

The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Clinton

LCC Name: Partnership for Drug Free Clinton County (PDFCC)

LCC Contact: Nancy Ward & Kathy Martin

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County Commissioners: Jordan Brewer, Kevin Myers, Bert Weaver

Address: 125 Courthouse Square

City: Frankfort

Zip Code: 46041

Vision Statement

What is your Local Coordinating Council's vision statement?

The vision of the Partners for a Drug Free Clinton County is to have prevention/education, treatment/intervention, law enforcement resources available to all citizens of Clinton County.

Mission Statement

What is your Local Coordinating Council's mission statement?

The mission of Partners for a Drug Free Clinton County is to reduce the abuse of tobacco, vaping and nicotine products, alcohol and other controlled substances in Clinton County and the associated negative effects on individuals and the community through the coordination, support, and promotion of county-wide education/prevention, treatment/intervention, and criminal justice efforts.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Nancy Ward	Probation	W	F	Enforcement
2	Anthony Sommer	Prosecutor	W	M	Enforcement
3	Bradley Mohler	Judge	W	M	Enforcement
4	Britt Ostler	Auditor	W	F	Government
5	Anita Stewart	United Way	W	F	Civic
6	Tonya Prifogle	Community	W	F	Treatment
7	David Fry	WeCare/One80	W	M	Treatment
8	Paul Fry	WeCare/One80	W	M	Treatment
9	Keegan Sharp	One80	W	M	Treatment
10	Martin Hale	CSF	W	M	Prevention
11	Samantha Mitchell	CSF	W	F	Prevention
12	Kathy Martin	HCCC	W	F	Prevention
13	Lorra Archibald	HCCC	W	F	Prevention/Treatment
14	Mary Kay Baker	Brianna's Hope CRAM	W	F	Prevention/Treatment
15	Matthew Risk	Probation	W	M	Enforcement
16	Jen Feterick	Probation	W	F	Enforcement
17	Emily Hall	IU Health	W	F	Prevention
18	Tammy Moss	Abba's Place	W	F	Prevention
19	Cheryl Overman	Abba's Place	W	F	Prevention
20	Sherri Stowers	The Bridge	W	F	Prevention
21	Nancy Elsea	Purdue Ext.	W	F	Prevention
22	Jen Bushore-Barry	YWCA	W	F	Prevention
23	Rich Kelly	Sheriff	W	M	Enforcement
24	Scott Shoemaker	Police Chief	W	M	Enforcement
25	Rodney Wann	Health Dept.	W	M	Treatment
26	Erin Dillingham	Rossville Schools	W	F	Prevention
27	Thomas Hughes	Clinton Central Schools	W	M	Prevention
28	Katie Schimmel	COACH Kids	W	F	Prevention
29	Chris Ward	Trinity Hope Center	W	M	Treatment
30	Jenny Gardner	WeCare	W	F	Treatment
31	Jeff Stafford	WeCare	W	M	Treatment
32	Kristy Lawson	HCCC	W	F	Prevention
33	Tammy Koger	HCCC	W	F	Prevention/Treatment
34	Evan Hall	FPD	W	M	Enforcement
35	Cesar Munoz	FPD	W	M	Enforcement
36	Macy Simmons	InWell	W	F	Treatment

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

2/18/25, 4/15/25, 5/13/25, 7/15/25, 9/16/25, 11/18/25

PDFCC meets every other month, along with each subcommittee meeting quarterly or as needed. The subcommittees meet on a different month than the full coalition. Combined, there are at least 8 meetings each year.

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 Clinton
County Population 32,730
Schools in the community Community Schools of Frankfort, The Crossing, Clinton Prairie, Clinton Central, Rossville Consolidated Schools
Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) IU Hospital, Open Door Clinic, Immunization Clinic, Riggs Community Health Center, Ascension
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Community Fairbanks, InWell
Service agencies/organizations Healthy Communities of Clinton County, COACH Kids, United Way, Purdue Extension, Board of Health, Trinity Hope Center, YWCA
Local media outlets that reach the community WILO, Frankfort Times, Clinton County Daily News, social media
What are the substances that are most problematic in your community? Vaping/fogging, methamphetamine, alcohol, opioids, marijuana, fentanyl
List all substance use/misuse services/activities/programs presently taking place in the community: Mentoring, after school programs, youth leadership programs, youth leadership council, systems of care navigators, peer recovery coaches, drug take back boxes & events, Narcan kits & training, men's & women's recovery homes, overdose awareness day, Cops & Kids, MAT programs, SUD treatment, prosocial events, drug free zones and events, bilingual evidence based prevention programming

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. Limited brick and mortar mental health and substance use disorder facilities and resources	1. Treatment facilities – ONE80 and WeCare 2. Trinity Hope Center – recovery facilitation and programming 3. Peer Recovery Coaches 4. Community Fairbacks, InWell	1. Limited treatment options 2. Difficulty of payment/lack of insurance coverage 3. Long wait lists 4. Transportation for out-of-town services 5. Stigma 6. Housing, including transition housing
2. Low perception of risk or harm among youth	1. Healthy Communities of Clinton County 2. After school programming – The Bridge, IMPACT 3. Trinity Hope Center 4. EBP in schools	1. Point of Sale 2. Low family connectedness 3. ACEs
3. Availability of alcohol and other drugs	1. Therapeutic Services including virtual options 2. Healthy Communities programming 3. Clinton County Probation, Community Corrections, and Law Enforcement 4. Random Drug Screens	1. Limited mental health & SUD providers 2. Long wait lists 3. Transportation to other counties and organizations to receive face-to-face treatment 4. Stigma 5. SUD
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.

