



Opioid Settlement Funds Report

Total Amount of Opioid Funds Received as of the End of Fiscal Year 2025	
	Total
Funds Received	\$ 189.5 million

Total Amount of Opioid Funds Appropriated in the Prior Fiscal Year (Fiscal Year 2025)	
	Fiscal Year 2025
Funds Appropriated	\$41 million

Total Amount of Opioids Appropriated for the Next Four Fiscal Years (Fiscal Year 2026 to Fiscal Year 2029)				
	Fiscal Year 2026	Fiscal Year 2027	Fiscal Year 2028	Fiscal Year 2029
Funds Appropriated	\$48 million	\$68 million	\$68 million	\$68 million

Syringe Service Programs

Opioid Settlement Funds are provided to NYC's SSPs in order to:

1. sustain and expand hours and wraparound services at the city's existing SSPs which operate Overdose Prevention Centers (OnPoint) to reduce overdose risk among people who use drugs and offer them connections to other services and supports, including treatment (see section I). Funding for this began in FY23;
2. support infrastructure projects at SSPs to improve their physical space and quality of services across several domains, thus expanding engagement with participants (see section II). Funding for this initiative was provided in FY26.

1. Syringe Service Program Wraparound Services

Provider: OnPoint NYC, with administration via Public Health Solutions (PHS)

OnPoint NYC is a community-based nonprofit organization that offers a wide range of services to people who use drugs, experience homelessness, or engage in sex work in order to improve the quality of life for program participants. OnPoint NYC provides social services that include drop-in centers, harm-reduction services, on-site medical and mental health services, community outreach and syringe litter cleanup, and supportive services along with overdose prevention services. OnPoint NYC, through its parent organizations (New York Harm Reduction Educators and Washington Heights Corner Project), has been providing services in the Bronx and Manhattan since 1992.

Data

In fiscal year 2026, OnPoint NYC provided:

- In FY26 Q1 (July 2025-September 2025), OnPoint NYC provided 18,840 harm reduction services to 3,672 participants. Services include provision of naloxone, health education, buprenorphine prescription, rapid HCV tests, and referrals to outside organizations for care.
- In FY26 Q1 (July 2025-September 2025), OnPoint NYC provided 58,859 services addressing participants' basic needs such as respite, meals, and laundry and bathroom/shower use in their drop-in centers.
- In FY26 Q2 (October 2025-December 2025), OnPoint NYC provided 19,708 harm reduction services to 3,479 participants. Services include provision of naloxone, health education, buprenorphine prescription, rapid HCV tests, and referrals to outside organizations for care.
- In FY26 Q2 (October 2025-December 2025), OnPoint NYC provided 76,225 services addressing participants' basic needs such as respite, meals, and laundry and bathroom/shower use in their drop-in centers.
- •In FY26 Q3 (January 2026- March 2026), OnPoint NYC provided 16,789 harm reduction services to 3,350 participants. Services include provision of naloxone, health education, buprenorphine prescription, rapid HCV tests, and referrals to outside organizations for care.
- • In FY26 Q3 (January 2026- March 2026), OnPoint NYC provided 82,846 services addressing participants' basic needs such as respite, meals, laundry and bathroom/shower use in their drop-in centers.

Demographic Characteristics of Participants Receiving Harm Reduction Services at OnPoint NYC, July 2025 Through March 2026

Source: eSHARE | Extraction Date: April 29, 2026

	FY 26 July-September		FY 26 Q2 October-December		FY 26 Q3 January-March	
	Number	Percent	Number	Percent	Number	Percent
Total Participants Receiving Harm Reduction Services	3,672	100%	3,479	100%	3,350	100%
Gender identity						
Man	2,517	68.5%	2,473	71.1%	2,400	71.6%
Woman	1,078	29.4%	945	27.2%	884	26.4%
Transgender Man	~	~	~	~	7	0.2%
Transgender Woman	~	~	~	~	32	1.0%
Other Gender Identity ¹	46	1.3%	32	0.9%	27	0.8%
Race/ethnicity²						
Latino/a/x	1,916	52.2%	1,783	51.3%	1,743	52.0%
White	537	14.6%	549	15.8%	542	16.2%
Black	1,051	28.6%	988	28.4%	905	27.0%
Asian/Pacific Islander	34	0.9%	28	0.8%	42	1.3%
Some other race	104	2.8%	101	2.9%	94	2.8%
Declined	30	0.8%	30	0.9%	24	0.7%

1 Other gender identity includes gender nonconforming, non-binary, not sure/questioning.

2 For the purpose of this table, Latino/a includes person of Hispanic origin based on ancestry reported in eSHARE demographics, regardless of reported race. Black, White and Asian race categories do not include persons of Latino/a origin.

~ Suppressed to protect confidentiality due to small cell sizes.

Number of Harm Reduction Services at OnPoint NYC, July 2025 Through March 2026

Source: eSHARE | Extraction Date: March 4, 2026

	FY 26 July-September	FY 26 Q2 October-December	FY 26 Q3 January-March
	Number	Number	Number
Total Harm Reduction Services			
Basic needs ³	58,859	76,225	82,846
Identified/confidential services ⁴	11,497	12,182	10,278
Anonymous/group services ⁵	7,343	7,526	6,511

3 Includes services addressing participants’ basic needs such as respite, meals, laundry and bathroom/shower use in their drop in center

4 Identified and confidential services require a program intake and include services such as infectious diseases testing, harm reduction education, and naloxone distribution.

5 Anonymous events do not require an individual program enrollment and include services such as targeted case finding and group health education.

2. Syringe Service Program Infrastructure Investments

Providers: Bronx Movil, After Hours Project, AIDS Center of Queens County, Safe Horizon, Alliance for Positive Change, BOOM!Health, Community Health Action of Staten Island, Family Services Network of New York, Harlem United, Housing Works, OnPoint, Positive Health Project, St. Ann's Corner of Harm Reduction, VOCAL; with administration via Public Health Solutions (PHS)

Data

Domain	SSPs with projects in this domain	Examples of Projects <i>*This is not a comprehensive list of all projects across the initiative</i>
On-Site Physical Space	AIDS Center of Queens County, After Hours Project, Alliance for Positive Change, BOOM!Health, Bronx Movil, Community Health Action of Staten Island, Family Services Network of NY, Harlem United, Housing Works, OnPoint, Positive Health Project, St. Ann's Corner of Harm Reduction, Safe Horizon, VOCAL	Structural improvements such as floor renovation, lighting enhancements, storage area expansion, new furniture for drop-in space

