

Adams County Opioid Settlement Fund Application

1. Applicant Information

- a. Organization Name The Salvation Army of Quincy Illinois
- b. Address 501 Broadway
- c. Address 2
- d. City, State, Zip Quincy Illinois 62301
- e. Website (if applicable) centralusa.salvationarmy.org
- f. Telephone # 217-231-5718
- g. Email of primary program contact heidi.howard@usc.salvationarmy.org

Chief Executive Officer Information

- a. Name Rich and Linnea Forney
- b. Title Senior Kroc Office
- c. Email Rich.Forney@usc.salvationarmy.org
Linnea.Forney@usc.salvationarmy.org

All funded projects are required to cover Adams County, Illinois

Funding source for projects is National Opioid Settlement funds distributed to Adams County, Illinois. Therefore, projects funded by this source are intended to primarily serve the residents of Adams County. However, if other jurisdictions are impacted by the project as well, this should be indicated below.

- a. Will the project funds primarily serve Adams County, Illinois YES NO
- b. What, if any, other areas will the project cover
 - a. Brown County, IL YES NO
 - b. Schuyler County, IL YES NO
 - c. Pike County, IL YES NO
 - d. Hancock County, IL YES NO
 - e. Other Illinois Counties (please list) YES NO

The 11 county COC area may be impacted due to we are the only Emergency Shelter program in a 100 mile radius that can serve women, men, and families.

- f. Counties in other States (please list) YES NO

Clients accessing emergency shelter may come from Missouri and Iowa. It is a low percentage of clients and we are committed to finding supports from the community of origin, but will still be providing case management, peer/recovery support, and housing assistance while they are staying at the emergency shelter.

2. Project Information

a. Project Name Recovery/Peer Support Services

b. Brief Project Description

The Salvation Army of Quincy Illinois recently partnered with The Tracy Family Foundation for financial support to employ a Recovery/Peer Support Specialist to provide services to our participants in all of the programs offered at The Salvation Army Social Services location. This program needs funding for training, training materials, and financial supports for clients participating in the Recovery/Peer support program. The employee will obtain certifications and licensing as required which will have an associated cost. Study materials, and testing require a fee for employees providing this service. Group counseling materials and activity expenses are also necessary to ensure participation. Reward for participation (gift cards, food vouchers, and Kroger day passes) would also be implemented into programming for recognition and awards. Wellness Recovery Action Plan (WRAP) workbooks can also be purchased for program participants and would be a great addition to the group sessions. Purchase of 12 Step literature for program participants for both AA and NA for approximately 200-300 participants, depending on level of participation. Fees for Recovery Conventions or travel expenses for extra training as needed for Recovery/Peer support specialist is another additional cost to ensure up to date and training that aligns with the Recover/Peer Support Specialist's education. Josh Stevens, PRSS, currently has his bachelor's degree in psychology, working on a certification process through the State of Illinois, and the IDHS training (currently enrolled) for peer support. The goal is to receive the Peer Support Specialist certification, and eventually expand our Peer Support Program in the future.

c. Project Start Date 04/01/2025

d. Project End Date 04/01/2026

e. Funding Amount Requested \$59,531

f. Will applicant accept partial funding?

YES NO

g. Will Subcontractors be used under this application

YES NO

a. If yes, please list subcontractors:

n/a

3. Applicant History

a. Description of Applicant Organization

The Salvation Army Social Services Programs, located at 501 Broadway, include a 16-20 bed shelter, food pantry, bread line, canteen ministry, and a family services department. The Family Services department is funded by state and federal funding and community partnerships. The United Way of Adams County provides support for the "monthly budget" program. This program provides financial support for persons seeking assistance with outstanding bills that without help could create housing instability or financial collapse. The Salvation Army has several grant partnerships with the IDHS (Illinois Department of Human Services). These grants are large funding amounts in different categories. We currently have a Homeless Prevention Program, Rapid Rehousing, Shelter Diversion, Emergency and Transitional Housing, and Hotel/motel funding. The Salvation Army has partnered with Transitions of Western Illinois to provide Homeless Youth Supports and on-site intakes. We have recently created a partnership with SIU to have an on-site clinic available to clients accessing our services. This clinic will provide medication and physician support for both physical and mental health needs. We have partnered with Blessing Hospital to identify "respite beds" for folks experiencing homelessness at the time of discharge from hospitalization that still need medical support. Blessing provides on-site rehabilitation nurses and care coordinators while the patient is living at The Salvation Army. The Salvation Army's efforts to develop more comprehensive systems to address the community's housing crisis, homelessness, mental health, and addiction needs continues. Program development is most necessary to address the current climate of need.

