The Indiana Commission to Combat Drug Abuse



Behavioral Health Division

Comprehensive Community Plan

County: Marshall

LCC Name: Marshall County Drug and Tobacco Free Committee

LCC Contact: Karrie McCay

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City: Argos

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County Commissioners: Marshall County Commissioners

Address: 112 West Jefferson St., Room 307

City: Plymouth

Zip Code: 46563

Vision Statement

What is your Local Coordinating Council's vision statement?

The Marshall County LCC hopes to prevent or reduce drug, alcohol, and tobacco use throughout all Marshall County Residents.

Mission Statement

What is your Local Coordinating Council's mission statement?

The Marshall County LCC will coordinate efforts to combat drug, alcohol, and tobacco issues through prevention, education, identification treatment, law enforcement and justice throughout Marshall County, Indiana.

Membership List					
#	Name	Organization	Race	Gender	Category
1	Abby Caswell	Marshall Co.	W	F	Justice
		Probation			
2	John Grolick	Coroner	W	M	Justice
3	Kathleen Davidson	Eric Foster, Inc.	W	F	Treatment
4	Michael Delp	Plymouth HS	W	M	Education
5	Chasity Keller	CASA	W	F	Prevention
6	Matt Schnaible	Bremen PD	W	M	Justice
7	Bill Martin	Bourbon PD	W	M	Justice
8	Andrew Rohde	Bremen HS	W	M	Education
9	Nick Medich	Argos HS	W	M	Education
10	Lindie Leary	Bowen Center	W	F	Treatment
11	Zac Cook	Bowen Center	W	M	Treatment
12	Rick Yarbrough	Triton HS	W	M	Education
13	Matt Hassel	Marshall Co. Sheriff	W	M	Justice
14	Dave Caswell	Indiana State Police	W	M	Justice
15	Michael Edison	LaVille HS	W	M	Education
16	Dan Franz	New Directions Counseling	W	M	Treatment
17	E. Nelson Chipman,	Marshall Co.	W	M	Justice
1.0	Jr.	Prosecutor	**7	7.5	
18	Larry Smith	Intrepid Phoenix	W	M	Treatment
19	Joyce Long	Beacon Health	W	F	Treatment

20	Annette Haining	St. Joseph	W	F	Treatment
		Health			
21	Linda Yoder	United Way	W	F	Prevention
22	Kevin Kubsch	LaVille HS	W	M	Education
23	James Bendy	Marshall Co. Probation	W	M	Justice
24	Matt Sarber	Superior Court #3	W	M	Justice
25	Christie Johnson	MCDAP	W	F	Treatment
26	Ward Byers	Community Corrections	W	M	Justice
27	Jalysa Gibson	St. Joseph Health	W	F	Treatment
28	Dawn Quimby	Serenity House	\mathbf{W}	F	Treatment
29	Rodney Younis	Triton HS	W	M	Education
30	Matt Geiger	Bourbon PD	W	M	Justice
31	Sharon Hurt	Marshall Co. Probation	W	F	Justice
32	LaTasha Bosse	Beacon Health Systems	W	F	Treatment

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

4th Tuesday in January, March, May, September, October, and November, with additional meetings as necessary. All meetings are at 9:15 am at alternating locations within the members.

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 Marshall County Population 46,336 Schools in the community Argos, Bremen, Culver, John Glenn, LaVille, Plymouth, and Triton. Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Beacon Health Bremen, Saint Joseph Regional Medical Center, Plymouth Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Bowen Center Plymouth, Michiana Behavioral Health Plymouth, Doctors Hospital Bremen Service agencies/organizations New Directions Counseling, Intrepid Phoenix, Eric Foster, Inc., Marshall County Tobacco Education, David's Courage, Project HOPE, Serenity House, and Brighter Tomorrows Local media outlets that reach the community Plymouth Pilot, Culver Citizen, WTCA AM1050, MAX 98.3 What are the substances that are most problematic in your community? Opioid-both illicit and prescription, Methamphetamine, Marijuana, Alcohol, and Tobacco/Vaping List all substance use/misuse services/activities/programs presently taking place in the community

Intrepid Phoenix, David's Courage, New Directions Counseling, Bowen Center, Michiana Behavioral Health, Marshall County Tobacco Cessations (St. Joseph Medical), United Way of Marshall County, Serenity House, Smart Recovery, Narcotics Anonymous, Celebrate Recovery

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.

