

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: **Brown**

LCC Name: **Brown County Recovery and Wellness Coalition**

LCC Contact: **Leyla Davis, Coordinator and Mallory Rockwell, Treasurer**

Address: **PO Box 1311**

City: **Nashville, IN 47448**

Phone: **Leyla Davis (812) 764-9833**

Email: leyla.davis@centerstone.org or rockwellm@browncounty-in.us

County Commissioners: **Jerry Pittman, President; Chuck Braden, Vice President;**

Ron Sanders

Address: **PO Box 151**

City: **Nashville, IN**

Zip Code: **47448**

Vision Statement

What is your Local Coordinating Council's vision statement?

We envision Brown County as a thriving community where recovery is possible for everyone.

Mission Statement

What is your Local Coordinating Council's mission statement?

To prevent and reduce substance use in Brown County

Membership List					
#	Name	Organization	Race	Gender	Category
1	Courtney Pence	RAP	W	F	Chairperson
2	Amanda Kinnaird	Centerstone	W	F	Vice Chairperson
3	Leyla Davis	Centerstone	W	F	Coordinator
4	Mallory Rockwell	Community Corrections	W	F	Treasurer
5	Sandy Washburn	BC Schools, PACES	W	F	P/E Chairperson
6	Felicia Velez	Community member	W	F	T/S Chairperson
7	Sarah Swinney	Centerstone	W	F	LE Chairperson
8	Melanie Thevenow	Centerstone, CJ Liaison	W	F	LE Vice Chair
9	Melissa Tatman	Jail Services Coordinator	W	F	LE subcommittee
10	Cory Joy	Do Something, local pastor	W	M	LE subcommittee
11	Melissa Rittenhouse	Centerstone, PACES	W	F	LE and T/S subcommittees
12	Jim Kemp		W	M	
13	Cathy Roundtree	Health board	W	F	
14	Jen Acton	BC Probation	W	F	LE subcommittee
15	Meagan Cothron	ITVAP	W	F	
16	Allison Braden		W	F	T/S subcommittee
17	Jon Dauterman	BC DCS	W	M	T/S subcommittee
18	Hannah Lee	BC Juvenile Probation	W	F	LE subcommittee
19	Bill Todd	BC for Quality Healthcare	W	M	T/S subcommittee
20	Brad Stogsdill	BC Sheriff	W	M	LE subcommittee
21	Melanie Voland	Centerstone, SOC	W	F	PE subcommittee
22	Lori DeYoung		W	F	
23	Tyler Hinkle	FSSA	W	M	
24	Melissa Helm		W	F	
25	Cheryl McDermott	Alkermes (vivitrol)	W	F	

26	Julia Reeves	BC auditor	W	F	
27	Kim Robinson	YMCA	W	F	
28	Ben Beatty	CRC	W	M	
29	Martha Bowman	Centerstone	W	F	LE subcommittee
30	Missey Badgerow	Centerstone	W	F	LE subcommittee

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

We meet the 2nd Thursday of the month at 201 Locust Ln, Salmon Room, Nashville, IN
 We typically take December off unless there is a need for business purposes.

II. Community Needs Assessment

The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

Community Profile

County Name
Brown
County Population
15,544 world population review
Schools in the community
Brown County High School, Brown County Middle School, Van Buren Elementary, Sprunica Elementary, Helmsburg Elementary
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.)
Brown County Health co-op IU Health No hospitals or urgent care facilities in the county

<p>Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.)</p> <p>Centerstone has an office in Nashville and is the only community mental health center in Brown County. There are no hospitals or urgent care centers.</p>
<p>Service agencies/organizations</p> <p>Centerstone, Turning Point Domestic Violence Services, YMCA, BC Health and Living Center (nursing home), Women’s Resource Center/Silver Linings (women and children only), Do Something, local youth groups/church groups</p>
<p>Local media outlets that reach the community</p> <p>Brown County Democrat</p> <p>Social media groups that exchange local news such as road conditions and school closings, etc.</p>
<p>What are the substances that are most problematic in your community?</p> <p>Methamphetamine, prescription misuse, fentanyl, marijuana, alcohol, tobacco, vaping (especially in the schools)</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community</p> <p>Smoking cessation classes for teens ticketed for tobacco possession.</p> <p>Centerstone provides assessments, substance use treatments and programming including SUD group, individual therapy, recovery coaching, MRT group, dual diagnosis group</p> <p>Alcoholics Anonymous</p> <p>Narcotics Anonymous</p> <p>AI-Anon</p> <p>Faith based recovery meetings</p> <p>Recover Out Loud</p> <p>Recovery meetings and SUD programming in BC Jail</p>

