

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Daviess

LCC Name: Daviess County Local Coordinating Council

LCC Contact: Angela Russell

Address: 4778 E. 825 S.

City: Montgomery

Phone: 812-631-4193

Email: angelaleisman@msn.com

Daviess County Commissioners:

Address: 300 Hefron St., Suite 204

City: Washington, Indiana

Zip Code: 47501

Phone: 812-254-8662

Vision Statement

What is your Local Coordinating Council's vision statement?

The Local Coordinating Council strives to make Daviess County a county free of substance abuse issues.

Mission Statement

What is your Local Coordinating Council's mission statement?

The Daviess County LCC believes alcohol, tobacco, or drug abuse (ATOD) to be among the leading health and social problems in our nation today. ATODs negatively affect virtually every member of our society through their impact on crime, families, health, education, employment and economics. We believe an important step toward the eradication of ATOD is to address the problem through the combined efforts of citizens at the community level.

We, the Local Coordinating Council for a Drug-free Daviess County, support the coordination of a community-based comprehensive ATOD network to address the problems associated with these abuses and to promote a healthy life-style.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Jennifer Stefancik	Purdue Extension	C	Female	Education
2	Ashley Charleston	Samaritan Center	C	Female	Prevention
4	Staff change-holding slot	Youth First	C	Female	Prevention
5	Carole Luchtefeld	RARE Program	C	Female	Treatment
6	Troy Zellers	WHS	C	Male	Youth/Prevention
7	Jeff Doyle	Barr-Reeve schools	C	Male	Education
8	Brent Dalrymple/Jed Jerrels	North Daviess Schools	C	Male	Education
9	Daniel Christie	Washington Police Dept.	C	Male	Law Enforcement
10	Kelly Miller	Griffith Elem	C	Female	Education
11	April Sircy	PACE	C	Female	Prevention
12	Angela Russell	Samaritan Center	C	Female	Treatment
13	Dan Murrie	DC Prosecutor	C	Male	Judiciary
14	Nicole Cook	North Daviess Schools	C	Female	Education
15	Cindy Barber	Purdue Extension	C	Female	Education
16	Cathy Bush/Megan	Hope's Voice	C	Female	Prevention
17	Myranda Knepp	ITPC	C	Female	Treatment
18	Christina Wicks	ITVAP	C	Female	Prevention
19	Scott Biding	WJHS	C	Male	Education
20	Joe Hamdan	Daviess County Community	C	Male	Treatment
21	Gary Allison/Steve Sturgis	Daviess Co. Sheriff's Dept.	C	Male	Law Enforcement
22	Brian Peek	Daviess Co. Peer Recovery / IRACS	C	Male	Treatment
23	Jenilee Counsil	Stigma Stoppers	C	Female	Education
LCC Meeting Schedule:					
Please provide the months the LCC meets throughout the year: The LCC meets at 12:00 noon on the second Monday of the month at the Daviess County Security Center in Washington, IN. Meetings are held January, February, March, April, May, August, September, November and Executive Committee only meets in December.					

Currently meetings have been held as hybrid meetings in person and virtually via Zoom Cloud Meetings. The LCC does not meet in June, July.

Community Needs Assessment: Results

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 Daviess County Local Coordinating Council
County Population 33,397 (2021)
Schools in the community North Daviess, Barr Reeve, Washington and Washington Catholic school districts. Home school and the Amish school system.
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Daviess County Hospital, Good Samaritan Hospital, Memorial Hospital
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Samaritan Center- Good Samaritan Hospital (Samaritan Center will change name to Daviess County Family Health Center in July of 2023) Council for Change White Stone Counseling DCH – Transitions Groups Youth First

