# The Indiana Commission to Combat Drug Abuse



# **Comprehensive Community Plan**

County:Boone

LCC Name:Drug Free Boone County

LCC Contact:Lisa Hutcheson

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County Commissioners: Don Lawson, Jeff Wolfe, Tom Santelli

Address: 116 W Washington Street

City: Lebanon

Zip Code: 46052

### **Vision Statement**

What is your Local Coordinating Council's vision statement?

We believe all residents of Boone County should live their best lives in a safe and drug free environment.

### **Mission Statement**

What is your Local Coordinating Council's mission statement?

The purpose of Drug Free Boone County is to support those organizations and agencies which are addressing substance use through prevention, intervention, treatment, and criminal justice initiatives through grants, and to facilitate collaboration among these organizations.

Me	mbership List				
#	Name	Organization	Race	Gender	Category
1	Anita Bowen	Boone Co Senior Services	С	F	Community services
2	Holly Bland	Lebanon Schools	С	F	Schools - nurse
3	Alyssa Allen	Parent	С	F	Parent
4	Lynette Clark	INWell	C	F	Mental health/treatment
5	Christina Candia	Boone Co Probation	С	F	Criminal justice
6	Pascal Fettig	Mental Health America of Boone Co.	С	M	Mental health
7	Vickie Foster	Boone Co. Health Dept.	С	F	Health
8	Claire Haughton	Boone Co. Health Dept.	С	F	Health/Tobacco prevention
9	Missy Bowman	Teen Challenge	С	F	Recovery
10	Diana Huddleston	Aspire	С	F	Treatment
11	Doug Phillips	INWell	С	M	Mental health/treatment
12	Michelle Standeford	Lift for Life	С	F	Recovery
13	Maria Villabla	Riggs Community Health Center	L	F	Health
14	Mike Nielsen	Boone Co. Sheriff's Dept.	С	M	Criminal Justice
15	Steve Toleos	INState Excise Police	С	M	Criminal Justice
16	Jeff Morris	Zionsville PD	С	M	Criminal Justice
17	Rob Knox	Zionsville PD	С	M	Criminal Justice
18	Tammy Tidd	House of Grace	С	F	Recovery
19	Karen Young	Lift for Life	С	F	Recovery
20	Mary Lueders	Susan Brooks office	С	F	Federal government
21	Lauri Thompson	Boone Co. Family Recovery Court	С	F	Recovery/criminal justice
22	Lisa Hutcheson	Mental Health America of IN/IN Coalition to Reduce Underage Drinking	С	F	Mental Health/Prevention
23	Missy Bowman	IN Tteen Challenge	С	F	Prevention
24					
25					

LCC Meeting Schedule:
Please provide the months the LCC meets throughout the year:
January, March, May, August, September, November

### **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:

Boone

County Population:

65,875 (based on 2017 census data)

Schools in the community:

Western Boone Jr and Sr High, Perry Worth Elementary, Hattie B Stokes Elementary, Central Elementary, Harvey Elementary, Lebanon Middle School, Lebanon High School, Zionsville Middle School, Zionsville High School, Thorntown Elementary, Granville Wells Elementary, Pleasntview Elementary, Stone Gate Elementary, University High School, Creekside Elementary, Trader's Point Christian Academy, Pleasant View Elementary, Boone Meadow Elementary

Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.):

Witham Hospital and ER, Witham Urgent Care in Anson, Riggs Community Health Clinic, Witham Health Services Zionsville, Witham Health Services Jamestown, Methodist Occupational Health Center, Witham Family Services of Thorntown, IU Health Urgent Care, Optum Health, Witham Health Services Frankfort, Indiana Hand to Shoulder

Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.):

Mental Health America of Boone County, InWell, Cummins Behavioral Health, Aspire, IU Health Physicians Behavioral Health, Hope Academy, Transitions Senior Behavioral Health, Sandra Eskenazi Mental Health Center, Cummins Behavorial Health, The Cabin Counseling Services, Families First

Service agencies/organizations:

