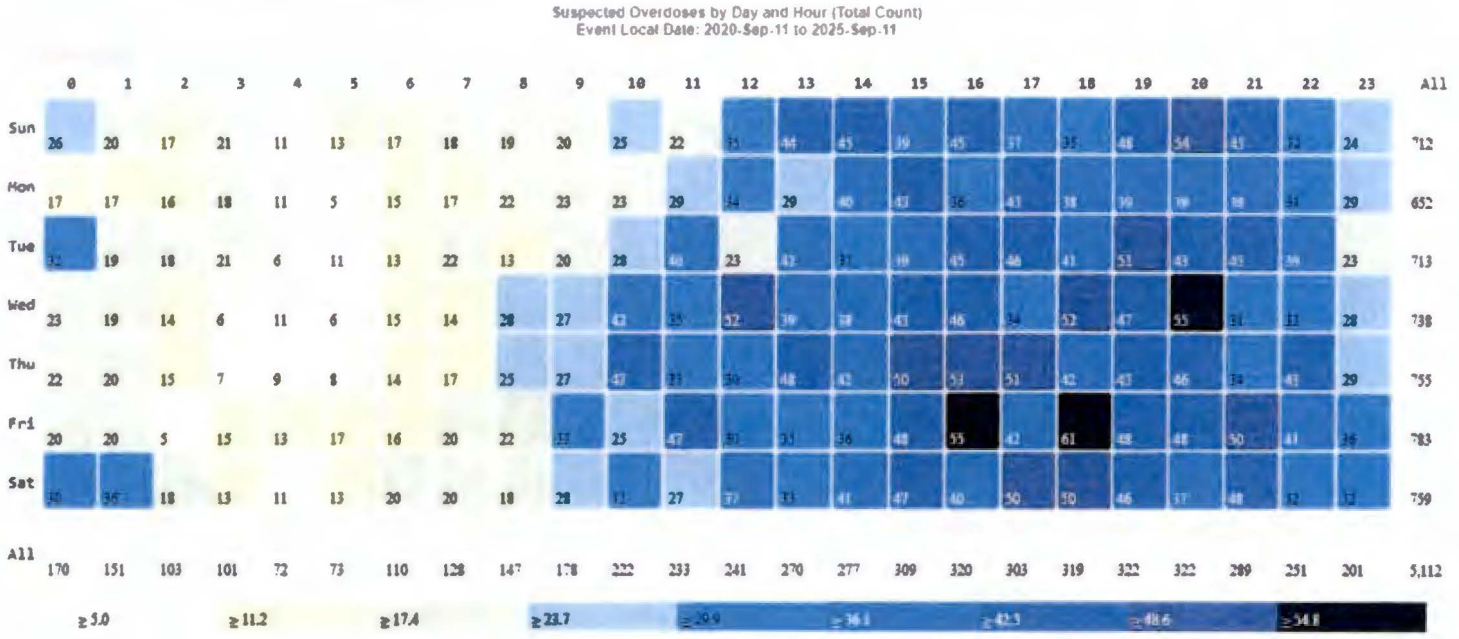
### Suspected Overdoses

Data filtered based on **Access Levels**: Event = **Location**



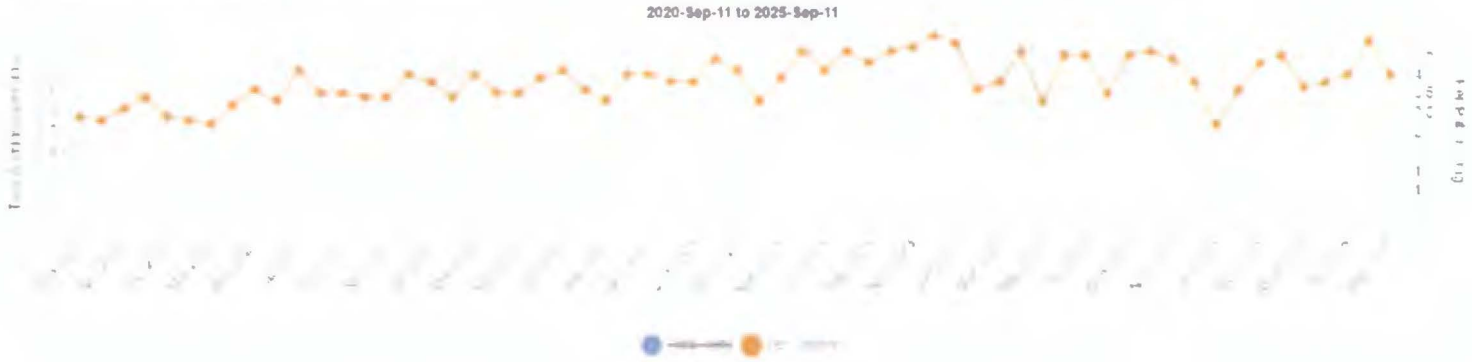
## Suspected Overdoses by Day and Hour

Data filtered based on **Access Levels** Event = **Location** Operational = **Full**




