The Keyport Unified Planning Board held a Regular Meeting on July 24, 2025, which was called to order by Juan Carlos Oviedo at 7:00 PM, the Sunshine Law Notice was read followed by the Flag Salute.

Present: J. Oviedo, H. Aumack, T. Burke, D. Pacheco (arrived 7:05PM), K. Bartolome W. McDermott, S. Dixon

Absent**:** Mayor Araneo, Councilmember Merla, W. Kane, C. Demarest

Mayor and Council could not vote for the application before the board since it was a use variance.

Professionals: Board Attorney Marc Leckstein, Trevor Taylor, CME, Ronald Reinertsen, CME, Planner

**MINUTES: JUNE 17, 2025 AND JUNE 26, 2025**

Motion to approve minutes was made by W. McDermott, second by S. Dixon

June 17th minutes ayes by all present.

June 26th minutes:
Ayes: J. Oviedo, W. McDermott, S. Dixon

**RESOLUTION: KUPB 23-03 NICA NICA**
**USE VARIANCE**
**262 FIRST STREET**
**BLK 43 LOT 9**

**MOTION TO APPROVE RESOUTION:**

Motion made by S. Dixon, second by T. Burke

Ayes: Chairman Oviedo, H. Aumack, T. Burke, W. McDermott, D. Pacheco, S. Dixon

**APPLICATION: KUPB 25-01 ABROHOM SCHLAFF**
**ZONING APPEAL/INTERPRETATION**
**3 CASS STREET**
**BLK 33 LOT 16**

This application has been carried to the October 23rd meeting without further notice.

**APPLICATION: WILLOW RECOVERY**
**46-48 HIGHWAY 36, LLC**
**SITE PLAN/USE AND BULK VARIANCE (Mayor and Council cannot participate)**
**BLK 106, LOT 1**

Exhibit A1 – Application
Exhibit A2 – Site plan dated 4/10/25
Exhibit A3 – Architect dated 1/21/25
Exhibit A4 – packet of pictures of the site
Exhibit B1 – CME letter dated 6/11/25
Exhibit B2 – Email from T. Vecchio

Mr. Himelman, Attorney for Willow Recovery. Mr. Himelman described the application he explained that the applicant would be seeking relief for a D1 use variance and site plan approval for a proposed substance use disorder treatment facility, classified as a residential health care treatment facility. The applicant is seeking approval to renovate the existing building on the property and to operate a short-term inpatient substance use disorder treatment facility. The proposed facility will include 20 short-term residential beds and will be staffed 24 hours a day, 7 days a week. Comprehensive security measures will be implemented throughout the building, with an emphasis on ensuring client safety and well-being at all times.

The project also includes proposed site improvements, such as the installation of a new landscaped buffer, upgraded lighting, and the reconfiguration of the existing parking lot, among other enhancements. Mr. Himelman stated that they property is located within the Highway Commercial (HC) Zone. The use is not a permitted use within this zone and that is why they are before the Board.

Mr. Himelman explained that he had several witnesses that would be testifying before the Board.

James Boozan – Consultant and executive director in another facility. Also, will be the Director of this facility. Mr. Boozan explained what his responsibilities were at the facility that he operates currently. He stated that they included oversight of clinical services, ensuring the facility operates in compliance with all relevant state and medical guidelines. This includes supervising short-term detoxification services, psychiatric care, and overall client safety and confidentiality.

Mr. Boozan explained what detoxification means, he stated that it refers to short-term medical stabilization which typically occurs over the course of 7 to 10 days. This helps individuals safely withdraw from substances such as drugs or alcohol. It is a closely monitored medical

process designed to support individuals through the initial stages of recovery, with both physical and psychiatric oversight.