CASA, Boone Co. Senior Services, YMCA, Boone County Cancer Society,Boone County Community Clinic,Boone County Community Foundation,Boone County Community Network,Boone County Healthy Coalition,Boone County Helpline,Boys & Girls Club,Faith-Based Organizations,Indiana United Methodist Children's Home,Love, Inc.,Meals on Wheels,Salvation Army,Shalom House,The Caring Center,United Way of Boone County, New Life Men's Recovery House, House of Grace, Live for Life

Local media outlets that reach the community:

Lebanon Reporter, Topics, Zionsville Times Sentinel (newspaper), Radio Mom 91.1, WITT 91.9

What are the substances that are most problematic in your community?:

Youth alcohol use, tobacco use, vaping, adult alcohol use, tobacco use, opioid and heroin use

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

School based programs (DARE, Tiger Pride, post prom, SADD), MHA Boone Co. (BASE, drop in center with tutoring), Teen Challenge, Boone Co. Senior Services (lunch and learn education regarding prescription use and drinking, drug disposal), Boone Co. Jail (assessment, treatment, mental health counsling, drug disposal), annual Jude David community in service, Recovery court, Boone Co. Health Dept. (tobacco prevention and cessation classes, youth and adults), INWell and Aspire (treatment), House of Grace and Live for Life (community based recovery services), Boone Co. Probation (classes for youth and adults)

#### **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.<sup>1</sup>

Risk Factors	Resources/Assets	Limitations/Gaps	
1. Excessive alcohol use by adults 18+ (23% of	1. Boone County Jail JCAP	1. Jail overcrowding	
treatment episodes for alcohol dependence, 9% of child removals are for	2. Substance abuse counseling and treatment	2. Limited insurance coverage or no insurance coverage	

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

	alcohol abuse fsph.iupui.edu). Excessive drinking has increased since 2012.	3.	Recovery Works programs and support groups	3.	No inpatient treatment, need more robust system of care upone release of incarceration or treatment
2.	Mental health (37% of Boone Co residents have sought treatment for mental health issues which is higher than the national average – Community Health Needs Assessment, 2018)	1.	Mental health and wellness services (INWell, Cummins, Aspire, Mental Health America of Boone Co., The Cabin Counseling, Transitions Unit at Witham, Families First,Phsyicians Behavioral Health)	nu Bo do pla ho De and see	cess to care – limited mber of psychiatrists in cone Co.and crisis care is ne in the ER with accement in a facility taking urs to days  enial and stigma still exist d may stop people from eking treatment  ople with no insurance or ek of insurance which will y for MH services; need ore early assessment and ferral; lack of inpatient and olescent inpatient care
3.	Peer substance use (6% of expulsions due to ATOD use, 49% of all treatment is due to marijuana use, 10% of TEDS due to opioid dependence, 26% of TEDS due to heroin dependence). Boone Co. has a 19% (per 100,000 pop.) death rate due to unintentional overdose. Nearly 12% of Boone Co. residents are current smokers.	2.	Available community services to address substance use (listed above)  Naloxone is widely available in the community and with first responders  Opportunities for community involvement, faith based organizations and support, resources are available	2.r cor ser	no syringue exchange ogram in the county need for more funding for mmunity programs and rvices need for increased evidence sed services and earlier entification and referral
-	otective Factors		sources/Assets	-	mitations/Gaps
1.	Strong neighborhood attachment	1.	Community parks, community festivals and events, neighborhood schools, community supports	2.	Still have large parts of the community who live in poverty  Parents who are in active addiction and are not engaged with and

		<ol> <li>3.</li> </ol>	Caring teachers, parents, community members  Walkability of the community and access to	3.	unattached to their children  Lack of physical exercise and health eating which
			fresh and nutritious foods (bike and hiking trails, parks, grocery stores, farmer's markets).		leads to poor health outcomes
2.	Supportive relationships	1. 2.	School based peer groups for students  Youth and adult	1.	Need additional ways for peers with developmental and physical disabilities to connect
			connections through sports teams, philanthropic clubs, regilious organizations, and the arts	2.	Lack of public transportation to connect people with peer groups and activities
		3.	Economic, financial security	3.	Pockets of poverty in the county
3.	Local and state policies that support positive healthy norms and child development	1. 2.	School ATOD policies  School mental health policies	1.	School policies in the county may not be uniform or enforced consistently
		3.	Local child development agency policies to ensure that all children in the county receive the education, social support, and services they need	2.	Not all schools in the county may have the same policies surrounding mental health or the ability to provide comprehensive services
				3.	Local agencies may not have adequate funding to support all children in. need of services