## Milligrams Naloxone Administered

Data filtered based on **Access Levels** Event = **Location**

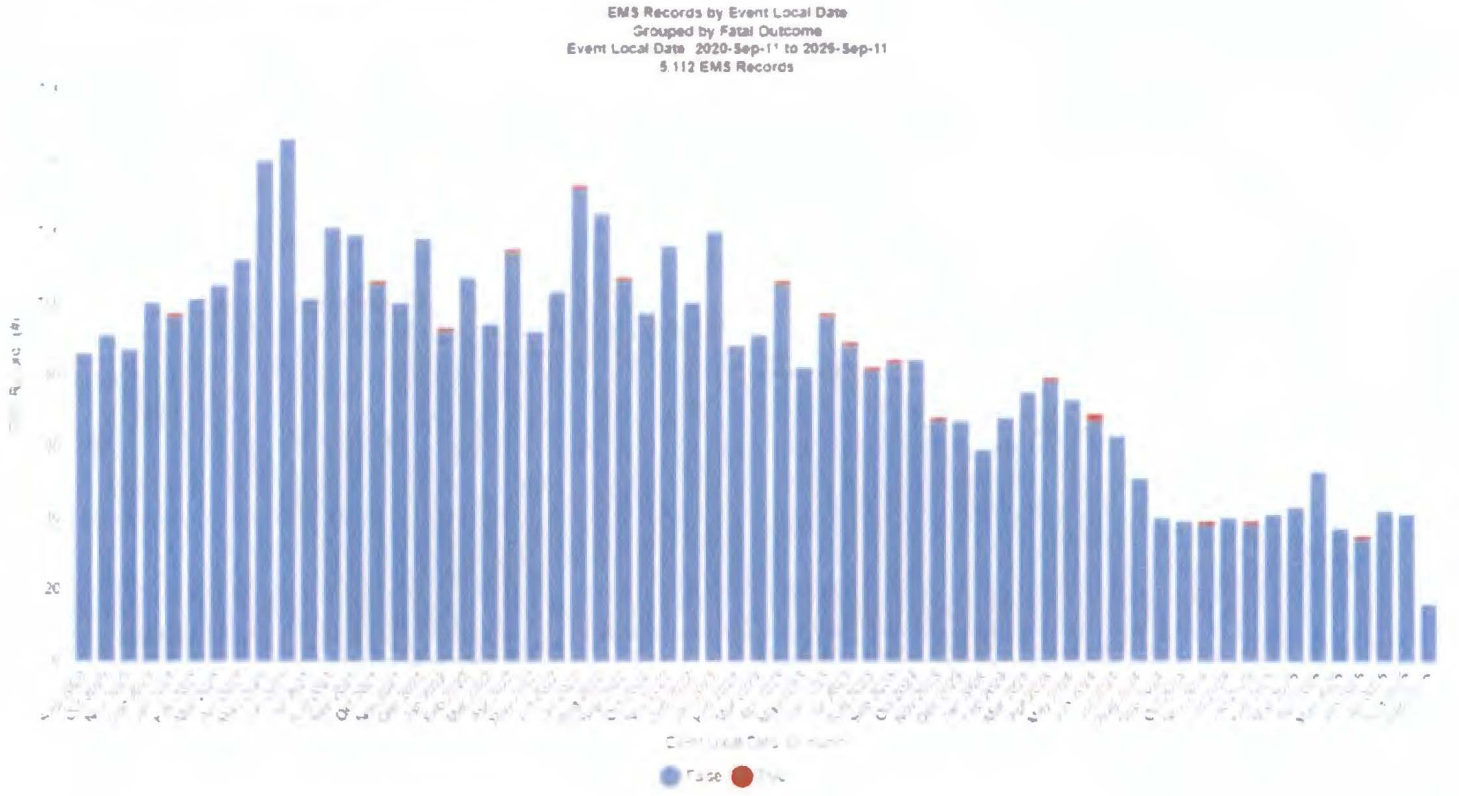



