



Meeting Highlights and Action Plan

Topic	Key Points	Action Items <i>Including Responsible Party/Timeline if applicable</i>
Task Force Members	Benetta Moore-Miller, Michelle Adkins, Tracey Stute, Robert Durham, Sherry Nelson, Chanteal Hall, Tina Fisher, Susan Bayless, Peggy Johnson, Tony Bailey, Richard Marsh, Dottie McNeil, Sheri Haines, Wendy Doolittle, Denise Estep, Karen Juliano, Michael Cooper, Keith Robinson	
Task Force Update	<ul style="list-style-type: none"> • W. Doolittle reported: Task Force was formed 3 years ago to address substance abuse, prevention and support. The task force is made up of members of our community representing many different facets of perspective. • The Task Force has: 1.) through various mechanism, obtained grant monies for the purchase of Dawn Kits for use on overdose clients/patients. 2.) Obtained completed surveys from active addicts in order to develop programs/interventions. 3.) Formed the Drug Death Review Committee. 4.) Been instrumental in initiating the Jail Program. 5.) Active in the development of Awareness Brochure in collaboration with Clark State. 	
Jail Program Highlights	<ul style="list-style-type: none"> • Letter to all inmates outlining the dangers of overdosing after being off of drugs during period of incarceration. • Injection of Vivitrol prior to release to inhibit the use of Heroin/Fentanyl thus reducing the risk of overdose. The inmates must be without opiates in their system to qualify. • Home visit for survivors of drug overdose who are now engaged in treatment. Currently 55% of survivors are in treatment. • Identified lack of knowledge regarding treatment resources and that insurance is not required to receive treatment at some facilities. 	
Drug Death Review Overview	<ul style="list-style-type: none"> • There were 63 confirmed drug overdose deaths in Clark County in 2015, and 11 confirmations are pending, bringing the total to 74. This is almost double the number of overdose deaths in 2014. Only 13% of these individuals were at poverty levels or below. Those who are more economically sound are more likely to abuse drugs. 	
Areas and Methods of Focus	<ul style="list-style-type: none"> • Data Collection to determine needs and focus: Data from EMS, Drug Death Review Committee, Surveys and other formal and informal data collection by multiple disciplines within the community. With data collection from many sources prevention can be approach in many different ways. • Stigma of drug abuse: 60% of the 74 drug overdose deaths has no connection to McKinley Hall, however, the majority of citizens see those that overdosed as having mental health concerns, are poor or have issues in their lives that would never impact the general population. 	

	<ul style="list-style-type: none"> • Lack of Understanding: Average age of death for overdose is in the 40's. Research shows underlying conditions/causes such as abuse, lack of economic security, and trauma lead to the initial drug use. • Resources: What resources are available for addicts/drug abusers but also what resources are available for family and friends. Example: Temple Center has a dinner once a month with resource speakers providing information. Also, CPR and First Aid classes are offered so that family/friends can better respond in overdose situations. • Reduction of number dying from overdose: Education regarding signs and symptoms of drug overdose so that family, friends or those present will know to call 911 immediately, no "sleeping it off". • Concerns that new legislation to prosecute an overdose death as homicide causing concerns/issues with reporting or seeking help. • Dawn Kits (Narcan) - A.) The number of lives saved per every 100 kits distributed to families of drug addicts is 10. This is based on self-reporting. It is believed that the number is higher but care givers do not want to admit using. B.) Dawn Kits are now being distributed to first responders as well, and usage reporting will provide better data than self-reporting. C.) Dealers are now keeping Narcan on hand for use in case of overdose. Two fold purpose keep business flowing and avoid prosecution. • What is driving the choice of drug - Cost?, the quality of the "High", Fentanyl is 100 times more potent than Heroin. 	
<p>Goals Discussion</p>	<ul style="list-style-type: none"> • Goal 1 - Additional data collection including occupation of abuser. • Goal 2 - Community Forums: Brochures, stigma reduction, education of impact on community as a whole (financial, justice systems etc....). Literature to address drug addiction in general, not focus exclusively on Heroin and Fentanyl, drug of choice changes dependent on availability, new options and cost. • Goal 3 - Youth education in schools, starting in Kindergarten. Curriculum currently available that is progressive K-12. Also, expand the Youth Mental Health First Aid program which is currently in pilot in several schools in Springfield City School District and Catholic Central. • Goal 4 - Outreach to Addicts, Community: A.) Provider Police Officers with drug overdose/drug abuse literature for distribution in the field. B.) Provide local hospital and urgent cares with drug overdose/drug abuse literature for distribution to patients as deemed appropriate. C.) Non-English population. D.) Invite New Carlisle Drug Coalition to join task force. E.) Utilize connection to faith to reach Hispanic population. • Goal 5 - Prevention - A.) Encourage pain management without drugs for population in general. B.) Alternative methods for pain control for current/recovering addicts. • 	
<p style="text-align: center;">Next Meeting: February 26, 2016, from 10:00 AM to 12 Noon. New location - DJFS in the Reid Room (go to entrance at building B, there are picnic tables in front of the doors, go left down the hall left and in first room on left.</p>		