

COMMONWEALTH OF KENTUCKY  
JUSTICE & PUBLIC SAFETY CABINET



2019 Combined Annual Report

Kentucky Office of Drug Control Policy

-AND-

Kentucky Agency for Substance Abuse Policy

Justice & Public Safety Cabinet

Van Ingram, Executive Director  
Office of Drug Control Policy  
March 2020



**ANDY BESHEAR**  
GOVERNOR

COMMONWEALTH OF KENTUCKY  
**OFFICE OF DRUG CONTROL POLICY**  
JUSTICE AND PUBLIC SAFETY CABINET  
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**JUSTICE MARY C. NOBLE, RET.**  
SECRETARY

**VAN INGRAM**  
EXECUTIVE DIRECTOR

The Honorable Andy Beshear, Governor  
The Honorable Jacqueline Coleman, Lt. Governor  
Commonwealth of Kentucky  
The State Capitol  
Frankfort, Kentucky 40601

Dear Governor Beshear and Lt. Governor Coleman:

Since the establishment of this office on July 9, 2004, by Executive Order 2004-730, we have been responsible for all matters relating to the research, coordination and execution of drug control policy for the Commonwealth, while directing state and federal grants management that focus on prevention/education, enforcement and treatment efforts.

The Commonwealth continues to battle this public health crisis, and we are pushing harder than ever to beat back addiction with a broad multifaceted approach that leverages every resource at our disposal to ensure a united effort among prevention, treatment, and education initiatives to address substance abuse in Kentucky. We continue to work toward significant goals that will strengthen our position to fight drugs in our state through innovative partnerships, technology and leadership.

This report focuses on the responsibilities and accomplishments of the Kentucky Office of Drug Control Policy (KY-ODCP) and the Kentucky Agency for Substance Abuse Policy (KY-ASAP) and the advances of other collaborating partners to help stop the runaway train of addiction. We continue to strengthen our partnerships within our Cabinet, Cabinet for Health and Family Services, Kentucky Public Health, Environmental and Public Protection Cabinet, and across the state with coalitions and local boards, the law enforcement community, substance abuse treatment providers, prevention agencies and other stakeholders.

Addiction is not invincible. We know what needs to be done, and we know we need to do it together. The solution lies in prevention, treatment, and recovery. Although there is much to do in the ever changing substance use and abuse front, we have only just begun to make progress and will continue to do so with your support and that of the General Assembly who have been resolute in our effort to make Kentucky a safer place for the citizens of the Commonwealth.

Sincerely,

A handwritten signature in black ink that reads "Van L. Ingram".

Van Ingram  
Executive Director

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## Executive Summary

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During the 2006 General Assembly, the Office of Drug Control Policy was enabled as the result of the reorganization of the Justice and Public Safety Cabinet. The enabling legislation designates the Office of Drug Control Policy to be responsible for all matters relating to the research, coordination, and execution of drug control policy and for the management of state and federal grants including but not limited to the prevention and treatment related to substance abuse. By December 31 of each year, the Office of Drug Control Policy shall review, approve, and coordinate all current projects of any substance abuse program which is conducted by or receives funding through agencies of the executive branch. This oversight shall extend to all substance abuse programs which are principally related to the prevention or treatment, or otherwise targeted at the reduction of substance abuse in the Commonwealth.

This report is intended to fulfill the statutory obligation listed above.

As this report reflects there are many ongoing projects throughout state government attempting to prevent and diminish substance abuse.

The majority of the prevention, education and treatment programs are administered by the Kentucky Agency of Substance Policy, the Division of Mental Health and Substance Abuse in the Cabinet of Health and Family Services, the Department of Public Health, Kentucky State Police and many more. This report highlights the successful ongoing efforts of the Kentucky Agency for Substance Abuse Policy, law enforcement, and all other state agencies addressing substance abuse crisis.

The Office of Drug Control Policy is tasked to coordinate Kentucky's response to substance abuse. Our goal is to change the way substance abuse is handled in Kentucky, reducing the problem, and making the Commonwealth a model for other states. We have joined prevention/education, treatment, and law enforcement in a united effort to confront this epidemic and have made great strides. As we plan for the future, we know the success of our initiatives depends on the involvement and support of grassroots coalitions, local and state agencies, as well as community and faith-based organizations throughout Kentucky.

**Also important to note, the Kentucky Office of Drug Control Policy and the Kentucky Agency for Substance Abuse Policy oversees and manages a budget of \$25 million with a staff of three.**

### Our History

In August of 2004, a 51-member team of state, federal and local officials in substance abuse prevention-education, treatment and enforcement recommended the creation of the Office of Drug Control Policy.

Prior to making its recommendations, the Statewide Drug Control Assessment Summit conducted a 20-week assessment of substance abuse in Kentucky. The Summit was charged with the responsibility of assessing the effectiveness of existing and new local, state and federal substance abuse programs; soliciting input from citizens about substance abuse issues in their respective communities; and formulating recommendations to improve the balance and effectiveness of statewide drug control efforts.

### KY-ODCP Core Values

- Plan for the development of an effective continuum of prevention and treatment services
- Assure collaboration of prevention, treatment and law enforcement initiatives related to substance abuse
- Provide a repository of information on best practices and standards of practice for prevention, treatment, education and law enforcement (as related to substance abuse)
- Educate communities and families about substance abuse and resources for promoting a healthy lifestyle and assuring safety for Kentucky's children
- Involve citizens at all levels of planning and implementing effective programs
- Develop standards of practice that assure the development, maintenance and improvement of prevention, treatment, education and law enforcement initiatives
- Coordinate overall research and evaluation of effectiveness of programs and services Assist and make recommendations regarding the management of existing resources assuring cost efficiency
- Advocate for the enhancement of resources for substance abuse initiatives
- Assist in developing policy and legislation that supports the mission and goals of the agency

# Overarching Themes

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## Core Principles

- Coordination of federal, state and local government efforts is essential for effectiveness
- Collaboration and communication among key stakeholders and agencies is vital for success
- Mobilizing community initiatives is effective in addressing substance abuse
- Utilizing multiple funding streams yields improved results
- Treatment, when available, works in healing lives, families and communities
- Preventing the onset of alcohol, tobacco and illicit drug use among youth is paramount to the reduction of demand

## Overarching Goals

- Establish multi-jurisdictional enforcement efforts that contain a local, state and coordinate, and when possible, integrate publicly funded prevention, treatment and enforcement efforts
- Reduce the demand for prescription & illicit drugs in Kentucky
- Reduce the supply of prescription & illicit drugs in Kentucky
- Promote the implementation of evidence-based strategies that target youth and adults
- Reduce the stigma associated with alcohol and drug addiction
- Promote safer communities and family stability
- Promote and support legislative efforts to address and fund alcohol, tobacco and other drug use/abuse initiatives
- Increase access to substance abuse treatment

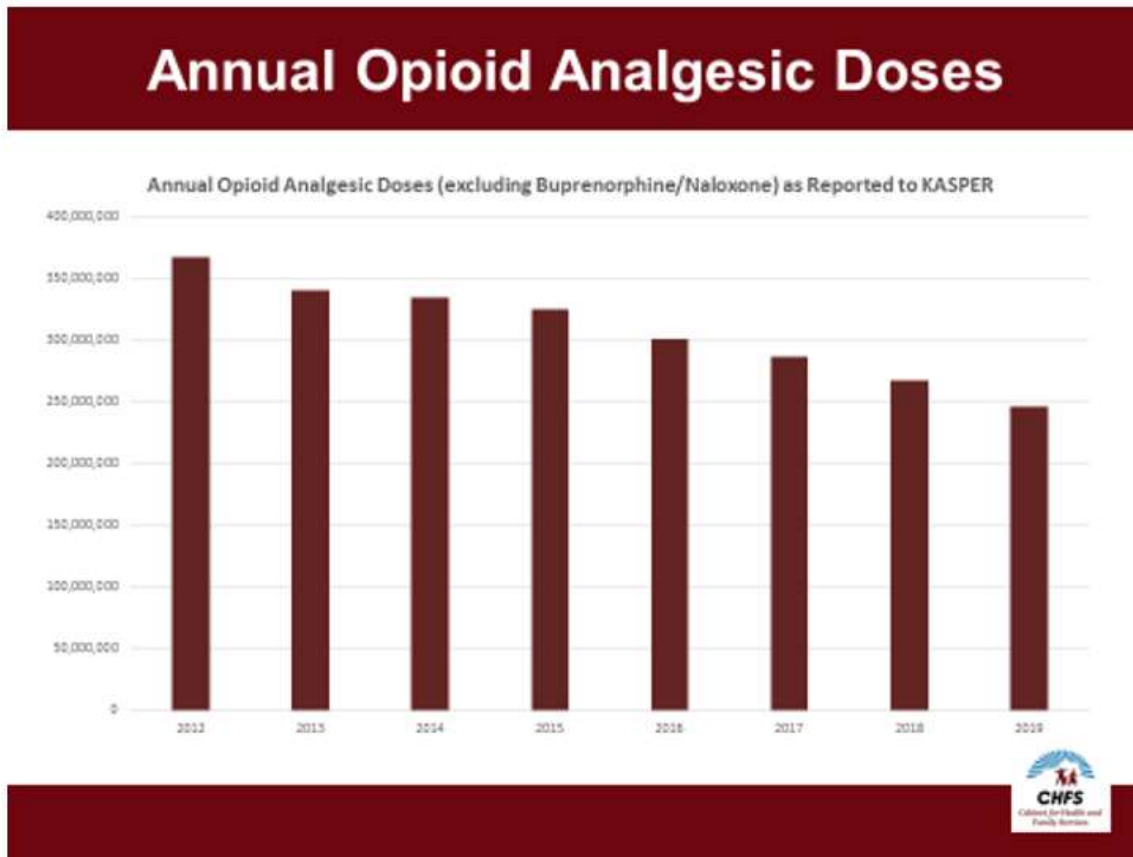


# Trends

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## Prescription Drugs:

The following chart represents a comparison of the number of prescription opioids dispensed from a high in 2012 of 326,098 dosage units to 248,000 in 2019, a 78 million dosage decline. HB1 has had the intended effect of reducing the overprescribing of Rx painkillers.



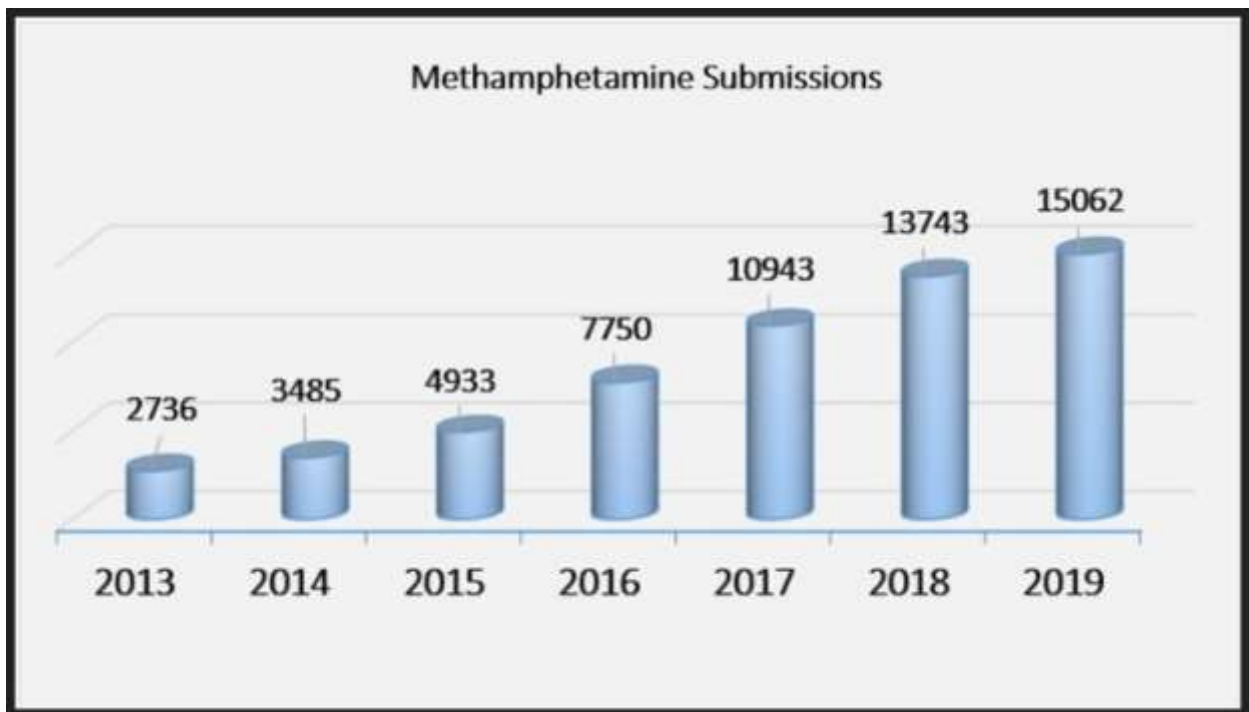
## Methamphetamine:

Domestic production of methamphetamine has continued to decline. Down from an all-time high in 2011 of 1235 labs, there were less than 10 in 2019. Unfortunately, meth produced in Mexico and South America has increased. In 2019, there were several large seizures of foreign produced meth in Kentucky.

Methamphetamine submissions are now making up the majority of the cases sent to the Kentucky State Police for forensic lab tests.

Key finding from the Kentucky Injury Prevention and Research Center [K-SURE report](#):

- Methamphetamine related overdose deaths have increased from 25.0% from 2017 quarter to 2019 quarter 2. All methamphetamine related overdose deaths involved polysubstance use.
- Methamphetamine continues to be the most commonly submitted drug to KSP Laboratories accounting for 43.4% tested lab submissions from the beginning of 2017 through June 2019.
- Methamphetamine use and distribution are a persistent threat to the Commonwealth's safety and health, as methamphetamine-related events increased by an average of 46.7% from January 2017 through June 2019.



### Marijuana:

Cannabis continues to be the most used illicit drug in Kentucky. In 2018, the marijuana eradication team seized over 410,000 plants placing Kentucky in the top 5 states for eradication plants. The good news is that in national surveys, use rates among Kentucky adolescents are some of the lowest in the nation.

These low use rates are threatened by efforts to legalize marijuana use in the Commonwealth.

Outdoor Plants      409,617

Outdoor Total Plots 3,661

Indoor Total Plants 967

Indoor Total Plots 90

Total Plants by Kentucky State Police – 410,584

## 2018 Overdose Fatality Report

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Substance abuse, particularly the diversion and abuse of prescription drugs along with heroin and illicit fentanyl, remains one of the most critical public health and safety issues facing Kentucky. For years, the annual number of Kentuckians who died from drug overdoses steadily climbed to a peak of more than 1,400 in 2017, exacting a disastrous toll on families, communities, social services and economic growth.

In 2018, the toll was likewise devastating. Yet, the Commonwealth also saw signs that the overall trend in overdose deaths may be changing direction. For the first time since 2013, overdose deaths among Kentucky residents declined, falling from 1,477 in 2017 to 1,247 last year – a 15 percent decrease equivalent to 230 lives. When the totals include individuals who died in Kentucky but were not residents, the decrease is similar – 1,566 in 2017 reduced to 1,333 in 2018, a decrease of 233 deaths.

We believe this reversal is due in large part to a number of program and policy initiatives underway in Kentucky, including the statewide use of prescription drug monitoring programs, expanded availability of naloxone and substance abuse treatment, and the enactment of laws specifically addressing the availability of prescription medications. The most recent of these laws, House Bill 333, limited opioid prescriptions for acute pain to a three-day supply with certain exceptions. The law also increased penalties for trafficking in heroin, fentanyl and fentanyl analogues.

In addition, the Kentucky Justice and Public Safety Cabinet and Operation UNITE launched a new substance abuse call center to connect people across the state with drug treatment. The KY HELP Call Center provides referrals to both public and private treatment providers in real-time. Kentuckians struggling with a substance use disorder, either themselves or within their families, can call 1-833-8KY-HELP (1-833-859-4357) toll-free to speak with a live specialist about treatment options and available resources. The specialists conduct a brief screening assessment in order to connect callers with the most relevant treatment services as quickly as possible. Options include everything from medication-assisted treatment to faith-based care, and the specialist helps callers work through all the variables, such as location and cost.

The Kentucky Injury Prevention and Research Center (KIPRC) also partnered with the Office of Drug Control Policy and the Kentucky Cabinets for Health and Family Services and Justice and Public Safety to create [www.findhelpnowky.org](http://www.findhelpnowky.org). The website provides a vital link for Kentucky health care providers, court officials, families and individuals seeking options for substance abuse treatment and recovery. It offers real-time information about available space in treatment programs, and guides users to the right type of treatment for their needs. The site is funded by the Centers for Disease Control and Prevention (CDC).

\* \* \*

House Bill 1 mandates that the Kentucky Office of Drug Control Policy, in cooperation with the Kentucky Medical Examiner's Office, prepare and publish an annual public report to the Secretary of the Justice and Public Safety Cabinet to include:

- (1) The number of drug-related deaths;
- (2) The decedent's age, race, and gender, but not his or her name or address;
- (3) The counties in which those deaths occurred;
- (4) The scientific, trade, or generic names of the drugs involved; and
- (5) The method by which the drugs were obtained, when available.

This report was compiled utilizing data from the Kentucky Medical Examiner's Office, KIPRC, and the Kentucky Office of Vital Statistics (OVS).

KIPRC, with support from the CDC, launched the Drug Overdose Technical Assistance Core (DOTAC) to support local health departments, community coalitions, and state and local agencies in their efforts to address substance misuse, abuse, and overdose. DOTAC's goal is to support and enhance local agencies' and community organizations' access to timely local data and analytical results on controlled substance prescribing, drug related morbidity and mortality trends.

More information on the available data, analytical and community services is available at <http://www.mc.uky.edu/kiprc/dotac/index.html>

Note: The Kentucky Office of Drug Control Policy (ODCP) will change its reporting methodology next year to emphasize Kentucky residents who died from overdoses. This will make comparisons with CDC data more useful. ODCP will still calculate the number of non-residents who died in Kentucky as a result of an overdose; however, the primary data set will focus on Kentucky residents only.

Key findings from 2018 include<sup>1</sup>:

Kentucky overdose fatalities decreased in 2018. Overdose deaths of Kentucky residents, regardless of where the death occurred, and non-residents who died in Kentucky, totaled 1,333 as reported to the Office of Vital Statistics in June 2019. Of those deaths counted 1,247 were Kentucky residents<sup>2</sup>. That is compared to 1,477 residents overdose deaths counted in the 2017 report. A review of the 1,298 resident cases autopsied by the Kentucky Medical Examiner's Office and toxicology reports submitted by coroners indicates that in 2018:

- Residents ages 35 to 44 were the largest demographic in overdose deaths, followed by 25-34.

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<sup>1</sup> This report was compiled by the most current data supplied by kipric and will change as additional toxicology reports are submitted

<sup>2</sup> The stated statistics are present from toxicology of overdose deaths of Kentucky residents

- Autopsies and toxicology reports from coroners show that approximately 188 resident overdose deaths involved the use of heroin in 2018, down from 270 percent from 2017.
- Fentanyl and fentanyl analogues were involved in 786 resident overdose deaths. That accounts for nearly 61 percent of all deaths, up from 52 percent in 2017, when 763 people died with fentanyl or its analogues in their system.
- Jefferson County had the most resident overdose deaths of any county with 337, down from 426 in the 2017 report.
- The largest increase in resident overdose fatalities occurred in Pike County, where deaths increased by five. Other counties with increases include Warren County by four and McCracken by three.
- The largest decrease occurred in Jefferson County, which had 89 fewer Kentucky resident fatalities in 2018 compared to the previous year. Other counties with significant declines include Kenton County, which declined by 24, Campbell County, which declined by 14, Nelson by 13 and Jessamine by 12.
- Morphine was detected in 432 resident cases, and Monoacetylmorphine (heroin) in 211.
- Alprazolam was detected in approximately 214 cases, down from 269 in 2017; gabapentin in 255 cases, down from 363 in 2017; methamphetamine in 428 cases, up from 357 in 2017; oxycodone in 110 cases, down from 157.