## Naloxone Administered by Route

Data filtered based on **Access Levels** Event = **Location**

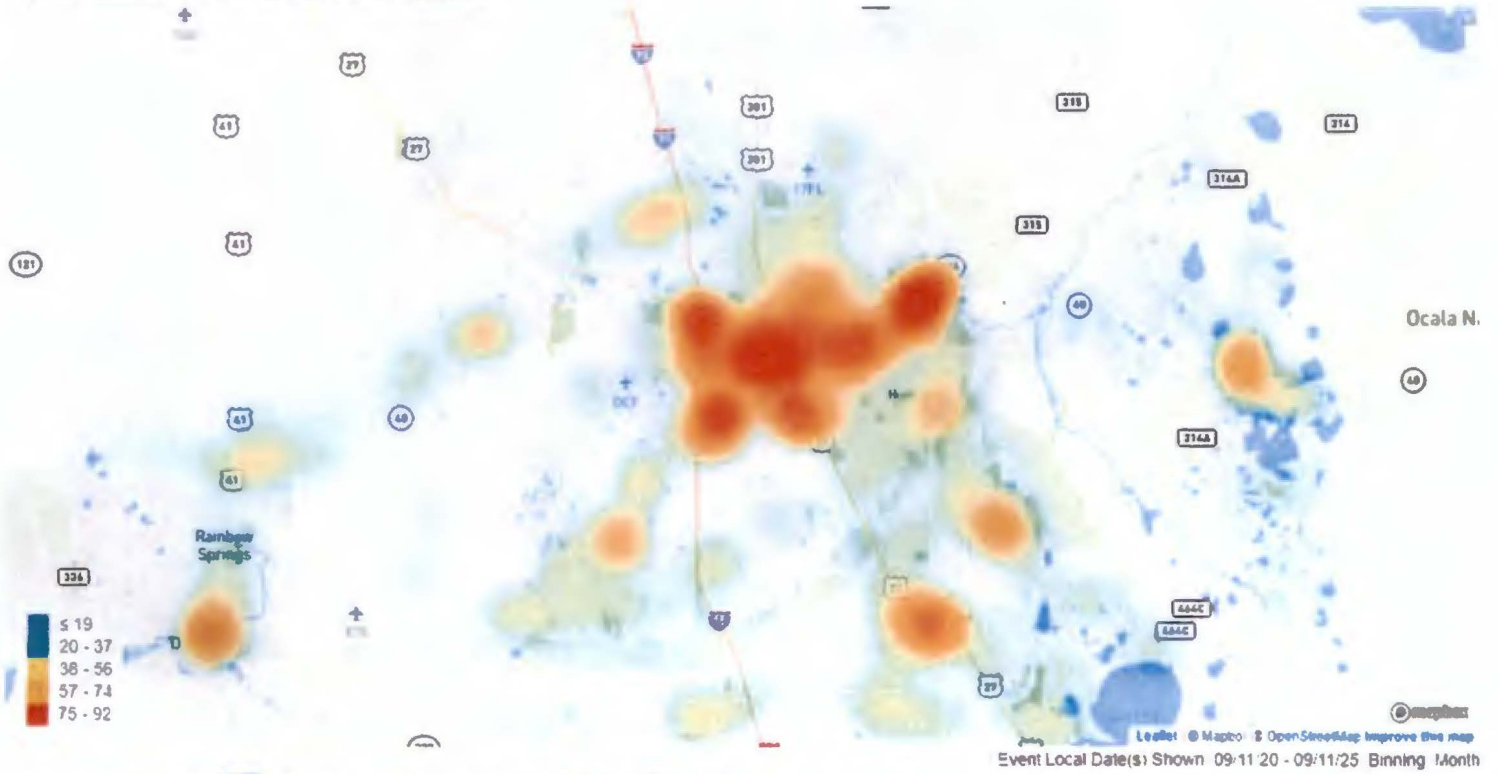
Data Explorer: **EMS Records by Event Local Date**