- b. How long has the applicant been in business? 160 years
- c. Is applicant in good standing with the Illinois Office of the Secretary of State? YES NO
- d. Has the applicant or any principal experienced foreclosure, repossession, civil judgment or criminal penalty (or been a part to a consent decree) within the past seven years as a result of any violation of federal, state or local law applicable to its business? YES NO

If yes, please identify the nature of the action and the disposition.

n/a

- e. Is the applicant or any principal the subject of any proceedings that are pending, or to the best of the applicant's knowledge threatened against applicant and/or any principal that may result in any adverse change in the applicant's financial condition or materially and adversely affect applicant's operations? YES NO

If yes, identify the nature of the proceedings and how they may affect the applicant's financial situation and/or operations.

n/a

4. Scope of Work

- a. Please provide an executive summary of the project here.

The Salvation Army of Quincy, Illinois is requesting funding to support the Peer/Recovery Support Specialist program that is focused on providing case management supports, education, counseling, and treatment for clients with mental health/substance abuse issues. The programs' sustainability requires training and certification with an approximate cost of \$500 per specialist. Currently we have two interested staff willing to take this training hosted by Southern Illinois University. The training will increase probability of successful outcomes for the program and client. The training is a 40 hour, in-depth training. Completion of this training will also provide an opportunity for program expansion. WRAP training materials designed for clients participating in the program also have a cost to purchase. The total cost of the wrap materials and training is \$420.00 per case manager. The cost of workbooks for clients are \$6.99 per person. The peer/recovery support program aligns with this grant's specific approved uses. Part one: Treatment B and C: Support People in Treatment and recovery: identifies that the grant can support counseling, engagement of non-for-profits, transportation to recovery, provide access to housing, provide funding for peer support specialist, and integrate recovery supports into framework of already established programming. The emergency shelter, family services and food programs can identify clients reporting the need for assistance with substance use disorders and mental health. Many of our clients need the education to support their movement from pre-contemplation to the contemplation stage of change. The Salvation Army social services programs see clients in various stages of change. The majority of our clients present with co-occurring mental health and substance use disorders. Reaching out for help indicates the contemplation phase of the stages of change (they recognize they have a problem), however, we have many clients who are moving from contemplation to preparation but require more hands on support, consistent peer supportive case management that provides transportation to and from appointments, advocacy within health systems, and someone who has experience navigating supportive systems that have had similar life experience.

- b. Successful applications will provide services that positively impact the community in a sustainable fashion. How will this project provide a sustained impact on the community after initial funding has been exhausted?

The training for the Peer/Recovery Support Specialist never goes away. Whether the individual continues work at The Salvation Army or not the PRSS is a trained professional working in the community with individuals and families struggling with addiction and mental health. The education and support the participants receive is life changing and supportive of long term recovery. The Tracy Family Foundation has expressed interest and is agree-able to funding the Peer/Recovery Support position long-term. This request for funding is to provide supports surrounding this program to ensure the strength and success of the program. The PRSS program's long term goal is to facilitate training and program growth for other persons with the desire to become Peer/Recovery Support Specialists in the community.

- c. What approved mitigation strategies outlined in Exhibit B of the settlement document will be implemented during the implementation of the proposed project?

The core strategy b #4: Provide treatment and recovery support services such as inpatient, outpatient therapy, recovery, and medication will be available to a group of community clients living at or visiting The Salvation Army.

The core strategy a#1: Expansion of services and distribution of nalaxone and other FDA opioid reversal medications.

Core Strategy E #1: warm hand-off and support to enter treatment. Also providing housing supports at treatment discharge (avoid going back to living situation that promoted, supported, and accessible substance

#3: Broaden scope of recovery services

#4: wrap around services, housing, transportation, job search and support (all already occur at The Salvation Army) while integrating peer/recovery support.

- d. Describe how your organization will develop evidence-based OUD/SUD recovery focused Programming to the residents and families of Adams County, Illinois. Outline resources that will be required to reach those deliverables.