**Using data from the Kentucky Office of Vital Statistics the top five counties for resident overdose deaths by county, age adjusted per capita, were:**

|                    |       |
|--------------------|-------|
| 1) Boyd County     | 60.49 |
| 2) Madison County  | 57.62 |
| 3) Kenton County   | 56.43 |
| 4) Clark County    | 51.16 |
| 5) Campbell County | 49.43 |

**The top five counties for resident, heroin-related overdose deaths were:**

|                     |    |
|---------------------|----|
| 1) Jefferson County | 84 |
| 2) Fayette County   | 36 |
| 3) Kenton County    | 14 |

- 4) Boyd County 7
- 5) Campbell County 6

**The top five counties for resident, fentanyl-related deaths were:**

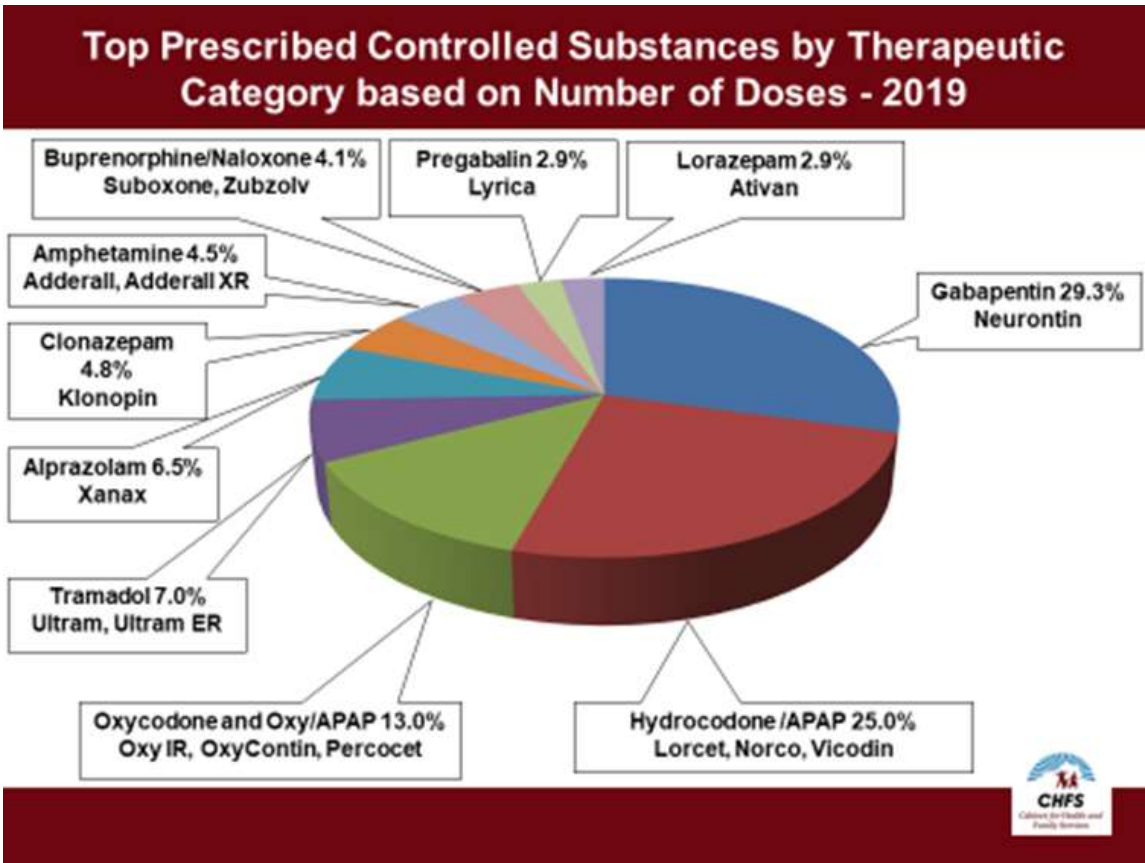
- 1) Jefferson County 229
- 2) Fayette County 117
- 3) Kenton County 71
- 4) Boone County 39
- 5) Campbell County 32

# KASPER SUMMARY

The year 2019 saw two significant enhancements to the Kentucky All Schedule Prescription Electronic Reporting System (KASPER). In April, KASPER implemented the Kentucky Online Gateway (KOG) single sign-on system to access KASPER thus bringing KASPER in-line with other Commonwealth systems. In October, the Non-Fatal Drug Overdose indicator from the Kentucky Health Information Exchange was activated. This feature places a flag on the KASPER patient report showing that KHIE indicates a non-fatal drug overdose. Users of KASPER can then log into KHIE to get details on the non-fatal drug overdose.

## Top 10 Controlled Substances Dispensed in Kentucky as Reported to KASPER:

Gabapentin has now surpassed hydrocodone as the most frequently prescribed controlled substance in Kentucky. The following chart lists the generic name and some brand names for the top 10 controlled substances dispensed in Kentucky.

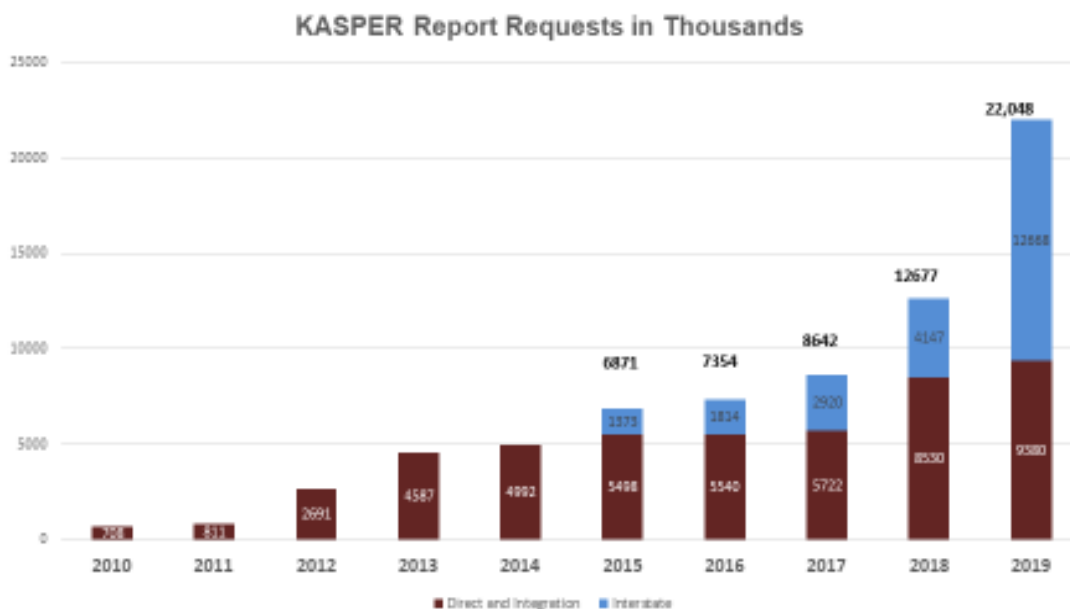




## KASPER Report and Data Requests

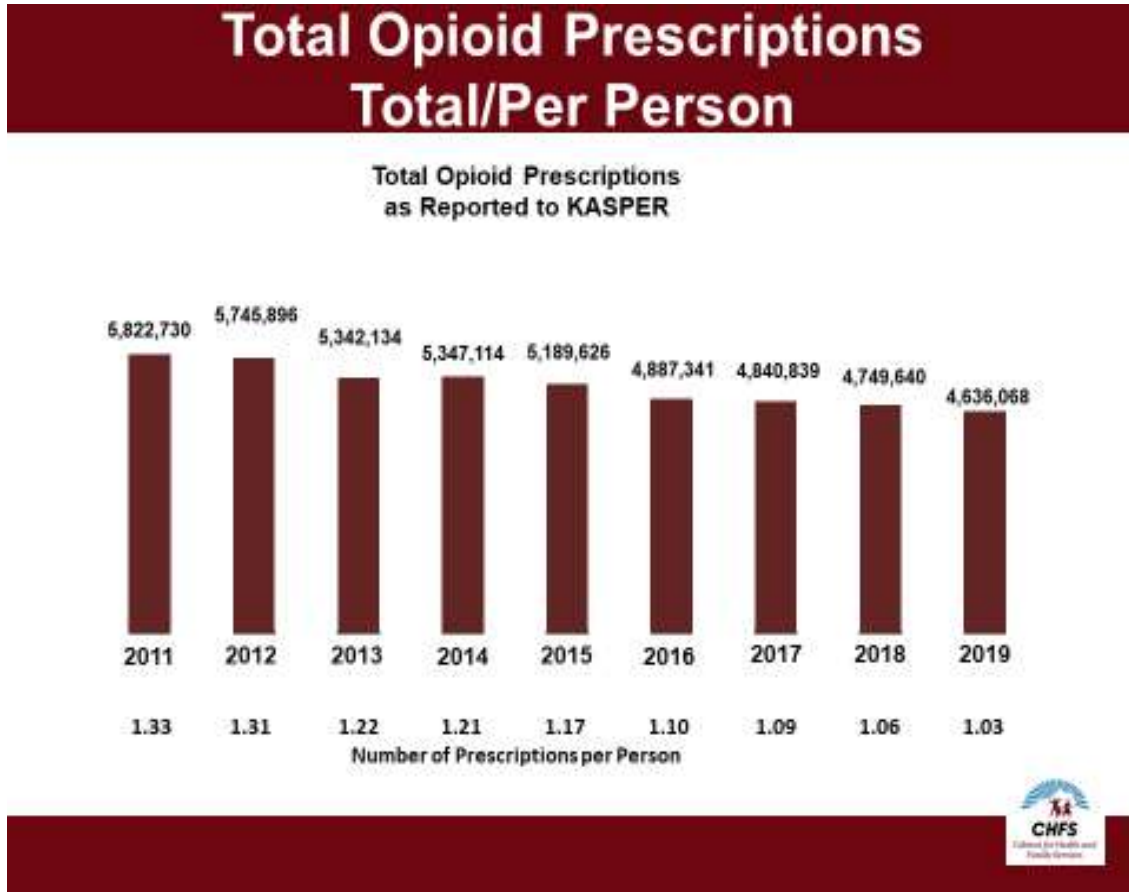
During 2019, there were over 22 million requests for KASPER reports and data, an increase of 55% from 2018. The increase in requests reflects expanded KASPER use by health care facilities and pharmacies that have integrated their electronic health record and pharmacy software systems with KASPER, and increased use of the interstate data sharing capability by authorized users of other state Prescription Drug Monitoring Programs, especially in Kentucky border states.

# KASPER Report Requests in Thousands



## Total Opioid Prescriptions

The total number of opioid prescriptions dispensed in Kentucky as reported to KASPER continues to decline, with a 2019 per capita rate of 1.03 opioid prescriptions per person.

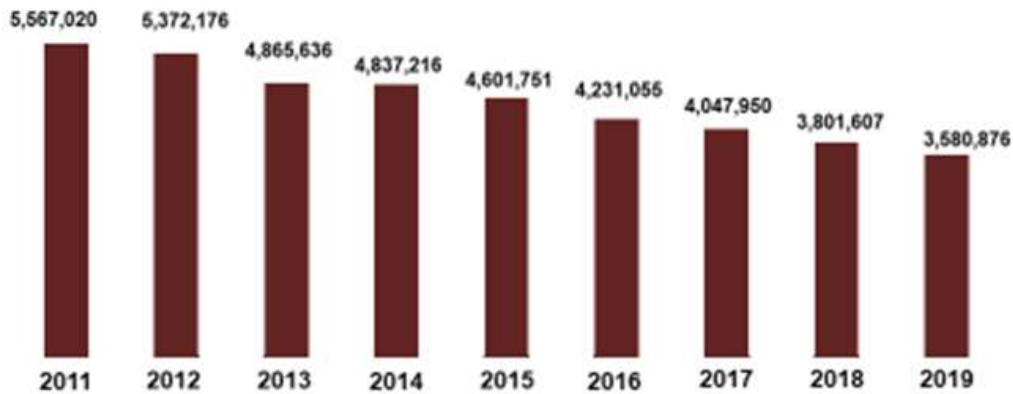


## Total Opioid Prescriptions for Pain

The total number of opioid prescriptions for pain continues to decline as well. The estimated number of opioid prescriptions for pain is determined by excluding the buprenorphine/naloxone opioid data. Buprenorphine/naloxone is used for medication assisted treatment of opioid use disorder and therefore is not considered to be prescribed for pain.

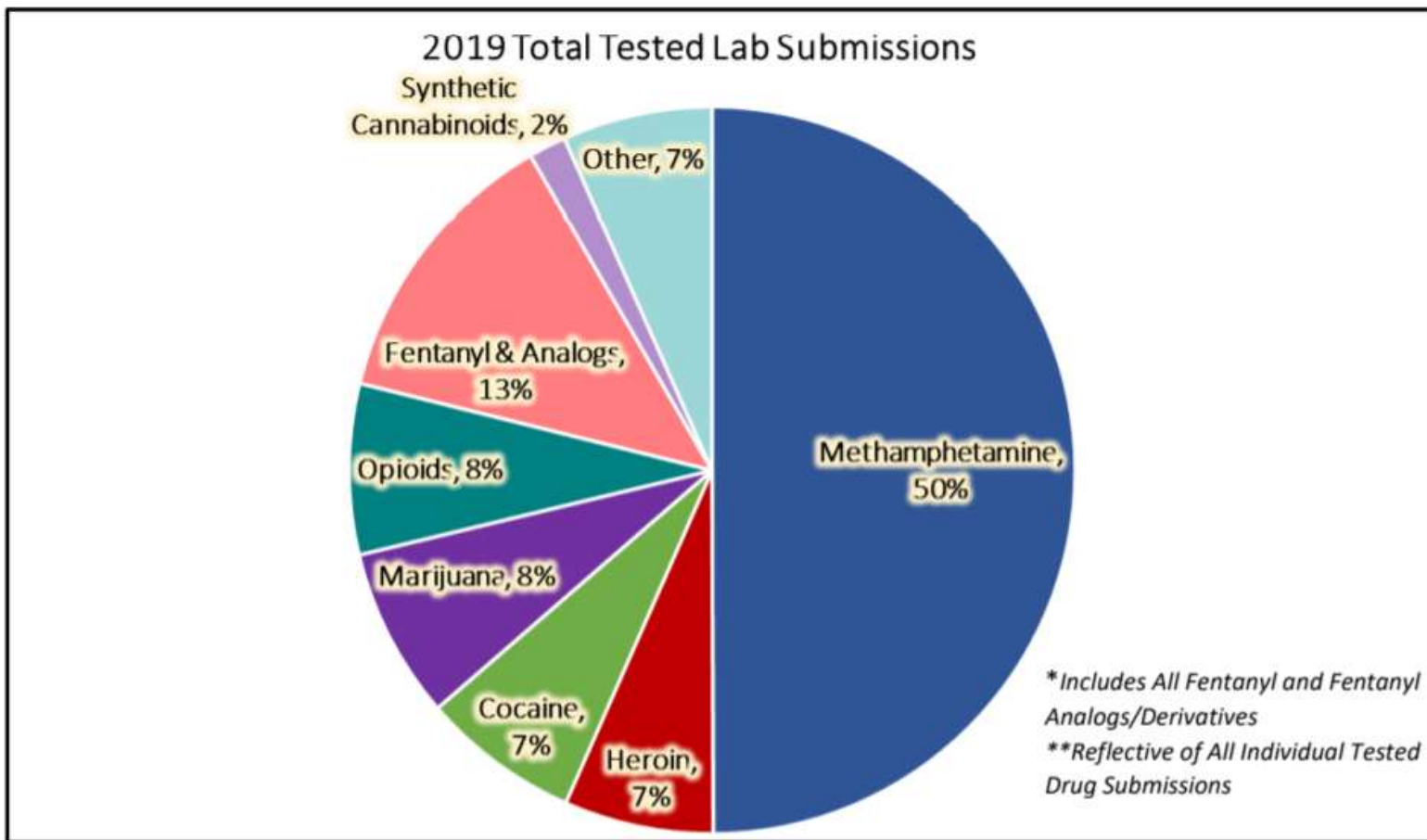
# Annual Opioid Prescriptions for Pain

**Annual Opioid Prescriptions  
Excluding Buprenorphine/Naloxone  
as Reported to KASPER**



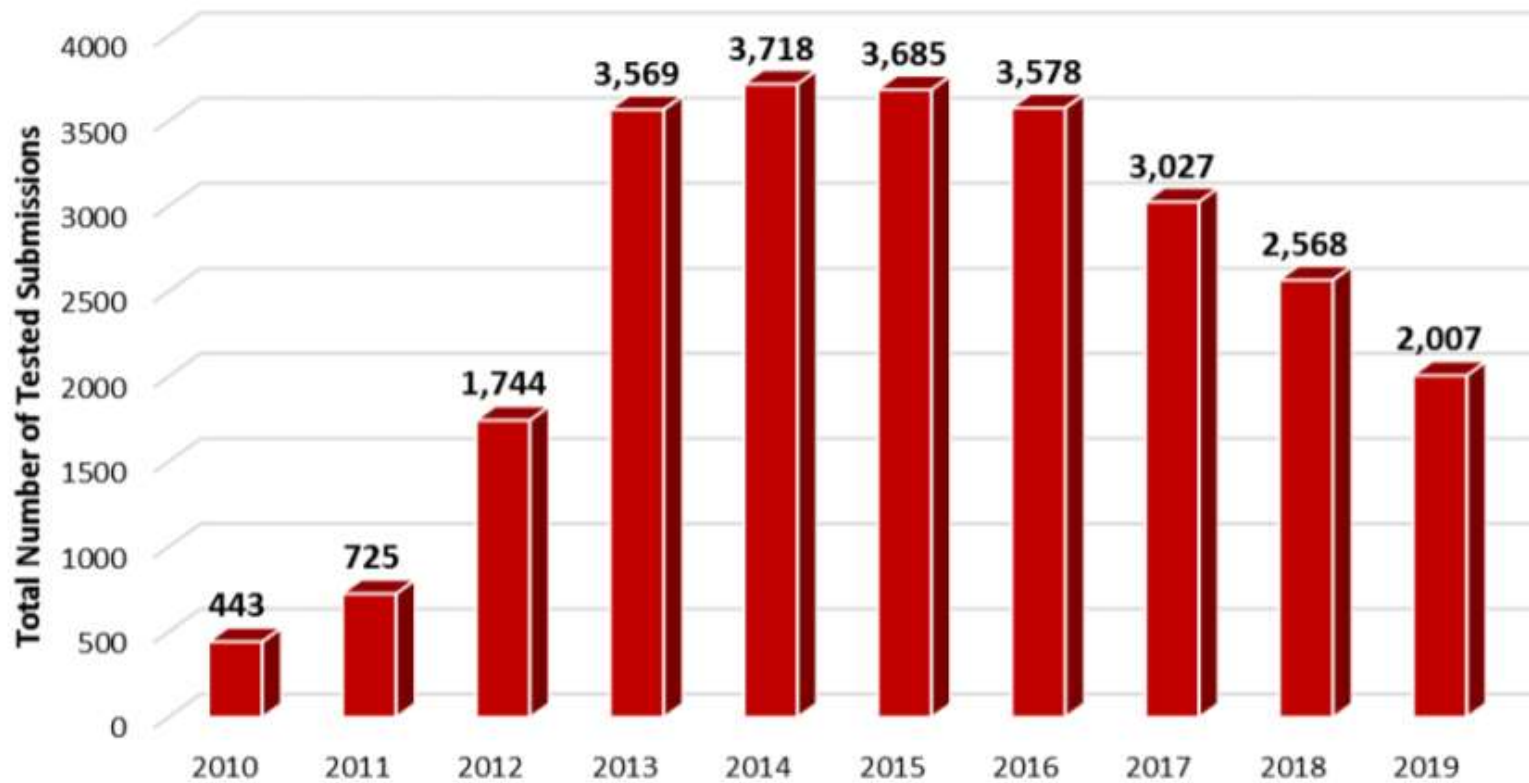
# Kentucky State Police Submissions

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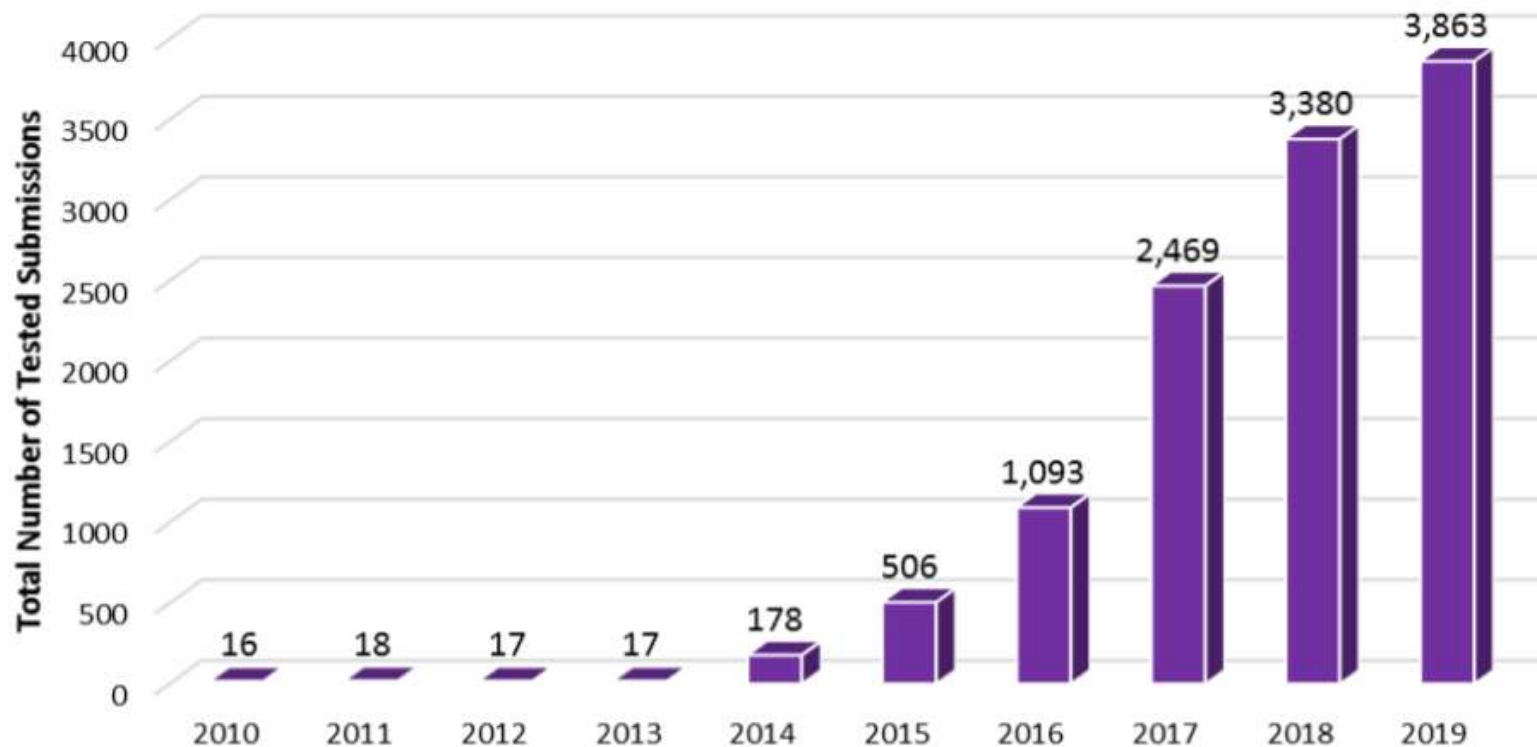
Data are provisional and subject to change. Tested Lab Submission Data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding time frame; submission data is not reflected. FOR OFFICIAL USE ONLY