Mr. Himelman asked what services would be available at the facility; The facility will provide short-term residential treatment. While the primary focus is detoxification, the level of care closely resembles that of a residential treatment program. Services will include round-the-clock medical supervision, psychiatric evaluations, clinical counseling, and individualized discharge planning. Mr. Leckstein asked what would happen if the client needed extra care; Mr. Boozan explained that most insurance plans do not authorize more than 14 days of detoxification treatment. Mr. Boozan explains that before a patient enters the facility, a pre-admission screening is conducted, which includes a review of their medical and psychiatric history to determine the appropriate level of care. Once admitted, further evaluations such as urine analysis and psychiatric assessments are conducted face-to-face to confirm the treatment plan.

Mr. Leckstein asked what if something changes and the patient needs more time; A clinical team including medical staff, licensed counselors, and utilization review specialists would work together to determine the best course of action. If extended care is required, the patient would be referred to an appropriate step-down or long-term facility. The transition is handled safely and with proper coordination, not simply by discharging the patient abruptly.

Mr. Boozan explained that the state only allows 14 days, the facility only takes private insurance. Typically, the admission process begins with a phone assessment. During that call, the individual's clinical eligibility is reviewed, and their insurance information is collected. Insurance is verified prior to admission, and the facility would contact the insurance provider directly to initiate a pre-certification process. This allows for approval of treatment before the patient physically arrives at the facility. Much of the clinical and administrative groundwork is completed in advance, including outlining a treatment plan and ensuring coverage is in place. Mr. Himelman asked if the clients are considered handicapped or disabled under state or federal law; yes, in my professional understanding, individuals receiving treatment for substance use disorder are recognized under federal and state protections as persons with a disability or handicap.

Mr. Himelman confirmed that thew facility will provide 20 residential beds; yes, the applicant is proposing 20 beds for short-term residency.

Mr. Boozan explained that the staffing would consists of a medical director who is normally a physician that is affiliated with the program, advanced practice nurses or Physician assistances that would work under the medical director. For the facility 24-hour coverage the facility will employee registered nurse or a licensed practical nurse. There would be one to two nurses per shift depending on the patient volume. Mr. Boozan stated that normally the facilities do not operate at a full capacity throughout the year.

Mr. Boozan explained that the facility would operate on three shifts 7:00 a.m. – 3:00 p.m., 3:00 p.m. – 11:00 p.m. and 11:00 p.m. – 7:00 a.m. Each shift will have one or two nursing staff. The medical staff is typically present during daytime hours only. The total estimated staff is 15–20, depending on multiple shifts. The social workers are present during the day. Mr. Boozan stated that the client-to-staff ratio is estimated based on NJ State guidelines.

The staff undergoes continuous license verification and criminal background checks. Trainings are required quarterly, semi-annually, and annually per state mandates. The licensing and operations are overseen by the NJ Department of Health, specifically the Office of Behavioral Health.

The facility is an in house there is no out patient treatment provided at this facility. Admissions are typically scheduled in advance and patients arrive either by loved ones or transport services no patient drive themselves. The patients are screened prior to arrival, once they arrive the patients' belongings are checked and searches are conducted. All patients must sign a consent to treatment and medical release forms.

During their stay family visits are limited, there sometimes would be family counseling which may occur in later stages of treatment. The staff would communicate with family members to gather background and behavioral visits.

Mr. Himmel asked if any of the clients are state ordered; no, the facility does not take anyone is court ordered. Mr. Leckstein confirmed that the client goes in voluntarily; yes. There was further discussion regarding the screening process.

Mr. Himmel asked what if the client wants to leave; Mr. Boozan explained that they would have to have a loved one pick them up. The facility has an obligation to hand off the client to a family member. Mr. Himmel asked about the safety that the facilities take for the patients; the facility has a controlled access for the staff with keycards, there are cameras in place except for the bedrooms, patients are limited to back yard areas for smoking but are accompanied by staff members and the support staff checks on the patients every 15 to 30 minutes. Mr. Leckstein confirmed that the patients are only allowed in the gated areas; yes.