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family

substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

Protective Factors Examples: strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.¹

Risk Factors	Resources/Assets	Limitations/Gaps
<p>1. Availability of alcohol and other drugs and perception of peer use.</p> <ul style="list-style-type: none"> - many youth report feeling sad or hopeless. - low commitment to school. -alcohol, vaping, and marijuana are used by youth 	<p>1. Centerstone services</p> <p>2. SEL curriculum and professional development</p> <p>3. DCS/Probation</p> <p>4. Extra-curricular activities</p>	<p>1. transportation</p> <p>2. staffing</p>
<p>2. Low perception of harm of substance and alcohol use.</p> <ul style="list-style-type: none"> - People are dying due to substance use. - People are self-medicating via substance and alcohol use. <p>Generational substance use.</p>	<p>1.naloxone availability</p> <p>2.fentanyl test strips</p> <p>3.treatment programming within the jail</p> <p>4.support groups</p>	<p>1.lack of transportation</p> <p>2. lack of employment opportunities</p> <p>3. stigma of mental health treatment</p> <p>4. barriers to getting health insurance</p> <p>5. internet accessibility.</p>
<p>3. Lack of treatment increases recidivism.</p> <ul style="list-style-type: none"> -People in Brown County are experiencing legal and criminal ramifications -Substance use is creating a public safety risk. -Increased cost of incarceration. 	<p>1.Criminal justice partners recognize ACE’s and needs for programming addressing these issues.</p> <p>2. Local mental health partners providing appropriate services.</p>	<p>1. Continued development and coordinating of Substance Use and Mental Health services within the jail.</p> <p>2. Getting individuals the appropriate level of care when in crisis.</p> <p>3. Lack of transportation and internet accessibility.</p>
Protective Factors	Resources/Assets	Limitations/Gaps

¹Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

<p>1.Prevention and education efforts related to substance use and mental health in the community.</p>	<p>1.Educational curriculum related to substance use.</p> <p>2.Agreement with Centerstone to provide school-based mental health services.</p> <p>3.Local youth programming such as 4H and faith-based programming.</p>	<p>1.School attendance and participation rates in youth programming are down due to COVID.</p> <p>2.Transportation to and from programs</p>
<p>2.Access to mental health care</p>	<p>1.Community mental health center-Centerstone</p> <p>2.Support groups such as NA,AA,and Al-ateen</p>	<p>1.Lack of internet in certain parts of the county</p> <p>2.Lack of adequate transportation</p> <p>3.Difficulty accessing health insurance.</p>
<p>3. Collaborative efforts between law enforcement agencies, corrections, mental health services, court and school.</p>	<p>1.Brown County Recovery and Wellness Coalition addressing substance use issues.</p> <p>2. School resource officer</p> <p>3. Jail services coordinator</p>	<p>1. Available funding for programming.</p> <p>2. intra-state coordination</p> <p>3. lack of intra-agency shared understanding and language.</p>

III. Making A Community Action Plan

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements

Step 2: Ensure your problem statements are evidence-informed, then prioritize

Step 3: Brainstorm what can be done about each

Step 4: Prioritize your list, and develop SMART goal statements for each

Step 5: List the steps to achieve each goal

Step 1: Create + Categorize Problem Statements

Create problem statements as they relate to each of the identified risk factors.

Risk Factors	Problem Statement(s)
<ol style="list-style-type: none">1. Availability of alcohol and other drugs and perception of peer use2. Youth report feeling sad and hopeless3. Youth have low commitment to school4. Favorable attitude towards drug and alcohol use	<ol style="list-style-type: none">1. BC youth are risk for developing a substance use disorder2. Youth perceive that many peers are using alcohol and other drugs-many more than actually reporting3. Youth have a low perception of harm of alcohol and other drugs.
<ol style="list-style-type: none">2. Low perception of harm of substance and alcohol use.	<ol style="list-style-type: none">1. Alcohol and substance use is a problem amongst adults in Brown County

	<ul style="list-style-type: none"> 2. Mental health disorders are being exacerbated by substance and alcohol use. 3. People in Brown County are dying or experiencing negative consequences due to substance and alcohol use.
3. Lack of treatment resources increases recidivism.	<ul style="list-style-type: none"> 1. People in Brown County are experiencing legal and criminal ramifications. 2. Substance use is creating a public safety risk. 3. County is financially strained due to increased cost of incarceration.