Community Outreach and Service Enhancements	AIDS Center of Queens County, After Hours Project, Alliance for Positive Change, BOOM!Health, Bronx Movil, Community Health Action of Staten Island, Family Services Network of NY, Housing Works, Positive Health Project	New acupuncture table, new materials for off-site testing, basic needs materials for participants
Workforce Investment	AIDS Center of Queens County, After Hours Project, Alliance for Positive Change, Bronx Movil, Housing Works, St. Ann's Corner of Harm Reduction, VOCAL	Professional development and technical skills workshops and trainings for staff such as peer trainings, enhanced overdose prevention trainings, notary licensure workshop for staff
Technology and Digital Infrastructure Investment	AIDS Center of Queens County, Alliance for Positive Change, BOOM!Health, Bronx Movil, Community Health Action of Staten Island, Family Services Network of NY, Harlem United, Housing Works, OnPoint, Positive Health Project, St. Ann's Corner of Harm Reduction, VOCAL	Electronic health system upgrade, Public Address system installation, Smartphones for outreach staff
Mobile & Vehicle Infrastructure Enhancements	AIDS Center of Queens County, After Hours Project, BOOM!Health, Bronx Movil, Community Health Action of Staten Island, Family Services Network of NY, Harlem United, St. Ann's Cornder of Harm Reduction, VOCAL	Outreach van customization with testing table for HIV/Hep C/STIs, added mobile wi-fi, wrapped van with company logo

Relay

Relay, launched in June 2017, is an innovative hospital-based support system for people who have experienced a suspected nonfatal opioid overdose. Most individuals who experience an overdose are transported to an emergency department (ED), which often lack standardized protocols or staff capacity to address a patient's future overdose risk. Through Relay, Wellness Advocates with lived experience with substance use provide 24/7 on-call support to patients presenting to emergency departments following a nonfatal overdose. After providing services in the ED, Wellness Advocates continue follow-up over a three-month follow-up period. Services include overdose risk reduction education, opioid overdose rescue training, naloxone distribution, and referrals and navigation to harm reduction services, substance use disorder treatment, and other health and social services. Relay is currently operational in 16 hospitals citywide.

*Please note that OSF funds currently support 1 Relay hospital; the data below is reflective of all Relay services across hospitals in NYC.

**Please note that Relay data is provisional and subject to change each quarter.

Demographic characteristics of participants receiving Relay services, July 2025 Through March 2026

Source: eSHARE | Extraction Date: April 17, 2026

	FY26 Q1		FY26 Q2		FY26 Q3	
	Number	Percent	Number	Percent	Number	Percent
Total Participants Receiving Relay Services¹	446	100%	363	100%	302	100%
Gender identity²						
Man	323	72.4%	251	69.1%	214	70.9%
Woman	114	25.6%	90	24.8%	59	19.5%
Unknown	9	2.0%	22	6.1%	29	9.6%
Race/ethnicity²						
Black	134	30.0%	99	27.3%	75	24.8%
Latino/a	213	47.8%	159	43.8%	123	40.7%
White	72	16.1%	63	17.4%	59	19.5%
Another race(s)	10	2.2%	9	2.5%	9	3.0%
Unknown	17	3.8%	33	9.1%	36	11.9%

1 Individuals with more than one Relay encounter may be counted more than once.

2 “Man” and “Woman” includes both cisgender and transgender men and women, respectively.

3 Another race(s) includes Asian, Middle Eastern or North African, American Indian or Alaska Native, Multiracial, or any other self-described race/ethnicity. White, Black, and “Another race(s)” categories exclude Latino/a ethnicity. Latino/a includes Hispanic or Latino/a of any race.

Expansion of Recovery Support Services

Funds will be used to expand recovery support for people with current or previous substance use disorders, including peer workforce development, outreach and engagement, community development and other programmatic expansions.

*List below includes awardees and corresponding program description

Provider	Program Description
Fortune Society Recovery Center	The Fortune Society Recovery Center will hire and train Certified Recovery Peer Advocates. Through engagement and outreach, they will connect with participants, complete community benefit projects each year and give out items such as sleeping bags and conduct coat drives. The Recovery Center will identify and enter into a memorandum of understanding with 4 community-based organizations that treat people who use drugs (PWUD) to provide training opportunities within their program for certified recovery peer advocates.

<p>Exponents Recovery Center</p>	<p>The Exponents Recovery Center plans to utilize the funding for important initiatives in Peer Workforce Development. Their goals include offering full scholarships to individuals eager to become certified recovery coaches; developing internships for Certified Recovery Peer Advocates (CRPAs) at Exponents, which will provide stipends. In terms of Outreach & Engagement, Exponents Recovery Center aims to connect with an additional participants in recovery services each year during the contract, increasing their annual engagement of participants served. The Recovery Center will also be funding a vocational component to support workforce efforts including offering GED classes, support for peer workforce, assistance with resumes and employment preparedness.</p>
<p>CHASI Recovery Center (RC)</p>	<p>CHASI Recovery Center (RC) plans to allocate funding to facilitate two main initiatives: Peer Workforce Development which entails hiring and training Certified Recovery Peer Advocates (CRPA), along with a Program Assistant and an Outreach & Engagement Specialist. They will also introduce three recertification training programs: Recovery Coaching & Professionalism, Recovery Coaching in the Emergency Department, and Spirituality & Recovery Coaching. These programs will be integrated into the center's professional development offerings. The RC will provide scholarships each year to cover the fees associated with CRPA-P (Provisional) and CRPA certification, which includes training and exam costs. The second initiative will be for Outreach & Engagement and includes expanding services at the Next Step Resource and Recovery Center each year throughout the duration of the contract. Lastly, they will implement community presentations to promote the resources available at Next Step.</p>
<p>Let's Talk Safety Recovery Center</p>	<p>Let's Talk Safety Recovery Center will utilize these funds to increase outreach and street-based engagement by certified recovery peers through use of a sprinter van mobile unit. Additional use of the funding will be to train volunteers in community outreach and material distribution of naloxone kits, flyers, and resource guides and also low barrier care items such as hygiene kits, socks, sweatsuits, blankets and nourishment (water, nutrition bars, sandwiches). The funding will also be used to provide on the spot harm reduction training, conduct recovery capital screening, refer and connect people to shelter, medical, substance use treatment, and recovery support.</p>
<p>Samaritan Daytop Village Recovery Center (Bronx)</p>	<p>Samaritan Daytop Village Recovery Center (Bronx) will utilize this funding to hire certified recovery peer advocates, vocational staff, a social media consultant and a driver to support the expansion of their internship program which includes community outreach and overdose prevention training, provision of scholarships and an annual retreat for staff bonding. These funds will also be used to expand outreach and engagement in the Bronx communities via use of mobile outreach team, peers in Bronx Treatment Court and HOPE Diversion Program-the funding will also expand operating hours and provide bi-weekly yoga and Tai Chi/Qi Gong classes at the Recovery Center.</p>

Samaritan Daytop Village Recovery Center (Queens)	Samaritan Daytop Village Recovery Center (Queens) will utilize this funding to hire certified recovery peer advocates, vocational staff, a social media consultant and a driver to support the expansion of their internship program which includes community outreach and overdose prevention training, provision of scholarships and an annual retreat for staff bonding. These funds will also be used to expand outreach and engagement in the Queens communities via use of mobile outreach team, peers in Queens Treatment Court and HOPE Diversion Program-the funding will also expand operating hours and provide bi-weekly yoga and Tai Chi/Qi Gong classes at the Recovery Center.
Odyssey House Recovery Center	Odyssey House Recovery Center plans to utilize this funding to enhance peer workforce development by hiring essential staff and establishing a mentorship program. The funding will also facilitate outreach and engagement efforts through a mobile unit, which will be deployed to hard-to-reach and underserved communities across community events. The objective is to increase the number of participants accessing recovery services. Additionally, program is expanding hours with the addition of work readiness and media literacy groups.
Phoenix House Recovery Center	Phoenix House Recovery Center plans to utilize these funds to enhance a Peer Professional Workforce Development program. Their goal is to hire key staff members and increase the number of certified recovery peers. They will ensure that all requirements for facilitator training are met and aim to host peer-to-peer wellness events each year. In addition, these funds will allow for the purchase of a large van, which will be essential for developing a Neighborhood Outreach and Wellness mobile unit. This mobile unit will support a Quick Response Team comprised of trusted community members to address incidents of public drug use and overdoses. Their outreach efforts target diverse communities in Brooklyn, and they anticipate enrolling individuals for recovery coaching or referral for holistic wellness programs. They will also offer incentives to encourage participation in these vital programs.

