

The Indiana Commission to Combat Substance Use Disorder



Behavioral Health Division

2025 Comprehensive Community Plan

County: Tippecanoe

LCC Name: Drug-Free Coalition of Tippecanoe County

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County Commissioners: Tracy Brown, David Byers, Thomas Murtaugh

Address: 20 N. 3rd St.

City: Lafayette, IN

Zip Code: 47901

Vision Statement

What is your Local Coordinating Council's vision statement?

The mission of the Coalition is to reduce the problems associated with substance use disorder in Tippecanoe County while enhancing family and community life.

Mission Statement

What is your Local Coordinating Council's mission statement?

We believe alcohol and drug use to be one of the leading health and social problems in our nation today. Alcohol and drug use negatively affect virtually every member of our society through its impact on crime, families, health, education, employment, and economies. We believe an important step toward the eradication of alcohol and drug use is to address the problem through the combined efforts of citizens at the community level. We, the Coalition, support the coordination of a community-based comprehensive drug-free network to address the problems associated with alcohol and drug use and to promote a healthy, drug-free lifestyle.

| Membership List | | | | | |
|-----------------|-------------------|------------------------------------|------------------------|--------|--|
| # | Name | Organization | Race | Gender | Category |
| 1 | Adam Ferguson | West Lafayette Police | White | Male | Law Enforcement |
| 2 | Amanda Ferguson | Lafayette Police Department | White | Female | Law Enforcement |
| 3 | Amy Brinkley | Paul's Plan Ministries | Native American/ White | Female | Community Organization to reduce substance use |
| 4 | Amy O'Shea | United Way | White | Female | Youth-serving organization |
| 5 | Ashley Billy | IU Health Care | White | Female | Healthcare Professional |
| 6 | Catherine Scott | Purdue University – Retiree | White | Female | Educational/ Community Member |
| 7 | Chad Robinson | Tippecanoe County Drug Task Force | White | Male | Law Enforcement |
| 8 | Charlie Short | Surf Center | White | Male | Community Organization to reduce substance use |
| 9 | Christina Poynter | Tippecanoe County Sheriff's Office | White | Female | Law Enforcement |
| 10 | Daniel Soria | Drug Enforcement Administration | White | Male | Law Enforcement |
| 11 | Devon Moore | West Lafayette Police Department | Black / White | Female | Law Enforcement |

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|----|------------------------|--|--------------|---------------|--|
| 12 | Diff Steyn | Tippecanoe County Health Department | White | Male | Government Agency |
| 13 | Donna Zoss | Grace Recovery | White | Female | Community Organization to reduce substance use / Religious Organization/ Parent |
| 14 | Erika Allen | Meridian Health Services | White | Female | Community Organization to reduce substance use |
| 15 | Heidi Gregory | Collaborative Health | White | Female | Mental Health Professional |
| 16 | Jane Krause | Purdue College of Pharmacy | White | Female | Educational |
| 17 | Jenni Murtaugh | Willowstone Family Services | White | Female | Community Organization to reduce substance use |
| 18 | Jennifer Glover | Meridian / Home with Home | White | Female | Community Organization to reduce substance use |
| 19 | Jon Kyle | Conquering Mountains Together | White | Male | Volunteer Group |
| 20 | Jonathan Eager | West Lafayette Police Department | White | Male | Law Enforcement |
| 21 | Julie Bray | Sycamore Springs | White | Female | Lived Experience |
| 22 | Lori Johansen | Lifeline Connections & TCOR | White | Female | Religious Organization / Community Organization to reduce substance use |
| 23 | Paige Logan | Tippecanoe County Health Department – Gateway to Hope | White | Female | Government Agency |
| 24 | Rebecca Ball | Meridian Health Services | White | Female | Community Organization to reduce substance use |
| 25 | Regina Pilotte | Purdue University HealthTAP | White | Female | Educational Organization |

