

# **The Indiana Commission to Combat Drug Abuse**



*Behavioral Health Division*

## **Comprehensive Community Plan**

County: Daviess

LCC Name: Daviess County Local Coordinating Council

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## **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 lifestyle.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Jennifer Stefancik	Purdue Extension	C	Female	Education
2	Angela Russell	Family Health Center	C	Female	Prevention
4	Lisa Seals	Youth First	C	Female	Prevention
5	Carole Smith	RARE Program/ United Way	C	Female	Treatment
6	Brian Peek	RISE Peer Recovery	C	Male	Treatment
7	Jeff Doyle	Barr-Reeve schools	C	Male	Education
8	Brent Delwumple / Ted	North Daviess Schools	C	Male	Education
9	Daniel Christie	Washington Police Dept.	C	Male	Law Enforcement
10	Kelly Miller	Washington Primary /Upper Em.	C	Female	Education
11	Jeremy Adams	Youth First	C	Male	Prevention
12	Elizabeth Condra	Daviess Family Health Center	C	Female	Treatment
13	Abby Brown	DC Prosecutor	C	Female	Judiciary
14	Nicole Cook	North Daviess Schools	C	Female	Education
15	Cindy Barber	Purdue Extension	C	Female	Education
16	Rachel Trabant	CFS	C	Female	Prevention
17	Myranda Knepp	Daviess Family Health Center	C	Female	Prevention
18	Olivia Findlay	DC Tobacco Free Coalition	C	Female	Prevention
19	Christie Newkirk	WCS	C	Female	Education
20	Tyler Council	Daviess County Coroner's Office	C	Male	Corners office/Law Enforcement/Justice
21	Gary Allison/Steve Sturgis	Daviess Co. Sheriff's Dept.	C	Male	Law Enforcement
22	Katherine E. Gerren	Peer Recovery Services at Daviess Community Hospital	C	Female	Treatment
23	Ryan Parsons	Light House Recovery Center	C	Male	Treatment
24	Jenilee Council	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 in January, February, March, April, May, August, September, November and the Executive Committee only meets in December.

Currently meetings have been held as in person and on Teams Meetings for those unable to attend in person. The LCC does not meet in June or 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 33,656 (2023)
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, Family Health Center
Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Daviess County Family Health Center Council for Change White Stone Counseling DCH – Transitions Groups Youth First Grasshopper Group
Service agencies/organizations. Hoosier Uplands- Tobacco Prevention PACE Hope's Voice Indiana Youth Services- Indiana Trafficking Victims Assistance Program Purdue Extension IRACS Recovery Café WIC
Local media outlets that reach the community WAMW, WWBL Washington Times Herald Odon Journal
What are the substances that are most problematic in your community? Meth, Marijuana, Fentanyl, Heroin, tobacco/vaping and prescription drugs.

List all substance use/misuse services/activities/programs presently taking place in the community.

Daviess Family Health Center

RARE

Peer Recovery Services at Daviess Community Hospital

RISE Peer Recovery

Lighthouse Peer to Peer

Recovery Café

Groups

## 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.<sup>1</sup>

Risk Factors	Resources/Assets	Limitations/Gaps
1. The ongoing problematic use of alcohol and drugs of adults and youth in the community.	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' 7. Quit Now	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. Increase population in Haitian	1. Hope's Voice 2. Indiana Trafficking Victims Assistance Program.	1. Limited substance abuse program options that would include translation services.