Expansion of Access to and Engagement in Treatment

Funds will be used by substance use disorder treatment providers for increasing access to buprenorphine and methadone, outreach and engagement, and care navigation services.

*List below includes awardees, corresponding program description, and total number of participants

Provider	Program Description	Total Participants <i>*Defined as total participants receiving any care/services from the funded program</i>
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<p>Project Renewal Inc. Recovery Center</p>	<p>Project Renewal Inc is a NYS Office of Addiction Services and Supports (OASAS)-certified, Part 822-licensed program. The Recovery Center (TRC) will use this funding to improve same-day access to medications for opioid use disorder (MOUD) in priority neighborhoods. The initiative will include outreach and targeted in-community services through the Shelter In-Reach program, in collaboration with the NYC Department of Homeless Services and NYS OASAS. Outpatient services will be provided onsite for high-risk clients experiencing homelessness in shelters across The Bronx, Washington Heights, and Brooklyn—many of whom are linked to these neighborhoods. TRC will also strengthen partnerships with local service providers, like St. Ann’s Corner of Harm Reduction and Project Renewal’s Support and Connection Center, to enhance service delivery and increase access to same-day MOUD and other 822 services for clients through these programs.</p>	<p>Data unavailable</p>
<p>Elmcor Youth and Adults</p>	<p>Elmcor Youths and Adult Inc. is a NYS OASAS-certified Part 822 program that offers a range of services including assessment, individual and group counseling, medication for addiction treatment (MAT) with buprenorphine or naltrexone, toxicology testing, vocational counseling, relapse prevention, anger management, parenting workshops, health workshops, family reunification groups, peer support, naloxone dispensing and training, as well as telehealth services. With the allocation of these funds, Elmcor aims to improve access and engagement in low-threshold care by implementing several initiatives. This includes revising existing protocols to facilitate same-day treatment and admission, along with same-day medication administration. The program intends to extend its operating hours and enhance outreach and engagement efforts in the community through a mobile unit. Additionally, Elmcor plans to incorporate methadone induction into its range of services supported by these funds.</p>	<p>83</p>
<p>Interborough Development & Consultation Center, Inc.</p>	<p>Interborough Development & Consultation Center, Inc. (IDCC) is an outpatient Certified Community Behavioral Health Center (CCBHC) located in Brooklyn, NY. They focus on enhancing access to Medications for Opioid Use Disorder (MOUD) and harm reduction strategies that save lives and support sustainable recovery. The CCHBC program integrates mental health and substance use care, ensuring comprehensive support for individuals with co-occurring substance use disorders (SUD) and mental illnesses, particularly those at high risk of overdose. This funding supports pioneering low-threshold MOUD access by enhancing mobile treatment teams and telehealth services to assist those facing barriers to in-person care. This funding further addresses significant treatment gaps by providing immediate, flexible access to buprenorphine and essential support services. They will also enhance same-day treatment capacity by deploying a community outreach team consisting of Certified Recovery Peer Advocates (CRPAs) and a CASAC/Program Coordinator, focused on delivering targeted services in East New York, one of the city’s neighborhoods with high overdose mortality rates.</p>	<p>576</p>

<p>Sun River Health Inc.</p>	<p>Sun River Health operates an OASAS-certified Part 822 outpatient program in Brooklyn, New York. The organization has effectively woven Medications for Opioid Use Disorder (MOUD) treatment into its Part 822 Program. With new funding, Sun River Health aims to expand its capacity for MOUD prescribers and social workers at the Alpha School Part 822 Program, strategically located in several high-priority neighborhoods in East New York. This increase in clinical staffing will enable the program to serve a significantly larger panel of MOUD patients, welcoming new individuals facing homelessness, those involved with the criminal justice system, and those who have recently experienced non-fatal overdoses. Additionally, the project team will focus on strengthening partnerships with local homeless shelters, hospital emergency departments, and criminal justice referral sources. A dedicated peer will also conduct community outreach to connect with individuals from priority populations.</p>	<p>25</p>
<p>VIP Community Services</p>	<p>VIP Community Services Inc. (VIP) is a Certified Community Behavioral Health Center (CCHBC) located in New York City. With the allocation of these funds, VIP aims to expand the weekly hours of its prescribing providers. The program will implement flexible scheduling to effectively determine treatment times and peer support, ensuring that services remain consistent. Peers will collaborate with harm reduction staff on community outreach, targeting potential patients who are open to starting buprenorphine therapy. Leveraging their community networks, peers will help pinpoint areas with high opioid use that currently lack recovery support programs. VIP will also assess its current methods for distributing Medication for Addiction Treatment (MAT) to ensure that buprenorphine is accessible beyond the CCBHC setting and through telehealth options. The organization will continue to engage in discussions aimed at creating streamlined pathways for patients to obtain buprenorphine.</p>	<p>62</p>
<p>Odyssey House-Bronx</p>	<p>Odyssey House-Bronx is a NYS OASAS certified outpatient treatment program focused on comprehensive, person-centered care for those with substance use disorders, especially opioid use disorders (OUD). With new funding, the program aims to enhance access to Medications for Opioid Use Disorder (MOUD) by streamlining the intake and engagement process, reducing drop-off rates, and encouraging same-day access. They plan to target underserved populations, including those with housing instability and individuals recently released from institutions, by providing walk-in and outreach services. The program will also expand harm reduction services, providing access to overdose prevention tools and education. Strategies include enhancing engagement among traditionally underserved groups, supporting individualized recovery pathways, and increasing service hours and access points to maintain care continuity. The program plans to improve MOUD access for those unable to attend clinic-based care, using mobile, telehealth, and community-based models. Strengthening collaboration with shelters, emergency departments, and correctional facilities will ensure ongoing support, while reducing transportation, stigma, and scheduling barriers through diverse treatment venues.</p>	<p>290</p>
<p>Greenwich House Inc.,</p>	<p>Greenwich House (GH) is a NYS OASAS-certified Opioid Treatment Program located in NYC, providing comprehensive outpatient care for individuals facing opioid use disorder. With the new funding, GH aims to strengthen collaborations with local hospitals, detox programs, and various agencies to enhance the referral process, ensuring seamless enrollment and offer same-day treatment options. The program plans to ramp up outreach initiatives, which include distributing harm reduction supplies, providing Narcan along with training in local high schools and businesses, and increasing visibility in parks, libraries, and key areas where individuals experiencing homelessness gather. This approach will help build trust between our outreach Community Recovery Peer Advocates (CRPAs) and the community.</p>	<p>1,015</p>