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| 26 | Rhonda Stein | 1 love harm reduction | White | Female | Community organization to reduce substance use/ Parent |
| 27 | Robert Hainje | Tippecanoe County Sherriff's Office | White | Male | Law Enforcement |
| 28 | Sharon Hutchison | Tippecanoe County Government | White | Female | Government Agency |
| 29 | Shedy Kyle | Conquering Mountains Together | White | Female | Volunteer group |
| 30 | Sheri Moore | NAMI- WCI | White | Female | Community Organization to reduce substance use |
| 31 | Stacia Peters | Big Brothers Big Sisters of Greater Lafayette | White | Female | Youth-Serving Organization |
| 32 | Stephen Horrocks | MHA – WVR | White | Male | Community Organization to reduce substance use |
| 33 | Tara Stovall | Phoenix Paramedics | White | Female | Healthcare |
| 34 | Will Evans | Purdue University | White | Male | Educational Organization |
| 35 | Nikkie Dell | Wooded Glen Recovery Center | White | Female | Healthcare |

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:

It is the intent of the Coalition to meet monthly and no less than six times per calendar year to address pertinent business and/or concerns. At least a 48-hour notice of a special meeting shall be given, including the time, place, and purpose of the meeting. All meetings are open to the public.

Tippecanoe County Drug Free Coalition meets monthly January-December.
The monthly meetings are held on the first Wednesday of the month at 4pm.
Subcommittees meet monthly or as needed.

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

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| County Name Tippecanoe |
| County Population 189,425 (2024) |
| Schools in the community Tippecanoe County is home to three public school systems: Lafayette School Corporation, Tippecanoe School Corporation, and West Lafayette Community School Corporation. Between these three institutions, there are 20 elementary schools, 9 middle schools, and 5 high schools. There is also an array of private and faith-based school systems in our community including, but not limited to, Faith Christian, Lafayette Catholic Schools, and Lafayette Christian School. We have one public charter school, Paramount Schools of Excellence. Alternative High School options include the Crossing, LARA, and the Excel Center. Higher Educational institutions in the county include the Greater Lafayette Career Academy, two cosmetology schools, Purdue University and Ivy Tech Community College. |
| Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.) Tippecanoe County consists of the following hospitals: Franciscan Health Lafayette IU Health Arnett (Lafayette), Lafayette Rehabilitation Hospital (Lafayette), River Bend Hospital (West Lafayette), Sycamore Springs Hospital LLC (Lafayette). There is two FQHC facility - Riggs Community Health Center and Meridian Health Services. Other providers include Lafayette VA Clinic (for eligible Veterans), WellNow Urgent Care, Fast Pace Health Urgent Care, additional urgent cares, Valley Oaks, Purdue University Student Health Center, The Center for Healthy Living, several private practices, and a UNITY Health Complex (which provides immediate care as well as other surgery and medical providers). |
| Mental health care providers in the community (hospitals with psychiatric/behavioral health units, mental health clinics, private/public providers, etc.) Community mental health is provided by Valley Oaks Health and other several independent provider agencies such as Sycamore Springs, Home with Hope, Lighthouse Recovery, Trinity Life Ministry, Oxford House, Riggs, River Bend, Willowstone- Family Services, Meridian Health, Counseling Partners, Families United and Calla Collaborative Health. Tippecanoe county is home to many private practice mental health care providers. Additional providers include: Dragonfly Recovery, MedMark, CleanSlate, Groups Recover Together, Indiana Suboxone Doctor, Seeds of Hope, |
| Service agencies/organizations There are many service organizations in our community including but not limited to: Bauer Family Resources, Child and Family Partners, Mental Health America- WVR, Salvation Army, Lafayette |