### Kentucky State Police Laboratories 2010-2019 Total Tested Heroin Submissions



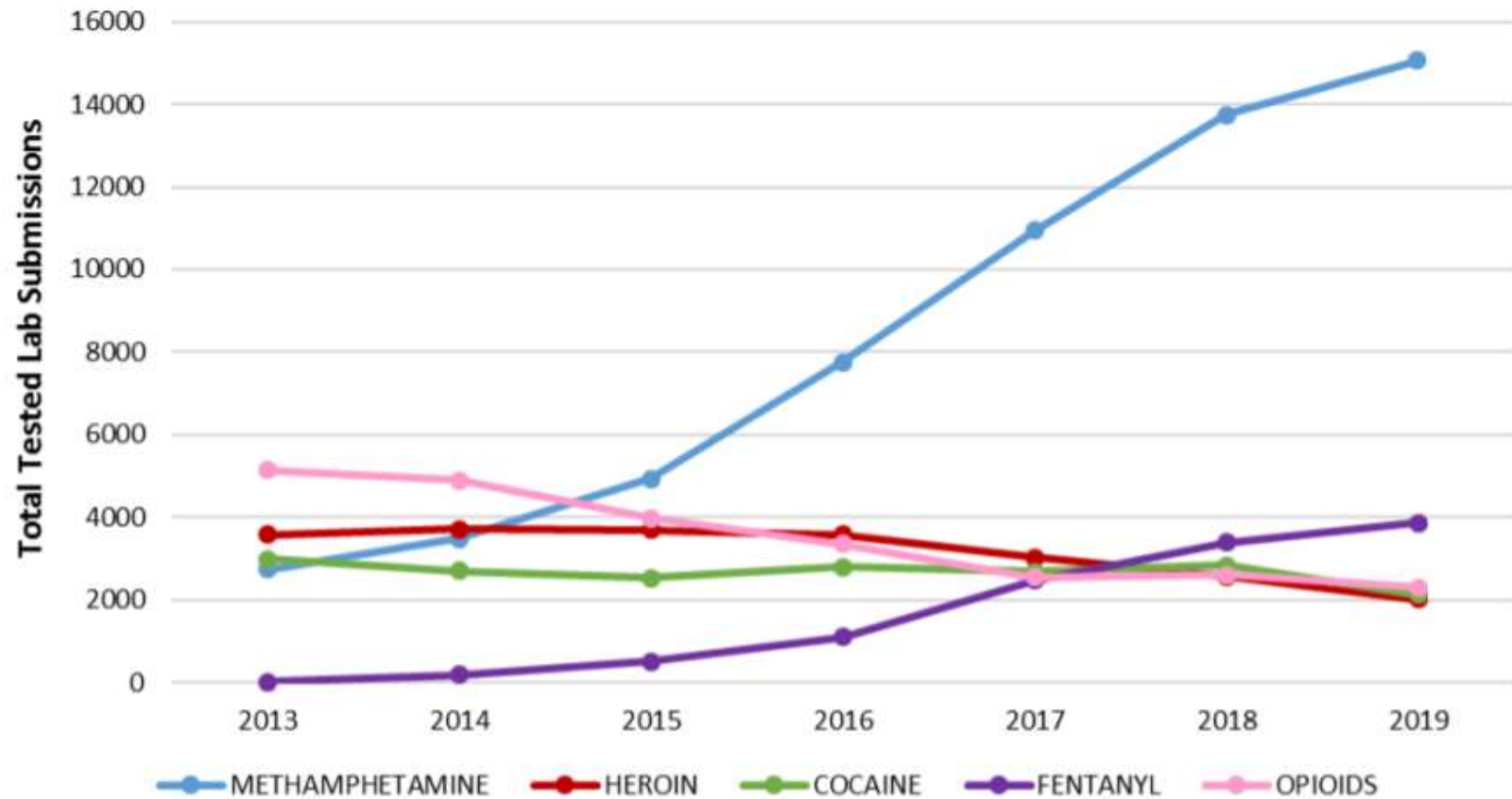
Data are provisional and subject to change. Tested Lab Submission Data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding time frame; submission data is not reflected. FOR OFFICIAL USE ONLY

## Kentucky State Police Laboratories 2010-2019 Total Tested Fentanyl Submissions



Data are provisional and subject to change. Tested Lab Submission Data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding time frame; submission data is not reflected. FOR OFFICIAL USE ONLY

## 2013-2019 Drug Trends: Meth, Heroin, Cocaine, Fentanyl/Fentanyl Analogs & Opioids



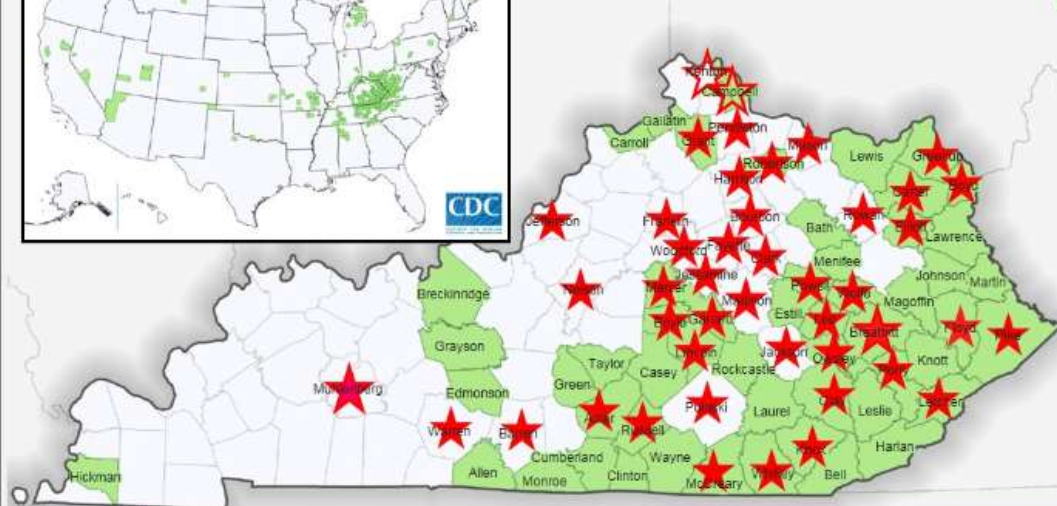
Data are provisional and subject to change. Tested Lab Submission Data represents those substances submitted to the lab for identification purposes; quantity is not reflected. Lab Data represents submissions tested within the corresponding time frame; submission data is not reflected. FOR OFFICIAL USE ONLY

# Counties with Harm Reduction/Syringe Exchange Program Approval



**Kentucky Public Health**  
Prevent. Promote. Protect.

## 54 Kentucky Counties with Increased Vulnerability to Rapid Dissemination of HIV/HCV Infections Among People who Inject Drugs and Preventive Syringe Exchange Programs



### National Ranking by County

|             |                |                  |
|-------------|----------------|------------------|
| 1 Wolfe     | 34 Martin      | 108 Gallatin     |
| 3 Breathitt | 35 Boyle       | 125 Bath         |
| 4 Perry     | 39 Lawrence    | 126 Grayson      |
| 5 Clay      | 40 Rockcastle  | 129 Greenup      |
| 6 Bell      | 45 Harlan      | 132 Green        |
| 8 Leslie    | 48 McCreary    | 153 Casey        |
| 9 Knox      | 50 Letcher     | 154 Carter       |
| 10 Floyd    | 53 Johnson     | 163 Monroe       |
| 11 Clinton  | 54 Russell     | 167 Garrard      |
| 12 Owsley   | 56 Elliott     | 175 Robertson    |
| 14 Whitley  | 65 Laurel      | 178 Lewis        |
| 15 Powell   | 67 Carroll     | 179 Edmonson     |
| 17 Knott    | 75 Taylor      | 180 Allen        |
| 21 Pike     | 77 Grant       | 187 Boyd         |
| 23 Magoffin | 93 Adair       | 191 Hickman      |
| 25 Estill   | 97 Lincoln     | 202 Breckinridge |
| 30 Lee      | 99 Wayne       | 212 Campbell     |
| 31 Menifee  | 101 Cumberland | 214 Mercer       |

Specific concerns regarding Kentucky Counties:

1. Dense drug user networks similar to Scott County Indiana
2. Lack of syringe exchange programs

- Vulnerable Counties
- ★ Operating Syringe Exchanges as of 07/06/2018
- ☆ Approved but not Operational yet

**NOTE: CDC stresses that this is a REGION-WIDE problem, not just a county-specific problem.**



## Heroin - Fentanyl

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Fentanyl and fentanyl analogues were the most lethal drug in 2019, contributing to more than half of all overdose deaths. There was also an increase in deaths attributed to methamphetamine.

Fentanyl and fentanyl analogs are increasingly pervasive in Kentucky communities – increasing the risks of overdose, and exposure to individuals, families, and law enforcement.

- Syringe exchange participants are 5X more likely to seek addiction treatment.
- Needle exchange helps prevent the spread of hepatitis and HIV.
- There are fewer dangerous dirty needles littering the Commonwealth because of the syringe exchange programs.

It's easy to understand why that's the case, considering a dose as small as two milligrams — the size of Abraham Lincoln's cheek on a penny — can be lethal.

Adding to the risks, Mexican cartels and other suppliers are hiding fentanyl in other drugs — even using a pill press to mimic prescription drugs.

"We know it's being disguised as legitimate pharmaceuticals as well as mixed with cocaine, heroin and methamphetamine

As authorities cracked down on prescription opioids and then on heroin, the black market offered up fentanyl as a substitute. Fentanyl — a synthetic opioid up to 50 times as strong as heroin and 100 times as strong as morphine — was developed for use as an anesthetic in the sixties. It is currently classified as a Schedule II narcotic, and it is used medicinally in end-of-life care.

Fentanyl, although similar to heroin, is far deadlier. As little as six grains of salt worth of fentanyl can be lethal if ingested. Fentanyl is often mixed with heroin and other narcotics sold on the street because it is cheap yet potent — leading many unsuspecting users to overdose.

US officials believe most of the illicit fentanyl in the US is produced in illegal labs in [China](#). Customs and Border Patrol experts believe fentanyl from these labs flows into the US through three major pipelines — from China to Canada to the US, from China to Mexico to the US, and from China directly to the US. Fentanyl is primarily transported through the mail after being bought and sold over the dark web, but shipments are sometimes routed through less-suspicious countries like Canada.

Fentanyl is highly concentrated, so even small shipments are highly profitable and deadly. A lethal dose of fentanyl is about three milligrams — so one smuggled kilogram contains over 333,000 lethal doses. Because fentanyl can be produced in large quantities at a high potency, it is among the cheapest and most prevalent illicit opioids in the US — and in Kentucky.

## Opioid-Heroin Funding Update

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In 2019 the Kentucky Justice and Public Safety Cabinet announced that eight programs in Kentucky will receive a total of \$16 million from the state budget this year to combat heroin and substance abuse in the Commonwealth.

Among other efforts, the expanded funds will help support treatment in communities and jails, alternative sentencing programs and care for expectant mothers who are struggling with drug dependency.

Funding for Fiscal Year 2019 includes:

- Community Mental Health Centers will receive more than \$2.6 million to provide substance abuse treatment in local communities throughout the state.
- The Kentucky Agency for Substance Abuse Policy will receive \$1.3 million to support substance abuse programs across the state.
- The Kentucky Agency for Substance Abuse Policy Traditional Programs \$306,000.
- The Department of Public Advocacy will receive \$2 million to fund its social worker program, which helps develop alternative sentencing plans.
- The Prosecutors Advisory Council will receive \$2.2 million to support “rocket docket” prosecutions in cases that involve controlled substances.
- Established programs that provide services related to Neonatal Abstinence Syndrome and help pregnant women will receive for \$3.2 million.
- Kentucky State Police \$500,000.
- UNITE Screening and Referral Service \$500,000.
- Kentucky Broadcasters Association \$150,000.
- Gang & Illicit Opioid Distribution Assessment \$25,000
- Kentucky Pharmacy Education & Research Foundation to distribute Naloxone to Law Enforcement Agencies \$400,000

The Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (BHDID) will collaborate with KY-ASAP for the distribution and monitoring of funds for the grant program.

The Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (BHDID) will collaborate with KY-ASAP for the distribution and monitoring of funds for the grant program.

The goal of the program is to serve adults diagnosed with a substance abuse disorder or a co-occurring mental illness with a substance abuse diagnosis. A total of nine (9) CMHCs were selected to receive funding of \$2,674,000 include:

- Pennyroyal, Hopkinsville \$300,000
- Lifeskills, Bowling Green \$300,000
- Kentucky River, Hazard \$300,000
- Centerstone, Louisville \$300,000
- Bluegrass, Lexington area \$285,000
- North Key, Northern KY \$300,000
- Mt. Comp Care, Prestonsburg \$300,000
- Communicare, Elizabethtown \$300,000
- Comprehend, Maysville \$289,000

Eleven additional awards totaling \$3,246,000 were granted to providers to address Neonatal Abstinence Syndrome include:

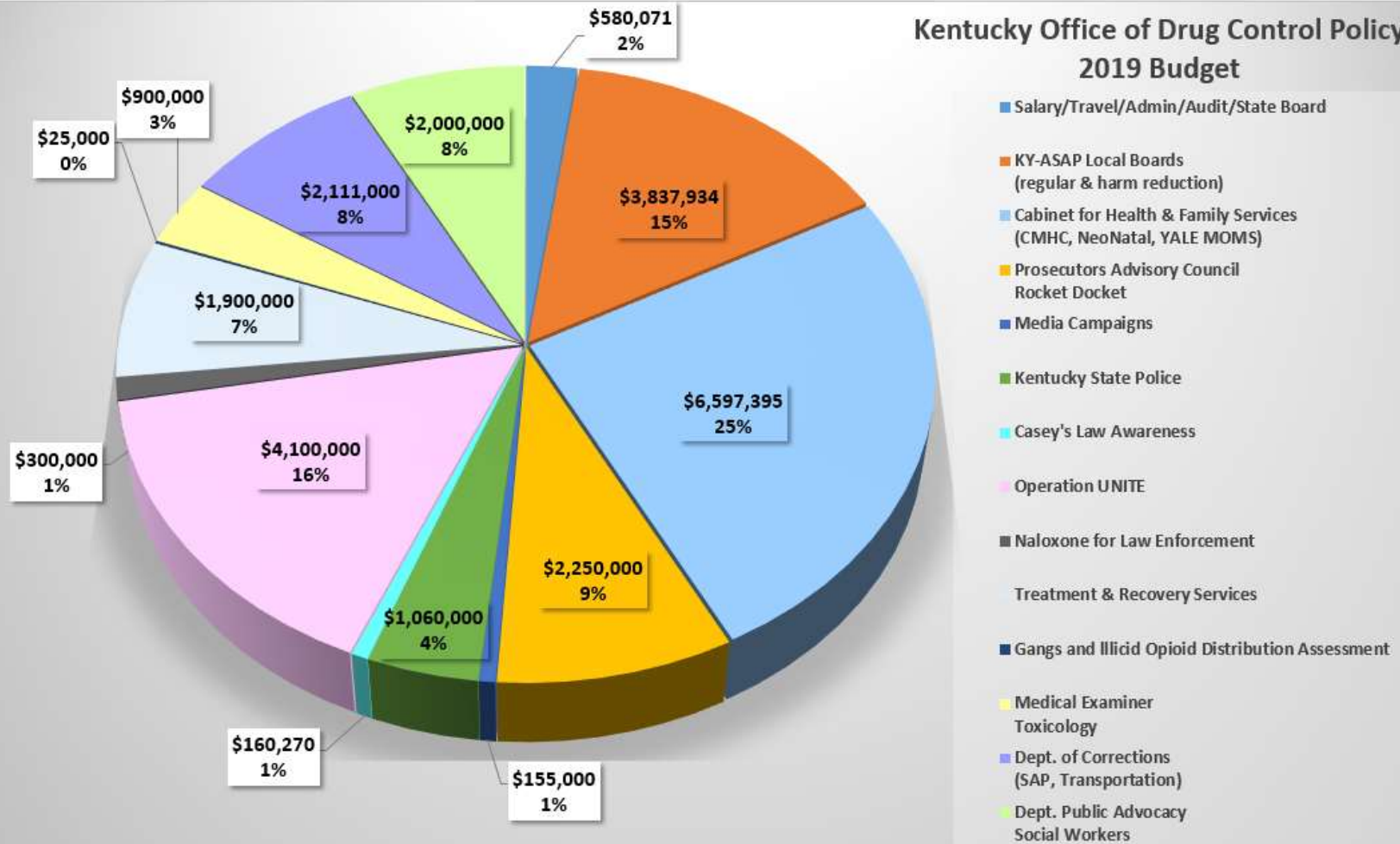
- Adanta, Somerset \$50,000
- Chrysalis House, Lexington \$325,000
- Communicare, Elizabethtown \$325,000
- Cumberland River, Corbin \$325,000
- Lifeskills, Bowling Green \$300,000
- Bluegrass, Lexington \$325,000
- Centerstone, Louisville \$300,000
- Mt. Comp Care, Prestonsburg \$325,000
- Transitions, Covington \$321,000
- Volunteers of America, Louisville \$325,000
- Kentucky River, Hazard, \$325,000

The Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (BHDID) will collaborate with KY-ASAP for the distribution and monitoring of funds for the grant program.

The goal of the program is to serve adults diagnosed with a substance abuse disorder or a co-occurring mental illness with a substance abuse diagnosis.

Awardees must demonstrate a commitment to ensuring individuals have access to evidence-based services and supports that include outpatient, medication-assisted, individuals, group, family, intensive outpatient, crisis, case management, residential treatment and recovery support services.

## Kentucky Office of Drug Control Policy 2019 Budget



## Law Enforcement – Drug Task Forces

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Kentucky's law enforcement community continued to perform at a high level during 2019. The Office of Drug Control Policy was instrumental in bringing law enforcement agencies together to share intelligence, resources and collaborate on significant drug investigations.

The Kentucky Justice and Public Safety Cabinet also provides grant funding for 12 multi-jurisdictional drug task forces. During 2019, standards, model policies and best practices for Drug Task Force operations continued to be evaluated and reviewed and ensure program compliance. The Office of Drug Control Policy in conjunction with the Grant's Management Branch, conducted annual audits and on-site inspections with all grant recipients and ensure program compliance.