Mr. McDermott asked if there was only medical staff present at the facility or do, they have security as well; Mr. Boozan stated that they do have security staff present on-site. The staff are trained in verbal de-escalation. Physical intervention is only used in emergencies by trained personnel.

Mr. McDermott asked if the facility does back ground checks; no, because of the HIPAA rules the admissions speaks to the family members regarding the placement of the patients.

Mr. Leckstein asked what if a patient insists on leaving; the protocol includes signing discharge forms against medical advice and arranging a safe transfer or handoff to a family member.

Mr., Himmel asked if the facility does drug testing; yes, they do a blood test during the admission process so that they have something to compare the tests to. They usually test once or twice a day. Further discussion regarding the admission process.

There was further discussion regarding the security; Mr. Leckstein asked if the Board did approve the application would the applicant agree as a condition that there would be two security personnel at the facility at all times; yes.

Mr. Dixon asked if the clients had access to their phones or laptops while their stay; no, they don't have any electronics.

Mr. Taylor asked about the type of deliveries the facility would receive; Mr. Boozan stated that they get supplies from WB Mason and food that is delivered by truck similar to a box truck.

Mr. Pacheco asked if each staff member would have a scanner so they can scan the patients' bracelets; not sure. Mr. Boozan explained that the bracelets are monitored by nurses to track their blood pressure.

Motion to open to the public at 7:50PM was made by D. Pacheco second by W. McDermott with ayes by all present.

Suzanne Ryan, 407 Atlantic Street asked how many people are working in the kitchen; Mr. Boozan stated it is one chef and one helper. A cleaning service comes in once a day. S. Ryan stated that would be additional people during the day. S. Ryan asked about the shift change; it takes between five to ten minutes to change the longest would be fifteen minutes. There was further discussion regarding the time it would take in between shift changes.

S. Ryan asked about the security; Mr. Leckstein stated that it was agreed it would be two security people 24 hours a day. There was further discussion regarding the patients leaving the facility. Mr. Leckstein asked if the patient becomes unruly what would be done; the facility would call the police if needed.

Jeffrey Spangler, 49 Second Street, asked what the age limit was and if the facility housed both sexes; the age is 18 and older. We do house box sexes but they are on different floors. Mr. Spangler asked what happens if someone did get out of the facility; they would notify the police and the staff would look for them. The key card usually prevents this to happen.

There was discussion regarding possibly hiring local police officers as well as what training the facilities security people have. Mr. Himmel added that they do background checks on all the employees that ae hired. Mr. Leckstein asked if the application was approved as a condition of approval would they submit a security plan to the local police for approval; yes.

Mr. Spangler asked what would happen if the conditions weren't followed; Mr. Leckstein explained that they would receive a violation and have to appear in court. Mr. Spangler asked if the approval just is for this facility; Mr. Leckstein explained that the change of use would stay with the building.

David Reilly, 425 Florence is concerned that the staffing is under estimated on what might go wrong. He explained that there is a day care, schools close to the facility he feels that this is an inappropriate site for this use. Mr. Reilly stated that there will two security guards at the site, how many other jobs would they be doing. Mr. Boozan stated that there would be other staff on site as well.

Patricia Burns, 120 Main Street asked if the security guards are armed; that is not a requirement. Ms. Burns stated that she thought that was said; Mr. Leckstein stated he didn't hear that there would be armed security guards none of the Board heard that as well.

Ms. Burns asked that since this is a voluntary facility what happens if someone got belligerent; they would try to get them to a safe place. Mr. Himmel added that the facility is liable. Ms. Burns asked if it is one nurse to 15 patients; Mr. Boozan explained that there is also staff that checks on the patients. The patients wear monitoring bands that track vital signs allowing the nursing station to monitor them continuously. There was further discussion regarding the patients care.

Mr. Boozan stated that after 14 days the patients are generally transferred to another level of care which could be residential treatment, partial care, intensive outpatient or other outpatient programs.

