

**SUNRISE, FLORIDA**

**RESOLUTION NO. \_\_\_\_\_**

**A RESOLUTION OF THE CITY OF SUNRISE, FLORIDA, APPROVING A “STATE OF FLORIDA DEPARTMENT OF HEALTH FINANCIAL ASSISTANCE STANDARD CONTRACT” BETWEEN THE STATE OF FLORIDA, DEPARTMENT OF HEALTH AND THE CITY OF SUNRISE FOR PROVISION OF POST-OVERDOSE SUPPORT; AND PROVIDING AN EFFECTIVE DATE.**

WHEREAS, the Sunrise Fire Rescue Department is working in collaboration with the Florida Department of Health (DOH) to implement an Opioid Co-Responder Program aimed at providing post-overdose support funded through a DOH grant; and

WHEREAS, the DOH grant will enhance the Community Risk Reduction Program by providing additional support to the Community Paramedic to conduct follow-up visits with patients discharged from the hospital due to opioid overdoses, with the goal of connecting individuals with harm reduction services, treatment options, and social support resources to reduce repeat overdoses and improve long-term recovery outcomes; and

WHEREAS, a Contract setting forth the grant terms and conditions is required.

NOW THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF SUNRISE, FLORIDA:

Section 1. A “State of Florida Department of Health Financial Assistance Standard Contract” (Contract) between the City of Sunrise and the State of Florida, Department of Health, for providing post-overdose support is hereby approved. A copy of the Contract is attached hereto and made a part of this Resolution as Exhibit A.

Section 2. The Fire Chief is hereby authorized to execute the Contract.

Section 3. City staff are hereby authorized to take all actions necessary to fully perform the City’s responsibilities under the Contract.

Section 4. Effective Date. This Resolution shall be effective immediately upon its passage.

PASSED AND ADOPTED this \_\_\_\_\_ DAY of \_\_\_\_\_, 2026.

\_\_\_\_\_  
Mayor Michael J. Ryan

Authentication:

\_\_\_\_\_  
Felicia M. Bravo  
City Clerk

MOTION: \_\_\_\_\_  
SECOND: \_\_\_\_\_

CLARKE: \_\_\_\_\_  
GUZMAN: \_\_\_\_\_  
KERCH: \_\_\_\_\_  
SCUOTTO: \_\_\_\_\_  
RYAN: \_\_\_\_\_

Approved by the City Attorney  
as to Form and Legal Sufficiency

\_\_\_\_\_  
Thomas P. Moss