Step 2: Evidence-Informed Problem Statements

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

Problem Statements	Data That Establishes Problem	Data Source
1. Brown County youth are at risk for developing a substance use disorder	<p>Low commitment to school 62% of grade 8, 47% of grade 10 and 57% of grade 12 youth report low commitment to school above the national standard</p> <p>Mental Health challenges Across grades 7-12, at least 1 in 3 BC youth report feeling sad or hopeless more than 2 weeks in a row. Anywhere from 16% grade 12 to 26% grade 10 reported that they had seriously considered suicide and 12% grade 8 and 19% grade 10 reported that they had made a plan for attempting suicide.</p>	IYI Data 2020

	<p>High rates of school absenteeism 1 out of 3 of BC Youth have already missed or are on track to miss at least or more than 18 days of school this year. Availability of alcohol, tobacco and other drugs</p> <p>Perception of Peer Use There is a significant gap at every grade level between perception of peer use and actual use for alcohol, tobacco, marijuana, and prescription drugs with perception of use elevated by as much as 40 plus percentage points.</p> <p>Perceptions favorable toward substance use Between 32% and 52% of BC Youth report more favorable attitudes toward drug use above the national standard. High rates of family conflict. 36% --51% of BC Youth report family conflict rates above the national standard</p> <p>Substance Abuse Screening CRAFFT scores show percentage of youth at various ages that screen as high risk of developing a substance use disorder. 12 years –2.9% 13 years-11.8% 14 years--12.5% 15 years—16.7% 16 years—21.6%</p>	
<p>2. Alcohol and substance use is a problem in Brown County</p>	<p>Data from Centerstone (Brown County specific) shows that 146 people were treated for substance use disorder</p>	<p>Centerstone analytics data team</p> <p>https://www.in.gov/recovery/data/</p>

<p>3. People in Brown County are experiencing legal and criminal ramifications, directly or indirectly from their substance use, which also may impact public safety.</p>	<p>Daily costs 2022 adult \$73.07 which reflects a 13% increase from 2021 2022 juvenile \$362.49 which reflects 2% decrease from 2021 Of the 433 bookings in 2021, 225 (52%) were related to substance use</p>	<p>IDOC July 1, 2022 Fact card BC Sheriff Dept records</p>
---	---	--

Step 3: Brainstorm

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

Problem Statements	What can be done (action)?
<p>1. Youth in Brown County are at risk of developing substance use disorder</p>	<ol style="list-style-type: none"> 1. Share data from IYNS with BCMS, BCHS and BCS Youth Ambassadors. 2. Seek counsel from students regarding factors that might increase school commitment. 3. Explore opportunities for school-based service Projects in partnership with Community agencies, faith based organizations, schools, and Beta. 4. Youth driven social norming activities to increase accuracy in perceptions of peer use. 5. Educate school personnel about actual youth use in their buildings. 6. Educate families and community members to understand the actual use/misuse of teens and the gaps that exist between perceived use and actual use in Brown County. 7. Educate youth on the relationship between social media use and feelings of self-efficacy 8. Increase access to strategies to improve one’s own mental health. 9. Educate youth on availability of community supports and crisis resources.

	<p>10. Connect with BC2M Club at High School to consider a student led campaign to reach out and support others.</p> <p>11. Let them be part of the solution in action. Help to plan Hopefest. Have a booth and let them participate in the Recovery Walk.</p> <p>12. Connect them with the incarcerated through a letter writing campaign or in person when Covid 19 subsides. (they have lots of education but we need to strategically think of ways that their knowledge turns into actions).</p> <p>13. Student panel to hear their thoughts about what is motivating or empowering to them. For example, “Just say no” was never going to work for a variety of reasons. Let’s find out what speaks to them.</p>
<p>2. People in Brown County are dying or experiencing life altering consequences due to substance use and addiction.</p>	<ol style="list-style-type: none"> 1. Increase community awareness and education of 988, mobile crisis units and stride center 2. Expand MAT options locally 3. Update treatments and supports guide 4. HOPE resiliency training made available to all providers and community members 5. Community conversation around awareness; access to treatment, resources, support, naloxone training and overdose awareness day
<p>3. People in Brown County are experiencing legal and criminal ramifications, directly or indirectly, from their substance use and mental health challenges, which also may impact public safety.</p>	<ol style="list-style-type: none"> 1. Identify substance abuse concerns in the criminal justice process and refer to services. 2. Work on ways to identify substance abuse and mental health concerns without having to engage law enforcement. 3. Develop programming/events with law enforcement to provide additional information and resources to the community.