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| <p>Housing Authority, LTHC Homeless Services, Lafayette Urban Ministry, SURF Center, NAMI-WCI, Recovery Café, United Way, Big Brothers Big Sisters, Food Finders, Paul’s Plan Ministries, Conquering Mountains Together, Phoenix Paramedics Solutions QRT, 1 Love Harm Reduction, Grace Recovery, New Leaf Wellness Center, Tippecanoe County Health Department, Tippecanoe County Community Corrections Recovery Coaching, Tippecanoe County Drug Task Force, West Lafayette Police Department, Lafayette Police Department, Tippecanoe County Sheriff’s Office, Purdue University Police Department, Purdue College of Pharmacy – Campus RX/ Drug Misuse Initiative, Lifeline Connections, Gateway to Hope, and Hartford House Child Advocacy Center. Tippecanoe County is home to over 200 churches from all denominations and congregation sizes.</p> |
| <p>Local media outlets that reach the community WLFI News 18, Star City Broadcasting, Journal and Courier, 106.7 FM, Purdue Exponent, Dave Bangert and other radio stations.</p> |
| <p>What are the substances that are most problematic in your community? Alcohol, benzodiazepines, cocaine, fentanyl nicotine/vaping, opioids, prescription drug use, methamphetamine, marijuana/ THC, Xylazine, Synthetic</p> |
| <p>List all substance use/misuse services/activities/programs presently taking place in the community. Home with Hope, Trinity Life Ministry, Lighthouse Recovery Home, Oxford House, SURF Center, Grace Recovery, Recovery Café, NAMI-WCI, Gateway to Hope- Syringe Service Program, Tippecanoe County Community Corrections Recovery Coaching, Paul’s Plan, Phoenix Paramedic Solutions QRT, Big Brothers Big Sisters, Youth Summit/Parent Summit, Lifeline Connections, Willowstone (Parent Café and Get SMART Jr), Grace Recovery- Kids Hope, Bauer Family Resources. Tippecanoe County Drug Task Force – Operation Narc Stop, West Lafayette Police Dept. – Rx takeback, safety lighting, Lafayette Police Dept. – Medication take back event assistance. Tippecanoe Celebration of Recovery Rally, 1 Love Harm Reduction Overdose Awareness Day, Drug-Free Coalition of Tippecanoe County Overdose Awareness Event, Overdose Awareness Day, Overdose Fatality Review Team, Tippecanoe Resilience and Recovery Network, Tippecanoe County Health Department – Community Health Fair. Tippecanoe County Sheriff Office K-9 dual purpose units that educate our students and citizens about narcotics and the dangers they hold.</p> |

Community Risk and Protective Factors

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive, and others may apply.

Risk Factors Examples: trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; homelessness and cost of housing; 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.

| Risk Factors | Resources/Assets | Limitations/Gaps |
|---|--|--|
| 1. Community Norms and peer use | 1. NAMI Living Room 2. Recovery Café 3. Phoenix Paramedics Solutions QRT 4. Grace Recovery 5. Surf Center 6. Paul's Plan Ministries | 1. Extremely limited options available to youth 2. Limited reach beyond Lafayette 3. Limited nights and weekend options beyond group settings 4. Lack of access to transportation |
| 2. Availability of alcohol and other drugs | 1. Purdue University Police Department 2. Lafayette Police Department 3. West Lafayette Police Department 4. Tippecanoe County Sheriff's Department 5. Tippecanoe County Community Corrections 6. Tippecanoe County Drug Task Force | 1. Youth continue to access and utilize substances at an alarming age. 2. EMS are at minimum daily having to respond to a substance-based call. 3. Alcohol has become such a norm that it's increasing addictions, arrests, and overdoses. |
| 3. Limited prevention and recovery resources | 1. NAMI 2. Recovery Café 3. Northend Community Center 4. Paul's Plan Ministries 5. Gateway to Hope | 1. Narcan is not available openly to the public in West Lafayette or rural Tippecanoe County cities. 2. Individuals being discharged from the emergency room due to substance use are not being connected properly with community resources. |

| | | 3. Those who die due to an overdose have a high percentage to have interacted with EMS, ED, or RX prescriber within the past year of their death, but never provided resource information. |
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| Protective Factors | Resources/Assets | Limitations/Gaps |
| 1. Community Based Intervention | 1. Surf Center – connections support group 2. NAMI WCI- Peer to Peer and Family to Family Programs 3. Tippecanoe County Health Department – Gateway to Hope 4. Recovery Café 5. Lifeline Connections 6. Celebrate Recovery Calvary Church | 1. Lack of inpatient beds for substance use recovery, particularly locally 2. Lack of financial means for individuals to be able to seek treatment 3. Lack of IOP/ PHP awareness and options 4. Lack of participation in available programs 5. Lack of financial means to transport to program locations |