Many of Kentucky's Police Departments and Sheriff's Offices conduct drug investigations on a daily basis. Although they may not be part of a formalized drug task force, there is still a great deal of collaboration and cooperation that occurs between federal, state and local agencies. Many local law enforcement agencies have detectives assigned exclusively to formalized drug task forces. This section highlights the agencies and their contributions to drug enforcement.

Kentucky's Drug Task Forces have been instrumental in reducing the manufacturing of methamphetamine in rural and urban areas, reducing the illegal distribution of prescription drugs and the growth and distribution of marijuana.

## Law Enforcement – MethCheck

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In 2005 Kentucky and dozens of other states passed laws restricting the sale of products containing pseudoephedrine (PSE), the key ingredient for meth production. These laws closely followed similar legislation enacted in Oklahoma in 2004. States that restricted PSE began seeing immediate declines in meth-lab responses. Those declines, however, were short lived, as meth users and cooks began an activity known as ‘smurfing,’ a process of purchasing small amounts of PSE at multiple locations.

The National Precursor Log Exchange (NPLEx) is a real-time electronic logging system used by pharmacies and law enforcement to track sales of over-the-counter (OTC) cold and allergy medications containing precursors to the illegal drug, methamphetamine. This system has the ability to alert the pharmacist at the point of sale when an individual is attempting to exceed legal product limits.

In 2012, Senate Bill 3 was passed that further limits the amount of over-the-counter allergy and cold medication that may be purchased without a prescription.

### How MethCheck / NPLEx helps Kentucky

- Reduces the quantities of allergy or cold medicines containing ephedrine, pseudoephedrine, or phenylpropanolamine that may be purchased without a prescription from 9 grams to 7.2 grams per month.
- Establishes an annual limit of 24 grams of allergy or cold medicine containing ephedrine, pseudoephedrine, or phenylpropanolamine that may be purchased without a prescription, whereas existing law did not specify an annual limit.
- Prohibits individuals under the age of 18 from purchasing any quantity of allergy or cold medicines containing ephedrine, pseudoephedrine, or phenylpropanolamine without a prescription.
- Requires pharmacies to maintain an electronic record-keeping system that will allow the pharmacy to prohibit transactions in excess of the limits established by this bill, and provide the Office of Drug Control with unimpeded access to records for statistical analysis purposes.
- Requires the Office of Drug Control to submit annual statistical reports on the sale of compounds, mixtures, or preparations containing ephedrine, pseudoephedrine, or phenylpropanolamine to the Legislative Research Commission.
- Prohibits individuals convicted of any offense relating to methamphetamine from possessing or attempting to possess medication containing ephedrine, pseudoephedrine, or phenylpropanolamine until 5 years after the following dates:
  - The date the individual was convicted;
  - The date the individual was discharged from incarceration; or
  - The date the individual was released from probation or parole.

In 2019, The Office of Drug Control Policy assisted countless pharmacies and numerous customers.

# KENTUCKY METHAMPHETAMINE LAB RESPONSE

## Numbers Provided by EPIC & ACS Container Program

| Post Area      | January | February | March | April | May | June | July | August | September | October | November | December | Total |
|----------------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|-------|
| 15 ADAIR       |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 3 ALLEN        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 12 ANDERSON    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 BALLARD      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 3 BARREN       | 2       |          |       |       |     |      | 1    |        |           |         |          |          | 3     |
| 8 BATH         |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 10 BELL        |         |          |       |       |     |      | 1    |        |           |         |          |          | 1     |
| 6 BOONE        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 6 BOURBON      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 14 BOYD        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7 BOYLE        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 6 BRACKEN      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 13 BREATHITT   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4 BRECKINRIDGE |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4 BULLITT      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 3 BUTLER       |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 2 CALDWELL     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 CALLOWAY     |         |          |       |       |     |      |      | 1      |           |         |          |          | 1     |
| 6 CAMPBELL     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 CARLISLE     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 5 CARROLL      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 14 CARTER      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 15 CASEY       |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 2 CHRISTIAN    |         | 1        |       |       |     |      |      |        |           |         |          |          | 1     |
| 7 CLARK        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 11 CLAY        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 15 CLINTON     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 2 CRITTENDEN   |         | 1        |       |       |     |      |      |        |           |         |          |          | 1     |
| 15 CUMBERLAND  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 16 DAVIESS     |         | 2        |       | 2     |     |      |      |        |           |         |          |          | 4     |



| Post Area |           | January | February | March | April | May | June | July | August | September | October | November | December | Total |
|-----------|-----------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|-------|
| 3         | EDMONSON  |         |          |       |       |     |      |      |        |           |         | 1        | 1        | 2     |
| 14        | ELLIOTT   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7         | ESTILL    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 12        | FAYETTE   |         |          |       |       |     |      |      | 1      |           |         |          |          | 1     |
| 8         | FLEMING   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 9         | FLOYD     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 12        | FRANKLIN  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1         | FULTON    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 5         | GALLATIN  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7         | GARRARD   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 6         | GRANT     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1         | GRAVES    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4         | GRAYSON   | 1       | 1        | 2     |       |     |      | 1    |        | 1         |         |          | 1        | 7     |
| 15        | GREEN     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 14        | GREENUP   |         |          |       |       |     |      |      | 1      |           |         |          |          | 1     |
| 16        | HANCOCK   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4         | HARDIN    |         |          |       |       |     | 1    |      |        |           |         |          |          | 1     |
| 10        | HARLAN    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 6         | HARRISON  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 3         | HART      |         |          | 1     |       |     |      |      |        |           |         |          |          | 1     |
| 16        | HENDERSON |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 5         | HENRY     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1         | HICKMAN   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 2         | HOPKINS   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7         | JACKSON   |         |          |       |       |     |      | 1    |        |           |         |          |          | 1     |
| 4         | JEFFERSON |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7         | JESSAMINE |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 9         | JOHNSON   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 6         | KENTON    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 13        | KNOTT     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |

| Post Area    | January | February | March | April | May | June | July | August | September | October | November | December | Total |
|--------------|---------|----------|-------|-------|-----|------|------|--------|-----------|---------|----------|----------|-------|
| 10 KNOX      |         |          | 1     |       |     |      |      |        |           |         |          |          | 1     |
| 4 LARUE      |         |          |       |       |     |      |      |        | 1         |         |          |          | 1     |
| 11 LAUREL    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 14 LAWRENCE  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7 LEE        |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 13 LESLIE    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 13 LETCHER   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 8 LEWIS      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7 LINCOLN    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 LIVINGSTON |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 3 LOGAN      |         |          | 1     |       |     |      |      |        |           |         |          |          | 1     |
| 1 LYON       |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7 MADISON    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 9 MAGOFFIN   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 15 MARION    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 MARSHALL   |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 9 MARTIN     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 8 MASON      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 1 MCCracken  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 11 MCCREARY  |         |          |       |       |     |      |      | 1      |           |         |          |          | 1     |
| 16 MCLEAN    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4 MEADE      |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 8 MENIFEE    |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 7 MERCER     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 15 METCALFE  |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 15 MONROE    | 2       |          |       |       |     |      |      |        |           |         |          |          | 2     |
| 8 MONTGOMERY |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 8 MORGAN     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 2 MUHLENBERG |         |          |       |       |     |      |      |        |           |         |          |          | 0     |
| 4 NELSON     |         |          |       |       |     |      |      |        |           |         |          |          | 0     |

| Post Area | ↓↑         | January | Februa | March | April | May | June | July | August | Septemb | Octobe | Novemb | Decemb | Total |
|-----------|------------|---------|--------|-------|-------|-----|------|------|--------|---------|--------|--------|--------|-------|
| 6         | NICHOLAS   |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 16        | OHIO       |         | 1      |       |       |     |      |      |        |         |        |        |        | 1     |
| 5         | OLDHAM     |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 5         | OWEN       |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 7         | OWSLEY     |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 6         | PENDLETON  |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 13        | PERRY      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 9         | PIKE       |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 8         | POWELL     |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 11        | PULASKI    |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 6         | ROBERTSON  |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 11        | ROCKCASTLE |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 8         | ROWAN      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 15        | RUSSELL    |         | 2      |       |       |     |      | 1    |        |         |        |        |        | 3     |
| 12        | SCOTT      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 12        | SHELBY     |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 3         | SIMPSON    |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 12        | SPENCER    |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 15        | TAYLOR     |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 2         | TODD       |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 1         | TRIGG      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 5         | TRIMBLE    |         |        | 1     |       |     |      |      |        |         |        |        |        | 1     |
| 16        | UNION      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 3         | WARREN     |         | 1      |       |       |     |      |      |        |         | 1      |        |        | 2     |
| 15        | WASHINGTON |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 11        | WAYNE      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 2         | WEBSTER    |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 11        | WHITLEY    |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 8         | WOLFE      |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
| 12        | WOODFORD   |         |        |       |       |     |      |      |        |         |        |        |        | 0     |
|           |            |         |        |       |       |     |      |      |        |         |        |        |        |       |
|           | Incidents  | 5       | 9      | 6     | 2     | 0   | 1    | 5    | 4      | 2       | 1      | 1      | 2      | 38    |

## Collaborative Partnerships

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The Office of Drug Control Policy has established significant working relationships with many governmental and private agencies across the Commonwealth and nationally. The strength of success is found in the quality of the working relationships. Listed below is a sampling of some of the agencies that have partnered with the ODCP on initiatives:

- The Commonwealth Alliance for Substance Abuse Prevention
- The Advancing Pharmacy Practice Coalition
- Kentucky Harm Reduction Coalition
- UNITE
- Kentucky Pharmacy Educational Research Foundation
- Appalachian Regional Commission
- Kentucky Chamber of Commerce Foundation
- Eastern Kentucky Concentrated Employment Program
- Community Foundations of Louisville
- Kentucky Coalition of Nurse Practitioners & Nurse Midwives
- University of Kentucky
- Community Anti-Drug Coalitions of America (CADCA)
- Department of Corrections
- Department of Education
- Department for Medicaid Services
- Department for Public Health
- Department for Behavioral Health, Development and Intellectual Disabilities
- Department of Public Advocacy
- Prosecutors Advisory Council
- Eastern Kentucky University
- Environmental and Public Protection Cabinet
- Governor’s Task Force on Campus Safety
- Kentucky All Scheduled Prescription Electronic Reporting (KASPER)
- Kentucky Administrative Office of the Courts – Drug Courts
- Kentucky Alcoholic Beverage Control
- Kentucky Attorney General’s Office
- Kentucky Board of Pharmacy
- Kentucky Broadcasters Association
- Kentucky Department for Public Health
- Kentucky Center for School Safety
- Kentucky County Attorneys Association
- Kentucky Crime Prevention Coalition
- Kentucky Injury Prevention Group
- SPARK Ministries – Casey’s Law
- Northern KY Hates Heroin- Casey’s Law
- Pfizer Foundation

- Kentucky Narcotic Officer's Association
- Kentucky Office of Homeland Security
- Kentucky Pharmacists Association
- Kentucky Prevention Network
- Kentucky Retail Federation
- Kentucky School Boards Association
- Kentucky State Police
- Office of Inspector General in the Cabinet for Health & Family Services
- Office of National Drug Control Policy
- Operation Unlawful Narcotics Investigation, Treatment & Education
- The Partnership for Drug-Free Kids
- People Advocating Recovery
- Regional Organized Crime Information Center (ROCIC)
- Reach of Louisville
- Regional Prevention Centers
- Substance Abuse and Mental Health Services Administration
- SYNAR Inter-Agency Workgroup
- Tobacco Prevention and Cessation Program Strategic Planning Group
- University of Kentucky Center on Drug and Alcohol Research
- University of Kentucky Community Coalition on Underage Drinking
- UNITE Medical Advisory Board
- NADDI (National Association of Drug Diversion Investigators)
- SEOW (State Epidemiology Outcomes Workgroup)
- MHDDAS (Mental Health Developmental Disabilities Addiction Services)
- Kentucky Pharmacy Board - PSE Sales
- PIRE (Pacific Institute for Research & Evaluation)
- Kentucky Medical Examiners Officer-Dr. Corey
- Governors Re-entry Task Force committee
- Physician Training sessions - Buprenorphine in the office setting
- Penal Code Task Force
- UK Real Time Data Collection Study
- Interstate Prescription Drug Abuse Task Force-KY, OH, WV and TN
- Recovery Kentucky
- Red7e
- HIDTA (High Intensity Drug Trafficking Areas)
- KSPAN (Kentucky Safety & Prevention Alignment Network)
- KY Domestic Violence Committee with RX training
- KY League of Cities
- Kentucky Medical Association
- Kentucky Board Nursing Licensure
- American Institute Technology Labs
- Kentucky Workers Compensation
- Drug Enforcement Agency
- Kentucky Board of Medical Licensure

# The Kentucky Injury Prevention and Research Center (KIPRIC)

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The Kentucky Injury Prevention and Research Center (KIPRC) is a partnership between the Kentucky Department for Public Health and the University of Kentucky's College of Public Health that combines academic investigation with practical public health initiatives.

Their purpose is to decrease the burden of injury in the Commonwealth. Our partnership, grounded in a belief that most injuries are preventable, cultivates a collaborative approach to problem solving. KIPRC works to reduce injury through education, policy initiatives, public health programming, surveillance, risk factor analysis, direct interventions, and evaluation.

KIPRC's mission is to increase knowledge and awareness of the injury prevalence in Kentucky, and to impart skills and strategies to reduce this problem and make Kentucky a safer place to call home.

The Kentucky Injury Prevention and Research Center (KIPRC) has been awarded a \$400,000 grant from the Bureau of Justice Assistance to develop data-driven, multidisciplinary approaches to reduce prescription drug abuse and overdoses in Kentucky. KIPRC is a bona fide agent for the Kentucky Department for Public Health and is housed within the University of Kentucky College of Public Health.

According to Svetla Slavova, the project's principal investigator and an assistant professor of biostatistics, the award is a collaborative effort between criminal justice and public health agencies to enhance the state's analytical capacity to identify existing and emerging prescription drug abuse trends and individuals and communities at risk of prescription drug overdose. The project will also address sources of diversion and determine best practices for sharing prescription drug overdose-related data.

This grant will give us an opportunity for the first time to review multiple data sources related to overdose deaths. We believe the information we will have as a result of this grant will help shape policy and ultimately assist in reducing accidental overdose deaths.

The program will have far-reaching effects in agencies across the state.

The Office of Inspector General in the Cabinet for Health and Family Services is a primary partner on the project. The grant award involves development of targeted search algorithms and analytical capabilities to enhance proactive use of Kentucky All Scheduled Prescription Electronic Reporting System (KASPER) data to identify possibly harmful prescribing practices and to inform prescribers' continuing education and policy development.

With support from this grant, Kentucky will establish an Action Team to examine data and analytic reports from various sources (including KASPER, medical examiners, coroners, hospitals, and emergency departments) to identify areas at greatest risk for prescription drug abuse.

The Action Team will also propose risk mitigation activities including education, outreach, treatment and enforcement. Action Team representation will include the Kentucky Board of Medical Licensure, Kentucky Board of Pharmacy, Kentucky Board of Nursing, Kentucky Pharmacists Association, Kentucky Department for Public Health, Office of Inspector General, Kentucky Agency for Substance Abuse Policy (KY-ASAP), Office of Drug Control Policy, Office of the Chief Medical Examiner, Operation UNITE, the Institute for Pharmaceutical Outcomes and Policy, and the Kentucky Injury Prevention and Research Center. An invitation for participation in the Action Team is also extended to other agencies and organizations committed to the mission to reduce drug abuse and misuse in the Commonwealth.

# Kentucky Agency for Substance Abuse Policy

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KY-ASAP has continued to evolve since its placement into the Office of Drug Control Policy in 2004. KY-ASAP continues to embrace and incorporate the philosophy of KY-ODCP to involve the three-pronged approach of prevention, treatment and law enforcement. The Kentucky Agency for Substance Abuse Policy is unique in that local boards determine their own needs for their service area. Through a strategic plan and needs assessment, the local boards identify the issues they need to direct their dollars toward concerning tobacco, alcohol, and other drugs as related to abuse.

Local communities continue to be required to complete a community needs and resource assessment as well as develop a strategic plan and assist in coordinating the local response to alcohol, tobacco, and other drugs before they receive KY-ASAP local board designation. Although, KY-ODCP has limited resources to support our local boards, with currently has less than two full-time positions<sup>3</sup>, our strong collaboration with Regional Prevention Centers provide technical assistance to both newly forming as well as existing local KY-ASAP boards. Furthermore, newly designated local boards now receive only \$20,000 upon completion of their needs & resource assessment and strategic planning documents.

KY-ASAP Local Boards now exist in 119 of Kentucky’s 120 counties and is currently being used in many of these communities as the primary component of a comprehensive drug education/prevention, treatment, and law enforcement programs. Within the three-pronged approach, there are several intervention programs that have been proven to be effective and are available to schools, families and communities.

Local KY-ASAP boards are effective in their individual communities because these boards are comprised of the key stakeholders in the communities. Through these stakeholders, a unique and varied perspective can be brought to the discussion table thus allowing a holistic approach to a local board’s ability to reach its entire community demographic. These stakeholders include individuals from the following sectors:

- |                            |                          |                 |
|----------------------------|--------------------------|-----------------|
| School Superintendent      | Faith Based Community    | Judicial System |
| Law Enforcement            | Media                    | Health Care     |
| University/College         | Mental Health Center     | Judge Executive |
| Health Department          | Family Resource Center   | Business        |
| Groups in ATOD Prevention  | Groups in ATOD Treatment | DCBS            |
| Leaders in ATOD Prevention |                          |                 |

Additionally, local boards may choose to add other community members to its membership roster. These additional members include parents, students, or other community members.

---

<sup>3</sup>staffing levels at ODCP and KY-ASAP decreased from as high as 14 to 3 today



The local KY-ASAP boards, through its community partners, engage in a variety of policy and programming initiatives; examples of these include:

|                                      |                                    |
|--------------------------------------|------------------------------------|
| 100% Tobacco Free Policy             | Attitudes & Behavioral Surveys     |
| Beth's Blessings                     | Chad's Hope                        |
| Community Coalitions                 | ATOD Assemblies                    |
| Curriculum                           | Curricula Facilitation             |
| DEA National Take Back Days          | Drug Court                         |
| Drug Court Staffing Training         | Drug Testing                       |
| DUI Checkpoints                      | Educational Materials              |
| Educational Meetings                 | Family Learning Nights             |
| GOALS Curriculum                     | Health Fairs                       |
| HOT Conference                       | Indoor Smoking Ordinances          |
| Juvenile Drug Court                  | Keep a Clear Mind Curriculum       |
| Ladies Like Us Curriculum            | Law Enforcement K-9 Unit Support   |
| Law Enforcement AlcoBlow Kits        | Law Enforcement Breathalyzer       |
| Law Enforcement Crisis Intervention  | Law Enforcement Equipment          |
| Law Enforcement Overtime             | Law Enforcement Training           |
| Leveraging Other Funding             | Life Skills Curriculum             |
| Messaging/Marketing Campaign         | Naloxone Distribution              |
| Nicotine Replacement Therapy         | Permanent Prescription Disposal    |
| Project Graduation                   | Project Prom                       |
| Protective Factor Building           | Random Student Drug Testing Policy |
| Recovery Month Activities            | Red Ribbon Week                    |
| Responsible Beverage Server Training | School Resource Officer            |
| Smoking Cessation Classes            | Smoke-Free Coalitions              |
| Social Host Policy                   | Synthetics Educational Trainings   |
| Teens Against Tobacco Use (TATU)     | TEG/TAP Programs                   |
| Treatment Transportation             | Treatment Vouchers                 |
| Underage Drinking Campaigns          | UNITE Clubs                        |
| Youth Coalitions                     | Youth PSA Contests                 |

The Commonwealth is very fortunate to have local KY-ASAP boards that are extremely dedicated and offer innovative and creative approaches to attacking the tobacco, alcohol and other drug challenges in their communities. These local boards have a unique ability to find community collaborations that allow them to blend and braid various funding sources to provide the best practical solutions to the challenges they face throughout their communities. Through these community collaborations, local KY-ASAP boards are able to combine KY-ASAP funding with other funding to accomplish more in all communities across the Commonwealth.

Local Boards continue to take advantage of the many collaborative opportunities and outreach responsibilities it has to share the mission regarding prevention, treatment and law enforcement. Boards are always looking for a "teachable moment" with communication and collaboration to be successful.

KY-ASAP will continue to work toward significant goals that will strengthen our position to fight drugs in our communities through innovative partnerships, technology, and leadership.

In conclusion, the KY Office of Drug Control Policy/Kentucky Agency for Substance Abuse Policy cannot stress enough that the local boards are dedicated, effective, valuable, but most of all, successful. They are an excellent local community tool and much needed component in educating, preventing, treating and enforcing substance abuse as part of a comprehensive prevention program.