The Salvation Army of Quincy partnered with SIU of Quincy to create a small clinic at The Salvation Army 501 Broadway location to provide medical and psychiatric supports to clients accessing services. All emergency shelter, family services, and food programs will allow access to the clinic at this location to receive immediate medication assistance. Paired with the Peer/Recovery support specialist services, an immediate response to clients walking in with crisis needs will allow individuals with substance and mental health concerns, as well as physical health issues, immediate access to intervention or referral. The on-site medication assistance (naloxone, buprenorphine, psychiatric meds, and all other prescriptions will allow the clients immediate treatment options and/or referral to other providers. We have also partnered with Transitions of Western Illinois to provide on-site assessments one day per week. Clarity Healthcare has also agreed to come on site on day per week to provide intakes for their programs. All of these partnerships will expedite services and address client concerns at The Salvation Army location. Our role in the MAT programs will be to provide clients, who otherwise would most likely never have the opportunity, referrals to providers, and immediate access on-site to see providers, which will set them up with follow-up appointments and long-term care. Our Peer Support program will then support them in the future by motivating them to abide by their prescribed treatment protocols, provide transport to their follow-up appointments, and will be another point of accountability and support for clients. A significant portion of our clients do not have the ability to advocate for themselves when they come into our shelter or begin to engage in services with our Family Services programs, our Peer Support Specialist has the opportunity to build relationships with our clients, which in turn allows them to go into these sometimes difficult to navigate systems and advocate for these clients, and more importantly support them and mentor them until they get to a point where they have learned to advocate for themselves. Our Peer Support Specialist also is capable, and already currently, helps refer and secure appointments for clients in these systems. If a client is in a crisis, and is unable to wait for the providers to come on site, our Peer Support Specialist can help with obtaining an appointment much sooner, providing transport to the appointment, and advocacy at the appointment. Peer support interventions show statistically significant positive impacts on mental health, including reduced hospitalizations, improved quality of life, and increased engagement in services, with some studies showing a reduction in symptoms of depression and anxiety. The Salvation Army's role in supporting the clinic is to refer to or ensuring the client has transportation, appointments to, or advocacy to ensure appropriate supports are established. More detailed statistics mention 56% reduction in hospital readmissions, a reduction in days spent in the hospital, 30% increase in outpatient treatment visits, cost-efficient, increased engagement with services, increased community integration, increased access to treatment and reduced substance use. According to the NIH limited resources and funding can hinder the development of peer support programs. To fully develop this program, we need to secure other resources, like the Opioid Settlement fund, and pair this support with the PRSS program. The Opioid Settlement Fund will enhance and stabilize services.

For further insight, here are our Peer Support statistics, these are the number of instances of involvement that have occurred by our Peer Support Specialist (Josh) in just a few weeks:

- 19 instances of Outreach
- 20 instances of Substance Abuse Counseling
- 33 instances of Offering Peer Support Case Management to Clients
- 12 instances of Transport to appointment and other treatment providers
- 12 Assessments
- 45 instances of follow-up services
- 36 instances of Advocacy
- 16 crisis interventions
- 53 instances of Case Management
- 12 referrals

These statistics reflect the work that we have been able to accomplish in a short time, the reality is that there is an infinite number of these instances that are possible in the population that we serve. Providing further support to our Peer Support Program, will ensure sustainability and allow us to expand the program. The need for support in our community regarding mental health and substance use will always far outweigh our ability to provide the necessary support, but any time that we have the opportunity to bolster that support will pay dividends, people's lives will be saved, and our community will be better because of it.

If given the opportunity to present our proposal, we will provide specific examples, which will give greater context from some of the case management we have provided.

- e. What key staffing will need to be educated or hired to create recovery focused OUD/SUD programming for your organization? Do you foresee challenges or barriers that will impact your ability to staff your project?

Josh Stevens has been hired to provide Recovery and Peer support to the clients accessing services at The Salvation Army in Quincy Illinois. Josh is also providing recovery groups at Preferred and works closely with AA/NA. He is a sponsor and provides support to the business side of these most important community supports. Josh is a graduate of Eastern Illinois University. Josh is currently prepared to receive the training and certification for the PRSS program. His goal in 2026 is to become licensed as a CADC, which will further broaden our ability to provide greater levels of care on site, specifically with SUD counseling. His role at The Salvation Army will evolve over time with the possibility of recruiting other Peer/Recovery Support Specialists. We do not see any current challenges and barriers besides the expense of trainings, certifications, and testing. Mindfulness Based Stress Reduction (MBSR) training, WRAP, and NA/AA groups will all be opportunities for client's accessing The Salvation Army's Peer Recovery Support Services.