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) |
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| 1. Community Norms/ Peer Use | <ol style="list-style-type: none"> 1. Vaping is a rising concern within the youth population in Tippecanoe County. 2. A significant portion of the population engage in alcohol consumption, which contributes to addictions, overdoses, exposure to youth, and arrests. |
| 2. Availability of alcohol and other drugs | <ol style="list-style-type: none"> 1. Youth perceive that accessing drugs and alcohol is effortless and comes with minimal consequences, leading to increased substance use and associated risks. 2. Insufficient education and awareness regarding the risks and consequences of substance use in Tippecanoe County contribute to a lack of informed decision making. |
| 3. Limited prevention and recovery resources | <ol style="list-style-type: none"> 1. There is limited access to affordable treatment in Tippecanoe County. 2. Individuals who die from overdoses may not have been adequately informed by medical professionals or provided with essential details and access to resources. This highlights the critical need for improved communication and education from healthcare providers, as well as enhanced availability of support and treatment options to prevent overdose deaths. |

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 |
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| 1. A significant portion of the population engage in alcohol consumption, which contributes to addictions, overdoses, | <ol style="list-style-type: none"> 1. 2,749 drug or alcohol related arrests were made in 2023, with 43.8% being related to alcohol in Tippecanoe County. 2. 44% of Hoosiers report alcohol use, 21% report to binge drinking, and 10% admit to addiction. | 1. https://www.in.gov/recovery/data/#County_Response_Hospital_Discharges_and_Deaths |

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| exposure to youth, and arrests. | <ol style="list-style-type: none"> 3. An average of 2,960 annual deaths in Indiana are attributable to excessive alcohol use. 4. The 5-year average annual rate of excessive alcohol deaths per capita in Indiana increased by as much as 49.7% from 2015 to 2019. | <ol style="list-style-type: none"> 2. https://www.in.gov/fssa/dmha/files/Drug-Fact-Sheet_2023_AD_A_final.pdf 3. Alcohol Abuse Statistics [2023]: National + State Data - NCDAS (drugabusestatistics.org) |
| 2. Youth perceive that accessing drugs and alcohol is effortless and comes with minimal consequences, leading to increased substance use and associated risks. | <ol style="list-style-type: none"> 1. In 2023 the 1st leading age group with ED overdose visits was 15-24, tying 3rd was 14 and under. 2. There were 353 arrests made in 2023 that were drug and alcohol related, in which the individual were 15-24 years old in Tippecanoe County. 3. Individuals aged 15-18 are 5% more likely than any other age group to be re-arrested within a year of their release from a criminal institution from a drug related crime. They are 15% more likely in alcohol cases. 4. There was a 14% increase since 2021 of drug overdose in youth aged 15-19. A total of 57 children died from a drug overdose in 2022 in Indiana. 5. 46.7% of students reported they believe there is no risk or slight risk of harm from taking one or two drinks of alcohol nearly every day, and 53.3% believed no risk or slight risk of harm from smoking one or more packs of cigarettes a day. 6. 23 arrests were made in Tippecanoe County High Schools in 2022 and 52 were made in 2023, an 126% increase, verse Indiana 12.94% decrease average. | <ol style="list-style-type: none"> 1. https://www.in.gov/health/overdose-prevention/overdose-surveillance/indiana/ 2. https://www.in.gov/recovery/data/#County_Response_Hospital_Discharges_and_Deaths 3. Alcohol Abuse Statistics [2023]: National + State Data - NCDAS (drugabusestatistics.org) 4. https://iyyi.org/resources/indiana-kids-count-data-book/ |
| 3. Individuals who die from overdoses often do so because they were not adequately informed by medical professionals or provided with essential details and access to resources. This highlights the critical | <ol style="list-style-type: none"> 1. Within the last year of an individual's death from an overdose they have likely interacted with a pharmacist 5.2x, been in the emergency room 3.5x, and interacted with EMS 2.3x. 2. 73.09% of overdose deaths interacted with the emergency room with the last year, verse Indiana average of 63%. 3. Currently there are zero public Narcan boxes in West Lafayette, Clark's Hill, Dayton, or Montmorenci. | <ol style="list-style-type: none"> 1. In.gov/mph/projects/fortress 2. MPH: Fatal Drug Overdose Touchpoints 3. Overdoselifelinel.org 4. https://www.in.gov/dhs/ems/ems-data/ |