### **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.* 

	sk Factors		roblem Statement(s)
1.	Excessive alcohol use by adults 18+ (23% of treatment episodes for alcohol dependence, 9% of child removals are for alcohol abuse fsph.iupui.edu). Excessive drinking has increased since 2012.  O Availability of alcohol through outlets (Boone Co has 171 alcohol outlets)  O Lack of insurance to pay for treatment and recovery support services (6% of adults 18 and over are uninsured O Mental illness – 19.6% of adults in Boone Co have been diagnosed with depression	1.	Adults in Boone County continue to drink alcohol at high rates.
2.	Mental health (37% of Boone Co residents have sought treatment for mental health issues which is higher than the national average – Community Health Needs Assessment, 2018)  o 36% of adults in Boone Co. were admitted to treatment for heroin and 49% of adults were admitted for marijuana addition (these are higher than the national average – IPRC, county demographics, 2018).  o 21% of households in Boone Co are single parent households  o 19% of adults over 18 report excessive drinking (higher than the state average of 18.6%)	2.	Adults in Boone use opioids at higher and marijuana at high rates
3.	Peer substance use (6% of expulsions due to ATOD use, 49% of all treatment is due to marijuana use, 10% of TEDS due to opioid dependence, 26% of TEDS due to heroin dependence).  Boone Co. has a 19% (per 100,000 pop.) death rate due to unintentional overdose. Nearly 12% of Boone Co. residents are current smokers.  Single parent household Age of first use 12% of outlets that sell tobacco are within 1,000 feet of a school	3.	Youth in Boone Co. use alcohol and tobacco at high rates.

- 96% of retailers who sell tobacco, sell flavored tobacco products that appeal to youth (higher than the state average of 91%)
- 28% of retailers displayed tobacco products within in 12 inches of other products that appeal to youth (this is higher than the state average of 24%) (Boone Co Health Improvement Plan, 2019)
- Nearly 30 percent of 12th-graders in Indiana report using electronic vapor products in the last month, according to the <u>28th annual Indiana Youth Survey</u>. This is an increase of 45 percent over 2017 numbers.
- Alcohol availability Youth access to alcohol people 21 and over are the main source of alcohol for minors (3.7% of 7<sup>th</sup> graders and 10.7% of 12<sup>th</sup> graders)
- Alcohol availability 4.4% of youth got alcohol from their parents and 10% of 12<sup>th</sup> graders got alcohol from their parents (IPRC, IYS 2018 data – most recent available)

#### **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).

<b>Problem Statements</b>	<b>Data That Establishes Problem</b>	Data Source
1. Adults in Boone County continue to	Excessive alcohol use by adults 18+ (23% of treatment episodes for	fsph.iupui.edu
drink alcohol at	alcohol dependence,	Boone County Sheriff's
high rates.	9% of child removals are for alcohol abuse). Excessive drinking has increased since 2012	Department
	Boone county has 171 alcohol outlets	Indiana Prev State county demographic data
	9% of deaths in Boone Co. involved alcohol	
	36% of adults in Boone Co. were admitted to treatment for heroin and 49% of adults were admitted for marijuana addition (these are higher than the national average).	https://iprc.iu.edu/epidemiological-data/epi_table.php?table_id=t702 &county=6
		IPRC, county demographics, 2018
	There were 406 OVWI/PI cases in Boone County	Boone County Prosecutor's office, 2019