- f. Does your project build upon existing community resources in Adams County? If so, how will you collaborate with other organizations to reduce redundancies and increase sustainability for your project?

Yes. The Salvation Army Emergency Shelter and Family Services works with many individuals reporting addiction and mental illness. Many of our clients initiate services during times of crisis. Providing this service, at our location will be an amazing addition to an already established program. We see this program as a "game-changer" for our program participants. Josh has been employed with us for only two weeks and has already facilitated and arranged in-patient treatment for two program participants, provided several instances of case management, and already secured 7 new clients who are fully engaged with case management and are active clients on his case load! Currently The Salvation Army has several contracts with other community supportive programs. SIU will be "in-house" medical and psychiatric services two days per month starting April 24th. We have established many partnerships to ensure we provide opportunities for our clients to find the resources they need. Transitions and Clarity will also provide long-term stabilization services and community case work services. We provide Homeless Youth Services, partner with Horizons to serve meals to individuals banned from community meals, and of course participate with Unmet Needs, the United Way monthly meetings, and The State of Illinois. The dollars we spend because of the partnerships with the State of Illinois are so important and focused on homeless prevention and housing stabilization. As previously mentioned, the majority of our clients present themselves with co-occurring substance use and mental health disorders. Our Peer Support Program will enable us to offer our clients with wrap around services and support, significantly increasing the opportunity for long-term success and stability.

- g. Outline your organization's current evidence based practices which contribute to the success of your organization in the implementation of this project.**

The evidence of our programs successes is related to the funding spent, amount of clients served, and outcomes related to housing stabilization. The stats report for the PRSS program will identify numbers, services, and outcomes. We will identify the disorder and the paired treatment approach. Homeless Prevention funding (\$138,000) provided relief for 100 households in the last grant cycle, \$7000 was spent for utility support using Ameren funding, 53 households were diverted from shelter using shelter diversion funding. We spent over \$90,000 this year for hotel/motel, 70 payments (rent) using Rapid Rehousing were used to stabilize households and an additional \$20,000 on rent for RR using Emergency Solutions Grant Funding. The Salvation Army also spends \$3500 a month for general households' expenses to help our clients avoid a housing crisis or financial collapse. Vouchers for furniture and clothing are also an expense to support clients exiting shelter or provided to walk-ins at Family Services when clients have experienced an emergency situation.

The addition of the Peer Recovery Support Specialist position will allow long term case management and continued supportive services to clients receiving this funding. This additional program was the obvious missing piece related to housing stabilization, recovery support, and long-term supportive services for our clients struggling with co-occurring mental health and substance use disorders.

- h. What barriers do you anticipate that might challenge your organization during the programming implementation? How will you overcome these barriers?**

Building space is the largest barrier to implementing new programming, however, it has been a game of Tetris creating spaces that fit and work together. We will be installing a new HVAC system at the 501 Broadway location this Spring. When that project is complete it will allow us the option to create different spaces or re-design current spaces.

- i. Is there additional information not captured in the above questions that you would like the review committee to consider in your application?

Aside from the multitude of existing research that supports the benefits of a Peer Support Program, there is something special when someone who has been through the same struggles as an individual currently facing them, reaches out and offers support, for the entirety of the journey. The level of empathy and understanding, alongside with the experience of not only learning how to navigate these struggles, but most importantly successfully, is truly unparalleled. The levels of co-occurring substance use and mental health disorders in the population that The Salvation Army serves is monumental. This population is almost always individuals with absolutely zero resources, and often are the people who fall through the cracks in every system, and end up with nowhere to go, no family to support them, and end up with the worst outcomes. There is such an opportunity to make an impact in our community now by providing greater support to our Peer Support Program, which has already seen success! Expanding this program will only further provide opportunities for success in individuals in our community, who most likely would not be given the opportunity for actual treatment and stability. There is an infinite amount of casework and support that is possible in the population that we serve, and as you have seen, mentioned previously in this application, when our Peer Support statistics were provided, that in just a few short weeks that work has already begun, and expanding this program will not only benefit each and every individual that we get the opportunity to serve, but our entire community as a whole.