Center for Comprehensive Health Practice	The Center for Comprehensive Health Practice (CCHP) is a NYS OASAS-certified Opioid Treatment Program located in New York City, specializing in comprehensive outpatient treatment for individuals with opioid use disorder (OUD). With the new funding, the program aims to enhance participant intake and enrollment by providing same-day treatment through the recruitment of staff dedicated to intake processes; increase prescriber hours and by expanding operational hours of the program. Additionally, these funds will facilitate ongoing client engagement, strengthen community partnerships, and support outreach initiatives. The funding will also support enhance community awareness of CCHP services, increase the number of staff trained in naloxone administration, and promote harm reduction strategies among community members. This will involve peer staff engaging with individuals with OUD in communal spaces where they gather.	348
START Care Treatment	Startcare, Inc. is a NYS OASAS-certified Opioid Treatment Program dedicated to providing evidence-based, person-centered integrated care. Their services include medications for opioid use disorder (MOUD), harm reduction strategies, treatments for HIV and HCV, psychiatric support, behavioral interventions, as well as health and social care services, alongside vocational support. With this funding, they plan to enhance their low threshold care services through a series of activities designed to expand access to services. The program goals include increasing the enrollment of participants in need of same-day treatment, initiating MOUD on the same day, and boosting the number of individuals engaging with harm reduction services and training programs. To further outreach and collaboration, the program will host multiple events within community settings to enhance the visibility of Startcare's services. Additionally, they will establish memorandums of understanding (MOUs) with community partners for bridge services and with primary care providers to facilitate linkage services.	Data unavailable

Staten Island Initiative

Purpose and update: Improve and expand substance use service provision on Staten Island across prevention, harm reduction, treatment, and recovery services.

Note: Initial data reporting for contracted Staten Island OSF programs is still being finalized, so program summaries are listed below. Subsequent reporting will include data once it has been received

United Activities Unlimited (UAU) - Prevention Program

Program description: United Activities Unlimited, Inc (UAU) utilizes Prevention Specialists to provide curriculum implementation, Social Emotional Learning (SEL) Coaching, and prevention counseling services. To effectuate a dramatic increase in the number of students served, UAU is hiring two new full-time Prevention Specialists and two part-time Prevention Specialists. These new Prevention Specialists will also be able to bridge the school-day culture with the afterschool SEL culture to create a universal approach to prevention, SEL, and behavioral approaches at local schools. This expands prevention strategies and evidence-based practices to more youth in these priority neighborhoods. The public schools and community centers UAU currently serves are located within the priority neighborhoods experiencing high rates of overdose on Staten Island.

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
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Prevention services	Number of participants that completed lessons	185	194	298
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* corrected Q1 figure

Camelot - OASAS Certified Part 822 Program

Program description: Camelot of Staten Island’s (“Camelot”) works to improve the lives of individuals with substance use disorder (SUD) by providing them with the skills necessary to achieve and maintain recovery as they see acceptable. This goal will be accomplished by reducing the alcohol and substance use for patients actively using substances, providing clinical support to those who have begun to move toward goals related to their specific stages of recovery, and addressing the emotional and behavioral issues of individuals who have been affected by the substance use of someone close to them. As part of service expansion efforts, Camelot is introducing a new service focused on providing comprehensive aftercare support for individuals transitioning from treatment to recovery. This service includes ongoing counseling, case management, peer support, and life skills training to help individuals maintain treatment goals, prevent relapse, and achieve long-term recovery goals.

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
SUD Treatment Services	Number of participants receiving all aggregate treatment modalities outlined in this service domain	*No data to report from Q1	446	563
Recovery/Wraparound Services	Number of participants receiving Peer Support, Navigation Assistance, Vocational Support, and Housing Support	*No data to report from Q1	29	43

"Richmond University Medical Center (RUMC) - OASAS Certified Part 822 Program

Program description: Richmond University Medical Center (RUMC) has developed a multifaceted approach to increase provision of services, utilizing its experience and success in the areas of enhanced treatment, Certified Recovery Peer Advocate (CRPA) outreach and engagement, harm reduction, and community engagement. Staff will promote the health and well-being of people who use drugs by preventing overdose deaths, reducing disease transmission, and providing low-threshold access to health and mental health care, substance use treatment, and social services; as well as providing access to harm reduction and education. Additional aims include providing effective, person-centered, and trauma-informed substance use disorder treatment, including medications for opioid use disorder; providing comprehensive vocational, social, and behavioral health supports for people in substance use recovery; and providing linkages to additional care and support."

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
Harm reduction services	Number of participants receiving harm reduction services (e.g. supplies outlined in Harm Reduction services domain, provision of counseling, care coordination, referrals, or other services)	1,287	2,166	Data unavailable

Recovery/Wraparound services	Number of participants served via the services outlined in the recovery support/wraparound services domain (Yoga/meditation)	101	253	Data unavailable
SUD Treatment Services	Number of participants in MAT client roster	103	108	Data unavailable

"Young Men's Christian Association (YMCA) - Part 822 OASAS Certified Program

Program description: Young Men's Christian Association of Greater New York ("The Y") will expand the breadth and depth of our services across domains. The program aims to provide, at program locations and in the community, where indicated: 1) more intensive and specialized support from clinicians as well as more individual services; 2) increased mental health support with a focus on in-person services; 3) increased access to Medication for Addiction Treatment (MAT) with a focus on low-threshold MAT; 4) more access to supplies to reduce the risk of overdose for individuals who are actively using substances; 5) enhanced peer support services; 6) support accessing pro-social opportunities; and 7) vocational/educational support. Services will be provided to all populations; however, the program will attempt to reach out to and serve priority populations including identified priority neighborhoods, individuals involved in the legal system, LGBTQ+ youth and individuals who use opioids."

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
SUD Treatment Services	Number of participants receiving treatment services	261	65	66
Harm reduction services	Number of people trained to use naloxone	17	5	4
Recovery/Wraparound services	Number of participants receiving recovery/wraparound services	32	50	38

*corrected Q1 figure

Community Health Action Of Staten Island, Inc. (CHASI) - Recovery Center

Program description: Community Health Action Of Staten Island, Inc. (CHASI) is augmenting the Peer Training Institute with three new/expanded services: 1) expanded training and certification, 2) workforce development and placement assistance, and 3) housing advocacy. Priority populations include people who use substances; people with current or past substance use disorders; people at risk of opioid overdose; families impacted by overdose death and substance use disorders who live in Staten Island. Specific priority populations will include people who use opioids, people with prior involvement or history in the criminal legal system (e.g. prior arrest or incarceration), and residents of Port Richmond and Stapleton-St. George. "

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
Recovery/Wraparound services	Number of participants receiving group career coaching	51	52	46
Recovery/Wraparound services	Number of participants receiving individual career coaching	126	65	50

Recovery/Wraparound services	Number of graduates of new training tracks placed in internships	5	0	6
Recovery/Wraparound services	Number of participants enrolled in individual housing assistance and educational workshop services	24	7	24
Recovery/Wraparound services	Number of participants enrolled in the Administrative/Office Training Track	14	5	20
Recovery/Wraparound services	Number of participants enrolled in the janitorial training track	2	18	7

Staten Island Performing Provider System (SI PPS)

Program description: Staten Island Performing Provider System (SI PPS) is expanding its Hotspotting the Opioid Epidemic Program, an algorithm for “hotspotting” high-risk populations. The program works to reduce overdose deaths and unnecessary hospitalizations, promoting harm reduction, and increasing retention in treatment and recovery services. The program identifies those most likely to become victims of an overdose event or death and seeks to engage them with a preventative program. In addition to identification, the program features shared use of a care coordination platform to reach potential participants, coordinate care, document referrals, and monitor progress and results. This subcontract specifically supports SI PPS’ oversight, technology, data analysis, and coordination activities—with a focus on harm reduction and recovery services/wraparound support."