<u>Risk Factors Examples:</u> 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.

<u>Protective Factors Examples:</u> 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

Resources/Assets	Limitations/Gaps
1. Ease of purchase with alcohol now available on Sundays	1. Must be 21 to purchase
	2. Harder to access in rural areas
	than urban areas
community	3. Some physicians have started using software to check current
3. Prescriptions are given and overused or the pills are sold for	prescription status of patient to limit use of opioids
profit	min use of opioids
1. Those in areas where	1. Transportation can be difficult
likely to use	2. Cash flow can be a problem
2. In cases regarding opioids,	leading to theft and other crimes
addictions happen quickly	3. Excessive use can lead to other physical and mental health
3. Availability through personal contacts	issues
1. Opioids and other drugs can	Some patients don't realize
be prescribed due to mental health issues leading to addiction	the severity of their problem
	1. Ease of purchase with alcohol now available on Sundays 2. Methamphetamine and Opioids are available in the community 3. Prescriptions are given and overused, or the pills are sold for profit 1. Those in areas where substance use is high are more likely to use 2. In cases regarding opioids, addictions happen quickly 3. Availability through personal contacts 1. Opioids and other drugs can be prescribed due to mental

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

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	Some patients experiment with drugs for self-treatment Growing number of mental health patients	2. Lack of facility space at times due to high influx of patients3. Law Enforcement can find it difficult to assist these subjects when encountered
Protective Factors	Resources/Assets	Limitations/Gaps
1. Access to Health Care	Saint Joseph Regional Medical Center	1. Lack of insurance
		2. Transportation issues
	2. Beacon Medical	3. Denial
		3. Delliai
2. Access to Mental Health Care	1. Bowen Center	1. Lack of Insurance
	2. Michiana Behavioral Health	2. Transportation issues
	3. Doctor's Hospital Bremen	3. Denial
3. Community Based	1. New Directions Counseling	1. People are unaware these
Interventions	2. David's Courage	programs exists
	3. Eric Fosters, Inc.	2. Unsure of hope the programs
		work.
		3.Monetary Issues

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.Availability of alcohol and other drugs	1. Alcohol is readily available in stores	
	2. Illicit drugs are available throughout the community	
	3. Prescription drug availability leads to use/misuse	
2. Peer substance use	1. Alcohol and tobacco is prevalent	
	2. Tobacco/Vaping is a growing issue among our youth	
	3. Illegal drugs are available through peer contact	
3.Mental health problems	Subjects can self-medicate to treat a variety of mental health problems	
	2. Subjects can refuse treatment	
	3.Lack of support or funding for treatment	

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. There is a high instance of prescription drug misuse in Marshall County	National 49% of adults take at least 1 prescription, and 24% are taking 3 or more medications	CDC.gov
2. There is a high instance of Methamphetamine, Opioid, and Marijuana use in Marshall County	Marshall County Probation Department reported 751drug screens. They reported the following positive results-215 for marijuana, 152 for methamphetamine, 34 for opiates, 0 for benzodiazepines, and 33 for cocaine	Marshall County Probation
3. There is a high instance of alcohol and tobacco use/abuse in Marshall County	In the 2020-2021 school year, area schools reported 269 drug tests given with results being 2 for THC, 1 for THC and Cotinine, and 6 for Cotinine.	Marshall Co. Schools
	There were 181 OWI arrests in Marshall County in 2022	Local department records not including Indiana State Police

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. There is a high instance of Prescription Drug misuse in Marshall County	1. Education of the dangers	
	2. Community Prevention groups	
	3. Limit accessibility to addictive medications through monitoring	
2. There is a high instance of Methamphetamine, Opioid, and Marijuana use in Marshall County	1. Counseling to assist in recovery	
opiole, and manguana ase in mansian county	2. Education programs to provide assistance to the community	
	3. Support Criminal Justice in training and corrective actions through local police and probation	
3. There is a high instance of alcohol and tobacco use/abuse in Marshall County	Education programs through our schools and community groups	
	2. Treatment to assist in recovery	
	3. Proactive criminal justice programs	

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

Increase public awareness by creating information packets and providing training.