<p>Service agencies/organizations Hoosier Uplands- Tobacco Prevention PACE Hope's Voice Indiana Youth Services- Indiana Trafficking Victims Assistance Program Purdue Extension IRACS</p>
<p>Local media outlets that reach the community WAMW, WWBL WashingtonTimes Herald Odon Journal</p>
<p>What are the substances that are most problematic in your community? Meth, marijuana, tobacco/vaping and prescription drugs.</p>
<p>List all substance use/misuse services/activities/programs presently taking place in the community Samaritan Center RARE Peer Recovery Services at Daviess Community Hospital IRACS Lighthouse Peer to Peer Recovery Café' Groups</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
1. The ongoing problematic use of alcohol and drugs of adults and youth in the community.	<ol style="list-style-type: none"> 1. Alcohol and tobacco compliance checks by Excise. 2. Drug return campaigns. 3. Laws and ordinances that allow for fines assessed to retail outlets. 4. Treatment access in community 5. Peer Recovery Services 6. Recovery Café' 	<ol style="list-style-type: none"> 1. Limited drug take back events. 2. Limited awareness of drug availability as a community issue. An example would be tobacco/vape availability to youth. 3. Limited harm reduction programs. 4. Limited levels of treatment that are accessible in the county.
2. At-risk groups exist within the county.	<ol style="list-style-type: none"> 1. Hope's Voice 2. Indiana Trafficking Victims Assistance Program. 3. Health Department Cultural Liasons 4. Youth First 	<ol style="list-style-type: none"> 1. Limited substance abuse program options that would include translation services. 2. Lack of awareness of substance abuse as an issue within the community and how that can affect rates of violence and crime. 3. External and Internalized Stigma of vulnerable populations.
3. Misperceptions of the use of alcohol and tobacco.	<ol style="list-style-type: none"> 1. SADD and school based prevention/awareness programs. Preventure Program, Stigma Stoppers 2. Youth First, LCC, Daviess County Hospital based coalitions targeting substance abuse. Live Well Health Coalition 3. Diverse population with 	<ol style="list-style-type: none"> 1. Multi generational use. 2. Lack of knowledge when understanding the consequences of substance abuse. 3. Mentoring or role modeling opportunities are newly established.

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

	cultural norms and influences.	
Protective Factors	Resources/Assets	Limitations/Gaps
1. Social connection	<ol style="list-style-type: none"> 1. Ethnic and cultural influences within the community. 2. School corporation connection thru events and activities. 3. Faith based organizations with youth and adult social oriented activities. 4. Self-help meetings in the community that support those in recovery. 	<ol style="list-style-type: none"> 1. Transportation 2. Program availability location. 3. Limited alternate program opportunities.
2. Multi-disciplinary support services	<ol style="list-style-type: none"> 1. DC Hospital,GSH/Samaritan Center, mental health service providers. 2. Parenting and child development service agencies. 3. Coalition groups addressing substance abuse and other community based issues. 4. Law Enforcement/Judicial entities that refer people to supportive resources. 	<ol style="list-style-type: none"> 1. Flexibility and availability of identified social service supports. 2. Awareness of the availability of support services. 3. Cooperative interaction between service providers.
3. Positive family connection and caring community.	<ol style="list-style-type: none"> 1. Churches and faith based programming. 2. Community based recreational alternative activity programming. 3. School programming, both after school and in school related. 	<ol style="list-style-type: none"> 1. Stigma related to treatment or addressing substance abuse behavior. 2. Lack of awareness of substance abuse, limited recognition of the dangers of substance abuse .

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. Identified problems are addressed over a three year period, where a full CCP is submitted to the Indiana Criminal Justice Institute (ICJI) April 1st of year 1, then two updates are submitted on April 1st of years 2 and 3.