Local boards are currently and have been involved in the following activities:

- Permanent Prescription Drug Disposal Locations
- Naloxone Distribution in the Community
- Supporting Tobacco Cessation programs
- Contracting with local school districts to provide evidence-based prevention programs in schools
- Hosting regional youth summits which focused on tobacco, substance abuse and underage drinking issues
- Investing in Drug Courts for adults and juveniles
- Providing Meth Awareness Trainings for community members
- Payment assistant for treatment services
- Support of School Resource Officers
- Providing financial support to law enforcement for prevention efforts
- Addressing substance abuse policies at all levels
- Media Ads with alcohol, tobacco and other substance facts (locally, statewide, & nationally)
- Student generated Public Service Announcements concerning Substance Abuse issues
- Supported community events such as Red Ribbon Week, Project Prom, Project Graduation, We Card, and Great American Ghost Out
- Collaborated with school districts and health departments to change smoking and drug policies at schools and provided financial support for programs such as Tobacco Education Groups/Tobacco Awareness Program (TEG/TAP), Teens Against Tobacco and Genesis Express
- Hosted Town Hall meetings to build awareness
- Preparing for community and school policy changes such as smoking ordinances, social host ordinances and random student drug testing
- Conducting adult and student surveys to assess the needs of their communities

Local KY-ASAP Boards utilize the KIP (Kentucky Incentives for Prevention) survey, among others, to collect their baseline data. The survey is conducted bi-annually in the fall in even-numbered years, with 6<sup>th</sup>, 8<sup>th</sup>, 10<sup>th</sup>, and 12<sup>th</sup> graders attending school in most Kentucky counties. To learn more about the KIP Survey and view the latest drug trends among youth in Kentucky visit the Reach of Louisville website at: <http://www.reachoflouisville.com>.



MIKE HARMON  
AUDITOR OF PUBLIC ACCOUNTS

Van Ingram, Executive Director  
Office of Drug Control Policy  
125 Holmes Street  
Frankfort, KY 40601

Adam Meier, Secretary  
Cabinet for Health and Family Services  
275 East Main Street, 5W-A  
Frankfort, KY 40601

Independent Accountant's Report

We have reviewed the expenditures of the Kentucky Health Care Improvement fund from July 1, 2017 to June 30, 2018. The Office of Drug Control Policy (ODCP) and the Cabinet for Health and Family Services (CHFS) are responsible for ensuring expenditures reported within the Kentucky Health Care Improvement Fund are complete and accurate. Our responsibility is to express a conclusion on the expenditures reported within the Kentucky Health Care Improvement Fund based on our review.

Our review was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants. Those standards require that we plan and perform the review to obtain limited assurance about whether any material modifications should be made to the expenditures reported within the Kentucky Health Care Improvement Fund. A review is substantially less in scope than an examination, the objective of which is to obtain reasonable assurance about whether the expenditures reported within the Kentucky Health Care Improvement Fund are complete and accurate, in all material respects, in order to express an opinion. Accordingly, we do not express such an opinion. We believe our review provides a reasonable basis for our conclusions.

Based on our review, we are not aware of any material modifications that should be made to the expenditures, as recorded in the enhanced Management Administrative Reporting System (eMARS) by ODCP or CHFS for the year ended June 30, 2018, in order for them to be complete and accurately reported within the Kentucky Health Care Improvement Fund.

This report is intended solely to fulfill the review requirements established in Kentucky Revised Statutes (KRS) 194A.055 and is not suitable for any other purpose.

Sincerely,

Mike Harmon  
Auditor of Public Accounts

May 15, 2019

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# Kentucky Agency for Substance Abuse Policy

81 Local Boards in 120 Counties  
 (17 multi-county & 103 single county)  
 includes Harlan & Elliott counties in process of receiving full board designation



Updated: 02-10-2020

## KY-ASAP: State Board Members

---

### **Ron Rice, Chairman**

Retired Chief of Police – City of Maysville  
Local Tobacco Addiction: Substance Abuse Board

### **Justice Mary Noble**

Secretary, Justice & Public Safety Cabinet

|  |   |
|--|---|
| <p><b><u>Dana Nickles, Director</u></b><br/>KY Public Health Association<br/><i>Designee: None</i></p>                                     | <p><b><u>Shannon Black Baker</u></b><br/>American Lung Association<br/><i>Designee: None</i></p>  |
| <p><b><u>Steve Shannon</u></b><br/>KY Association of Regional Programs<br/><i>Designee: None</i></p>                                       | <p><b><u>Jeff Jones</u></b><br/>Local Tobacco Addiction, Subs. Abuse Bd.<br/><i>Designee: None</i></p>  |
| <p><b><u>Justice Mary Noble, Secretary</u></b><br/>Justice &amp; Public Safety Cabinet<br/><i>Designee: Van Ingram</i></p>                 | <p><b><u>Dr. Steven Stack, Commissioner</u></b><br/>Department for Public Health<br/><i>Designee: Rebecca Gillis</i></p>  |
| <p><b><u>Allyson Taylor, Commissioner</u></b><br/>Alcoholic Beverage Control<br/><i>Designee: David Wilkerson</i></p>                      | <p><b><u>Tim Robinson</u></b><br/>Private Community-Based Organization<br/><i>Designee: None</i></p>  |
| <p><b><u>Laurie Dudgeon, Director</u></b><br/>Administrative Office of the Courts<br/><i>Designee: Melynda Benjamin</i></p>                | <p><b><u>Ronald J. Rice, Chief-Maysville PD Retired</u></b><br/>Local Tobacco Addiction, Subs. Abuse Board<br/><i>Designee: None</i></p>  |
| <p><b><u>Tim Cesario</u></b><br/>Private Community-based Organizations<br/><i>Designee: Tony Landrum</i></p>                               | <p><b><u>Vacant</u></b><br/>Kentucky Cancer Society<br/><i>Designee: None</i></p>   |
| <p><b><u>Megan Nicodemus</u></b><br/>KY Family Resource Youth Services Coalition<br/><i>Designee: T.C. Johnson</i></p>                     | <p><b><u>David Sloane</u></b><br/>American Heart Association<br/><i>Designee: Shannon Smith</i></p>   |
| <p><b><u>Eric Friedlander, Acting Secretary</u></b><br/>Cabinet for Health &amp; Family Services<br/><i>Designee: Maggie Schroeder</i></p> | <p><b><u>Phyllis Millspaugh</u></b><br/>Division of Behavioral Health, Dept. of Behavioral Health, Developmental &amp; Intellectual Disabilities<br/><i>Designee: Patti Clark &amp; Steve Cambron</i></p> |
| <p><b><u>Kevin Brown, Interim Commissioner</u></b><br/>Department of Education<br/><i>Designee: Doug Roberts</i></p>                       | <p>UPDATED 02/2020</p>  |

**KY-ASAP State Boards  
(81 boards in 120 counties)**

|    |   |
|----|---|
| 1  | Adair County Local KY-ASAP Board  |
| 2  | Allen County Local KY-ASAP Board  |
| 3  | Anderson County Local KY-ASAP Board   |
| 4  | Ballard County Local KY-ASAP Board  |
| 5  | Barren-Hart-Metcalf Local KY-ASAP Board (BHM)                               |
| 6  | Bath County Local KY-ASAP Board   |
| 7  | Bell-Knox-Whitley Local KY-ASAP Board (BKW)                                 |
| 8  | Black Patch Council Local KY-ASAP Board (Livingston, Lyon, Caldwell, Trigg) |
| 9  | Bourbon/Harrison Local KY-ASAP Board  |
| 10 | Boyle County Local KY-ASAP Board  |
| 11 | Breathitt County Local KY-ASAP Board  |
| 12 | Breckinridge County Local KY-ASAP Board                                     |
| 13 | Buffalo Trace Local KY-ASAP Board   |
| 14 | Butler-Logan-Simpson Local KY-ASAP Board (BLS)                              |
| 15 | Calloway County Local KY-ASAP Board   |
| 16 | Carlisle County Local KY-ASAP Board   |
| 17 | Casey County Local KY-ASAP Board  |
| 18 | Central KY Local KY-ASAP Board  |
| 19 | Clark County Local KY-ASAP Board  |
| 20 | Clay-Jackson Local KY-ASAP Board  |
| 21 | Clinton County Local KY-ASAP Board  |
| 22 | Crittenden County Local KY-ASAP Board                                       |
| 23 | Cumberland County Local KY-ASAP Board                                       |
| 24 | Daviess County Local KY-ASAP Board  |
| 25 | Edmonson County Local KY-ASAP Board   |
| 26 | Elliott County (1 <sup>st</sup> half designation compete)                   |
| 27 | Estill-Powell Local KY-ASAP Board   |
| 28 | Fayette County Local KY-ASAP Board  |
| 29 | Floyd-Pike Local KY-ASAP Board  |
| 30 | Franklin County Local KY-ASAP Board   |
| 31 | Fulton-Hickman County Local KY-ASAP Board                                   |
| 32 | Garrard County Local KY-ASAP Board  |
| 33 | Graves County Local KY-ASAP Board   |

**KY-ASAP State Boards  
(81 boards in 120 counties)**

|    |  |
|----|--|
| 34 | Grayson-Meade-Hardin Local KY-ASAP Board   |
| 35 | Green County Local KY-ASAP Board   |
| 36 | Harlan County Local KY-ASAP Board ( <i>1<sup>st</sup> half designation complete</i> )                |
| 37 | Hancock County Local KY-ASAP Board   |
| 38 | Heartland Trail Local KY-ASAP Board  |
| 39 | Henderson County Local KY-ASAP Board   |
| 40 | Henry County Local KY-ASAP Board   |
| 41 | Hopkins County Local KY-ASAP Board   |
| 42 | Jessamine County Local KY-ASAP Board   |
| 43 | Johnson-Martin Local KY-ASAP Board   |
| 44 | Knott County Local KY-ASAP Board   |
| 45 | LaRue County Local KY-ASAP Board   |
| 46 | Laurel County Local KY-ASAP Board  |
| 47 | Lawrence County Local KY-ASAP Board  |
| 48 | Lee County Local KY-ASAP Board   |
| 49 | Leslie County Local KY-ASAP Board  |
| 50 | Letcher County Local KY-ASAP Board   |
| 51 | Lincoln County Local KY-ASAP Board   |
| 52 | Madison County Local KY-ASAP Board   |
| 53 | Magoffin County Local KY-ASAP Board  |
| 54 | Marshall County Local KY-ASAP Board  |
| 55 | McCracken County Local KY-ASAP Board   |
| 56 | McCreary County Local KY-ASAP Board  |
| 57 | McLean County Local KY-ASAP Board  |
| 58 | Menifee County Local KY-ASAP Board   |
| 59 | Mercer County Local KY-ASAP Board  |
| 60 | Monroe County Local KY-ASAP Board  |
| 61 | Montgomery County Local KY-ASAP Board  |
| 62 | Morgan County Local KY-ASAP Board  |
| 63 | Nicholas County Local KY-ASAP Board  |
| 64 | Northern KY Local KY-ASAP Board (Carroll, Gallatin, Boone, Kenton, Campbell, Pendleton, Grant, Owen) |
| 65 | Ohio County Local KY-ASAP Board  |

**KY-ASAP State Boards  
(81 boards in 120 counties)**

|    |   |
|----|---|
| 66 | Owsley County Local KY-ASAP Board   |
| 67 | Pennyrile Local KY-ASAP Board (Todd, Christian, Muhlenberg)                         |
| 68 | Perry County Local KY-ASAP Board  |
| 69 | Pulaski County Local KY-ASAP Board  |
| 70 | Region 6 Local KY-ASAP Board (Trimble, Oldham, Jefferson, Bullitt, Spencer, Shelby) |
| 71 | Rockcastle County Local KY-ASAP Board   |
| 72 | Rowan County Local KY-ASAP Board  |
| 73 | Russell County Local KY-ASAP Board  |
| 74 | Scott County Local KY-ASAP Board  |
| 75 | Tri-County Local KY-ASAP Board (Carter, Greenup, Boyd)                              |
| 76 | Union County Local KY-ASAP Board  |
| 77 | Warren County Local KY-ASAP Board   |
| 78 | Wayne County Local KY-ASAP Board  |
| 79 | Webster County Local KY-ASAP Board  |
| 80 | Wolfe County Local KY-ASAP Board  |
| 81 | Woodford County Local KY-ASAP Board   |

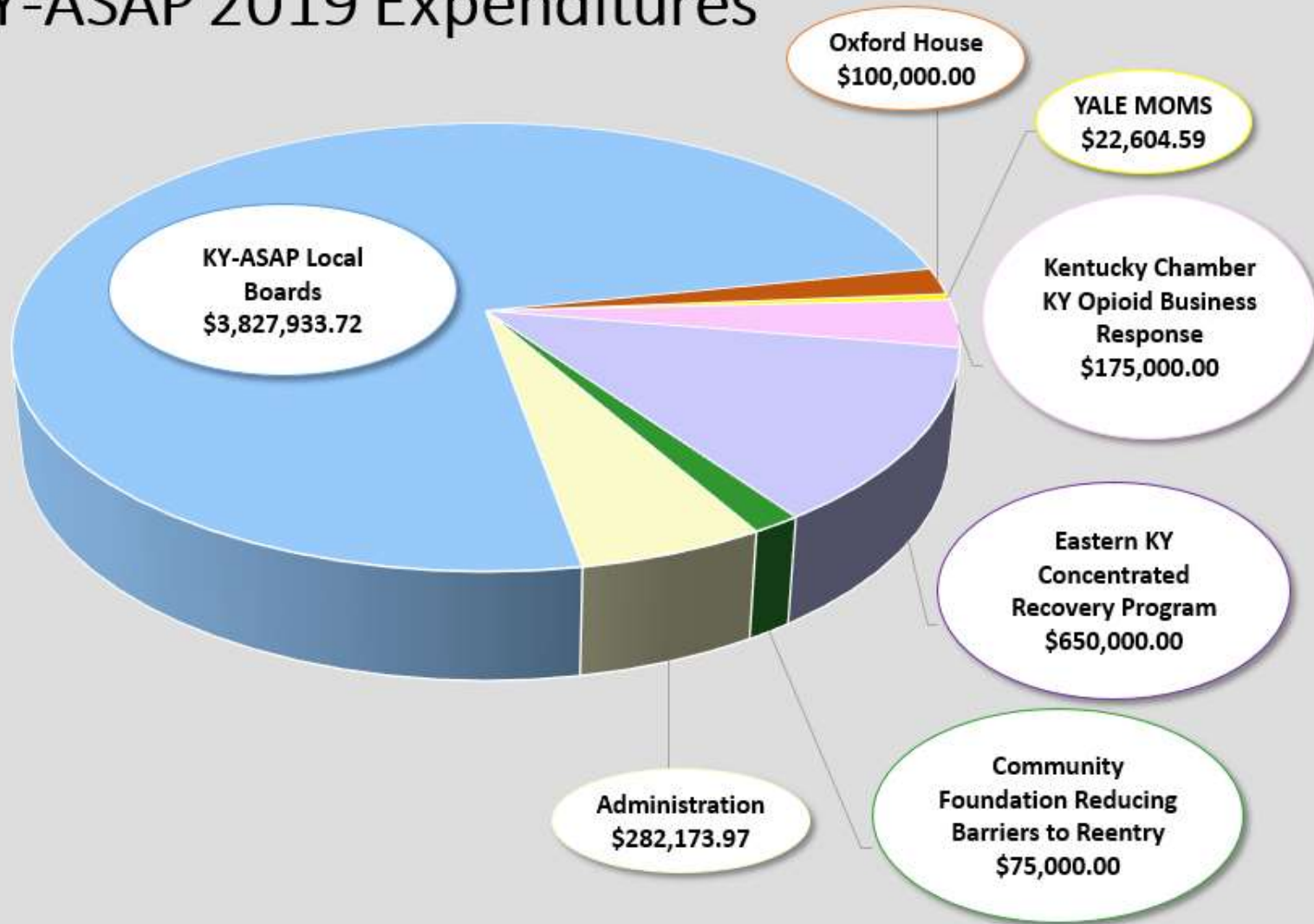


Kentucky Agency for Substance Abuse Policy  
 Program Expenditure Summary SFY2019  
 July 1, 2019 through June 30, 2020

*(Tobacco Fund – 65AH)*

| Kentucky Office of Drug Control Policy<br>Tobacco Settlement<br>Expenditures |                       |
|--|-----------------------|
|  | <b>2019</b>           |
| KY-ASAP Traditional Awards   | \$2,457,000.00        |
| KY-ASAP Harm Reduction Awards*   | \$1,360,933.72        |
| KY-ASAP New Boards   | \$10,000.00           |
| KY-ASAP State Board Meetings   | \$1,552.57            |
| Other (EMARS/supplies, telephone, COT, AGATE, Auditor, Copier, Media, etc.)  | \$12,387.21           |
| Vehicle Purchase   | \$11,223.00           |
| Oxford House   | \$100,000.00          |
| YALE MOMS  | \$22,604.59           |
| Salary/Fringe/Travel   | \$257,011.19          |
| Kentucky Chamber - Kentucky Opioid Business Response                         | \$175,000.00          |
| Eastern KY Concentrated Recovery Program                                     | \$650,000.00          |
| Community Foundation - Reducing Barriers to Reentry                          | \$75,000.00           |
| <b>TOTAL</b>   | <b>\$5,132,712.28</b> |

# KY-ASAP 2019 Expenditures



\*includes harm reduction projects paid with substance abuse initiatives funding

## KY-ASAP: SFY2019 Local Board Funding

| <b>KY-ASAP LOCAL BOARDS<br/>SFY2019 TRADITIONAL FUNDING</b> |                         |
|---|-------------------------|
| <b>Board</b>  | <b>Award<br/>Amount</b> |
| Adair County Local KY-ASAP Board                            | \$21,000.00             |
| Allen County Local KY-ASAP Board                            | \$21,000.00             |
| Anderson County Local KY-ASAP Board                         | \$21,000.00             |
| Ballard County Local KY-ASAP Board                          | \$21,000.00             |
| Barren Hart Metcalfe Local KY-ASAP Board (BHM)              | \$63,000.00             |
| Bath County Local KY-ASAP Board                             | \$21,000.00             |
| Bell Knox Whitley Local KY-ASAP Board (BKW)                 | \$63,000.00             |
| Black Patch Council (BPC) Local KY-ASAP Board               | \$84,000.00             |
| Bourbon/Harrison Local KY-ASAP Board                        | \$42,000.00             |
| Boyle County Local KY-ASAP Board                            | \$21,000.00             |
| Breathitt County Local KY-ASAP Board                        | \$21,000.00             |
| Breckinridge County Local KY-ASAP Board                     | \$21,000.00             |
| Buffalo Trace Local KY-ASAP Board                           | \$105,000.00            |
| Butler Logan Simpson Local KY-ASAP Board (BLS)              | \$63,000.00             |
| Calloway County Local KY-ASAP Board                         | \$21,000.00             |
| Carlisle County Local KY-ASAP Board                         | \$21,000.00             |
| Casey County Local KY-ASAP Board                            | \$21,000.00             |
| Central KY Local KY-ASAP Board                              | \$21,000.00             |
| Clark County Local KY-ASAP Board                            | \$21,000.00             |
| Clay/Jackson Local KY-ASAP Board                            | \$42,000.00             |
| Clinton County Local KY-ASAP Board                          | \$21,000.00             |
| Crittenden County Local KY-ASAP Board                       | \$21,000.00             |
| Cumberland County Local KY-ASAP Board                       | \$21,000.00             |
| Daviess County Local KY-ASAP Board                          | \$21,000.00             |
| Edmonson County Local KY-ASAP Board                         | \$21,000.00             |
| Estill/Powell Local KY-ASAP Board                           | \$42,000.00             |
| Fayette County Local KY-ASAP Board                          | \$21,000.00             |
| Floyd/Pike Local KY-ASAP Board                              | \$42,000.00             |
| Franklin County Local KY-ASAP Board                         | \$21,000.00             |
| Fulton-Hickman Local KY-ASAP Board                          | \$42,000.00             |