The Salvation Army Family Services is planning on adding a 24/7 publicly accessible box for Narcan distribution. Each of our employees are currently trained in the administration of Narcan, which is always available inside of Family Services and in the Emergency Shelter. Our Peer Support Specialist keeps Narcan on him at all times, as someone whose life has been saved by Narcan, he understands the importance of the need for its availability. Safety is a huge priority at The Salvation Army, each of our staff undergoes trauma-informed CPI training regularly. Accountability for behaviors at The Salvation Army is important, but we NEVER under any circumstances abandon our clients. We are used to facing some of the toughest cases and have a tested and successful protocol with dealing with those cases. We utilize positive peer pressure at all times. We motivate our clients every opportunity that we get. If a client comes in after experiencing a relapse, they will never face shame at The Salvation Army, instead, the Peer Support Specialist will work with them to get them back to a place of stability. Relapse is common in early recovery, and we understand the importance of our clients always having a safe place to come to. Another important note of safety is our ban list, we have had clients in the past whose behaviors have put themselves and others' safety in jeopardy. We have an obligation to keep all of our clients and staff safe. If a client's behavior imposes these types of risks, we have a ban list, which is mostly for the emergency shelter. Clients still have access to Family Services, and do not lose the support or ability to engage in services. Our Peer Support Specialist then works with those clients and allows them the opportunity to come off of the ban list and be able to receive full services from our entire Social Services program. There is never an instance where we will not provide any services to our clients.

- j. Are you willing to present your project in person YES NO to the committee if requested?

5. Program Work Plan

The program workplan should outline the objectives of the project, activities and dates, expected outcomes and how the project's success will be measured. The project should list a minimum of one output and up to 4 outputs.

a. Output 1 (required)

a. Objective:

Certification of Peer/Recovery support specialist

b. Activities to be conducted:

Complete training and take test for certification

c. Date Range (Start Date to End Date)

04/25/2025

10/25/2026

d. Expected Outcome(s)

The Recovery/Peer support specialist will complete the training through IDHS and SIU to receive the certification for Peer Support Specialist.

e. Measurement(s)

Certification Document

b. Output 2 (optional)

a. Objective:

Treatment for clients with OUD or SUD.

b. Activities to be conducted:

The peer support specialist will provide case management and recovery support for a case load of clients with the focus of treatment and long term support.

c. Date Range (Start Date to End Date)

04/25/2025

04/25/2027

d. Expected Outcome(s)

Clients will agree to treatment, long term supportive services, after care, case management, housing, and continued support by the Peer/Recovery Support Specialist

e. Measurement(s)

of clients on caseload

of clients that engaged in treatment

of clients living in housing and receiving Peer/Recovery Support Peer Support Statistics (see 4D)

Detailed case notes on each client, that paint the picture of how our Peer Support program works. Another thing that we engage in is Client Centered Consults and direct supervision from the Director of Social Services. The Peer Support Specialist keeps a detailed record in both client files and a spreadsheet of his caseload and progress updates that are available to the Director of Social Services at any time. Successes are not the only important thing to track, we also look at what doesn't work as well, and as a team, figure out better ways to approach situations, solve problems, and provide better services. Every client requires a different form of support, and our goal is to determine what that is for each client. Measuring the Peer Support stats and keeping detailed client files enables us to do this.

c. Output 3 (optional)

a. Objective:

Recruit more peer/recovery support specialists in the community

b. Activities to be conducted:

Identify individuals willing to provide peer support to clients accessing programs at The Salvation Army of Quincy Illinois.

c. Date Range (Start Date to End Date)

04/01/2026

04/01/2028

d. Expected Outcome(s)

Recruitment effort will create two more Peer Recovery Support Specialists in the next three years. We will apply for funding through The Tracy Family Foundation for salary support for the new recruits.

e. Measurement(s)

of peer support specialists employed by The Salvation Army of Quincy Illinois

d. Output 4 (optional)

a. Objective:

Supportive housing for persons exiting treatment.

b. Activities to be conducted:

Persons exiting treatment will work with Recovery Peer Support Specialist to identify the best housing support that will help support long term recovery: Hotel/motel, rental, or reserved shelter bed at the time of treatment discharge are options that will assist client with safe and stable housing while recovering.

c. Date Range (Start Date to End Date)

06/01/2025

d. Expected Outcome(s)

Clients will receive the best possible opportunity to remain in recovery and sustain sobriety long term.

e. Measurement(s)

Clients remain sober, continue to participate in recovery programs, and express interest in Peer/Recovery Support Specialist certification.