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

Community. Interpersonal Violence/Family Violence	<ul style="list-style-type: none"> <li>3. Health Department Cultural Liaisons</li> <li>4. Youth First</li> </ul>	<ul style="list-style-type: none"> <li>2. Lack of awareness of substance abuse as an issue within the community and how that can affect rates of violence and crime.</li> <li>3. External and Internalized Stigma of vulnerable populations.</li> </ul>
<ul style="list-style-type: none"> <li>3. Misperceptions of the use of alcohol and tobacco.</li> </ul>	<ul style="list-style-type: none"> <li>1. SADD and school-based prevention/awareness programs. , Stigma Stoppers, FHC Prevention Programs, SOC</li> <li>2. Youth First, LCC, Daviess County Hospital, DARAC, Tobacco Coalition, WPD &amp; DCSD Safe Prom Program</li> <li>3. Diverse population with cultural norms and influences.</li> </ul>	<ul style="list-style-type: none"> <li>1. Multi-generational use.</li> <li>2. Lack of knowledge when understanding the overreaching consequences of substance abuse.</li> <li>3. Mentoring or role modeling opportunities are newly established.</li> </ul>
Protective Factors	Resources/Assets	Limitations/Gaps
<ul style="list-style-type: none"> <li>1. Social connection</li> </ul>	<ul style="list-style-type: none"> <li>1. Ethnic and cultural influences within the community.</li> <li>2. School corporation connection through events and activities.</li> <li>3. Faith based organizations with youth and adult social oriented activities.</li> <li>4. Self-help meetings in the community that support those in recovery.</li> </ul>	<ul style="list-style-type: none"> <li>1. Transportation</li> <li>2. Program availability location.</li> <li>3. Limited alternative program opportunities.</li> <li>4. Assimilation for Haitian Population- Limited translators and barriers to communication</li> <li>5. Isolation</li> </ul>
<ul style="list-style-type: none"> <li>2. Multi-disciplinary support services</li> </ul>	<ul style="list-style-type: none"> <li>1. Daviess Community Hospital/Good Samaritan Hospital medical providers/Family Health Center, mental health service providers.</li> <li>2. Parenting and child development service agencies.</li> <li>3. Coalition groups addressing substance abuse and other community-based issues.</li> </ul>	<ul style="list-style-type: none"> <li>1. Flexibility and availability of identified social service supports.</li> <li>2. Awareness of the availability of support services.</li> <li>3. Cooperative interaction between service providers.</li> <li>4. Language Barriers/Cultural Barriers</li> <li>5. Limited advocacy and education help people connect to resources.</li> </ul>

	4. Law Enforcement/Judicial entities that refer people to supportive resources.	
3. Positive family connection and caring community.	1. Churches and faith-based programming. 2. Community based recreational alternative activity programming. 3. School programming, both after school and in school related. 4. Peer Recovery Coaches/ IRACS, RISE	1. Stigma related to treatment or addressing substance abuse behavior. 2. Lack of awareness of problems created by 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 1<sup>st</sup> of year 1, then two updates are submitted on April 1<sup>st</sup> 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 problems of education attainment that exist within the community. 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. 3. Population growth of diverse cultural and ethnic groups
3. Minimizations of harm from the use of drugs, alcohol and tobacco	1. The use of alcohol, marijuana and tobacco/vaping products by adults and youth is the result of disregard for harmful factors, family related factors (generational use), easy availability/ marketing to create misperception of societal normalcy, boredom and perception of peers in use within the community. 2. Youth use rates of alcohol, tobacco/vaping products and marijuana remain problematic in our region. 3. There is lack of acceptance of substance use is a problem and help seeking behaviors are limited on the part of youth and their families even with 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
1. Continued use of polysubstance continues to create problems of addictions for adults and youth along with limited acceptance of	1. 32 violations of drugs and alcohol offenses with a breakdown of 12 OWI's, 3 Possession of a controlled substance, 5 possession of paraphernalia, 11 possession of methamphetamine, 1 drug narcotic violation	Daviess County Sheriff's Department provided this data however it should be noted that these numbers appeared to be low according to the officer running the report and by last year's report. I left the