2.	Adults in Boone use opioids and marijuana at high rates.	5.08% of people over 12 in Boone Co. report using opioids for non medical use – that is higher than the state at rate of 4.98% and 3.09% of residents report drug dependence, which is higher than the state rate of 2.98%	https://opioid.amfar.org/IN
		2018, Indiana providers wrote 65.8 opioid prescriptions for every 100 persons compared to the average U.S. rate of 51.4 prescriptions.	https://www.drugabuse.gov/drugs- abuse/opioids/opioid-summaries- by-state/indiana-opioid-summary (revised April 2020)
		70% of inmates in Boone County are behind bars for drug related charges	2018, 4th Quarter  Data Source: Indiana State
		187 opioid dispensations per 1,000 population (12,129)	Department of Health, Division of Trauma and Injury Prevention, INSPECT. Retrieved from
		In 2019, 70 people visited the ER with opioid related issues	https://gis.in.gov/apps/isdh/meta/st ats_layers.htm on April 10, 2019
		In 2018, there were 55 senior citizens who received counseling for mixing medications with alcohol and other drugs	https://iprc.iu.edu/epidemiological-data/epi_table.php?table_id=t903 &county=6
		There were 609 controlled substance related cases	Boone Co. Sheriff's Department
			https://iprc.iu.edu/epidemiological-data/epi_table.php?table_id=t903 &county=6
			Boone County Senior Services
			Boone Co Prosecutor's office, 2019
3.	Youth in Boone Co. use alcohol and tobacco at high	Percent of family households with single parent (21.3%)	
	rates.	8% of people under 18 live below poverty	
		5.3% of families in Boone County live in poverty	IPRC county demographic data, 2018
		Only 1 tobacco compliance check was conducted in 2018	Boone Co. Probation, 2019
		The rate of non-compliance for alcohol checks in Boone County is 15%	

Bonding and lack of caring adults – 11 out of 1,000 (rate of substantiated child abuse and neglect cases)	
28 Minors participated in Prime for life	
23 Minors charged with tobaccao violations	
1 Minor charged with possession of alcohol and 16 minors charged with consumption of alcohol and 4 charged with OWI	

## **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)?
Adults in Boone County continue to drink alcohol at high rates.	<ol> <li>Create disincentives for drinking and driving by increasing DUI checkpoints in the county</li> <li>Increase availability of support systems in the county through assessment, intervention, and treatment services</li> <li>Increase knowledge and awareness of high risk drinking by implementing education campaign targeted at adults</li> </ol>
2. Adults in Boone use opioids and marijuana at high rates.	<ol> <li>Increase awareness of and education about illicit drug use, targeting at risk populations</li> <li>Increase availability of sypport systems in the community through assessment, intervention, and treatment services</li> <li>Support drug take backand safe drug disposal programs and naloxone education, kits, and distribution</li> </ol>
3. Youth in Boone Co. use alcohol and tobacco at high rates.	<ol> <li>Increase awareness of and education about underage drinking and tobacco use/vaping, targeting at risk populations</li> <li>Support programs that address underage drinking and tobacco/vaping prevention</li> </ol>

<ul><li>and create safe, substance free environments</li><li>3. Increase availability of support systems in the community through assessment, intervention, and treatment services</li></ul>

#### **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 by 5% the number of DUI checkpoints that are conducted in Boone County by March 31, 2021.

#### Goal 2

Increase by 5% the number of people receiving intervention and treatment for alcohol abuse in Boone County by March 31, 2021.

#### **Problem Statement #2**

#### Goal 1

Increase by 5% the number of adults in Boone County who are receiving treatment for opioid or marijuana dependence by March 31, 2021.

#### Goal 2

Restrict social access to Rx painkillers for abuse in Boone County by increasing safe disposal of medications by 5% by supporting onsite drop-boxes for safe and continuous return of medications by March 31, 2021.

#### **Problem Statement #3**

#### Goal 1

Increase by 5% among youth and adults the perceived risk of legal consequences for breaking alcohol and tobacco related laws by publicizing social host law information and alcohol compliance checks information by March 31, 2021.

#### Goal 2

Increase by 5% the number of alcohol compliance checks that are conducted in Boone County by March 31, 2021.