| KY-ASAP LOCAL BOARDS<br>SFY2019 TRADITIONAL FUNDING |              |
|---|--------------|
| Board   | Award Amount |
| Garrard County Local KY-ASAP Board                  | \$21,000.00  |
| Graves County Local KY-ASAP Board                   | \$21,000.00  |
| Grayson Meade Hardin Local KY-ASAP Board (GMH)      | \$63,000.00  |
| Green County Local KY-ASAP Board                    | \$21,000.00  |
| Hancock County Local KY-ASAP Board                  | \$21,000.00  |
| Harlan County Local KY-ASAP Board <sup>1</sup>      | \$10,000.00  |
| Heartland Trail Local KY-ASAP Board                 | \$63,000.00  |
| Henderson County Local KY-ASAP Board                | \$21,000.00  |
| Henry County Local KY-ASAP Board                    | \$21,000.00  |
| Hopkins County Local KY-ASAP Board                  | \$21,000.00  |
| Jessamine County Local KY-ASAP Board                | \$21,000.00  |
| Johnson/Martin Local KY-ASAP Board                  | \$42,000.00  |
| Knott County Local KY-ASAP Board                    | \$21,000.00  |
| LaRue County Local KY-ASAP Board                    | \$21,000.00  |
| Laurel County Local KY-ASAP Board                   | \$21,000.00  |
| Lawrence County Local KY-ASAP Board                 | \$21,000.00  |
| Lee County Local KY-ASAP Board                      | \$21,000.00  |
| Leslie County Local KY-ASAP Board                   | \$21,000.00  |
| Letcher County Local KY-ASAP Board                  | \$21,000.00  |
| Lincoln County Local KY-ASAP Board                  | \$21,000.00  |
| Madison County Local KY-ASAP Board                  | \$21,000.00  |
| Magoffin County Local KY-ASAP Board                 | \$21,000.00  |
| Marshall County Local KY-ASAP Board                 | \$21,000.00  |
| McCracken County Local KY-ASAP Board                | \$21,000.00  |
| McCreary County Local KY-ASAP Board                 | \$21,000.00  |
| McLean County Local KY-ASAP Board                   | \$21,000.00  |
| Menifee County Local KY-ASAP Board                  | \$21,000.00  |
| Mercer County Local KY-ASAP Board                   | \$21,000.00  |
| Monroe County Local KY-ASAP Board                   | \$21,000.00  |
| Montgomery County Local KY-ASAP Board               | \$21,000.00  |
| Morgan County Local KY-ASAP Board                   | \$21,000.00  |
| Nicholas County Local KY-ASAP Board                 | \$21,000.00  |
| Northern KY Local KY-ASAP Board                     | \$168,000.00 |

| KY-ASAP LOCAL BOARDS<br>SFY2019 TRADITIONAL FUNDING |                       |
|---|-----------------------|
| Board   | Award Amount          |
| Ohio County Local KY-ASAP Board                     | \$21,000.00           |
| Owsley County Local KY-ASAP Board                   | \$21,000.00           |
| Pennyrile Local KY-ASAP Board                       | \$63,000.00           |
| Perry County Local KY-ASAP Board                    | \$21,000.00           |
| Pulaski County Local KY-ASAP Board                  | \$21,000.00           |
| Region 6 Local KY-ASAP Board                        | \$126,000.00          |
| Rockcastle County Local KY-ASAP Board               | \$21,000.00           |
| Rowan County Local KY-ASAP Board                    | \$21,000.00           |
| Russell County Local KY-ASAP Board                  | \$21,000.00           |
| Scott County Local KY-ASAP Board                    | \$21,000.00           |
| Tri-County Local KY-ASAP Board                      | \$63,000.00           |
| Union County Local KY-ASAP Board                    | \$21,000.00           |
| Warren County Local KY-ASAP Board                   | \$21,000.00           |
| Wayne County Local KY-ASAP Board                    | \$21,000.00           |
| Webster County Local KY-ASAP Board                  | \$21,000.00           |
| Wolfe County Local KY-ASAP Board <sup>2</sup>       | \$0.00                |
| Woodford County Local KY-ASAP Board                 | \$21,000.00           |
|   | <b>\$2,467,000.00</b> |

<sup>1</sup>Harlan County Local KY-ASAP Board completed the 1<sup>st</sup> half of the KY-ASAP Local Board designation process and received its 1<sup>st</sup> half of start-up funding in the amount of \$10,000

<sup>2</sup>Wolfe County Local KY-ASAP Board did not receive 2019 funding while it underwent financial review and membership reorganization

## KY-ASAP: SFY2019 Harm Reduction Local Board Award Amounts & Projects

| Local Board         | Award Amount | Funded Project  |
|---------------------|--------------|---|
| Adair               | \$9,807.00   | <ul style="list-style-type: none"> <li>• SEP supplies</li> <li>• education materials</li> <li>• test kits</li> </ul>  |
| Allen               | \$11,200.00  | <ul style="list-style-type: none"> <li>• opioid training</li> <li>• naloxone for law enforcement</li> <li>• court drug testing</li> </ul>   |
| Anderson            | \$20,000.00  | <ul style="list-style-type: none"> <li>• awareness campaign</li> <li>• narcan doses</li> <li>• recovery program</li> <li>• drug court</li> <li>• K-9 purchase &amp; maintenance</li> <li>• nitrile gloves</li> <li>• syringe disposal containers</li> </ul>           |
| Barren-Hart-Metcalf | \$16,122.00  | <ul style="list-style-type: none"> <li>• opioid overdose detection</li> <li>• prime for life curriculum</li> <li>• naloxone doses</li> <li>• 1<sup>st</sup> responder training</li> <li>• syringe exchange program supplies</li> <li>• treatment brochures</li> </ul> |
| Bath                | \$20,000.00  | <ul style="list-style-type: none"> <li>• educational brochures</li> <li>• naloxone doses</li> <li>• hazmat suits</li> <li>• treatment transportation</li> </ul>   |
| Bourbon-Harrison    | \$27,365.42  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies</li> </ul>   |
| Boyle               | \$20,000.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies</li> </ul>   |
| Breckinridge        | \$17,737.50  | <ul style="list-style-type: none"> <li>• overdose community education</li> <li>• naloxone doses</li> <li>• marketing/advertising</li> <li>• treatment</li> <li>• enforcement surveillance equipment</li> </ul>  |

| Local Board          | Award Amount | Funded Project   |
|----------------------|--------------|--|
| Buffalo Trace        | \$20,000.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• travel vouchers</li> <li>• treatment incentives</li> </ul>  |
| Butler-Logan-Simpson | \$22,775.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies</li> <li>• media campaign</li> <li>• outreach</li> <li>• nitrile gloves</li> </ul>  |
| Casey                | \$18,369.50  | <ul style="list-style-type: none"> <li>• drop box ads</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• interdiction stops</li> <li>• rx drop box maintenance</li> <li>• sharps containers</li> <li>• tip line</li> </ul>  |
| Clark                | \$19,800.00  | <ul style="list-style-type: none"> <li>• media campaign</li> <li>• naloxone doses</li> </ul>   |
| Clay-Jackson         | \$20,000.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies</li> <li>• enforcement overtime</li> </ul>  |
| Davies               | \$20,000.00  | <ul style="list-style-type: none"> <li>• media campaign</li> <li>• teen leadership conference</li> <li>• drug disposal bags</li> <li>• education &amp; advertising</li> <li>• treatment vouchers</li> <li>• adult drug court support</li> <li>• nitrile gloves</li> </ul>                          |
| Edmonson             | \$8,492.56   | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• drug test kits</li> <li>• needle resistant gloves</li> </ul>   |
| Estill-Powell        | \$20,000.00  | <ul style="list-style-type: none"> <li>• SPARK rally</li> <li>• drug march/resource fair</li> <li>• addiction awareness</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• syringe exchange program supplies</li> <li>• treatment support</li> <li>• enforcement support</li> </ul> |

| Local Board          | Award Amount | Funded Project   |
|----------------------|--------------|--|
| Fayette              | \$20,000.00  | <ul style="list-style-type: none"> <li>● naloxone doses</li> </ul>   |
| Floyd/Pike           | \$40,000.00  | <ul style="list-style-type: none"> <li>● town hall meetings</li> <li>● prevention materials</li> <li>● naloxone doses</li> <li>● syringe exchange program supplies</li> <li>● educational materials</li> </ul>   |
| Franklin             | \$19,800.00  | <ul style="list-style-type: none"> <li>● community outreach/meetings</li> <li>● opioid prevention training events</li> <li>● naloxone doses</li> <li>● naloxone training</li> <li>● syringe exchange program supplies</li> </ul>   |
| Garrard              | \$11,625.00  | <ul style="list-style-type: none"> <li>● media awareness</li> <li>● naloxone doses</li> <li>● syringe exchange program supplies</li> <li>● needle resistant gloves</li> </ul>  |
| Graves               | \$20,000.00  | <ul style="list-style-type: none"> <li>● naloxone doses</li> <li>● syringe exchange program supplies</li> <li>● media/outreach</li> <li>● treatment referral information</li> <li>● evidence processing system</li> <li>● needle resistant gloves</li> <li>● field test kits</li> </ul>  |
| Grayson-Meade-Hardin | \$47,465.00  | <ul style="list-style-type: none"> <li>● education for pregnant women</li> <li>● community RX education</li> <li>● mobile harm reduction awareness</li> <li>● naloxone doses</li> <li>● syringe exchange program supplies</li> <li>● treatment</li> <li>● adolescent recovery</li> <li>● digital evidence computer</li> <li>● opioid enforcement overtime</li> </ul> |
| Green                | \$19,945.00  | <ul style="list-style-type: none"> <li>● town hall forum</li> <li>● naloxone doses</li> <li>● naloxone training</li> <li>● treatment transportation</li> </ul>   |



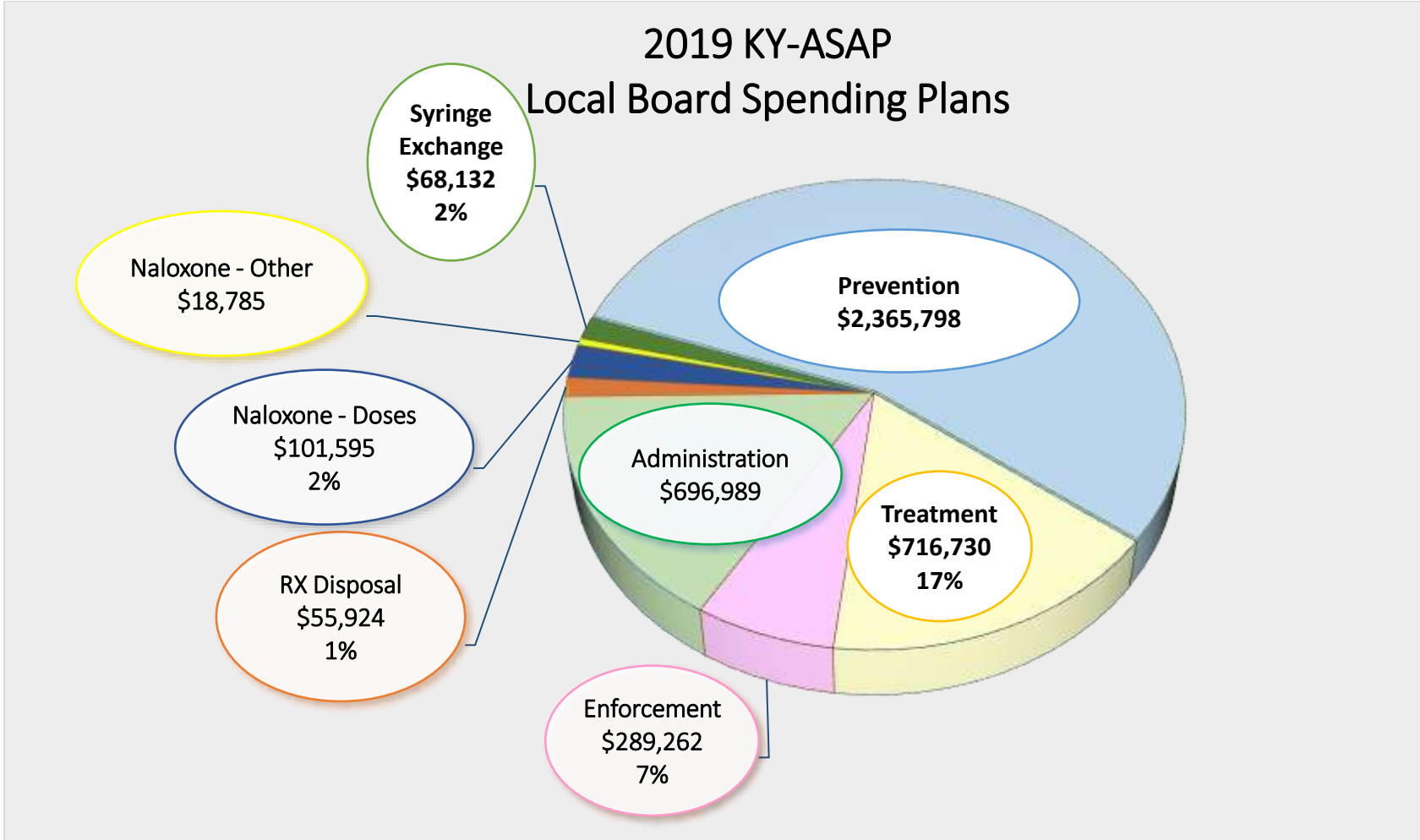
| Local Board     | Award Amount | Funded Project  |
|-----------------|--------------|---|
| Hancock         | \$18,500.00  | <ul style="list-style-type: none"> <li>• RX disposal bags</li> <li>• lock boxes</li> <li>• educational/promotional materials</li> <li>• lunch &amp; learn</li> <li>• media campaign</li> <li>• naloxone does</li> <li>• naloxone training</li> <li>• treatment vouchers</li> </ul>                    |
| Heartland Trail | \$40,000.00  | <ul style="list-style-type: none"> <li>• community opioid training</li> <li>• family night</li> <li>• moms MATR</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• syringe exchange program education/promotion</li> <li>• treatment</li> <li>• enforcement opioid overtime</li> </ul> |
| Jessamine       | \$20,000.00  | <ul style="list-style-type: none"> <li>• resilience scholarship for incarcerated individuals</li> </ul>   |
| Johnson/Martin  | \$24,900.00  | <ul style="list-style-type: none"> <li>• town hall meetings</li> <li>• prevention materials</li> <li>• social media campaigns</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• syringe exchange program supplies</li> </ul>  |
| Knott           | \$20,000.00  | <ul style="list-style-type: none"> <li>• treatment vouchers</li> <li>• treatment transportation</li> <li>• AA/NA/Drug Court materials &amp; incentives</li> </ul>   |
| LaRue           | \$12,210.00  | <ul style="list-style-type: none"> <li>• opioid education</li> <li>• naloxone doses</li> <li>• syringe exchange program promotion</li> <li>• treatment</li> <li>• opioid enforcement overtime</li> </ul>  |
| Laurel          | \$20,000.00  | <ul style="list-style-type: none"> <li>• social media campaign</li> <li>• naloxone doses</li> <li>• syringe exchange program onsite counseling</li> </ul>   |
| Lawrence        | \$20,000.00  | <ul style="list-style-type: none"> <li>• too good for drugs curriculum</li> <li>• educational brochures</li> <li>• naloxone doses</li> <li>• hazmat suits</li> </ul>  |

| Local Board | Award Amount | Funded Project   |
|-------------|--------------|--|
| Lincoln     | \$20,000.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies/promotion</li> </ul>  |
| Madison     | \$20,000.00  | <ul style="list-style-type: none"> <li>• too good for drugs curriculum</li> <li>• resource guides</li> <li>• educational billboard</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• celebrate recover</li> <li>• treatment voucher</li> <li>• drug exposed infant guides</li> </ul> |
| Magoffin    | \$20,000.00  | <ul style="list-style-type: none"> <li>• community resource materials</li> <li>• naloxone doses</li> <li>• syringe exchange program supplies/promotion</li> <li>• mobile clinic</li> </ul>   |
| Marshall    | \$20,000.00  | <ul style="list-style-type: none"> <li>• media ads (newspaper/radio/billboard)</li> </ul>  |
| McCracken   | \$20,000.00  | <ul style="list-style-type: none"> <li>• media ads</li> <li>• brochures/educational folders</li> <li>• naloxone doses</li> <li>• masks/gloves</li> <li>• treatment workbooks</li> </ul>  |
| McLean      | \$18,040.00  | <ul style="list-style-type: none"> <li>• social media campaign</li> <li>• rx disposal bags</li> <li>• treatment vouchers</li> <li>• adult drug court</li> <li>• drug court marketing</li> <li>• diversion program</li> </ul>   |
| Monroe      | \$20,000.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• naloxone training</li> </ul>  |
| Montgomery  | \$20,000.00  | <ul style="list-style-type: none"> <li>• sharps containers</li> <li>• naloxone doses</li> <li>• treatment vouchers</li> </ul>  |
| Morgan      | \$20,000.00  | <ul style="list-style-type: none"> <li>• educational brochures</li> <li>• too good for drugs curriculum</li> <li>• naloxone doses</li> <li>• hazmat suits</li> <li>• treatment transportation</li> </ul>   |
| Northern KY | \$36,825.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• leadership academy</li> <li>• peer support training</li> </ul>  |

| Local Board | Award Amount | Funded Project   |
|-------------|--------------|--|
| Ohio        | \$20,000.00  | <ul style="list-style-type: none"> <li>• rx lock boxes</li> <li>• disposal bags</li> <li>• media campaign</li> <li>• naloxone doses</li> <li>• treatment resources</li> <li>• treatment transportation</li> <li>• court designated worker - drug testing kits</li> </ul> |
| Owsley      | \$12,170.24  | <ul style="list-style-type: none"> <li>• syringe exchange program support</li> <li>• addiction treatment resource pamphlets</li> </ul>   |
| Perry       | \$10,290.00  | <ul style="list-style-type: none"> <li>• educational materials</li> <li>• naloxone doses</li> <li>• naloxone training</li> </ul>   |
| Pulaski     | \$19,882.50  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program supplies</li> </ul>  |
| Region 6    | \$234,586.00 | <ul style="list-style-type: none"> <li>• community awareness campaign</li> <li>• naloxone doses</li> <li>• naloxone training</li> </ul>  |
| Rockcastle  | \$19,800.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• naloxone promotion</li> <li>• treatment vouchers</li> </ul>   |
| Rowan       | \$20,000.00  | <ul style="list-style-type: none"> <li>• casey's law education</li> <li>• syringe exchange program support</li> <li>• treatment transportation</li> <li>• sharps containers</li> <li>• nitrile gloves</li> </ul>   |
| Russell     | \$17,901.00  | <ul style="list-style-type: none"> <li>• media</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• syringe exchange program support</li> </ul>   |
| Taylor      | \$19,945.00  | <ul style="list-style-type: none"> <li>• town hall forums</li> <li>• naloxone doses</li> <li>• naloxone training</li> <li>• treatment transportation</li> </ul>  |
| Tri-County  | \$60,000.00  | <ul style="list-style-type: none"> <li>• community education</li> <li>• naloxone doses</li> <li>• syringe exchange program support</li> <li>• sharps containers</li> </ul>   |

| Local Board           | Award Amount | Funded Project   |
|-----------------------|--------------|--|
| Wayne                 | \$20,000.00  | <ul style="list-style-type: none"> <li>• media advertisements</li> <li>• treatment fees</li> <li>• treatment transportation</li> </ul>   |
| Webster               | \$20,000.00  | <ul style="list-style-type: none"> <li>• opioid awareness campaign</li> <li>• town hall meetings</li> <li>• lunch &amp; learn</li> <li>• rx drop boxes</li> <li>• naloxone training</li> </ul> |
| Woodford              | \$25,380.00  | <ul style="list-style-type: none"> <li>• naloxone doses</li> <li>• syringe exchange program support</li> <li>• recovery program</li> </ul>   |
| <b>\$1,360,933.72</b> |              |  |

Kentucky Agency for Substance Abuse Policy  
SFY2019 Local Board Overall Proposed Expenditures  
(includes 2018 carryover)



## KY-ASAP: State Board Agency Report

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KY-ASAP is required by KRS 15A.342 (formerly codified as KRS 12.332) (20) to report on “the proper organization of state government agencies that will provide the greatest coordination of services, report semi-annually to the Legislative Research Commission and the Governor on the proper organization structure, devising and implementing an accountability system to be designed to ensure efficiency and efficacy of service and grants, and on other matters as requested by the Legislative Research Commission and the Governor.” The following is the semi-annual update of state government activities and other organizations that serve on the KY-ASAP state board.

### Administrative Office of the Courts (Laurie Dudgeon)

The Department of Specialty Courts oversees the Drug Court, DUI Court, Mental Health Court and Veterans Treatment Court programs. Collectively referred to as Specialty Courts, these programs are similarly structured and supervised and have the same goals—to give eligible participants the opportunity to make positive changes in their lives. The programs all provide oversight by a judge, case manager, treatment and drug testing, while utilizing evidence-based practices.

**Federal— Federal Grants** —The Administrative Office of the Courts, Department of Specialty Courts has partnered with Morehead State University, Department of Social Work to secure federal grants from the Substance Abuse and Mental Health Service Administration (SAMHSA) and the Bureau of Justice Assistance (BJA). In 2019, SAMHSA awarded the Bourbon-Scott-Woodford Specialty Court a five-year grant totaling \$1,913,275 for treatment expansion. The Fayette Specialty Court was awarded a five-year grant totaling \$2,000,000 for treatment expansion. The BJA awarded Pike Specialty Court, Northern Kentucky Veterans Court and Hardin Veterans Treatment Court \$500,000 each over 3 years to enhance treatment and increase the capacity of the program to serve more participants.