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| need for improved communication and education from healthcare providers, as well as enhanced availability of support and treatment options to prevent overdose deaths. | <p>4. In 2023 there were 374 EMS runs under the category of overdose, poisoning, alcohol detox, and withdrawal within Tippecanoe County.</p> <p>5. Tippecanoe County is the 16th lowest administrator of Narcan among all Indiana counties.</p> | 5. https://www.in.gov/recovery/data/#County_Response_Hospital_Discharges_and_Deaths |
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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)? |
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| 1. A significant portion of the population engage in alcohol consumption, which contributes to addictions, overdoses, exposure to youth, and arrests. | <p>1. Create awareness and encourage alternatives to alcohol consumption.</p> <p>2. Encourage activities that prevent triggers to consume alcohol and encourage sobriety.</p> <p>3. Enhance awareness of support groups, recovery options, IOP, PHOP, and treatment centers for substance use/ addition.</p> <p>4. Educate residents about the risk of alcohol use.</p> <p>5. Identify and support programs that help eliminate barriers to accessing treatment and care</p> |
| 2. Youth perceive that accessing drugs and alcohol is effortless and comes with minimal consequences, leading to increased substance use and associated risks. | <p>1. Provide more group and one on one activities for youth in the hours they are not in school.</p> <p>2. Work with school resources that reach the youth most vulnerable to the use of these items and build a relationship to healthier choices that provide activities and encouragement.</p> <p>3. Educate youth about the risk of substance youth and the resources available to them.</p> <p>4. Provide support to youth struggling with substance use and legal issues by helping them access resources and services to guide them towards a positive path.</p> |
| 3. Individuals who die from overdoses often do so because they were not adequately informed by medical professionals or provided with essential | <p>1. Create a collaboration with medical providers, hospitals, urgent cares, EMS, pharmacists on peer support options, community substance use presentation resources, and locations to get free Narcan.</p> |

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| details and access to resources. This highlights the critical need for improved communication and education from healthcare providers, as well as enhanced availability of support and treatment options to prevent overdose deaths. | <ol style="list-style-type: none"> 2. Install Narcan boxes in West Lafayette, Clark's Hill, Dayton, and Montmorenci. Create more Narcan distributors while making Narcan more available at community events. 3. Collaborate with community partners for programs that provide support for recovery from substance use 4. Identify and support programs that help eliminate barriers to accessing treatment and care |
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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

A significant portion of the population engage in alcohol consumption, which contributes to addictions, overdoses, exposure to youth, and arrests.

Goal 1

Increase activities and new events in Tippecanoe County that will occur between April 2025-March 2026 with a combined minimum attendance of 500 people that will offer an alcohol-free environment.

Goal 2

Work with community organizations to increase awareness about support groups, recovery options, IOP, PHP, and treatment centers for substance use/ addiction aiming to interact with 50 unreached individuals over the year.

Problem Statement #2

Youth perceive that accessing drugs and alcohol is effortless and comes with minimal consequences, leading to increased substance use and associated risks.