Goal 2

Decrease the number of persons on probation testing positive for prescription opioid as measured by county probation and local schools.

Problem Statement #2

Goal 1

Decrease the number of subjects that test positive for illicit drugs as measured by statistics from local schools and probation.

Goal 2

Provide treatment and services to drug offenders while incarcerated at local jail and post-conviction on community supervision.

Problem Statement #3

Goal 1

Decrease the number of subjects that test positive for tobacco and alcohol as measured by local schools and county probation.

Goal 2

Decrease the number of OWIs by increasing targeted patrol through law enforcement.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1 Increase public awareness by creating information	Continue to provide resource packets to all offenders when released from Marshall County Jail.
packets and providing training.	2. Provide speakers and training to schools and community members.
Goal 2	1. Continue to screen subjects on probation and in school.
Decrease the number of persons on probation	
testing positive for prescription opioid as	2. Assist probation and local schools
measured by county probation and local schools.	with getting subjects in contact with established services.
Problem Statement #2	Steps
Goal 1	1. Provide drug testing and vape detectors to schools.
Decrease the number of subjects that test positive	
for illicit drugs as measured by statistics from	2. Make information about the
local schools and probation.	established programs available to students and subjects on probation.
Goal 2	1. Distribute information packets to subjects upon release.
Provide treatment and services to drug offenders	
while incarcerated at local jail and post-conviction on community supervision.	2. Assist subjects in getting established services or education.
Problem Statement #3	Steps
Goal 1	1. Provide drug testing and vape detectors to schools.
Decrease the number of subjects that test positive	
for tobacco and alcohol as measured by local	2. Continue to provide DARE programs
schools and county probation.	in local schools.
Goal 2	1. Continue to apply for CHIRP funding and other OWI grants.
Decrease the number of OWIs by increasing	
targeted patrol through law enforcement.	2. Continue to provide training and equipment for local law enforcement.

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).

Fur	Funding Profile					
1	Amount deposited into the Count	last vear:	\$58,634.00			
2	Amount of unused funds from last year that will roll over into this year:			\$3,652.00		
3	Total funds available for program		\$62,286.00			
	(Line 1 + Line 2):			\$02,280.00		
4	Amount of funds granted last year			\$54,982.00		
	ditional Funding Sources (if no r					
A	Substance Abuse and Mental Hea		MHSA):	\$0.00		
В	Centers for Disease Control and	1 1		\$0.00		
C	Bureau of Justice Administration	\ /		\$0.00		
D	Office of National Drug Control	• ` ′		\$0.00		
E	Indiana State Department of Health (ISDH):			\$0.00		
F	Indiana Department of Education (DOE):			\$0.00		
G	Indiana Division of Mental Healt	,		\$0.00		
H	Indiana Family and Social Services Administration (FSSA):			\$0.00		
I	Local entities:			\$0.00		
J	Other:			\$0.00		
	tegorical Funding Allocations		- · a			
	vention/Education:	Intervention/Treatment:	Justice Se			
\$15	5,717.00	\$22,335.00	\$17,234.0	0		
Fur	nding allotted to Administrative	costs:				
	nized list of what is being funded		Amo	ount (\$100.00)		
	ordinator compensation		\$6,000.00			
Off	Office supplies \$1,000.00			00.00		
Funding Allocations by Goal per Problem Statement:						
				Statement #3		
Goa	Goal 1: \$3,900.00 Goal 1: \$9,200.00 Goal 1: \$8			3,613.00		
Gos	Goal 2: \$9,125.00 Goal 2: \$16,948.00 Goal 2: \$7			7 500 00		
	Goal 2. \$7,500.00					