Step 4: Develop SMART Goal Statements

For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

Problem Statement #1	
Goal 1	The BCRAWC will reach a minimum of 100 community members to raise awareness regarding youth risk for substance use disorder
Goal 2	Engage community members and support families in having conversations with youth by distributing Talk They Hear You Materials at 3 Community Events and at local community organizations.
Problem Statement #2	
Goal 1	Expand awareness and access for treatment in recovery by December 31 2023
Goal 2	Reduce the number of substance related deaths by December 31, 2023
Problem Statement #3	
Goal 1	Identify substance abuse and mental health concerns early in the criminal justice process and ensure access and support for services.
Goal 2	Increase community awareness of programs that may reduce and/or prevent the incarceration of people with Substance Use Disorder and Mental Health concerns by providing information about access to community services.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 The BCRAWC will reach a minimum of 100 community members to raise awareness regarding youth risk for substance use disorder	<ol style="list-style-type: none"> 1. Write a guest column containing most recent data from IYS 2. Post at least twice per week on Facebook, Instagram, and/or Twitter
Goal 2 Engage community members and support families in having conversations with youth by distributing Talk	<ol style="list-style-type: none"> 1. Print materials with local branding

<p>They Hear You Materials at 3 Community Events and at local community organizations.</p>	<ol style="list-style-type: none"> 2. Distribute materials at 4-H Fair, Family Festival, HOPE Fest, and 2 school events 3. Distribute to YMCA, Faith organizations, BC Public Library, Community Corrections, government offices
<p>Problem Statement #2</p>	<p>Steps</p>
<p>Goal 1 Expand awareness and access for treatment in recovery by December 31 2023</p>	<ol style="list-style-type: none"> 1. Host 2 community conversations around substance use and recovery and connect one to the Overdose Awareness Day 2. Update the Brown County Treatment Guide 3. Publicize 988, mobile crisis unit, Stride Center
<p>Goal 2 Reduce the number of substance related deaths by December 31, 2023 Reduce the number of substance related deaths by December 31, 2023</p>	<ol style="list-style-type: none"> 1. Naloxone trainings for public (minimum of 2) 2. Host 1 MAT educational/stigma busting presentation 3. Stakeholder and community awareness of naloxone access/resources/update naloxone distribution posters
<p>Problem Statement #3</p>	<p>Steps</p>
<p>Goal 1 Develop and disseminate the process available for community members to be able to access appropriate substance use and mental health services</p>	<ol style="list-style-type: none"> 1. Continue to pursue that permanence of the jail services coordinator position. 2. Create and implement a referral form with services available inmates once they are incarcerated. 3. Decide and implement a method for tracking if people are engaging in services while they are incarcerated to be able to see if there is a correlation to the recidivism rates.
<p>Goal 2 Improve communication between law enforcement and school system. Determine if using the “Handle</p>	<ol style="list-style-type: none"> 1. Obtain more information and resources regarding the “handle with Care” program.

with Care” would be helpful for the juvenile community in Brown County.	<p>2. Improve additional training and tracking of the in-service calls for individuals in the community who are not under arrest.</p> <p>3. Develop a plan to increase the communities understanding of the 988 Help line and the Mobile Crisis number.</p>
---	---

IV. Fund Document

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC’s fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

Funding Profile		
1	Amount deposited into the County DFC Fund from fees collected last year:	\$15,309.78
2	Amount of unused funds from last year that will roll over into this year:	\$10,667.95
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$25,977.73
4	Amount of funds granted last year:	\$10,270.00
Additional Funding Sources (if no money is received, please enter \$0.00)		
A	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
B	Centers for Disease Control and Prevention (CDC):	\$0.00
C	Bureau of Justice Administration (BJA):	\$0.00

D	Office of National Drug Control Policy (ONDCP):		\$0.00
E	Indiana State Department of Health (ISDH):		\$0.00
F	Indiana Department of Education (DOE):		\$0.00
G	Indiana Division of Mental Health and Addiction (DMHA):		\$0.00
H	Indiana Family and Social Services Administration (FSSA):		\$0.00
I	Local entities:		\$0.00
J	Other:		\$0.00
Categorical Funding Allocations			
Prevention/Education: \$6,494.42		Intervention/Treatment: \$6,494.42	Justice Services: \$6,494.42
Funding allotted to Administrative costs:			
<i>Itemized list of what is being funded</i>			<i>Amount (\$100.00)</i>
Coordinator compensation			\$2,400.00 (12 months)
Office supplies			\$4,094.42
Funding Allocations by Goal per Problem Statement:			
Problem Statement #1	Problem Statement #2	Problem Statement #3	
Goal 1: \$3,247.21	Goal 1: \$3,247.21	Goal 1: \$3,247.21	
Goal 2: \$3,247.21	Goal 2: \$3,247,21	Goal 2: \$3,247.21	