Goal 1

Increase existing or add new mentorship or resource programs to assist at least 50 youth struggling with substance use that may or may not involve legal issues, providing each with access to a minimum of three relevant resources within 12 months of the program's initiation.

Goal 2

Engage with local schools to implement evidence-based programs, groups, or resources that supports no less than 25 students (per school) with engaging activities to combat substance use and increase awareness of risks and effects.

Problem Statement #3

Individuals who die from overdoses often do so because they were not adequately informed by medical professionals or provided with essential details and access to resources. This highlights the critical need for improved communication and education from healthcare providers, as well as enhanced availability of support and treatment options to prevent overdose deaths.

Goal 1

Establish or continue collaborations with no less than three local medical providers, hospitals, urgent care centers, EMS, and pharmacies to enhance peer support, community substance use prevention resources,

Goal 2

Identify and support at least five programs that address barriers to accessing treatment and care providing necessary funding, resources, or advocacy, and ensure that each program reports a measurable reduction in access barriers within 12 months of receiving support.

Step 5: Plans to Achieve Goals

For each goal, list the steps required to achieve each

| Problem Statement #1 A significant portion of the population engage in alcohol consumption, which contributes to addictions, overdoses, exposure to youth, and arrests. | Steps |
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| <p>Goal 1</p> <p>Fund activities and new events in Tippecanoe County that will occur between April 2025-March 2026 with a combined minimum attendance of 500 people that will offer an alcohol-free environment.</p> | <ol style="list-style-type: none"> 1. Facilitate a non-clinical support group for at least 20 individuals seeking a more informal and community-based approach to managing substance use and self-harm. 2. Host and provide alcohol- and substance-free events and environment. 3. To reduce life-controlling issues within the targeted population by providing educational intervention program that promotes healthy habits, addiction prevention, and overdose awareness. 4. We will double the number of Parent Cafe's provided in Tippecanoe County and increase |

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| | engagement in Parent Cafes by 50% to provide more access to a fun and productive activity that offers an alcohol-free environment for parents. |
| <p>Goal 2</p> <p>Work with community organizations to increase awareness about support groups, recovery options, IOP, PHP, and treatment centers for substance use/addiction aiming to interact with 50 unreached individuals over the year.</p> | <ol style="list-style-type: none"> 1. NAMI-WCI will offer two CIT trainings per year to area Law Enforcement Officers. The Officers will become aware of organizations who offer substance use treatment options in order for them to share their knowledge with individuals they encounter 2. By December 2025, the program will have successfully supported at least 100 individuals in their reentry from incarceration, engaged a minimum of 500 participants in educational-focused community outreach events in collaboration with multiple organizations, and completed a 12-week contingency management program with no less than 10 participants, monitoring outcomes and fostering sustained engagement in recovery activities. |
| <p>Problem Statement #2</p> <p>Youth perceive that accessing drugs and alcohol is effortless and comes with minimal consequences, leading to increased substance use and associated risks.</p> | Steps |
| <p>Goal 1</p> <p>Fund existing or new mentorship or resource programs to assist at least 50 youth struggling with substance use that may or may not involve legal issues, providing each with access to a minimum of three relevant resources within 12 months of the program's initiation.</p> | <ol style="list-style-type: none"> 1. BBBSGL will present a minimum of 50 youth and their families with 3 relevant resources regarding substance use, with the aim of reducing youth perception that accessing drugs and alcohol is effortless and has minimal consequences. This will be |