**Medically Assisted Treatment (MAT)**— The Department of Specialty Courts continues to educate staff and specialty court teams on the three forms of MAT – Vivitrol, Suboxone and Methadone. The Department of Specialty Courts has developed protocols and guidelines relating to MAT to ensure communication between the treating physician and Specialty Court staff.

As of January 13, 2020, there were 27 programs in 34 counties in which participants utilize Vivitrol (35 participants), Methadone (8 participants), Suboxone (112 participants).

**National – Problem Solving Court Summit** – The Chief Justice, AOC Deputy Director and the Department of Specialty Courts Executive Officer attended the National Center for State Courts Problem Solving Courts Summit in Denver Colorado. Participants included Supreme Court Chief Justices and representatives from 33 states and Guam. Discussions included the National Judicial Opioid Task Force resources, improving community responses to the opioid crisis (sequential-intercept model) and development of courts to meet individual needs of persons suffering from substance abuse disorders.

**Regional - RJOI** – The Department of Specialty Courts continues to participate in the Regional Judicial Opioid Initiative action group with Indiana, Ohio, Tennessee, West Virginia and Michigan. The action plan objectives included compiling Aggregate data from the states regarding opioid use disorder. Assess Neonatal Abstinence Syndrome (NAS) birth rates. Expand Prescription Drug Monitoring Program and provide Child Welfare Roundtable-Opportunities regarding challenges to using PDMP data to improve child welfare practices. Once the data was collected and distributed to the states, additional project subcommittees were formed to include Child Welfare, Evidence Based Practices, Prescription Monitoring, Regional Treatment Capacity and Research. The committee will be structuring a resource center for the states in the future. The RJOI committee has identified Floyd County Adult Drug Court for participation in the rural county telehealth services pilot program for Kentucky. The RJOI Evidence Based Practices committee has prepared a MAT bench card based off of the bench card currently used in Kentucky for distribution to the other jurisdictions participating in the initiative.

**State - KY-ASAP**—KY-ASAP continues to collaborate with AOC Specialty Courts programs throughout the state. Jurisdictions have often sought and received assistance through KY-ASAP for enhanced funding for the Basic Essentials of Specialty Courts, drug testing and treatment. KY-ASAP local boards also provide a variety of assistance to Specialty Courts programs, ranging from providing transportation for participants, to purchasing graduation items, assisting with resources, or assisting with education about alcohol and drugs. Specialty Courts staff have provided trainings and/or information regarding substance abuse to local KY-ASAP boards or other community groups.

**State – RESTORE** – The Department of Specialty Courts participated in the planning and presentation of training for judges, court staff and stakeholders statewide through the series of Responsive Education to Support Treatment in Opioid Recovery Efforts (RESTORE) summits. Sixteen summits were conducted across the commonwealth in 2019. Additional summits are planned for 2020.

**State - Community Corrections Grant**—The AOC Division of Specialty Courts continues supporting a Community Corrections grant for the continuation of the pilot SMART

Probation Projects in 8 jurisdictions: Allen/Simpson; Jefferson; Shelby/Spencer/Anderson; Campbell; Pike; Knott/Magoffin; Campbell; Boone; and Lincoln/Pulaski/Rockcastle. SMART (Supervision, Monitoring, Accountability, Responsibility, Treatment) targets and appears to be effective for defendants who use or abuse substances, but whose substance use has not risen to the level of addiction, or defendants who have previously been unsuccessful on probation because of technical violations or a defiant disregard for the terms of probation. The probation strategy uses long term behavior modification concepts combined with supervision and immediate responses to negative behavior choices either by the probation officer or the judge. The AOC Division of Specialty Courts will continue to partner with Community Corrections in reapplying for this grant in 2020.

**State - Operation UNITE**—The Department of Specialty Courts continues to partner with Operation UNITE utilizing Operation UNITE’s treatment vouchers, shared trainings, and collaborative projects. Local UNITE community coalitions assist individual Drug Court programs with a variety of needs ranging from assistance in arranging transportation to educational opportunities. The Department of Specialty Courts management holds a position on the Board of Directors. The Executive Officer and two Managers for the Department of Specialty Courts will be attending the 2020 National Rx Drug Abuse & heroin Summit. The Executive Officer attended Camp Unite in 2019 and will attend again in 2020.

**Local Government and/or Entities - Fiscal Courts**—Several fiscal courts throughout the state continue to provide money and/or space for Kentucky Specialty Courts programs in their jurisdiction. This funding pays for staff, additional treatment and additional drug testing.

**Local Government and/or Entities - Steering Committees**—Specialty Courts programs have influential leaders/citizens in the community that comprise a steering committee. A steering committee may raise funds to assist and help with buying food for drug court events, graduations, or special holiday dinners. Some steering committees have been known to assist participants with in-patient treatment beds and other financial burdens.

**Local Government and/or Entities - Louisville Urban League**—The Louisville Urban League has provided work force development through job readiness and job placement programs. They have also provided group educational counseling to the Jefferson County Drug Court participants. In addition, they provide banking classes, finance and mortgage/housing assistance for the Jefferson County Drug Court participants. Finally, the Urban League provides a wealth of programs and material promoting healthy lifestyles for the Jefferson County Drug Court participants.



**Local Government and/or Entities - Educational Opportunities**—In 2019, the Department of Specialty Courts conducted performance measures trainings across the state to enhance and adhere fidelity to the national drug court model.

In July 2019, over 70 Kentucky Specialty Court employees attended the National Association of Drug Court Professionals Conference held in Washington DC.

The Department of Specialty Courts held a statewide conference in August 2019 at the Louisville Marriott Downtown Kentucky. Programing for the conference centered around MAT and evidence based Adult Drug Court Best Practice Standards. Attendees included over 300 specialty court employees, judges, prosecutors, attorneys, law enforcement, probation and parole and community members.

**Pretrial Services** — The AOC Department of Pretrial Services provides investigations on all arrested defendants. This investigation includes a thorough examination of each defendant’s criminal history through the application of a validated risk assessment instrument by a skilled team of risk assessment specialists. The purpose of the risk assessment is to provide the courts with a tool to make release decisions. Using the tool, risk assessment specialists assess probability of court appearance and re-arrest. Once the risk assessment has been applied, certain eligible defendants charged with non-violent, non-sexual offenses may be released per Supreme Court order. For defendants not eligible for release pursuant to the order, Pretrial Services completes an investigation so the court, in its discretion, can determine risk of flight and danger to the community. Upon the court’s order, Pretrial Services will provide monitoring services for defendants released and awaiting trial until the disposition of the case.

Pretrial officers assure defendants are interviewed so that contact information is obtained to provide court reminders and to meet statutory obligations, which include; identifying defendants with veteran and/or combat service, screening for substance use, and where practical, completing affidavits for the appointment of public defenders. These statutory requirements aid pretrial officers in encouraging defendants to seek resources such as treatment, housing, education or counseling. Defendants may be monitored on MCR (Monitored Conditional Release) upon order of the court or may be released to a more intensive form of supervision, PARTS (Pretrial Assisted Recovery and Treatment Services). PARTS programs have eligibility requirements that target felony, unreleased pretrial populations. MCR is offered statewide but due to intensive operational resources requiring case management, PARTS availability is very limited.

Pretrial Services staff had the opportunity to receive training on substance use disorders through the KORE (Kentucky Opioid Response Effort) grant initiative and through a State

Opioid Response SAMHSA grant awarded to the Cabinet of Health and Family Services, Department of Behavioral Health. The RESTORE summits (Responsive Education to Support Treatment in Opioid Recovery Effort) were held regionally allowing more staff to attend. The short-term, pretrial parameters in which staff interact with defendants does not allow them to see the long-term effects of substance use disorder. This training provided much needed insight and information on a disorder staff see daily.

### Alcoholic Beverage Control – (Allyson Taylor)

The Kentucky Department of Alcoholic Beverage Control (ABC) regulates the production, distribution and sale of alcoholic beverages within the Commonwealth. Each entity involved in the production, distribution or sale of alcohol interacts with the Department. The statutory mission of the agency is the prevention of underage access to alcohol. To that end, ABC actively empowers licensees to serve alcohol responsibly through effective programs and policies. ABC stresses compliance through an understanding of the law and utilizes enforcement tools to gain it.

#### Education

The Department provides Server Training in Alcohol Regulations (STAR) training. This program, which is completely online, trains and educates the people who work with, sell and serve alcohol in Kentucky. The main goals of STAR are to reduce alcohol sales to minors and intoxicated persons, provide information on the potential liabilities associated with producing, distributing, serving or selling alcoholic beverages. Participation in the program results in a better trained and informed workforce for retail establishments. Upon completion of the course and passing the exam, individual server participants are awarded a certification from the Commonwealth of Kentucky, which is valid for three years. The Department trains thousands of individuals annually. The training is encouraged for city and county ABC Administrators, prevention groups and law enforcement officers.

During 2019, the online STAR training was utilized by 15,549 students who participated in the online training program. Our passage rate overall was 98%.

In addition to the STAR training program, the Department conducted special trainings to organizations that sell and serve alcohol at temporary locations during 2019, such as music festivals, civic organizations and schools. Further, upon request, the Department coordinates with various industry and community awareness groups, city councils, schools and prevention entities to provide similar information and training.

## Enforcement

ABC Investigators are vested with full police powers to enforce all state laws. Investigators are strategically located throughout the Commonwealth to maximize their special emphasis on the enforcement of the state's alcohol laws on a daily basis, and placing particular emphasis on the prevention of underage sales and consumption. The Enforcement Division conducts and engages in alcohol compliance strategies such as Operation Zero Tolerance (OZT).

The OZT program monitors retailer compliance by enlisting 18-20 year old investigative aides (minors) who attempt to purchase alcoholic beverages at licensed premises throughout the state. If a sale is made to an investigative aide during an OZT compliance check, the employee who makes the sale routinely is cited to criminal court and an administrative citation is issued against the licensed establishment. OZT compliance checks are randomly conducted at licensed premises throughout the year. The goal of the Division is to raise retailer awareness of checking IDs at the point of sale and preventing youth access to alcoholic beverages. During the 2019 calendar year, the Division conducted 634 OZT checks resulting in 87 alcohol purchases with a compliance rate of increased compliance rate of 86%.

In 2019, ABC continued in an extended contract by the Food and Drug Administration (FDA) to enforce provisions of the Family Smoking Prevention and Tobacco Control Act of 2009. Under the law, tobacco retailers will be inspected to ensure they are complying with new marketing and sales standards. In these tobacco inspection operations, investigators employ 16-17 year old aides who attempt to purchase tobacco products at retail outlets. These checks are designed to ensure retailers are not selling tobacco products to minors.

There were 4083 FDA inspections at retail establishments across the Commonwealth of Kentucky in 2019. The inspections resulted in 188 underage tobacco purchases for a 95% compliance rate similar to that of 2018.

Another part of the tobacco prevention initiative is the federal Synar Survey. The Synar survey is part of the Substance Abuse Prevention and Treatment Block Grant. The grant gives support to public health initiatives, prevention measures and educational programs for substance abuse. If compliance rate falls below 80%, the funds can be decreased by up to 40%.

The Synar compliance checks are conducted during the summer when youth are not in school. Investigators are assigned to perform inspections at randomly selected retail outlets by a third party entity. The goal of the survey is to maintain a high rate of

compliance through education and prevention efforts and the data collected during the survey shows the success of those ongoing efforts.

During the Synar inspection, investigators enter a retail outlet. After the establishment is determined to be safe by the investigators, the teen investigative aide enters and attempts to purchase tobacco products. If the employee and/or retailer sell tobacco products to the investigative aide, an ABC investigator will issue an administrative citation to the suspected violator for the violation of KRS 438.310. The investigator will seize the tobacco product from the investigative aide and process it as evidence until a hearing is held and/or the case is resolved. If no sale is made to the investigative aide, the investigative aide and the investigators leave and proceed to the next assigned inspection. The management of each retail outlet is later notified of the results (compliance/non-compliance) of the inspection. In 2019, the Enforcement Division conducted 368 Synar tobacco checks resulting in 11 violations and a compliance rate of 97%.

Please contact Commissioner Allyson Taylor at the Department of Alcoholic Beverage Control at 502-782-1000, or email at [info@abc.ky.gov](mailto:info@abc.ky.gov), with any questions or for additional information.

### [American Cancer Society – Kentucky Chapter \(Vacant\)](#)

No Report Submitted

### [American Heart Association \(David Sloane- Shannon Smith\)](#)

The American Heart Association is a voluntary health organization dedicated to reducing death and disability due to heart disease and stroke. Because tobacco use is one of the major risk factors for heart disease and stroke, preventing and reducing tobacco use among children and adults is one of the association's top priorities. Our efforts in this area primarily take the form of advocacy initiatives to promote policy and environmental changes that will have a positive impact on tobacco use and initiation.

The American Heart Association works with the American Lung Association, the American Cancer Society, the Campaign for Tobacco Free Kids and other key partners on all tobacco related advocacy activities. Policy initiatives are based on best practices guidelines for comprehensive tobacco prevention and cessation programs as well as healthy lifestyle choices and heart disease prevention campaigns.

#### **State Policies:**

- **Tobacco Free** - Repeal the tobacco retail preemption law.

Senator Julie Raque Adams is the sponsor for this legislation. Bill # has not been assigned yet. This bill targets preemption as it relates to the sale and distribution of tobacco and e-cigarettes, allowing local communities the choice to set policy addressing local needs.

- **Healthy Eating** – Require construction standards for bottle filling stations in all newly constructed or renovated schools. Floor Majority Leader Rep Bam Carney is the bill sponsor.
- **Healthy Eating and Active Living** – Strengthen nutrition, physical activity and screen time standards in early childcare facilities.

**Local Policies:**

- **Healthy Eating**- Lexington- Advocate for a healthy vending policy to ensure healthier food and beverage options are offered in public buildings and locations.
- **Active Living** - Louisville- Strengthen Louisville’s complete street policy to ensure it addresses health equity, transparency and community input.

[American Lung Association \(Shannon Black Baker\)](#)

The American Lung Association (ALA) is dedicated to preventing lung disease and promoting lung health. Founded in 1904 to fight Tuberculosis, the American Lung Association is America’s oldest nonprofit voluntary health organization. The American Lung Association carries out its mission using three basic strategies: education, advocacy and research. Considering that tobacco use is the most preventable cause of lung disease in our culture, the American Lung Association works closely with key partners to change local, state and federal policies to decrease the numbers of tobacco related deaths.

The American Lung Association’s policy goals in this area are based on best practice guidelines for comprehensive tobacco prevention and cessation programs and primarily take the form of advocacy and educational tobacco cessation programs.

The American Lung Association continues to support policy changes that can result in lowering tobacco utilization and preventing people, including youth, from starting smoking. The American Lung Association supported increasing the tobacco tax in Kentucky in past years and notes that Kentucky is still way below the national average cigarette tax rate. Raising cigarette taxes results in an increased demand for cessation services and a decrease in the overall smoking rate in Kentucky by \$1.00.

ALA continues to support smoke-free laws in local communities throughout Kentucky. Kentucky now has 23 communities that have passed comprehensive smoke-free

laws and 16 others with less strong smoke-free laws. We are a part of the Smoke-free Kentucky Coalition which is working for a statewide smoke-free law. Currently, Susan Westrom is sponsoring a House bill to make all public places SmokeFree in the state. We have advocated for this legislation and will lobby legislators to make sure it is passed this legislative session.

The American Lung Association also offers: public education about the consequences of tobacco use; a free call center to answer questions regarding lung health and provide counseling on quitting smoking; assistance to a network of support groups around the state for people and their families who are dealing with chronic lung disease. Finally, the American Lung Association offers a variety of school based programs for youth and continuing education opportunities for health care professionals to ensure the most up to date information is available on lung

### **Cabinet for Health and Family Services (Acting Secretary, Eric Friedlander)**

#### **Cabinet for Health & Family Services - Department for Behavioral Health, Developmental and Intellectual Disabilities (Phyllis Millspaugh)**

#### **Behavioral Health Prevention and Promotion Branch (Patti Clark, Branch Manager)**

#### **Adult Substance Use Treatment and Recovery Services Branch (Maggie Schroeder, Branch Manager)**

Prevention services provided through the Department of Behavioral Health, Developmental and Intellectual Disabilities are guided by the Prevention and Promotion Branch and funded through Substance Abuse and Mental Health Services Block Grant for Substance Abuse Prevention and Treatment and discretionary grants received by the department for this purpose. All funding is leveraged to ensure maximum outcomes from resources.

DBH submitted a new Block Grant Plan to SAMSHA in August. Based on data from the Kentucky Incentives for Prevention survey, two priorities were identified: youth e-cigarettes use and underage drinking. These two priorities will drive DBH prevention efforts for the next two-year Block Grant planning cycle.

#### **Funding Sources**

Prevention receives about 22% of SAPT Block Grant funds to deliver primary prevention programs to individuals who do not require treatment for substance abuse. The majority of these prevention dollars are allocated to the state's network of Regional Prevention

Centers (RPCs) housed within the Community Mental Health Centers (CMHCs), which includes for Prevention Enhancement sites focusing on specific substances or topic areas. Prevention funds allow RPCs to deliver high-quality training and technical assistance on the Strategic Prevention Framework (the Center for Substance Abuse Prevention's planning model), to KY-ASAP local boards and prevention coalitions throughout the state. RPC staff are or are training to become Certified Prevention Specialists who work with communities to ensure that the prevention strategies they implement address the needs of the community and that those strategies are evidence-based or best practices. Sustaining outcomes – not necessarily the programs that achieve them -of prevention services are also built into service delivery. The RPCs are community consensus builders and are instrumental in supporting communities to establish tobacco- and alcohol-related ordinances such as smoke-free policies, keg registration, and mandatory responsible beverage server training.

Prevention services were also delivered during 2019 with resources from the PFS 2015 grant, the State Targeted Response Grant, State Opioid Response Grant, and Zero Suicide Initiative. Additionally, many of the Regional Prevention Centers serve as the fiscal agents for their local ASAP boards and for DFC community grants, and attempt to align work with these entities as possible to ensure effective use of resources and increased outcomes from efforts.

- **PFS 2015** – addresses use of prescription drugs, heroin and suicide, especially among service members, veterans, and their families (SMVF)
- **Kentucky Incentives for Zero Suicide (KIZS)** – provides prevention, intervention and postvention support to communities and care providers to address suicide risk among residents
- **State Opioid Response** – provides capacity and resources to implement community-based prevention services to address opioid use and related consequences
- **State Targeted Response** – provided support to deliver the SAMHSA Opioid Prevention Toolkit training to community members, first responders, and prescribers

DBH applied for a \$2 million dollar Robert Wood Johnson Foundation to reduce tobacco-related health disparities. Kentucky's proposal focused on building the capacity among low-income, rural communities throughout the state to mobilize and implement local tobacco/nicotine policies and to enhance advocacy for state level policies aimed at changing tobacco/nicotine norms and reducing prevalence across the lifespan.

In collaboration with the Kentucky Office of Drug Control Policy local boards, Foundation for a Healthy Kentucky, Interact for Health, the Department for Public Health's Tobacco Prevention and Cessation Branch, and the University Kentucky School of Nursing, the project would provide guidance and technical assistance for local planning efforts. The grant money would have been directed to the Kentucky-ASAP local boards to fund smoke-

free policy and other tobacco prevention efforts. The proposed grant objectives focused on building capacity of the KY ASAP local boards to:

- Improve community readiness and capacity for implementation of local smoke free policies in low income rural communities,
- Mobilize communities to support state-wide tobacco policies to reduce access to tobacco/nicotine,
- Engage the target population to increase perception of harm of e-cigarettes among youth and adults,
- Increase target population access to tobacco/nicotine cessation services, and
- Establish a tobacco policy consortium to formalize and enhance coordination/support between state stakeholders.

Kentucky's proposal made it to the third round of the review process but unfortunately did not make it the fourth and final round of funding. However, the Prevention and Promotion Branch is currently looking at ways to fund the proposal through other prevention grants.

The Prevention staff in partnership with the REACH evaluation team have been working on a statewide plan so that our prevention providers can respond proactively to any eventual changes in the state's marijuana laws.

### Guiding goals and target substances

Prevention services offered through DBH support the four goals of SAMSHA's Strategic Initiative # 1. The four goals of the Strategic Initiative # 1 are:

1. With primary prevention as the focus, build emotional health, prevent or delay onset of, and mitigate symptoms and complications from substance use and mental illness.
2. Prevent or reduce consequences of **underage drinking** and **adult problem drinking**.
3. Prevent **suicides** and attempted suicides among populations at high risk, especially military families, LGBTQ youth, and American Indians and Alaska Natives.
4. Reduce **prescription** drug misuse and abuse.