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
Harm reduction services	Number of hotspotting partner orgs successfully using the channels platform	9	N/A	N/A
Harm reduction services	Number of individuals receiving harm reduction services including naloxone kits and other opioid reversal medications, xylazine and fentanyl test strips, sterile syringes and access to syringe exchange programs and infectious disease testing and programs	172	377	396
Recovery/Wraparound services	Number of individuals receiving wraparound/recovery services, including care plan initiation, peer coaching, certified peer advocate engagement, PCP visits, health-relates social needs (HRSN) assessments and HSRN referrals	117	392	435

The Staten Island Partnership for Community Wellness, Inc (SIPCW)

Program description: The Staten Island Partnership for Community Wellness, Inc. (SIPCW) aims to enhance the TYSA coalition’s (formerly called Tackling Youth Substance Abuse) prevention and harm reduction strategies to respond to Staten Island’s growing opioid epidemic through the distribution of harm reduction materials and educational presentations/resources on opioids. This subcontract is growing TYSA’s coalition membership and expertise, launching awareness and outreach campaigns, hiring dedicated staff to deliver new outreach and harm reduction interventions at various community-based locations, and investing in public health vending machines. Focused interventions are primarily

concentrated in the priority United Hospital Fund (UHF) neighborhoods of Community District 1 (CD1), with priority being given to the neighborhoods of Port Richmond and Stapleton/St George. Targeting the interventions in CD1 ensures that the interventions reach people who are BIPOC, LGBTQ+ and involved with the justice system."

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
Prevention services	Number of individuals engaged at community tabling events	435	650	614
Harm reduction services	Number of community members reached by HRC/POCs	1,614	1,332	1,233

Staten Island University Hospital (SIUH)

Program description: Staten Island University Hospital (SIUH) concentrates initiatives in geographic areas where there are higher rates of both fatal and non-fatal opioid overdoses on Staten Island. Specifically, SIUH expands and provides Harm Reduction Education programs and tabling sessions at community events on Staten Island. These events focus on delivering community education regarding harm reduction strategies and providing resources such as Narcan, Xylazine, and Fentanyl test strips. SIUH collaborates with community partners and the Borough President's Office to participate in diverse wellness events, offering education and supplies to individuals seeking information. Furthermore, SIUH provides training and builds skills to engage community members in understanding the importance of harm reduction and the necessity of utilizing safe supplies."

Domain	Indicator	Reported Number (Q1)	Reported Number (Q2)	Reported Number (Q3)
Prevention services	Number of people who received SBIRT (Screening, Brief Intervention and Referral to Treatment) Screenings with successful connection to CATCH services	68	121	149
Harm reduction services	Number of people who accessed overdose prevention training and education	1,793	750	2,915
Harm reduction services	Number of naloxone kits dispensed	1,793	750	2,915
Harm reduction services	Number of fentanyl test strips dispensed	3,586	1,500	5,830
Harm reduction services	Number of xylazine test strips distributed	3,586	1,500	5,830

DOHMH Updates

Updates on other programs being implemented using settlement funds as of the FY27 Executive Budget:

Program	Description
Outreach and Syringe Litter Teams	Outreach and Syringe Litter (OSL) teams led by Syringe Service Programs (SSPs) respond to community concerns of public drug use and syringe litter. OSL teams collect and safely dispose of ground syringes and syringes from kiosks, initiate outreach and engagement including providing syringe disposal education, distribute naloxone kits, and refer individuals to additional care and services. Through new investment, all SSPs will be funded to operate OSL teams and all teams will have one clinician to enhance their ability to connect people to treatment in real time. This program expansion is funded with opioid settlement funding beginning in FY27. Programmatic data will be provided in future reports.
Community Syringe Redemption Program	The Community Syringe Redemption Program (CSRP) is designed to reduce syringe litter and serve as a low-threshold engagement opportunity for people who use drugs to be connected to services. This program helps address syringe litter by providing a financial incentive for bringing used syringes to the program. In addition to incentivizing the safe disposal of syringes, the CSRP refers to a variety of additional care services in NYC, including SSPs, and distributes naloxone. This program has been operating as a pilot program since March 2025. Given the successful rollout of the pilot, this program will continue and is funded with opioid settlement funding beginning in FY27. Programmatic data will be provided in future reports.

Forensic Toxicology

The NYC Office of Chief Medical Examiner Department of Forensic Toxicology provides Forensic Toxicology testing covering all five boroughs of the City of New York and serving a population of approximately 8.6 million people. The primary mission of the Laboratory is postmortem analysis to determine the absence or presence of drugs and their metabolites or other toxic substances in human fluids and tissues, and to evaluate their role as a determinant or contributory factor in the cause and manner of death. The Laboratory also carries out analysis of cases submitted by law enforcement agencies with the purpose of determining the absence or presence of ethanol and other drugs and to evaluate their role in modifying human performance or behavior (primarily as related to the operation of motor vehicles and for victims of alleged drug facilitated crimes). The NYC OCME Forensic Toxicology Laboratory has experienced an unprecedented increase in opioid positive cases. Not only has the number of cases increased but the opioids detected are continually changing presenting a significant challenge to the Laboratory.

All of the OTPS opioid funds are spent on a vendor "National Medical Services," who assists OCME Toxicology Unit on Toxicology testing and reduces current testing backlog. We provide our services to the entire City of New York irrespective of zipcode, gender, ethnicity or languages spoken. There are not metrics that would be measured by a Forensic Toxicology Laboratory. The work we do is dictated by who dies, who is arrested or who is a victim of drug facilitated crime. The testing service we offer is not predicated by any of the metrics requested. The opioid funding has and continues to allow us to develop and validate new testing methodologies so we can provide a state-of-the-art service to the City of New York.

Drug Intelligence and Intervention Group

The Drug Intelligence and Intervention Group (DIIG) at the NYC Office of Chief Medical Examiner (OCME) is involved in multiple local efforts related to overdose surveillance, prevention, and response. During fiscal year 2023, the DIIG relaunched a pilot with opioid settlement funds to serve New Yorkers who had lost a loved one to drug overdose.