<p>services and recovery support.</p>	<ol style="list-style-type: none"> <li>2. 559 cases related to Alcohol and drug charges were reported for Daviess County Sheriff Department for 1-1-2023 to 3-27-2024. 106 of those charges were Possession of Meth, 37 were Dealing Meth, 40 Possession of Marijuana, 20 OVWI controlled substance, 27 OVWI, 1 OVWI causing death, 6 OVWI Endangerment, 5 Minor Possession of alcohol, 20 Minor Consumption of Alcohol, 2 Dealing Schedule I, II,III, IV</li> <li>3. According to the WPD Total Offenses Report 336 cases of alcohol or drug related charges occurred. 18 charges of Possession of Hyper dermic Needle,89 Possession of meth, 16 Marijuana,15 possession of schedule II,III,IV,8 Minor Consumption,7 Public Intox by Alcohol/Drugs,5 PI by Alcohol,23 OVWI, 30 OVWI Endangerment , 20 Operating with ACE of .15 or more,12 Operating with Controlled Substance Approximately 167 arrests were reported for violent crimes including: Battery/IPV/Murder/Rape. 11 charges related to Battery on a minor were reported and 10 charges of battery on an officer.</li> <li>4. 3 Alcohol Driving Deaths in 2023 and 2 Opioid Overdose deaths were noted in data points on IU Prevention Insights</li> <li>5. 2 Suicides in 2024 and 2 at this time in 2025 have had a single or polypharmacy toxicological results, indicating correlating factors in these deaths</li> <li>6. Individuals receiving Addiction Treatment services at Samaritan Center/ Family Health Center was reported for Daviess County as 298, Patients receiving Services at Daviess Family Health Center totaled 1707. Numbers for the number of Children Receiving Mental Health was not noted in this year's data.</li> <li>7. 2023 Children's mental health data point stood at 19, Unduplicated cases reported as 116. (Please note these were a reflection from DMHA- all clients</li> </ol>	<p>data from last year in this review for comparison.</p> <p>Washington Police Department Total Offenses Report, by Statue Data ran on 3/14/2025</p> <p>IU Prevention Insights 2024 data</p> <p>Data provided by Tyler Counsil at the Daviess County Coroner's office.</p>
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	<p>served are not all state qualified for this report system)</p> <ol style="list-style-type: none"> <li>8. Numbers obtained from Family Health Center reflect a total of 2046 being served. 39 cases noted to be from DCS referral, 254 Chemical Dependency Episodes.</li> <li>9. Substance use treatment episodes documented on IPRC note 113 with 50 for alcohol, 48 for marijuana and 76 for methamphetamine, 27 for opioids.</li> <li>10. IRACS Program has been 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 successfully re-enter the community post-incarceration to treatment programs, Recovery Residences, or Work Release along with setting them up with Peer Recovery Coaching.</li> <li>11. RARE program in Daviess County Jail served approximately 85 men and women in 2024 over the past 15 years RARE has served 1,200 men and women.</li> </ol>	<p>Family Health Center data points ran for 2024 population served at Daviess Family Center. Please note this may not include all that were served due to the reports that were produced by an electronic medical record(Community Mental Health) DMHA records indicated lower numbers and it would be safe to say inaccurate due the reporting system having issues with data collection.</p> <p>No new data was submitted from this program.</p> <p>RARE Program at Daviess County Security Center provided the numbers.</p>
<p>2. Limited utilization and receptivity create disconnect to address problems from addictions that create complications related to mental health, physical health, along with problems of education attainment that exist within the community.</p>	<ol style="list-style-type: none"> <li>1. 8 youths were arrested for Minor Consumption of Alcohol by the Washington Police Department.</li> <li>2. School Suspensions or Expulsions related to Alcohol, Tobacco and/or Drug Use reported as 52 cases for Daviess County</li> <li>3. 11 cases were reported for removals of children from the home due to Parental Alcohol and/or Drug Abuse in Daviess County for SFY 2023</li> <li>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 visits. 45 Births were affected by smoking with low birth weight, SIDS, and Reduced Lung Function. Smoking deaths 55, 9 due to secondhand smoke.</li> </ol>	<p>Washington Police Department Total Offenses Report 3/14/2025</p> <p>County Epidemiological Data- IPRC (Indiana Prevention Resource Center) (IU Prevention Insights)</p> <p>County Epidemical Data- IPRC (Indiana Prevention Resource Center)</p>