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)
1. The easy access of drugs for adults and youth in the community.	1. Use of Alcohol, methamphetamine, marijuana and other drugs continue to create problems of addictions for adults and youth. 2. Treatment options addressing substance abuse issues are limited due to gaps for care placement within the community and limited utilization of existing recovery resources. 3. Adult and youth use of tobacco/vaping, meth, marijuana, alcohol and other drugs continue at unacceptable rates.
2. Susceptible and vulnerable groups exist within the county.	1. Limited insight as to the effects resulting from addictions that create problems for mental health, physical health, along with

	<p>problem of education attainment that exists within the community .</p> <ol style="list-style-type: none"> 2. Generational patterns contribute to Adverse Childhood Effects that contribute to mental illness and addiction along with continued illegal use and abuse of alcohol and other drugs.
<ol style="list-style-type: none"> 3. Minimizations of harm from the use of drugs, alcohol and tobacco 	<ol style="list-style-type: none"> 1. The use of alcohol, marijuana and tobacco/vaping products by adults and youth is the result of disregard of harmful consequences, family related factors (generational use), easy availability, boredom and perception of peers in use within the community. 2. Youth use rates of alcohol, tobacco/vaping products and marijuana are prevalently high and remain problematic in our region. 3. There is a lack of awareness on the part of youth and their families of the perceived risk and consequences involved with illegal substance abuse.

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
<ol style="list-style-type: none"> 1. Use of Alcohol, methamphetamine, marijuana and other drugs continue to create problems of addictions for adults and youth. 	<ol style="list-style-type: none"> 1. 230 charges related to alcohol and drug use in 2022 for Washington Police Department. A breakdown of the numbers: 2 Minor Possession of Alcohol, 10 were Public Intoxication of Alcohol, 2 Public Intoxication of drugs, 52 	<p>Washington Police Department Law Incident Total Report, by Offense Codes, report ran on 3/29/2023.</p>

	<p>OWI with alcohol related arrests, 6 OWI with controlled Substance arrests, 18 charges for Dealing meth, 31 charges Poss. Of Meth, 2 for Dealing marijuana, 14 Poss. Of Marijuana and 1 for Dealing a controlled substance Schedule I,II,III,IV,V, 3 charges related to Cocaine or Narcotic drug.</p> <p>2. 39 cases related to Alcohol and drug charges were reported for Daviess County Sheriff Department for 2022. 13 Traffic Stops were related to Drug and Alcohol cases. Reckless driving and Accidents were other cases related to drug and alcohol cases.</p> <p>3. Individuals receiving Addiction Treatment services at Samaritan Center was reported for Daviess County as 88, Adults receiving Mental Health Services 264, Children Receiving Mental Health 138, Unduplicated cases reported as 437. (Please note these were a reflection from DMHA- all clients served are not all state qualified to this report system)</p> <p>4. Substance use treatment episodes documented on IPRC note 113 with 50 for alcohol, 48 for marijuana and 76 for methamphetamine, 27 for opioids</p> <p>5. IRACS Program is</p>	<p>Daviess County Sheriff's Department Office, Total Offenses Report, By Statute, report ran on 12/13/2022.</p> <p>Division of Mental Health and Addiction SFY 2021 FSSA DMHA: County Provider Reports specified to Daviess County Knox County Hospital – Good Samaritan Hospital (Samaritan Center)</p> <p>County Epidemiological Data-IPRC (Indiana Prevention Resource Center) SFY2021 with data source of Indiana Family and Social Services Administration, Division of Mental Health and Addiction</p>
--	--	--

	<p>working in Daviess County Security Center since July of 2022- to this point March of 2023 they report having helped 20 people successfully Matrix Program and have enrolled over 400 people through Recovery Link an online data system. 60 people were noted to be successfully re-enter the community post-incarceration to treatment programs, Recovery Residences, or Work Release along with setting them up with Peer Recovery Coaching.</p>	<p>Integrated Re-Entry and Correctional Support Program Highlights March 2023</p>
<p>2. Limited insight as to the effects resulting from addictions that create problems for mental health, physical health, along with problem of education attainment that exists within the community .</p>	<ol style="list-style-type: none"> 1. 2 youth were arrested for Minor Possession of Alcohol by Washington Police Department. 2. School Suspensions or Expulsions related to Alcohol, Tobacco and/or Drug Use reported as 19 cases for Daviess County 3. 18 cases were reported for removals of children from the home due to Parental Alcohol and/or Drug Abuse in Daviess County for SFY 2021 4. Tobacco and Health in Daviess County notes 19.8% of adults who smoke, 44.5 Lung Cancer Deaths, 254.7 Cardiovascular Disease Deaths, and 47.2 Asthma related Emergency Room 	<p>Washington Police Department Dispatch report 3/29/2023</p> <p>County Epidemiological Data-IPRC (Indiana Prevention Resource Center)</p> <p>County Epidemical Data- IPRC (Indiana Prevention Resource Center)</p> <p>The State Tobacoc Control Daviess County, Hoosier Uplands Tobacco Coalition – September 2021</p>