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| | <p>tracked through Matchforce and achieved within 1 year.</p> <p>2. At least 75% of the individuals participating in Kids Hope or their parent/guardian will be provided with information or a referral to three relevant resources within the time frame of April 1, 2025, to March 31, 2026.</p> <p>3.</p> |
| <p>Goal 2</p> <p>Engage with local schools to implement evidence-based programs, groups, or resources that supports no less than 25 students (per school) with engaging activities to combat substance use and increase awareness of risks and effects.</p> | <p>1. BBBSGL will engage with local school to implement evidence-based programs that support no less than 10 students with engaging activities to combat substance use, with the aim of reducing youth perception that accessing drugs and alcohol is effortless and has minimal consequences. This will be tracked through Match force and achieved within 1 year.</p> <p>2. NAMI-WCI trained presenters will provide 32 Ending the Silence presentations to 750 students in the 2025-26 school year. 75% of the students will report and increase awareness of risks and effects of substance use.</p> <p>3.</p> |
| <p>Problem Statement #3</p> <p>Individuals who die from overdoses often do so because they were not adequately informed by medical professionals or provided with essential details and access to resources. This highlights the critical need for improved communication and education from healthcare providers, as well as enhanced availability of support and treatment options to prevent overdose deaths.</p> | <p>Steps</p> |

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| <p>Goal 1</p> <p>Establish or continue collaborations with no less than three local medical providers, hospitals, urgent care centers, EMS, and pharmacies to enhance peer support, community substance use prevention resources, and access to free Narcan, with installation of public Narcan boxes (particularly in West Lafayette, Dayton, Clark’s Hill, and Montmorenci) over the next twelve months.</p> | <ol style="list-style-type: none"> 1. NAMI-WCI will offer two CIT trainings per year to area Law Enforcement Officers. The Officers will become aware of organizations who offer substance use treatment options in order for them to share their knowledge with individuals they encounter 2. Within first 12 months PPM will ensure that there is a process in place that allows for 100% of law enforcement crisis referrals (from Lafayette Police, West Lafayette Police, Tippecanoe County Sheriff’s Office, and Tippecanoe County Community Corrections) will be processed within 48 hours. 3. Ensure at least 90% of GTH participants report receiving and understanding overdose prevention education, with a goal of distributing 300 Narcan kits over the program year. |
| <p>Goal 2</p> <p>Identify and support at least five programs that address barriers to accessing treatment and care providing necessary funding, resources, or advocacy, and ensure that each program reports a measurable reduction in access barriers within 12 months of receiving support.</p> | <ol style="list-style-type: none"> 1. By the end of 2025 PPM anticipates having lists of felony friendly/criminal justice impacted resources curated for person's impacted by the criminal justice reentering the community. 2. SMART Goal: Within 12 months of receiving funding, PPM will successfully cover up to \$7,000 in treatment, housing, transportation, and other recovery support services for at least 10 individuals referred from local law enforcement, aiming to reduce treatment access barriers by 50% for these individuals, as tracked by application, receipts, and follow up from referring law enforcement agency/PPM. |

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| | 3. Achieve a 10% increase in the number of participants reporting reduced alcohol consumption after working with a recovery coach. |
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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 | | |
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| 1 | Amount deposited into the County DFC Fund from fees collected last year: | \$147,231.00 |
| 2 | Amount of unused funds from last year that will roll over into this year: | \$39,499.00 |
| 3 | Total funds available for programs and administrative costs for this year (Line 1 + Line 2): | \$186,730.00 |
| 4 | Amount of funds granted last year: | \$146,805.00 |
| 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: | Intervention/Treatment: | Justice Services: |
| \$46,682.50 | \$46,682.50 | \$46,682.50 |
| Funding allotted to Administrative costs: \$46,682.50 | | |
| Itemized list of what is being funded | | Amount (\$100.00) |
| Coordinator compensation | | \$30,000.00 |
| Office supplies | | \$3,682.50 |
| Events | | \$5,000 |
| Scholarships | | \$8,000 |
| Funding Allocations by Goal per Problem Statement: | | |
| Problem Statement #1 | Problem Statement #2 | Problem Statement #3 |
| Goal 1: \$28,120.00 | Goal 1: \$17,940.00 | Goal 1: \$28,960.00 |
| Goal 2: \$25,755.00 | Goal 2: \$21,656.00 | Goal 2: \$17,616.50 |