	<p>1,638 Smoking Related Illnesses Indiana</p> <p>5. Daviess County seen 57 Adult individuals enroll into Quit Now Indiana Program. 26 into standard program, 26 in Behavioral Health Program and 5 enrolled in pregnancy/postpartum program</p> <p>6. 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>7. IPRC notes Educational Attainment in Daviess County as 34.0% have a High School Diploma or GED, 15.9% have less than 9<sup>th</sup> 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 9<sup>th</sup> Grade or less and 7.5% Some High School, no diploma</p> <p>8. The percentage of 12<sup>th</sup> grade Indiana Students, Southwest Region 8, reporting monthly use of cigarettes is 4.4%. Indiana State average is 2.8% for cigarettes. Region 8 percent reporting monthly use is 21.2% for vape use. State average vape use 14.8%.</p> <p>9. The percentage of 12<sup>th</sup> grade Indiana Students, Southwest Region 8, reporting monthly use of marijuana is 11.5 %. Indiana State average is 12.6%. Synthetic Marijuana 1.9% for region 8 compared to state percentage 1.4%.</p> <p>10. The percentage of 12<sup>th</sup> 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>11. 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 are comparable to average state rates for Indiana 9<sup>th</sup> grade students.</p>	<p>The State Tobacco Control Daviess County, Hoosier Uplands Tobacco Coalition –September 2021</p> <p>2024 Quitline Report for 2024 provided by Daviess County Tobacco Prevention and Cessation Program</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- <a href="http://iprc.iu.edu/epidemiological-data">iprc.iu.edu/epidemiological-data</a> Year of Data 2020- no new data listed on their site.</p> <p>2022 Indiana Youth Survey</p>
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<p>3. Disregard and failure to connect alcohol, marijuana and tobacco/vaping products by adults and youth continues to create long term harmful consequences, family related factors(generational use), marketing in the community underlines easy availability to misconstrue use perception and misperception of use that leads to likelihood of long-term use within the community.</p>	<ol style="list-style-type: none"> <li>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 11 cases that noted this as the cause of removal.</li> <li>2. IPRC data for school year 2022-2023 reports Daviess County Graduation rate as 93.7 compared to state percentage of 88.8.</li> <li>3. Health risk Behaviors identified resulted for Adults Current smoking 23.3% for Daviess compared to state average of 18% and adults excessive drinking in Daviess reported as 14.9% while state average rated at 16.9% by IU Prevention Insights.</li> <li>4. Violent Crime charges were reported as 167 separate charges that involved Battery, Murder, IPV, Strangulation and Rape- this does not include the charges related to other sex offenses</li> </ol>	<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 IU Prevention Insights</p> <p>County Epidemiological Data-IPRC- Indiana Prevention Resource Center- iprc.iu.edu/epidemiological-data Data year 2024 as reported in the 2024 Health Ranking</p> <p>Washington Police Department Total Offenses Report, by Statute March 14,2025</p>
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### 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"> <li>1. Polysubstance use along with limited acceptance of services and recovery support continues to create problems of addictions for adults and youth</li> </ol>	<ol style="list-style-type: none"> <li>1. Provide law enforcement and justice programming with resources for projects that reduce the number of crimes associated with alcohol and drug abuse.</li> <li>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.</li> <li>3. Support re-entry of incarcerated individuals with the provision of treatment assessments, substance abuse education programming and recovery support.</li> </ol>

2. Limited utilization and receptivity to address the problems created by complications of addictions related to mental health, physical health, violence and education attainment exist within the community.	1. Support intervention and treatment for adults and youth. This would include programs that build life skills/resilience, increase education attainment and directly address risk factors for substance use. 2. Support access and availability of substance abuse treatment and intervention services, including assessments and the need for comorbid treatment practices, counseling support, peer support and after care programs. 3. Support community awareness programs along with public training regarding the effects of substance use on health, families and the community.
3. Disregard and failure to connect long term harmful consequences of the use of alcohol, marijuana and tobacco/vaping products by adults and youth, has created family related factors (generational use, IPV, Abuse/Neglect), along with marketing in the community that underlines the easy availability of products has led to misconstrued perceptions and misperception of peers in use within the community.	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. 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.

#### 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 Daviess County LCC, by supporting law enforcement in their investigation of cases that identify adults and 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 5% the number of adults arrested for alcohol, marijuana, meth and other drugs during the current year.
Goal 2: The Daviess County LCC will see an increase for treatment assessments or relapse prevention /recovery support programs by 6% 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 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 to decrease by 6% self-reported past 30-day usage