	<p>visits. 45 Births were affected by smoking with low birth weight, SIDS, Reduced Lung Function. Smoking deaths 55, 9 due to secondhand smoke. 1,638 Smoking Related Illnesses</p> <p>5. Most common route of use for Marijuana is by smoking with 84% of users noting this their most common method. 17% of users were noted to use a combination of nicotine and Marijuana mix while using.</p> <p>IPRC notes Educational Attainment in Daviess County as 34.0% have a High School Diploma or GED, 15.9% have less than 9th grade education and 10.3% have some high school but no diploma. Indiana state averages 33.4% for an education of High School Diploma or GED, 3.7% for 9th Grade or less and 7.5% Some High School, no diploma</p>	<p>Indiana Adult Tobacco Survey Summary of Findings November 2022- Indiana Department of Health, Tobacco Prevention and Coalition</p> <p>County Epidemiological Data- IPRC- Indiana Prevention Resource Center- iprc.iu.edu/epidemiological-data Year of Data 2020- no new data listed on their site</p>
--	--	--

	<p>Percentage of 12th grade Indiana Students, Southwest Region 8, reporting monthly use of cigarettes is 4.4% . Indiana State average is 2.8% for cigarettes. Region 8 percetage reporting monthly use is 21.2% for vape use.State average vape use 14.8%.</p> <p>6. Percentage of 12th grade Indiana Students, Southwest Region 8, reporting monthly use of marijuana is 11.5 % . Indiana State average is 12.6% . Snythetic Marijuana 1.9% for Region 8 compared to state percentage 1.4%</p> <p>7. Percentage of 12th grade Indiana Students, Southwest Region, reporting monthly use of alcohol is 26.1 % . Indiana State average is 19.9. Binge Drinking of Alcohol use for Regional 8 was reported as 14.1% while state average noted at 8.2%.</p> <p>8. For Region 8 Percentage Reporting Monthly use of Alcohol, Tobacco, and Other Drugs the local prevalence rates of Electronic Vapor Products, Alcohol and Binge drinking</p>	<p>2022 Indiana Youth Survey</p>
--	--	----------------------------------

	<p>are comparable to average state rates for Indiana 9th grade students.</p>	
<p>3. The use of alcohol, marijuana and tobacco/vaping products by adults and youth is the result of disregard of harmful consequences, family related factors (generational use), easy availability, boredom and perception of peers in use within the community.</p>	<ol style="list-style-type: none"> 1. IPRC data reports removal of children from their homes due to Parent Alcohol abuse and/ or Parent Drug Abuse in Daviess County, resulted in 24 cases that noted this as the cause of removal. 2. IPRC data for school year 2019-2020 reports school suspensions or expulsions related to Alcohol, Tobacco and/or other drugs as 19 Students. 3. Health risk Behaviors identified as smoking 24.7% and excessive drinking 16.7% rated higher than state average by IPRC. 	<p>County Epidemiological Data- IPRC- Indiana Prevention Resource Center- iprc.iu.edu/epidemiological-data</p> <p>County Epidemiological Data- IPRC- Indiana Prevention Resource Center- iprc.iu.edu/epidemiological-data</p> <p>County Epidemiological Data- IPRC- Indiana Prevention Resource Center- iprc.iu.edu/epidemiological-data Data year 2019 as reported in the 2022 Health Ranking</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)?
<ol style="list-style-type: none"> 1. Use of Alcohol, methamphetamine, marijuana and other drugs continue to create problems of addictions for adults and youth. 	<ol style="list-style-type: none"> 1. Provide law enforcement and justice programming with resources for projects that reduce the number of crimes associated with alcohol and drug abuse. 2. Support law enforcement through training to identify adults and youth in use of substances along with maintenance and refinement of equipment used to take into custody offenders who have alcohol or drug abuse as a primary or secondary reason for arrest. 3. Support re-entry of incarcerated individuals with the provision of treatment assessments and substance abuse education programming.
<ol style="list-style-type: none"> 2. Limited understanding of the effects of substance abuse on mental health, physical health, along with education attainment exist within the community 	<ol style="list-style-type: none"> 1. Support intervention and treatment for youth. This would include programs that build youth life skills/resilience, increase education attainment and directly address risk factors for substance use. 2. Support access and availability of substance abuse treatment and