Chester Galloway, 258 Van Dorn Street questioned the time for the patients to detox; Mr. Boozan explained the timeframe for the different substances. He explained that patients are typically medically cleared within 5–7 days, though not necessarily fully recovered mentally. Continued treatment at another level of care is strongly recommended after detox. The purpose of detoxification is to stabilize patients so they are in the right condition to receive further treatment.

Mr. Galloway asked about the employees; Mr. Boozan explained that the facility would employ approximately 15–20 total staff members, with approximately 8 per shift. The staffing per shift could include two security personnel, two nurses, a doctor, kitchen staff, an administrator, and other support staff. Mr. Galloway expressed concerns based on past uses of the property. He

asked what happens to the property if the building became vacant; Mr. Leckstein explained that the change of use stays with the property.

Mr. Leckstein clarified that the Board cannot just deny the application because they don't like it. The Board has to base their decision on legal proofs presented by the applicant, not solely on public opinion. Denying the application purely because of community opposition would not be legally defensible and could be overturned if challenged in court.

Debbie Zielinski, 247 Van Dorn Street. 247 Van Dorn. Questioned the security issue if the Department of Health, has a requirement for you to have one security guard, when they come out to do their site visits, that is what they're going to look for. What would make the facility have the two-security person as discussed. Mr. Leckstein stated that they would be in violation of their approval and issued a violation and they would have to go to court.

Ms. Zielinski asked how the outside areas would be controlled; Mr. Boozan stated they would go out in groups. Ms. Zielinski was concerned about the location that is being considered, she explained that she feels the facility should be more isolated.

There was a discussion regarding how common substance abuse and alcoholism has become. Mr. Boozan stated that most families have someone that has been affected by addiction. This facility would provide a private, confidential, and safe place for individuals both from our community and beyond to begin their journey toward recovery.

Amanda Bichao, 241 Van Dorn St – resides next door to proposed facility. Ms. Bichao asked about the number of smoke breaks the residents have; usually three to four a day. Ms. Bichao asked what would prevent a patient to use before entering the facility, she has small children that play in her yard and she is concerned about drug paraphernalia being left around the facility; Mr. Boozan stated that they security admission, they consistently keep up of the grounds. There was discussion regarding the security during the admission of the patients and who brings the patients to the facility.

Gail Carton- O'Connell, 230 Van Dorn Street commented that there has been discussion regarding the patient's safety and the facilities safety she asked what about the resident's safety that live on Van Dorn. Mr. Boozan stated that they did agree to have two security people on the premises 24 hours a day and they will work with the local police department.

Michael Lane, 51 First Street – concerned about the patients emptying their pockets before arriving at the facility on streets. He asked if the patients were going to be transported to the facility by the facility; Mr. Boozan explained that family members normally bring them. Mr. Lane stated that he thought it would be a good idea for the facility to have a place that is more remote to pick up their patients and have the facility them transported to the establishment. Mr. Lane mentioned that he thought he saw or heard something regarding the patients bringing their own vehicles; Mr. Leckstein stated that the document stated that the patients would either be dropped off b a loved one, by ambulance or public transportation.

There was discussion regarding the facility having classes; Mr. Boozan explained that they are not having classes and visitors; Mr. Boozan explained that they may have someone from AA or NA come speak to the patients but that is all.

Avery Meyer, 120 Main Street asked if someone in the facility leaves; Mr. Boozan stated that they would leave with a loved one. Mr. Meyer asked how long would they have to wait to re-enter the facility. Mr. Boozan stated it depends on the situation, if the patient was leaving with the police they may not be welcomed back. If the patient goes home with a family member and decides to come back, they are usually are allowed back quick. Ms. Meyer is concerned that a patient leaves with their buddies and get high and they are hanging around town then they come right back; Mr. Boozan stated that not just anyone could sign them out. Ms. Meyer asked how will the public be made aware not to pick up hitchhikers around the area, will there be a public warning that would say something like “if you see anyone running down the highway don’t pick them up? Mr. Boozan stated that they would look into that with the local police to try to work out.