This initiative is intended to reach highly vulnerable New Yorkers, as research suggests that individuals who witness overdoses are at higher risk of overdose than the general population.^{1,2,3} Overdose bereaved individuals are also at higher risk of depression, post-traumatic stress disorder, and prolonged grief than other bereaved populations.⁴ Oftentimes, individuals who have lost a loved one to overdose have intense feelings of shame and isolation due to the stigma associated with drug use.^{5,6}

DIIG social workers check in with overdose bereaved New Yorkers multiple times in the weeks and months after their loss, connecting survivors with long- and short-term mental health care, emergency financial support services, harm reduction and substance use treatment, housing support programs, and immigration services. Additionally, the Family Support Team helps families navigate common administrative issues related to the sudden and unexpected passing of a loved one, including benefits transfers and applications, financing of funeral arrangements, and retrieval of the decedent's property. The OCME takes a person-centered approach to care, meeting the needs identified by the client as the most urgent and important, whether they are material or socioemotional. Whenever possible, any referrals to other agencies or social service providers are done using a warm handoff approach.

Data: New Clients Only (Between July 1st, 2025 through March 31st, 2026)

Gender	Q1 (Jul 1-Sep 30)		Q2 (Oct 1-Dec 31)		Q3 (Jan 1-Mar 31)	
	Individuals contacted	Individuals successfully engaged	Individuals contacted	Individuals successfully engaged	Individuals contacted	Individuals successfully engaged
Male	182	129	183	110	150	108
Female	301	221	297	209	252	195
Other/Unknown	4	1	2	2	0	0
Total	487	351	482	321	402	303

Total FY26 YTD

¹ Bohnert AS, Tracy M, Galea S. Characteristics of drug users who witness many overdoses: implications for overdose prevention. *Drug Alcohol Depend.* 2012;120(1-3):168-73. doi:[10.1016/j.drugalcdep.2011.07.018](https://doi.org/10.1016/j.drugalcdep.2011.07.018)

² Silva K, Schrage SM, Kecojevic A, Lankenau SE. Factors associated with history of non-fatal overdose among young nonmedical users of prescription drugs. *Drug Alcohol Depend.* 2013;128(1-2):104-10. doi:[10.1016/j.drugalcdep.2012.08.014](https://doi.org/10.1016/j.drugalcdep.2012.08.014)

³ Havens JR, Oser CB, Knudsen HK, et al. Individual and network factors associated with non-fatal overdose among rural Appalachian drug users. *Drug Alcohol Depend.* 2011;115(1-2):107-12. doi:[10.1016/j.drugalcdep.2010.11.003](https://doi.org/10.1016/j.drugalcdep.2010.11.003)

⁴ Bottomley JS, Feigelman WT, Rheingold AA. Exploring the mental health correlates of overdose loss. *Stress Health.* 2022;38(2):350-363. doi:[10.1002/smi.3092](https://doi.org/10.1002/smi.3092)

⁵ Feigelman W, Feigelman B, Range LM. Grief and healing trajectories of drug-death-bereaved parents. 2020;80(4):629-647. doi:[10.1177/0030222818754669](https://doi.org/10.1177/0030222818754669)

⁶ Feigelman W, Jordan JR, Gorman BS. Parental grief after a child's drug death compared to other death causes: Investigating a greatly neglected bereavement population. 2011;63(4):291-316. doi:[10.2190/OM.63.4.a](https://doi.org/10.2190/OM.63.4.a)

Gender	Individuals Contacted	Individuals Successfully Engaged
Male	515	347
Female	850	625
Other	6	3
Total	1371	975

Note: The DIIG does not currently collect ZIP code, ethnicity, or languages spoken data from clients.

Addiction Response Team

The Addiction Response Team (ART) is a multidisciplinary pilot program at three NYC H+H acute care facilities: Jacobi, Harlem, and Queens. ART expands the existing SUD acute care service team (ED leads) to include addiction-trained medical providers and community health workers and extends service delivery beyond the emergency department to inpatient units and SUD walk-in and bridge clinics. Under the direction of the ART associate medical director, the team provides comprehensive SUD treatment care, including provision of MAT, SBIRT, peer support, care coordination, post-discharge bridging services, and harm reduction.

Services include:

- Expert evaluation, diagnosis, and treatment of patients with SUD (including alcohol use disorder and OUD) within any acute care service area
- Withdrawal management support
- MAT
- Individual counseling
- Peer support
- Referral to SUD (including OUD) treatment as part of the discharge plan
- Care coordination and navigation to care
- Naloxone education and kit distribution (offered to all acute care patients, including those who have experienced a nonfatal opioid overdose or have an OUD)
- Fentanyl and xylazine test strip distribution (offered to people who have experienced a nonfatal opioid overdose or have an OUD)
- SUD bridging, including for patients who have experienced a nonfatal opioid overdose

ART Program Planning Accomplishments: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

- ART CHW at Harlem continues to demonstrate strong, consistent patient engagement reflecting a sustained commitment to meaningful community-centered care.
- ART presence at Jacobi is strong with dedicated SW and MD who actively seek to connect patients from the IP/ED to long-term substance use care.
- Despite operating without a dedicated ART provider, Harlem continues to sustain a strong and effective outreach and referral program.
- New dashboards are currently being developed in collaboration with the data team, designed to deliver enhanced analysis and capture the work ART is providing.

- Revised reporting methodology to reflect real care delivery, addiction services are delivered by staff beyond budgeted personnel (e.g., residents, additional prescribers).

Data: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Location	Fiscal Year 2026, Q3
	Number
Outside of NYC (five boroughs)	21
NYC (five boroughs)	617
Bronx	347
Brooklyn	29
Manhattan	152
Queens	86
Staten Island	3
Unknown	0
Grand Total	638

Ethnicity	Fiscal Year 2026, Third Quarter	
	Number	Percentage of Total
Not Hispanic or Latino	406	64%
Hispanic or Latino	231	36%
Unknown	1	0%
Grand Total	638	100%

Sex	Fiscal Year 2026, Third Quarter	
	Number	Percentage of Total
Male	456	71%
Female	182	29%
Unknown	-	0%
Grand Total	638	100%

Emergency Department Leads

Since 2017, NYC Health + Hospitals (H+H) has been provided funding to engage with medical emergency department (ED) patients who may be at risk for a substance use disorder (SUD), including opioid use disorder (OUD). ED leads teams consist of social workers or licensed counselors and certified peer counselors in all 11 NYC H+H acute care facility emergency departments who provide screening, brief intervention and referral to treatment (SBIRT), peer support, and counseling services, including to people who have co-occurring mental health conditions or are experiencing homelessness. In 2022, NYC H+H was provided additional funding via New York State (NYS) opioid settlement funds to expand ED leads coverage to 24/7 (in progress) across all facilities. This allows ED leads to increase patient

engagement, as well as provide coverage in NYC H+H hospital service areas outside of the medical ED, as per service need. This “roving” model allows for further continuity of care from hospital admission to discharge and beyond. With regards to combatting the opioid epidemic, ED leads play an integral role in supporting NYC H+H medical providers with medication assisted treatment (MAT) care coordination. Once initiated into MAT, ED leads assist in connecting patients to long-term MAT services post-discharge. In addition, ED leads provides patients with harm reduction resources and connections to community-based services and supports, as well as supporting a warm hand off to a treatment or recovery center’s transportation services.