	<p>intervention services, including assessments and the need for comorbid treatment practices, counseling support and after care programs.</p> <p>3. Support community awareness programs along with public training in regards to the effects of substance use on health, families and the community.</p>
<p>3. The use of alcohol, marijuana and tobacco/vaping products by adults and youth is the result of disregard of harmful consequences, family related factors (generational use), easy availability, boredom and perception of peers in use within the community.</p>	<p>1. Support initiatives that provide opportunities for prevention, awareness and education options. Funding will allow for the support and increase of the availability of evidence based prevention programs.</p> <p>2. Support prevention and education initiatives for youth. This would include programs that build youth life skills and directly address risk factors for substance use.</p>

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
<p>Goal 1: The Daviess County LCC, by supporting law enforcement in their efforts to discern adults and youth in use of substances by support of training, maintenance and refinement of equipment used to take into custody offenders who have alcohol or drug abuse as a primary or secondary reason for arrest, will see a reduction of 3% the number of adults arrested for alcohol, marijuana, meth and other drugs during the current year.</p>
<p>Goal 2: The Daviess County LCC will see an increase for treatment assessments or relapse</p>

prevention /recovery support programs by 3% in the number of Adult and youth use of tobacco/vaping, meth, marijuana, alcohol and other drugs with referrals of justice involved individuals in this year.

Problem Statement #2

Goal 1: The Daviess County LCC will support prevention education, intervention and treatment for youth and adults. This would include programs that build life skills/resilience, increase education attainment and directly addresses the risk factors for substance use in an effort to decrease by 5% self reported past 30 day usage rates for those using marijuana/other drugs, tobacco/vaping products and alcohol during the current year.

Goal 2: The number of youth participating in programming to address increasing insight as to the effects resulting from addictions that create problems for mental health, physical health, along with problem of education attainment that exists within the community will increase by 3 % during the current year.

Problem Statement #3

Goal 1: Daviess LCC will support initiatives that provide opportunities for prevention, awareness and education options for adults and youth. Funding will allow for a 3 % increase in support and increase of the availability of evidence based prevention programs to address tobacco/vaping, alcohol, marijuana and other drugs during the current year.

Goal 2: Adults and Youth involvement with treatment and relapse prevention programming addressing illegal substance use will measure a 5% successful participation rate during the current year.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
<p>Goal 1: The Daviess County LCC, by supporting law enforcement in their efforts to discern adults and youth in use of substances by support of training, maintenance and refinement of equipment used to take into custody offenders who have alcohol or drug abuse as a primary or secondary reason for arrest, will see a reduction of 3% the</p>	<ol style="list-style-type: none"> 1. Prevention: Support public awareness campaigns and events that address substance use/misuse. 2. Treatment: Support law enforcement in making referrals to treatment services provided for adults affiliated with the justice system.