Jean Galloway, 258 Van Dorn Street explained that there are a number of detox center within a half hour; Mr. Boozan stated that there is only one facility similar to this one. Ms. Galloway asked about emergency admissions; they would have to delay if they didn’t have the right staff. Ms. Galloway confirmed that there were requesting 20 beds; yes.

Richard Zielinski, 247 Van Dorn Street asked what made the applicant decide on this site that is located near schools; it was the availability, size and closer to the highway. Further discussion regarding the location of the facility.

There was discussion regarding the amount of parking spaces. Mr. Leckstein asked about the two visitor spots; Mr. Boozan explained that would be if someone had to bring something to a patient.

Mr. Zielinski asked about a plan for black outs; there is an emergency generator. Mr. Leckstein asked if the Fed Ex box was going away; yes.

Elmer J. Graham, 22 St. Peters Place asked about the security; Mr. Leckstein explained that they have agreed to have two security people on the premise and will work with our local police.

Ann Dorn, Third Street asked for clarification regarding the zone of the site; Highway commercial. Ms. Dorn spoke about the security concerns. She asked if there was any alternative site being considered if this location doesn’t work out; Mr. Boozan stated that no alternative sites have been explored at this time.

Motion to close to the public at 9:30PM was made by D. Pacheco, second by W. McDermott with ayes by all present.

Mark Leber, Engineer introduced exhibit A4 – pictures of the facility. Mr. Leber described the exhibit and the area surrounding the location.

Mr. Leber stated that the ingress is provided from Route 36 with one-way, clockwise circulation around the building, and egress is provided onto Van Dorn Street.

The proposed improvements would include restriping of the parking lot to create an 18-foot-wide drive aisle along the south side by removing certain parallel parking stalls. Installation of a planter strip with green groundcover and trees along the south property line. Installation of a hedge row (27 boxwoods) along the east property line to provide buffering between properties. The property would have a fully enclosed outdoor area for patients to access fresh air.

The applicant's parking calculation included one space for intake assessments, two spaces for visitors, and eight spaces for staff. Board members discussed the potential need for an additional space to accommodate cleaning staff and raised concerns regarding potential overlap during shift changes, which could temporarily increase the number of parked vehicles on-site. Mr. Taylor asked about the spaces with the staff members switching, he questioned the time that it would take for this to happen. He explained he didn't want the parking to go onto the street. Mr. Leber stated he would discuss this with the operator of the facility and address this at the next meeting.

Mr. Himmel and Mr. Leber went through the CME review letter and addressed all the professional's concerns.

Mr. Taylor read the email from the Fire Official, Tony Vecchio regarding his concerns; Mr. Leber stated that he would speak to Mr. Vecchio before the next meeting.

Chairman Oviedo asked if the applicant was going to remove the existing trash enclosure would be removed; Mr. Leber stated that it will remain with fencing. Trash pickup frequency was discussed, with the applicant noting it would be based on generation rates.

Mr. Leckstein asked if the facility would be administering medication; yes. The waste would be limited to sharps (needles, etc.), collected in state-required sharps containers located inside the nurse's station. Sharps containers are picked up by a licensed medical waste company in compliance with state regulations. The applicant agreed to a condition of approval prohibiting any medical waste from being stored or deposited outside.

There was discussion regarding the landscaping, lighting and fencing around the property.

Mr. Leber mentioned that the only sign that would remain is the sign on the corner.

Motion to carry to the October 23rd meeting without further notice was made by D. Pacheco, second by W. McDermott with ayes by all present.

Motion to adjourn at 9:55PM was made by D. Pacheco, second by W. McDermott with ayes by all present.

Mr. Leckstein reminded the public that the application is going to be carried without further notification to the October 23rd meeting, he stated anyone that has any questions or concerns must be present at that meeting.