6. Budget

a. Personnel

Name	Total Hours	Rate of Pay	Total Request
			0.00
			0.00
			0.00
			0.00
			0.00
			0.00

b. Travel

Travel Type	Quantity	Rate	Total Request
Mileage (local)			0.00
Mileage (outside service area)			0.00
Airfare			0.00
Lodging			0.00
Meals (outside service area)			0.00
Other (explain in narrative)			0.00
			0.00

- a. Narrative for Travel – Explain use of funding for travel related expenses, including names of travelers, events, how travel supports the project, and clarification for quantities of mileage, lodging and meals. If other travel expense types are requested, please detail:

n/a

c. Equipment (Items per unit over \$1,000)

Name of item	Unit Cost	# of Units	Total Request
			0.00
			0.00
			0.00
			0.00

- a. Narrative for Equipment – Provide justification for equipment's purpose in achieving program outcomes.

n/a

d. Supplies (Items per unit under \$1,000)

Name of item	Unit Cost	# of Units	Total Request
Wrap Material for clients	6.99	400	2,796.00
AA literature	11.50	400	4,600.00
NA literature	13.60	400	5,440.00
			0.00
			0.00
			0.00
			0.00
			0.00
			12,836.00

- a. Narrative for Supplies – Provide justification for supply purchases in achieving program outcomes.

Clients need to tools to remain sober. The literature and wrap material will provide focus for education and group counseling.

e. Subcontractors (if applicable)

Name of subcontractor	Contact Person	Total Request
		0.00

- a. Narrative for subcontractors. Provide justification for the use of each subcontractor, including purpose for which you are utilizing the subcontractor, a template subcontract to be utilized to outline terms of the subcontract and other relevant information:

n/a

f. Other Expenses

Name of Expense	Justification	Total Request
Certification/schooling	\$595 for training and certification (SIU)	595.00
Testing	Peer/Recovery Support testing \$100	100.00
Benefit Package	Salary is Supported by grant funded by The Tracy Foundation. Benefit Package is	14,000.00
housing expenses, hotel/motel, and cost of	Housing expenses for clients exiting treatment. This may include hotel/motel,	30,000.00
transportation and medication costs for	Transportation could include assistance to NA/AA meetings, outpatient treatment, or	2,000.00
		46,695.00

- a. Narrative for Other Expenses – Provide justification for each listed expense, including the expenses purpose in achieving program outcomes.

The Peer/Recovery support specialist is receiving funding for salary but not for benefit package. An additional \$14,000 cost to cover the additional cost of the package is included with this funding request.

g. Budget Summary

Name of item	Total Request
Personnel	0.00
Travel	0.00
Equipment	0.00
Supplies	12,836.00
Subcontractors	0.00
Other Expenses	46,695.00
	59,531.00
Matching Funds (not required)	
	59,531.00

This amount should equal your funding request on Page 2

This is the total project cost including any match by you

7. Certification

By signing this application, I certify that the statements herein are true, complete and accurate to the best of my knowledge. I also agree to comply with any resulting terms if I accept an award. I certify to the best of my knowledge and belief that all the details in the budget are true, complete and accurate and that any false, fictitious, or fraudulent information or the omission of any material fact, could result in the immediate termination of my grant award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)

Organization name and mailing address:

Name of authorized representative: Heidi Howard

Signature of Authorized Representative:  Date: 03/18/2025

Email of authorized representative: heidi.howard@usc.salvationarmy

Phone Number of authorized representative: 217-231-5718

Complete applications may be submitted to opioidfund@adamscountyil.gov with a subject line of Opioid Settlement Fund Committee – Application for Funding --OR-- delivered in person or by US Mail, UPS, FedEx or other carrier to the Adams County Health Department, 330 Vermont St., Quincy, IL 62301 with attention to the Opioid Settlement Fund Committee.

Competed applications will be reviewed by the Committee approximately one time per quarter with recommendations will be made for funding to the Adams County Board. Notice of awards, clarifications or rejections will be provided to the addressee listed on the application.