Data filtered based on **Access Levels**: Event = **Location**, Operational = **Full**



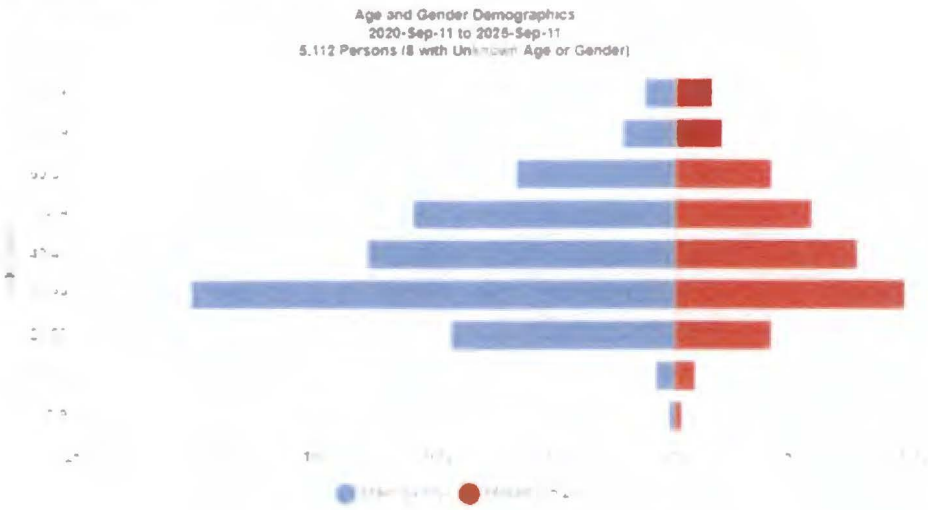

**Overdose Map**

Data filtered based on **Access Levels**: Event = **Location**



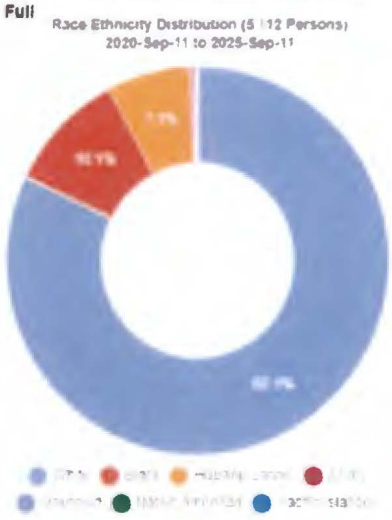
## Age and Gender Distribution

Data filtered based on **Access Levels** Event = **Location**




## Race/Ethnicity

Data filtered based on **Access Levels** Event = **Full**




## Suspected Drug Overdose Patient Demographics

Data filtered based on **Access Levels** Event = **Full**

2020-Sep-11 to 2025-Sep-11

| Age | Male | Female | White | Black | Hisp/Lat | Other |
|---|---|---|---|---|---|---|
| 0-9 | 4 | 6 | 5 | 4 | 1 | 0 |
| 10-19 | 43 | 39 | 66 | 6 | 9 | 1 |
| 20-29 | 482 | 205 | 588 | 51 | 47 | 1 |
| 30-39 | 1037 | 490 | 1283 | 132 | 105 | 5 |
| 40-49 | 658 | 389 | 838 | 106 | 96 | 5 |
| 50-59 | 561 | 293 | 686 | 103 | 60 | 5 |
| 60-69 | 340 | 205 | 441 | 74 | 29 | 1 |
| 70-79 | 114 | 98 | 167 | 30 | 12 | 3 |
| 80+ | 65 | 75 | 123 | 10 | 5 | 2 |

Showing 1 to 9 of 9 entries