Services include:

- SBIRT for SUD (including OUD) treatment post-discharge
- Individual counseling
- Peer support
- Naloxone education and kit distribution (offered to all ED leads patients, including those who have experienced a nonfatal opioid overdose or have an OUD)
- Fentanyl test strip and xylazine test strip distribution (offered to patients who have experienced a nonfatal opioid overdose or have an OUD)

ED Leads Program Planning Accomplishments: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

- A systemwide survey regarding naloxone workflows was conducted confirming alignment with best practices.
- ED Leads was featured in a presentation to community-based organizations showcasing programming available across the system to support individuals experiencing homelessness.
- An assessment conducted by Central Office highlighted strengths across the 11 facility ED Leads teams, such as collaboration with the inpatient consult team and post-discharge follow-up workflows.

Data: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Location	Fiscal Year 2026, Q3
	Number
Outside of NYC (five boroughs)	199
NYC (five boroughs)	7828
Bronx	2481
Brooklyn	1948
Manhattan	1919
Queens	1427
Staten Island	53
Unknown	4
Grand Total	8,031

Ethnicity	Fiscal Year 2026, Q3
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	Number	Percentage of Total
Not Hispanic or Latino	4,773	59%
Hispanic or Latino	3,206	40%
Unknown	52	1%
Grand Total	8,031	100%

Sex	Fiscal Year 2026, Q3	
	Number	Percentage of Total
Male	6,196	77%
Female	1,831	23%
Unknown	4	0%
Grand Total	8,031	100%

Obstetrics Addiction Counselors

This initiative supports one dedicated obstetrics addiction counselor at each of the 11 NYC H+H acute care facilities to prioritize perinatal patients experiencing SUD. Working as part of the ART, the obstetrics addiction counselor will support perinatal patients with SUD in birthing units, emergency departments, inpatient units, and bridging outpatient clinics and improve linkages to ongoing addiction care.

Services include:

- Referral to SUD (including OUD) treatment as part of the discharge plan
- Care coordination and navigation to care
- Screening, identification, and assessment of patient needs for SUD support
- Ongoing support, counseling, and connection to internal and external SUD resources for pregnant and postpartum patients and families
- Longitudinal perinatal support, counseling, and linkage to addiction services
- Collaboration with SUD team members, as well as local behavioral health, social work, medical, nursing, and other care team staff
- Enhancement of the care team’s education and knowledge around topics of SUD and available supports
- Naloxone education and kit distribution
- Fentanyl and xylazine test strip distribution

Obstetrics Addiction Counselor Program Planning Accomplishments: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Progress to date:[†]

- SAMHSA-validated 5P screening tool has been built in Epic and is on track for go-live on May 20th.

- Nurse Educator Training course has been fully developed and approved. It is positioned for successful implementation at the beginning of next quarter prior to mid-quarter screening tool launch.
- Reported encounters reflect total ED/IP engagement and are not limited strictly to perinatal encounters as OB AC workflows are still in ramp up in preparation for deployment of 5P tool; previous quarters counted each admission vs. each encounter.

Data: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Location	Fiscal Year 2026, Q3
	Number
Outside of NYC (five boroughs)	17
NYC (five boroughs)	363
Bronx	181
Brooklyn	46
Manhattan	122
Queens	12
Staten Island	2
Unknown	0
Grand Total	380

Ethnicity	Fiscal Year 2026, Q3	
	Number	Percentage of Total
Not Hispanic or Latino	258	68%
Hispanic or Latino	118	31%
Unknown	4	1%
Grand Total	380	100%

Sex	Fiscal Year 2026, Q3	
	Number	Percentage of Total
Male	243	64%
Female	137	36%
Unknown	-	0%
Grand Total	380	100%

Street Health Outreach and Wellness Mobile Harm Reduction

NYC H+H’s Street Health Outreach and Wellness (SHOW) program utilizes mobile units to provide health screenings, vaccinations, wound care, basic material necessities such as socks and bottled water, mental health and recovery support service referrals, and harm reduction services to New

Yorkers who are unsheltered. A further goal of the program is to connect patients to NYC H+H facility-based Primary Care Safety-Net clinics, where they can receive ongoing medical care, including primary and preventive care and treatment for physical, behavioral, or mental health needs. NYC H+H is utilizing opioid settlement funding to create Mobile Harm Reduction roving teams consisting of a social worker, an addiction counselor, and a peer recovery counselor. With a focus on MAT and building patient trust, the goal of the program is to offer low-barrier health care and meet patients who are unsheltered where they are at.

Services include:

- SUD screening, brief intervention, and referral to treatment (SBIRT)
- Peer recovery counselor support
- Linkage to NYC H+H, community SUD, or mental health treatment
- Support NYC H+H staff with patients experiencing co-occurring SUD or other mental health disorders and homelessness
- Naloxone, fentanyl, and xylazine education and kit and test strip distribution

Data: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Location	Zip Code	Launch Date	Quarter	Encounters
Bellevue	10002	1/1/2023	FY26 Q1 (Jul – Sept 2025)	1,076
			FY26 Q2 (Oct – Dec 2025) ¹	963
			FY26 Q3 (Jan – Mar 2026)	1,043
			FY26 Q4 (Apr – Jun 2026)	
			FY26 Q1-Q4 (Jul 2025 - Jun 2026)	3,082
Woodhull	11221	3/23/2023	FY26 Q1 (Jul – Sept 2025)	712
			FY26 Q2 (Oct – Dec 2025)	387
			FY26 Q3 (Jan – Mar 2026)	246
			FY26 Q4 (Apr – Jun 2026)	
			FY26 Q1-Q4 (Jul 2025 - Jun 2026)	1,345
Elmhurst	11373	5/23/2023	FY26 Q1 (Jul – Sept 2025)	618
			FY26 Q2 (Oct – Dec 2025)	760
			FY26 Q3 (Jan – Mar 2026)	1,050
			FY26 Q4 (Apr – Jun 2026)	
			FY26 Q1-Q4 (Jul 2025 - Jun 2026)	2,428
Bellevue	10027	9/23/2023	FY26 Q1 (Jul – Sept 2025)	987
			FY26 Q2 (Oct – Dec 2025)	
			FY26 Q3 (Jan – Mar 2026)	
			FY26 Q4 (Apr – Jun 2026)	
			FY26 Q1-Q4 (Jul 2025 - Jun 2026)	987
Bellevue ²	10018	10/22/2025	FY26 Q1 (Jul – Sept 2025)	
			FY26 Q2 (Oct – Dec 2025) ³	246
			FY26 Q3 (Jan – Mar 2026)	343
			FY26 Q4 (Apr – Jun 2026)	
			FY26 Q1-Q4 (Jul 2025 - Jun 2026)	589
Lincoln ⁴	10451	6/25/2024	FY26 Q1 (Jul – Sept 2025)	4,638

		FY26 Q2 (Oct – Dec 2025)	4,479
		FY26 Q3 (Jan – Mar 2026)	4,371
		FY26 Q4 (Apr – Jun 2026)	
		FY26 Q1-Q4 (Jul 2025 - Jun 2026)	13,488

Footnotes

1. Additional FY26 Q2 encounters were discovered due to a recategorization of the data
2. A new location was added for Bellevue to account for a new midtown location
3. The 246 encounters from FY26 Q2 were recategorized from Bellevue 10027 to Bellevue 10018 to account for the shifting of operations out of that location in September 2025
4. Lincoln operates two SHOW units: one unit serving the direct neighborhood surrounding Lincoln Hospital and the second covering a wider radius. The Lincoln units continue to have the highest overall encounter numbers across the SHOW program, reflecting the distinct need for services in this community. In response, the program continues to work closely with community partners including Bronxworks, BOOM! Health, and DHS to best meet community need.