rates for those using marijuana/other drugs, tobacco/vaping products and alcohol during the current year.
Goal 2: 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 awareness of long term effects of substance use and assist to increase of the availability of evidence-based prevention programs to address tobacco/vaping, alcohol, marijuana and other drugs during the current year.
<b>Problem Statement #3</b>
Goal 1: The number of youth participating in evidence based programs 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.
Goal 2: Daviess LCC will support Treatment Providers to enhance assessment and evidence -based treatment by enhanced training and procurement of materials utilized for treatment of adults and children that need services to address substance use and relapse prevention programming will measure a 6% 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
Goal 1: The Daviess County LCC, by supporting law enforcement in their investigation of cases that identify 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 5% the number of adults arrested for alcohol, marijuana, meth and other drugs during the current year.	<ol style="list-style-type: none"> <li>1. Prevention: Support public awareness campaigns and events that address substance use/misuse.</li> <li>2. Treatment: Support law enforcement in making referrals to treatment services provided for adults affiliated with the justice system.</li> <li>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.</li> </ol>
Goal 2: The Daviess County LCC will see an increase for treatment assessments or relapse prevention /recovery support programs by 6% 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.	<ol style="list-style-type: none"> <li>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.</li> <li>2. Prevention: Support activities that provide educational and awareness opportunities for incarcerated or justice affiliated individuals.</li> </ol>

	3. Justice: Support the access and availability of assessments and treatment services/recovery support for justice related individuals while incarcerated.
<b>Problem Statement #2</b>	<b>Steps</b>
Goal 1: The Daviess County LCC will support prevention education 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 to decrease by 6% self-reported past 30-day usage rates for those using marijuana/other drugs, tobacco/vaping products and alcohol during the current year.	<ol style="list-style-type: none"> <li>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.</li> <li>2. Treatment: Support assessment/treatment for youth and adults engaging in substance use to determine need of services to address illegal substance use.</li> <li>3. Justice: Support Justice and law enforcement activities that are involved with youth participating in illegal substance use.</li> </ol>
Goal 2: 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 awareness of long term effects of substance use and assist to increase of the availability of evidence-based prevention programs to address tobacco/vaping, alcohol, marijuana and other drugs during the current year.	<ol style="list-style-type: none"> <li>1. Prevention: Support the increased provision of prevention education and programs that increase insight of risk with substance use for youth.</li> <li>2. Justice: Fund justice services that help identify youth in need of prevention education or treatment assessments and other services.</li> <li>3. Treatment: Support access to treatment or intervention services that are specific to youth recovery needs.</li> </ol>
<b>Problem Statement #3</b>	<b>Steps</b>
Goal 1: The number of youth participating in evidence based programs 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.	<ol style="list-style-type: none"> <li>1. Prevention: Support the identification of adults and youth interested in participating in the development and provision of prevention-oriented programs.</li> <li>2. Justice: support the interaction of law enforcement or justice services to assist with prevention service providers in the provision of</li> </ol>

	<p>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: Daviess LCC will support Treatment Providers to enhance assessment and evidence based treatment by enhanced training and procurement of materials utilized for treatment of adults and children that are in need of services to address substance use and relapse prevention programming will measure a 6% 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		
<b>1</b>	Amount deposited into the County DFC Fund from fees collected last year:	\$28,926.40
<b>2</b>	Amount of unused funds from last year that will roll over into this year:	\$8309.59
<b>3</b>	Total funds available for programs and administrative costs for this year (Line 1 + Line 2):	\$37,235.99
<b>4</b>	Amount of funds granted last year:	\$23,809.22
Additional Funding Sources (if no money is received, please enter \$0.00)		
<b>A</b>	Substance Abuse and Mental Health Services Administration (SAMHSA):	\$0.00
<b>B</b>	Centers for Disease Control and Prevention (CDC):	\$0.00
<b>C</b>	Bureau of Justice Administration (BJA):	\$0.00
<b>D</b>	Office of National Drug Control Policy (ONDCP):	\$0.00
<b>E</b>	Indiana State Department of Health (ISDH):	\$0.00
<b>F</b>	Indiana Department of Education (DOE):	\$0.00
<b>G</b>	Indiana Division of Mental Health and Addiction (DMHA):	\$0.00
<b>H</b>	Indiana Family and Social Services Administration (FSSA):	\$0.00
<b>I</b>	Local entities:	\$0.00
<b>J</b>	Other:	\$0.00
Categorical Funding Allocations		
Prevention/Education: \$10,912	Intervention/Treatment: \$10,912	Justice Services: \$10,912
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:		
<b>Problem Statement #1</b>	<b>Problem Statement #2</b>	<b>Problem Statement #3</b>
Goal 1: \$ 5,456	Goal 1: \$5,456	Goal 1: \$5,456
Goal 2: \$5,456	Goal 2: \$5,456	Goal 2: \$5,456