## **Step 5: Plans to Achieve Goals**

For each goal, list the steps required to achieve each

Problem Statement #1	Steps
Goal 1	1. Meet with stakeholders such as the
Increase by 5% the number of DUI checkpoints that are conducted in Boone County	Boone Co. Sheriff's Dept., LPD, and ISP to talk about increased DUI checkpoints
	2. Encourage LEAs to apply for funding to increase DUI checkpoints
	3. Publicize DUI checkpoints and results
Goal 2 Increase by 5% the number of people receiving intervention and treatment for alcohol abuse in Boone County	1. Increase information about alcohol abuse, assessment, and treatment through social media and information shared through probation, Boone Co. Jail, prosecutor's office and other stakeholders
	2. Meet with treatment providers to understand current TEDS data, treatment options, funding needs
	3. Support community treatment and community court programs (such as the Boone Co. Family Court), probation programs, jail programs)
Problem Statement #2	Steps
Goal 1 Increase by 5% the number of adults in Boone County who are receiving treatment for opioid or marijuana dependence	1. Increase information about opioid and marijuana use, assessment, and treatment through social media, information shared through probation, Boone Co. Jail, prosecutor's office and other stakeholders
	2. Meet with treatment providers to understand current TEDS data, treatment options, funding needs
	3. Support community treatment and community court programs (such as the Boone Co. Family Court), probation programs, jail programs)

Goal 2 Restrict social access to Rx painkillers for abuse in Boone County by increasing safe disposal of medications by 5% by supporting onsite dropboxes for safe and continuous return of medications	<ol> <li>Increase information about the dangers of opioids and marijuana through social media campaigns</li> <li>Support onsite drop-boxes for safe and continuous return of medications as well as naloxone training and kits by March 31, 2021</li> <li>Support programs that educate and address high risk populations</li> </ol>
Problem Statement #3	Steps
Goal 1 Increase by 5% youth who receive education, intervention, or treatment for their tobacco use or vaping	Increase awareness of tobacco laws and tobacco compliance checks information through social media by March 31, 2021      Support treatment and cessation programs for tobacco use and vaping      Support programs that educate and address high risk populations for alcohol and combustible and non-cobustible tobacco products
Goal 2 Increase by 5% the number of alcohol compliance checks that are conducted in Boone County by March 31, 2021	1. Meet with the Indiana State Excise Police rearding alcohol compliance check initiative (SAC)  2. Publicize compliance checks and results through social media  3. Educate retailers about responsible retail practices, fines and penalties for failing compliance checks, and

#### **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**

Amount of funds deposited into the County Drug Free Community Fund from fees collected last year (\$100.00): \$50,701.51

Amount of unused funds that rolled over from the previous year (\$100.00): \$16,513.76

Total funds available for programs and administrative costs for the upcoming year (\$100.00): \$50,701.51 (appropriated budget is \$44,500 because we don't get all of the financial data and estimated collections until after the budget has been submitted – we are working to try to get the additional roll over funds allocated into the 2020-2021 budget if possible but have to use our appropriated budget)

Amount of funds granted the year prior (\$100.00): \$34,187.75

How much money is received from the following entities (if no money is received, please enter \$0.00):

Substance Abuse and Mental Health Services Administration (SAMHSA):\$0.00

Bureau of Justice Administration (BJA): \$0.00

Office of National Drug Control Policy (ONDCP): \$0.00

Indiana State Department of Health (ISDH): \$0.00

Indiana Department of Education (DOE): \$0.00

Indiana Division of Mental Health and Addiction (DMHA): \$0.00

Indiana Family and Social Services Administration (FSSA): \$0.00

Local entities: \$0.00

Other: \$0.00

# Funding allotted to prevention/education; intervention/treatment; and criminal justice services and activities (\$100.00):

Prevention/Education:	Intervention/Treatment:	Justice:
\$11,062.50	\$11,062.50	\$11,062.50

#### Funding allotted to Administrative costs:

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Itemized list of what is being funded	Amount (\$100.00)	
Chair stipend	\$3,000 per year	
Miscellaneous funding to supplement grant requests if needed,	\$8,062.50	
printing and advertising, other office expenses		

#### **Funding allotted by Goal per Problem Statement:**

Problem Statement #1	Problem Statement #2	Problem Statement #3
Goal 1: \$0.00	Goal 1: \$9,956.25	Goal 1: \$11,062.50
Goal 2: \$11,062.50	Goal 2: \$1,106.25	Goal 2: \$0.00