<p>number of adults arrested for alcohol, marijuana, meth and other drugs during the current year.</p>	<p>3. Justice: Support justice system in their efforts to address substance use/misuse by incarceration of individuals engaging in illegal drug usage or problem alcohol use.</p>
<p>Goal 2: The Daviess County LCC will see an increase for treatment assessments or relapse prevention /recovery support programs by 3% in the number of Adult and youth use of tobacco/vaping, meth, marijuana, alcohol and other drugs with referrals of justice involved individuals in this year.</p>	<p>1. Treatment: Support programming that will enhance the ability of service agencies to conduct substance abuse assessments and enhance treatment to include comorbid best practices with individuals associated with the justice system.</p> <p>2. Prevention: Support activities that provide educational and awareness opportunities for incarcerated or justice affiliated individuals.</p> <p>3. Justice: Support the access and availability of assessments and treatment services/recovery support for justice related individuals while incarcerated.</p>
<p>Problem Statement #2</p>	<p>Steps</p>
<p>Goal 1: The Daviess County LCC will support prevention education, intervention and treatment for youth and adults. This would include programs that build life skills/resilience, increase education attainment and directly addresses the risk factors for substance use in an effort to decrease by 5% self reported past 30 day usage rates for those using marijuana/other drugs, tobacco/vaping products and alcohol during the current year.</p>	<p>1. Prevention: Promote the use of youth oriented substance use surveys on an annual basis. Promote support for programs that utilize building life skills/resilience/alternatives to use, education attainment along with addiction awareness programs.</p> <p>2: Treatment: Support assessment/treatment for youth and adults engaging in substance use to determine need of services to address illegal substance use.</p> <p>3: Justice: Support Justice and law enforcement activities that are involved with youth participating with illegal substance use.</p>
<p>Goal 2: The number of youth participating in</p>	<p>1. Prevention: Support the increased provision of prevention education and</p>

<p>programming to address increasing insight as to the effects resulting from addictions that create problems for mental health, physical health, along with problem of education attainment that exists within the community will increase by 3 % during the current year.</p>	<p>programs that increase insight of risk with substance use for youth.</p> <p>2. Justice: Fund justice services that help identify youth in need of prevention education or treatment assessments and other services.</p> <p>3. Treatment: Support access to treatment or intervention services that are specific to youth recovery needs.</p>
<p>Problem Statement #3</p>	<p>Steps</p>
<p>Goal 1: Daviess LCC will support initiatives that provide opportunities for prevention, awareness and education options for adults and youth. Funding will allow for a 3 % increase in support and increase of the availability of evidence based prevention programs to address tobacco/vaping, alcohol, marijuana and other drugs during the current year.</p>	<p>1: Prevention: Support the identification of adults and youth interested in participating with the development and provision of prevention oriented programs.</p> <p>2: Justice: support the interaction of law enforcement or justice services to assist with prevention service providers in the provision of information relating to the consequences of illegal substance use.</p> <p>3: Treatment: Support treatment and intervention programming that is specific to addiction treatment needs for adults and youth.</p>
<p>Goal 2: Adults and Youth involvement with treatment and relapse prevention programming addressing illegal substance use will measure a 5% successful participation rate during the current year.</p>	<p>1. Prevention: Support the increased participation of youth with prevention programming addressing illegal substance use.</p> <p>2. Justice: Support the interaction of law enforcement or justice services with prevention service providers with the provision of information relating to the consequences of illegal substance use.</p> <p>3. Treatment: Support treatment and intervention programming that is specific to identifying treatment needs and resilience building.</p>

--	--

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:	\$33,813.00
2	Amount of unused funds from last year that will roll over into this year:	\$3,712.78
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$37,525.78
4	Amount of funds granted last year:	\$22,675.00
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: \$9,381.45	Intervention/Treatment: \$9,381.45	Justice Services: \$9,381.45
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation		\$4,500
Office supplies		\$0
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$ 4,875.00	Goal 1: \$13,700	Goal 1: \$900
Goal 2: \$2,500	Goal 2: \$0	Goal 2: \$700

--	--	--