1. Peer Recovery coaches; recovery homes for men & women; mentoring for youth; youth engagement programs; robust health prevention programs	1. Healthy Communities of Clinton County 2. Trinity Hope Center 3. After school programs & other youth serving organizations 4. Purdue Extension 5. InWell	1. Limited funding and limited PRCs – caseload can only take on so much before it is an overload to the PRCs 2. Lack of re-entry programs for inmates 3. Lack of housing and transportation
2. K-9 officers; MAT programs; SUD treatment & support groups; strong, engaged local law enforcement	1. Frankfort Police Department & Clinton County Sheriff's Department (JCAP specifically) 2. Community Howard, InWell, IU Health 3. Clinton County Probation 4. Healthy Communities of Clinton County 5. Trinity Hope Center 6. Brianna's Hope, NA, Celebrate Recovery, & other support groups	1. Not enough treatment programs within the county 2. No re-entry program for inmates – while JCAP is available in the jail, only 10-12 individuals can attend at any given point 3. Transportation 4. Difficulty paying/lack of insurance
3. Case managers; System of Care Navigators; Insurance Navigators; Treatment programs	1. Community Howard, InWell, IU Health 2. Healthy Communities of Clinton County 3. Trinity Hope Center 4. Overdose Awareness Day & Drug Take Back Day	1. Lack of housing and transportation 2. No re-entry program for inmates 3. Community awareness of programming

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)
1. Limited Treatment Resources	1. Adults and juveniles are abusing, alcohol, drugs, tobacco and prescription medication. 2. Lack of wraparound services 3. Limited residential/step-down services for women & men. 4. Lack of transportation
2. Tobacco, prescription, and other drug abuse	1. Availability of vape and synthetic marijuana products 2. Gas stations and other businesses continue to sell items to underage youth 3. Rise in SUD
3. Mental Health	1. Lack of mental health services 2. Affordability of services & lack of insurance 3. Lack of transportation

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. Adults and juveniles are abusing, alcohol, drugs, tobacco and prescription medication.	1. 1 in 12 Hoosiers meet the criteria for SUD 2. 20.6 state rate vs 18.7 national rate for males and 9.6 state rate vs 8.2 national rate for females mental health and SUD mortality (with county level data 22.4 for males) 3. 13.7 rate of Child Abuse and Neglect compared to 11.6 nation wide with 66.7% of removals with parental alcohol and/or drug use 4. 44% of people who felt they needed treatment did not seek it due to fear of what people would think or say 5. 26.7 alcohol outlet density (compared to 22.5 for the state) and 13.0 tobacco outlet density (compared to 11.4 for the state) 6. 19.2% of 11 th graders in Region 4 report alcohol use with 8.3% reporting 7. Binge Drinking	SAMHSA: Results from the 2023 National Survey on Drug Use and Health Healthdata.org County Report IU Prevention Insights INYS

2. Lack of quality resources and wrap-around services available to those with Substance Use Disorder and their support systems.	<ol style="list-style-type: none"> 26.7 alcohol outlet density (compared to 22.5 for the state) and 13.0 tobacco outlet density (compared to 11.4 for the state) 2,053:1 mental health provider ratio No transitional housing or re-entry program Lack of public transportation options 	<p>IU Prevention Insights</p> <p>IYI Databook 2025</p>
3. Adults and Juveniles are being arrested for substance-related offenses and underappreciate the consequences (short and long term) of substance abuse	<ol style="list-style-type: none"> 44% of people who felt they needed treatment did not seek it due to fear of what people would think or say 215 Drug Violations; 17 overdose calls with 2 fatal overdoses 103% increase in drug convictions in Indiana with drug possession offenses comprised 86% of such Approx. half of students reported no or slight risk of harm from alcohol 	<p>SAMHSA: Results from the 2023 National Survey on Drug Use and Health</p> <p>Local law enforcement</p> <p>Indiana Drug-Related Crime Statistics</p> <p>INYS</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)?
1. Adults and juveniles are abusing, alcohol, drugs, tobacco and prescription medication.	<ol style="list-style-type: none"> Support and fund substance use prevention and education, using curriculum and other resources to reach out to the community. Support and fund initiatives that promote prosocial activities for youth, adults, and families Support and share events and activities that increase awareness and decrease stigma community wide
2. Lack of quality resources and wrap-around services available to those with Substance Use Disorder and their support systems.	<ol style="list-style-type: none"> Support and fund residential treatment facilities Support and fund transitional housing options Ensure that citizens of Clinton County have access to health insurance. Increase knowledge and awareness, and promote shared communication between referral sources and treatment providers and to the community
3. Adults and Juveniles are being arrested for substance related offenses and underappreciate the consequences	<ol style="list-style-type: none"> Support EBP, support groups, and other SUD programming that increases refusal skills for youth and adults