Substance Use Disorder Workforce Training Program

NYC H+H’s Office of Behavioral Health (OBH) has been allocated opioid settlement funds to implement the Substance Use Disorder Workforce Training Program (SUD WTP), a pivotal initiative aimed at enhancing the quality of care for individuals with opioid use disorder seeking treatment at NYC H+H. The mission of the SUD WTP is to drive a transformative cultural and clinical shift, fostering a more compassionate, evidence-based, and patient-centered approach to OUD treatment. Through a comprehensive series of educational initiatives, the program seeks to equip behavioral health providers, medical professionals, and support staff with the necessary skills and knowledge to deliver high-quality care that is both anti-stigmatic and aligned with best practices. By focusing on improving clinical competence and cultural sensitivity, the SUD WTP aims to create a supportive, inclusive, and effective environment for individuals living with OUD across the NYC H+H system.

Training initiatives include:

- Emergency department OUD simulations: Synchronous training with simulated patients.
- E-learning (Relias): Asynchronous modules on an electronic learning platform for behavioral health providers and staff.
- Lunch and learn: Synchronous interactive modules for social workers and peers.
- Community learning: Synchronous, case-based learning for acute care providers, social workers, and peers.

Enhanced services for patients include:

- Grant-funded buprenorphine
- Sober socialization events

Goals and Benefits

- To provide easy-to-access and evidence-based information on medical treatment, special populations (women, perinatal patients, families, and patients with co-occurring disorders),

harm reduction, destigmatized language for behavioral health and non-behavioral health providers and staff that interact with patients living with OUD.

- To provide facility-determined, enhanced services for patients living with OUD.

Data: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Note: SUD-WTP started implementation and ramp up in FY23-24 and continues to develop, hire, and roll-out in FY26.

Table 1: Quarterly Programmatic Metrics				
Metric	FY26 Q1	FY26 Q2	FY26 Q3	FY26 Q4
Number (#) of Phase 1 (Emergency Medicine - EM) providers trained in the Opioid Use Disorder (OUD) Simulation	49	97	14	
Total Percentage (%) of Phase 1 (EM) workforce trained in OUD Simulation	25%	35%	36%	
Number (#) of participants in non-simulation, synchronous trainings	159	170	271	
Number (#) of patients receiving enhanced services*	319**	409	463	
Number (#) of participants enrolled in asynchronous training platform	128	15	276	

*Enhanced services include unique patients receiving grant-funded buprenorphine and total patient attendance at patient community-building events which include Sober Socialization, Creative Healing, and Patient Recognition projects. The Creative Healing group is a weekly therapeutic arts group for patients. The Harlem Recognition events are monthly celebrations to honor the hard work, dedication, and success of patients in their outpatient Addiction Service.

**Number reflects total number of patient attendees at patient community-building events only (i.e., Sober Socialization, Creative Healing Group)

Table 2: Q3 Programmatic Updates
The OUD ED Simulation Program has trained a total of 364 emergency providers.
Synchronous training includes a monthly, case-based learning community for acute care medical providers and peer counselors. A synchronous training series for social workers is scheduled to launch FY26Q4 and will offer 1 CE per session.
In FY26 Q3, a Motivational Interviewing training was delivered to 34 CASAC, social work, and LMHC staff. The interactive session emphasized identifying, eliciting, and responding to both change talk and sustain talk in complex or challenging conversations.
In FY26 Q3, 23 Patient Enhancement Events - 1 Sober Socialization and 22 Creative Healing - were held. A total of 163 patients received grant-funded buprenorphine support.

Recovery, Integrated Support, Empowerment (R.I.S.E. Center at Lincoln)

The RISE Center at Lincoln Hospital integrates Adult and Child Family Medicine/OBGYN, Adult and Child Behavioral Health, and Addiction Medicine co-located at one NYC H+H location with the goal of meeting the critical needs of pregnant and parenting people and their children impacted by substance use disorder (SUD). RISE is a multidisciplinary specialty care model that will serve pregnant and parenting people and their children receiving care at participating NYC H+H facilities as well as those referred from outside the NYC H+H system. RISE's family-based model builds upon NYC H+H's clinical expertise in the management of substance use during pregnancy, and its experience developing and implementing family-based mental health services for families affected by HIV and substance use. The

program will leverage a team of medical/behavioral health providers, social workers, community health workers, and certified peer counselors with lived SUD experience to support pregnant and parenting people struggling with addiction while also addressing the primary care, psychosocial, and mental health needs of their children.

Services include:

- Expert evaluation, diagnosis and treatment of pregnant and postpartum patients and their children impacted by SUD seeking care for themselves and their children.
- Family Medicine Services such as routine primary care and /OBGYN visits; annual well visits; annual immunizations; vitals checks for adults and children.
- BH Services with 1:1 therapy sessions, group therapy sessions, child developmental assessments.
- Addiction Medicine Services to provide medically supervised out-patient program offering medically assisted treatment and individual and group recovery support services.

Recovery, Integrated Support, Empowerment Planning: Fiscal Year 2026, Third Quarter (January 1, 2026, Through March 31, 2026)

Progress to date:†

- The RISE Center at Lincoln (Recovery, Integrated Support, Empowerment) anticipates the completion of construction in 2028. However, initial hiring efforts are underway, and the Lincoln team is developing processes to begin offering the clinic services by 2027 to start serving pregnant patients and their families even before the physical center is ready.
- The Associate Director role was posted in January, with interviews occurring February-March, aiming for a candidate selection in April.
- The Office of Facilities Development, together with Lincoln Hospital, has worked diligently to complete the Health Equity Impact Assessment (HEIA), which will be paired with the Certificate of Need (CON) for the IOS LRA submission.
- Although the architectural firm, Barr + Barr, is still awaiting contract registration with the Comptroller's Office, we understand this approval to be "imminent." After they are issued a PO, they will be able to be engaged to complete architectural schematics, to be fully reviewed by a set of clinical teams before being submitted as part of the IOS LOA, this summer.
- The Lincoln clinical work group was held in February to review key updates and discuss plans to open RISE services even before construction has completed. The team at Lincoln has worked with Central Office Finance to coordinate planning.
- * Program data will be available after the RISE Center opens.

Opioid Fund Expenditures FY23 and FY24

Agency	Program	FY23 Expenditures	FY24 Expenditures
DOHMH	SSP (OnPoint NYC)	\$ 8,440,903	\$ 8,440,903
DOHMH	DOHMH Oversight Staff	\$ -	\$ 101,057
DOHMH	Naloxone	\$ -	\$ 2,200,000
OCME	DIIG	\$ -	\$ 678,411

H+H	SHOW MHR	\$ 267,177	\$ 890,843
H+H	ED Leads	\$ 5,609,048	\$ 9,885,580
H+H	SUD-WTP	\$ -	\$ 1,183,202
H+H	CATCH	\$ 6,522,604	\$ 5,375,160
H+H	Virtual ExpressCare	\$ 399,819	\$ 265,215
Grand Total		\$ 21,239,551	\$ 29,020,371

6.2