(short and long term) of substance abuse	<ol style="list-style-type: none"> 2. Support and fund law enforcement equipment, training, and initiatives that combat SUD 3. Support and fund intervention and treatment initiatives that increase the availability of assessments, treatment, counseling, support, and after care services
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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 – Adults and juveniles are abusing alcohol, drugs, tobacco, and prescription medication	
Goal 1: Provide EBPs or other prosocial activities through schools and youth serving organizations to increase perception of harm by at least 2% over the next year.	
Goal 2: Increase accessibility and participation in prosocial activities by at least 5% over the next year, including evidence based programming.	
Problem Statement #2 – Lack of quality resources and wraparound services available to those with Substance Use Disorder and their support systems	
Goal 1: To expand the quality resources such as treatment and recovery facilities available in Clinton County at all levels, including but not limited to community -based, transitional, and residential settings.	
Goal 2: Continue and expand wrap-around services available to those with Substance Use Disorder and their support systems evidenced by increase of at least 5% of participation in support groups and increase of at least 5% referrals given in the next year.	
Problem Statement #3 – Adults and juveniles are being arrested for substance related offenses and underappreciate the consequences (short and long term) of substance abuse	
Goal 1: Provide funding and support for additional patrols, programming, equipment, and/or specialized training to support drug/alcohol intervention activities for law enforcement with the goal to reduce alcohol, drug, tobacco, and vaping use amongst adults and youth (ages 10-18) by 2% within a one-year period.	
Goal 2: The number of adults and youth referred to EBP and/or treatment options will increase by at least 5% over the next year.	

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
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Goal 1: Provide EBPs or other prosocial activities through schools and youth serving organizations to increase perception of harm by at least 2% over the next year.	1. Financially support EBP and prosocial activities and events for youth, adults, and families that prevent SUD
	2. Provide educational resources and opportunities to youth and families, such as mentoring, after school programs, curriculum and programming in schools, including information dissemination 3. Financially support random drug screening and prevention measures for schools
Goal 2: Increase accessibility and participation in prosocial activities by at least 5% over the next year, including evidence-based programming.	1. Financially support EBP and prosocial activities and events for youth, adults, and families that prevent SUD 2. Provide information dissemination and community awareness of events 3. Monitor engagement
Problem Statement #2	Steps
Goal 1: To expand the quality resources such as treatment and recovery facilities available in Clinton County at all levels, including but not limited to community -based, transitional, and residential settings.	1. Support and fund treatment and intervention facilities, including transitional and residential settings 2. Support and fund mental health facilities 3. Increase referrals and community knowledge of treatment options
Goal 2: Continue and expand wrap-around services available to those with Substance Use Disorder and their support systems evidenced by increase of at least 5% of participation in support groups and increase of at least 5% referrals given in the next year.	1. Fund and support active support groups for those with Substance Use Disorder and their support systems 2. Increase the number of peer recovery coaches and increase their contacts with those with Substance Use Disorder. 3. Provide information dissemination and community awareness of such options
Problem Statement #3	Steps
Goal 1: Provide funding and support for additional patrols, programming, equipment, and/or specialized training to support drug/alcohol intervention activities for law enforcement with the goal to reduce alcohol, drug, tobacco, and vaping use amongst adults and youth (ages 10-18) by 2% within a one-year period.	1. Support and fund law enforcement efforts 2. Support and fund activities that remove controlled substances from the community such as Drug Take Back days and other items that promote drug disposal

Goal 2: The number of adults and youth referred to EBP and/or treatment options will increase by at least 5% over the next year.	1. Support and fund training and other needed items for law enforcement regarding mental health, SUD, and referral systems 2. Support and fund law enforcement with programs targeted to assist those with SUD
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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:	\$51,251.07
2	Amount of unused funds from last year that will roll over into this year:	\$5,191.04
3	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$56,442.11
4	Amount of funds granted last year:	\$39,940.00
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: \$16,932.63	Intervention/Treatment: \$16,932.63	Justice Services: \$16,932.63
Funding allotted to Administrative costs:		
<i>Itemized list of what is being funded</i>		<i>Amount (\$100.00)</i>
Coordinator compensation		\$1,411.05
Marketing and Supplies		\$4,233.16
Funding Allocations by Goal per Problem Statement:		
Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$8,466.31	Goal 1: \$8,466.31	Goal 1: \$8,466.31
Goal 2: \$8,466.32	Goal 2: \$8,466.32	Goal 2: \$8,466.32