The Regional Prevention Centers (RPCs) work to build the capacity of local coalitions to effect community changes that will reduce both the social and retail availability of alcohol to underage youth. Strategies to reduce the social availability of alcohol include educating parents about the health and legal consequences of providing alcohol to youth and by passing laws such as Social Host ordinances, which hold adults accountable for knowingly allowing youth to consume alcohol on their property. Strategies to reduce retail availability of alcohol to underage youth include laws such as Keg Registration, and Responsible Beverage Servers Training. Keg Registration requires wholesalers or retailers to attach a



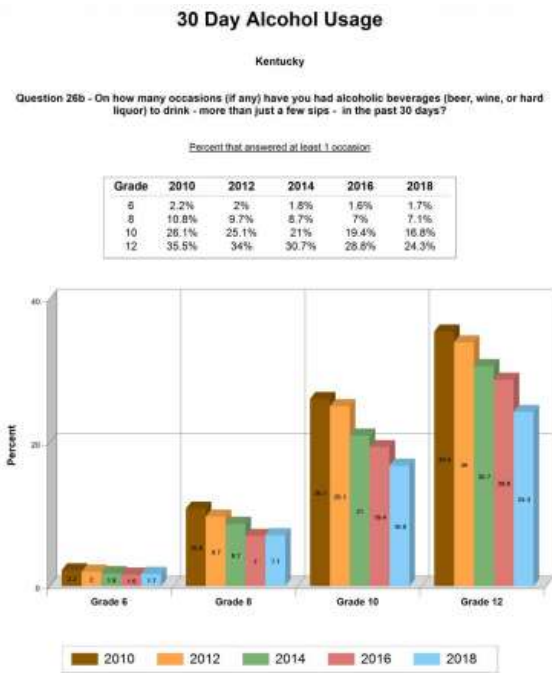
tag, sticker, or engraving with an identification number to keg so that they can be traced back to the purchaser in the event that they are found at field parties.

Through its Block Grant, DBH continues to provide funds to community coalitions to implement alcohol compliance checks, party patrols, Responsible Beverage Server (STAR) training for restaurant and bar staff, evidence-based school curriculums for middle school and high school, conduct social norms campaign, and provide training on alcohol awareness for high school coaches. Under-age alcohol use was determined to be a state priority and is the main priority of the SAMSHA Block Grant plan. The work of Regional Prevention Centers, KY-ASAP Local Boards and prevention coalitions have had a significant statistical impact in reducing youth and adult alcohol consumption. The 2018 Kentucky Incentives for Prevention Survey results are now available and show continued decline in underage drinking. For more information on efforts to prevent underage drinking in Kentucky please go to:

<http://www.kyprevention.com/>

DBH continues to pursue strategic initiatives relating to populations of high risk. Suicide prevention efforts have been conducted primarily through federal discretionary funding, which has now ended. In order to maintain efforts. Research shows that mental health is significantly correlated to substance use with 45% of youth who died by suicide between 2013 and 2016 had been using alcohol at the time of their death. Additionally, 25% had been using another substance when they died.

As a result, DBH has leveraged resources from the SOR and the PFS 2015 grants to expand suicide prevention programs throughout Kentucky, including delivery of gatekeeper trainings, and implementation of the peer-led school change program, Sources of Strength. However, data indicates that issues among youth related to psychological distress and suicidal behavior are increasing. The 2018 KIP survey results show that the number of past 30-day psychological distress, past-year suicide ideation and suicide attempts have risen in all grades surveyed. Key activities include increasing awareness of suicide risk, building capacity of community partners to connect those at risk to available resources, increasing access to care through the National Suicide Prevention Lifeline by increasing the number of Kentucky crisis lines accredited, and training clinical providers to assess, manage, and treat suicide risk.



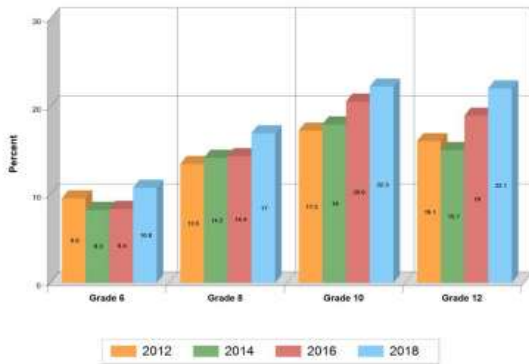
### 30 Day Serious Psychological Distress

Kentucky

Question 20 - The K6 scale is a clinically validated brief screening scale for non-specific psychological distress, like depression and anxiety.

Percent who scored 13 or higher on the K6 scale

| Grade | 2012  | 2014  | 2016  | 2018  |
|-------|-------|-------|-------|-------|
| 6     | 9.6%  | 8.3%  | 8.4%  | 10.8% |
| 8     | 13.5% | 14.2% | 14.4% | 17%   |
| 10    | 17.3% | 18%   | 20.6% | 22.3% |
| 12    | 16.1% | 15.1% | 19%   | 22.1% |



KIP SURVEY  
 Note: The K6 is a validated scale for assessing serious psychological distress among adolescents. Scoring involves converting the K6 to a 0-24 scale and using the validated cut point of 13 to assess the prevalence of serious psychological distress. The K6 scale is utilized in several national surveys including NSDC, MRPS and the National Health Interview.

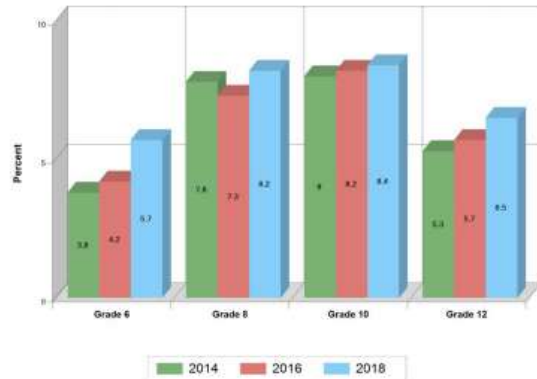
### Past Year Suicide Attempts

Kentucky

Question 24 - During the past 12 months, how many times did you actually attempt suicide?

Percent that answered at least 1 time

| Grade | 2014 | 2016 | 2018 |
|-------|------|------|------|
| 6     | 3.8% | 4.2% | 5.7% |
| 8     | 7.8% | 7.3% | 8.2% |
| 10    | 8%   | 8.2% | 8.4% |
| 12    | 5.3% | 5.7% | 6.5% |



KIP SURVEY  
 Note: This question first appeared on the 2014 version of the KIP Survey.

The PFS 2015 serves as the cornerstone of our non-medical use of prescription drug (NMUPD) prevention efforts, allowing us to direct resources and services to the SMVF population to address NMUPD abuse on a wide-scale in every county of the state. We are also leveraging resources through the State Targeted Response and State Opioid Response grants to increase capacity to deliver prevention services. The survey data shows that past 30-day past prescription drug misuse decreased in grades 10-12, while grades 6 and 8 saw a minimal increase of one tenth of a percent. Cumulatively we have reduced illicit prescription drug use across all grades surveyed by about 17 percentage points. The graph below provides detailed data for each grade level from 2004 to 2018.

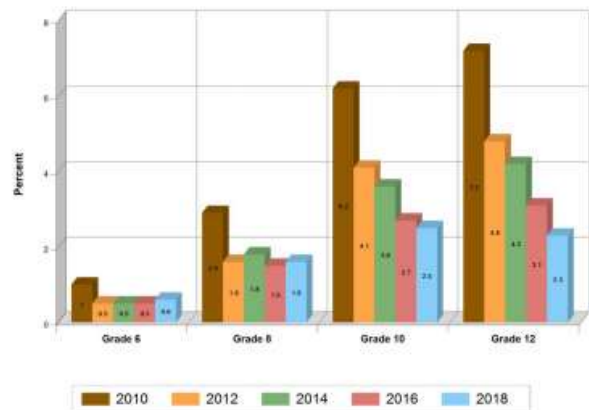
### 30 Day Prescription Drug Usage

Kentucky

Question 38b - On how many occasions (if any) in the past 30 days have you taken narcotics or drugs that require a doctor's prescription, without a doctor telling you to take them?

Percent that answered at least 1 occasion

| Grade | 2010 | 2012 | 2014 | 2016 | 2018 |
|-------|------|------|------|------|------|
| 6     | 1%   | 0.5% | 0.5% | 0.5% | 0.6% |
| 8     | 2.9% | 1.6% | 1.8% | 1.5% | 1.6% |
| 10    | 8.2% | 4.1% | 3.6% | 2.7% | 2.5% |
| 12    | 7.2% | 4.8% | 4.2% | 3.1% | 2.3% |



In addition to these four goals, prevention professionals work at the state and community level to address additional prevention needs that have been identified during local needs assessments, including use of **e-cigarettes/vaping, marijuana, nicotine, and stimulants**. The goal of prevention services is to increase a community's ability to reduce the risk factors

that lead to use of these substances, and increase protective factors that buffer community members from consequences. The current DBH system includes Prevention Enhancement Specialists who focus on: underage drinking and adult problem drinking; nicotine use, marijuana (position vacant) and suicide.

### **Target populations**

Prevention services are provided across the lifespan to all Kentucky residents, with a significant focus on youth and service members, veterans and their families (SMVF), and LGBTQ youth and young adults. Additional emphasis is placed on engaging the faith community in community-based efforts to reduce substance use. The majority of services are community-based and universal in nature, with the intent of covering as many residents of the Commonwealth as possible. The DBH systems includes a Prevention Enhancement Specialist focused on engaging the faith community in community-based prevention efforts.

### **Focus areas for 2019**

#### **1. Capacity building of prevention workforce**

**Trainings** – Building workforce capacity has been a focus of 2019, with RPC staff and those from related sectors attending trainings designed to increase capacity to:

- Assess needs in the community and develop work plans (Logic Model Training, 85 people trained)
- Deliver training and technical assistance to communities (98 trained)
- Understand foundational prevention theory and the Strategic Prevention Framework; 130 prevention practitioners were trained in three offerings of the Substance Abuse Prevention Skills Training (SAPST), which provides knowledge and skills to implement effective data-driven prevention programs, practices and policies that reduce behavioral health disparities and improve wellness
- Increase community collaboration to support expanded prevention delivery
- Increase capacity to deliver Too Good for Drugs to communities. Each of the 14 sub-recipients trained at least two staff members to deliver the curriculum. They then delivered the curriculum directly to students in 10-session increments and then participated in train-the-trainer sessions in order to train school staff and community members to support continued delivery.
- Eastern Kentucky University is embedding the SAPST into its public health curriculum. One university professor, who also maintains CPS certification and serves on the certification board, is being trained in the SAPST during the virtual training in February. A second professor is also being trained. The goal is to increase the workforce capacity of those who earn a public health degree in supporting the community-level prevention work across the state.

**Certified Prevention Specialists** - Ten new prevention providers were approved to sit for the Certified Prevention Specialist certification exam during 2019 and January 2020, taking to 81 the number of prevention specialists in Kentucky holding the certification. Approval comes with 150 hours of training, 2000 hours of work in prevention, 100 hours of supervision from a current CPS certified prevention specialist, submission of a portfolio of training verification, and passing a 200-question exam. The certification is administered by the International Certification and Reciprocity Consortium for substance use prevention and treatment professionals.

**Internship program** – Through the SOR grant, DBH has worked with colleges and universities across Kentucky to place students in Regional Prevention Centers and at the state agency to develop a prevention workforce pipeline. Twenty-five college students have or are working in prevention agencies and of those six have been placed in full-time prevention positions to date.

## 2. Youth empowerment

Research shows that youth who are empowered to become change makers in their community have a greater impact on prevention efforts. Focus has been placed on supporting youth in delivering prevention services in their community while guiding adults in utilizing a youth empowerment framework. Efforts to move prevention toward a youth empowered framework include:

- Partnership with the Kentucky Association of Sexual Assault Programs to provide a statewide youth leadership conference and grant program designed to encourage and equip youth to take action in their communities, while providing small grants to be used toward their initiatives. One hundred youth from across Kentucky attended the inaugural EmpowerKy conference in June in Bowling Green. Five grants have been made to youth attending the conference to implement projects in their community.
- Trainings by the Dover Youth2Youth program from Dover, New Hampshire, focused on equipping youth to become change makers, and guiding adults to support their efforts
- Hiring of 14 youth engagement prevention specialists (one in each RPC) to support youth empowerment in the communities they serve
- Statewide assessment of current youth organizations and identification of those specifically addressing behavioral health prevention topics

## 3. Community collaboration

In order to fully understand and address a community's substance use issues, all sectors of the population must be engaged and equipped to understand the local situation and identify appropriate evidence-based programs, practices and policies. Local engagement is vital for the success of prevention services. In order to increase community engagement, 2019 efforts include:

- Hiring 14 Collaboration Specialists (one in each RPC) to engage and empower community members to implement prevention interventions in their communities
- Conducting statewide assessment of community coalitions to determine their breadth of engagement and readiness to provide prevention services
- Conducting a statewide assessment of the skills and knowledge of members of community coalition member to develop a resource of technical assistance experts
- Increasing capacity of collaboration specialists and other prevention providers to engage a diverse group of community partners through trainings and attendance at national conferences

#### 4. Policy implementation

To ensure long-term sustainability of prevention outcomes, interventions must be accompanied by the implementation of policies and procedures, regulations, ordinances, and laws that increase the likelihood that outcomes will sustain. To this end, DBH has promoted the following policy work in 2019:

- EIRF/SBIRT policy for schools – each school that implements a DBH-supported curriculum must also assess their policies and procedures related to early identification, referral and follow up of students at risk for substance use and suicide. Schools then develop a work plan to address the gaps in their capacity to support at-risk students
- Promotion of smoke-free ordinances at community/school level (to include vaping)
- Promotion of social host ordinances to decrease social access of alcohol products
- Promotion of state-level tobacco-free legislation (Tobacco 21)
- Review of all proposed legislation to identify impact of on prevention initiatives and potential substance use outcomes
- Inclusion in contracts the requirements to address policy implementation

#### 5. Surveillance

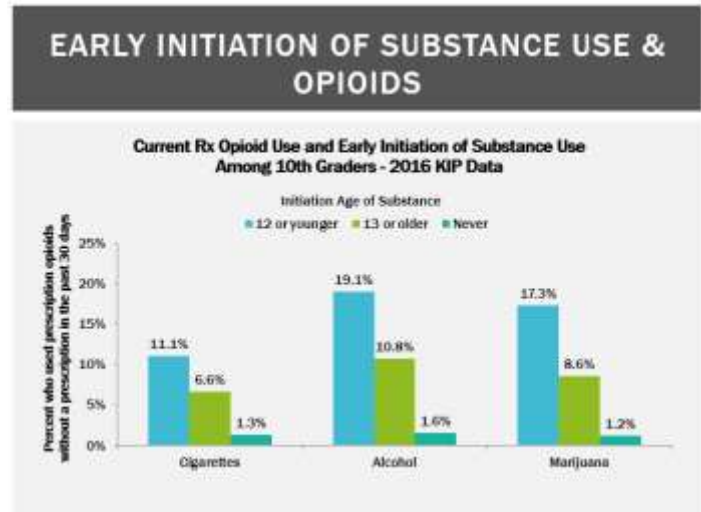
Data-driven prevention strategies ensure that efforts are focused on the specific needs of the local community. During 2019, the following initiatives focused on increasing knowledge of the prevention needs across the state:

- Completion of a statewide needs assessment – each RPC completed an 18-month in-depth needs assessment that considered not only the consequence and consumption patterns of each of the 120 counties, but also looked at the available resources and readiness of coalitions and other prevention organizations to address substance use at the local level. That needs assessment identified capacity building (98% of counties), suicide

(83%), tobacco 69%), alcohol (63%) and marijuana (56%) as priorities for Regional Prevention Centers to address.

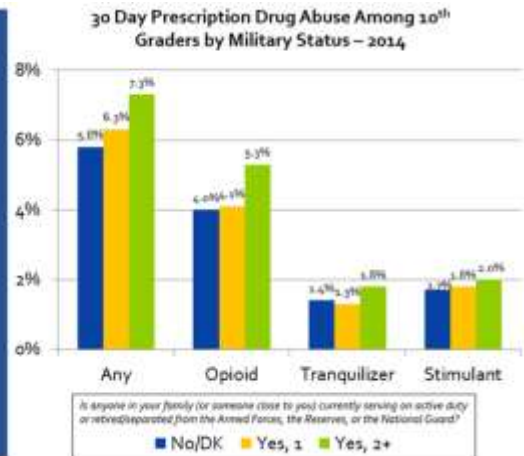
- KIP survey administration - Increased the number of school districts completing the Kentucky Incentives for Prevention (KIP) survey. In 2018, 151 school districts and 128,000 students participated, including Jefferson County, whose students completed the survey for the first time in history providing invaluable information for urban students. Administration included two additional school districts and 16,000 additional students.
- State Epidemiological Outcomes Workgroup – the SEOW, charged with surveillance for prevention in Kentucky, identifies the needs for intervention delivery. During 2019, the SEOW increased membership with six new members, including the KORE project manager and evaluation director, two representatives of the Kentucky Office of Health Data and Analytics, an ECU Public Health department professor, and a representative of the Kentucky Department of Medicaid Services.
- SEOW members are investigating additional questions to add to the KIP survey for the 2020 administrations. Additions will focus on investigating e-cigarette and marijuana use, as well as adult connectedness, social media use, and sleep. Demographic questions are being adjusted to give a more complete view of youth at risk for substance use.

- The SEOW analyzed age-of-onset data for gateway drugs (tobacco, alcohol and marijuana) for 10th graders who took the 2016 KIP Survey and found that the earlier students reported using tobacco, alcohol or marijuana, the higher their prevalence of opioid use, heroin use, problem behavior and behavioral health problems. The report confirms the importance of delaying onset of usage of gateway drugs and that money invested in tobacco prevention can, indirectly reduce illicit drug use in the long term.



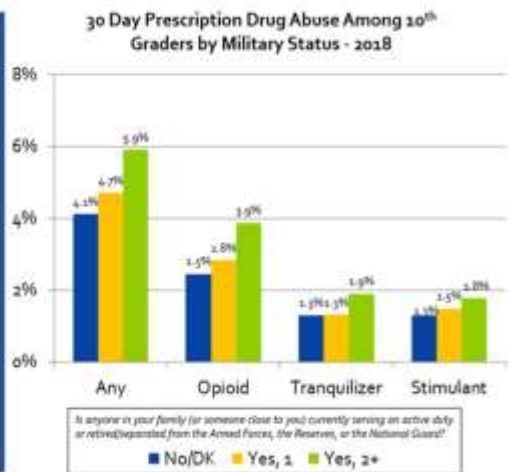
- The SEOW produced an evaluation report tracking opioid use among military-connected and non-military connected youth in Kentucky. The report shows statistically significant decreases of opioid and all prescription drug abuse among non-military and military-connected youth.

Students in Military Families:  
Substance Abuse

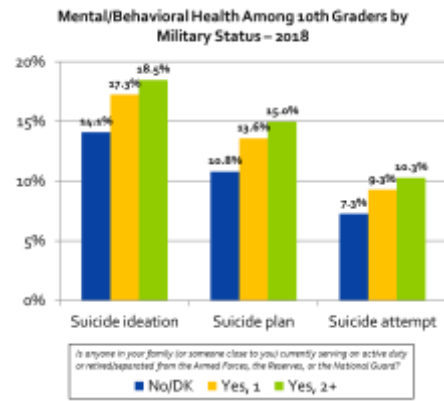
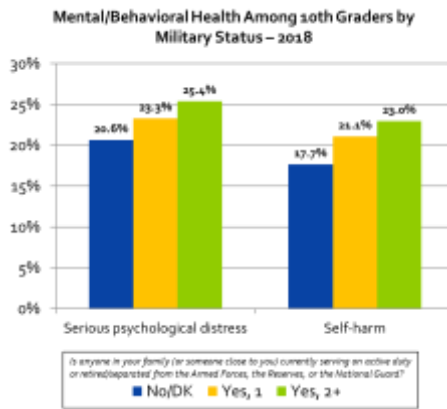
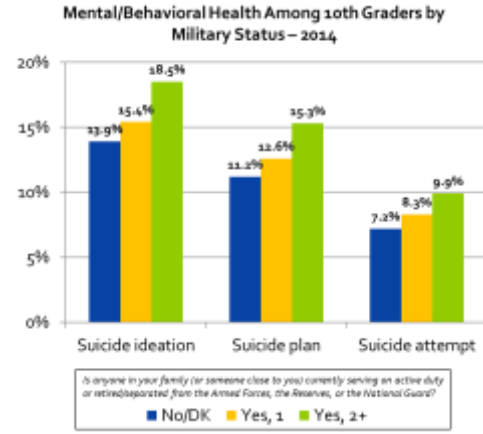
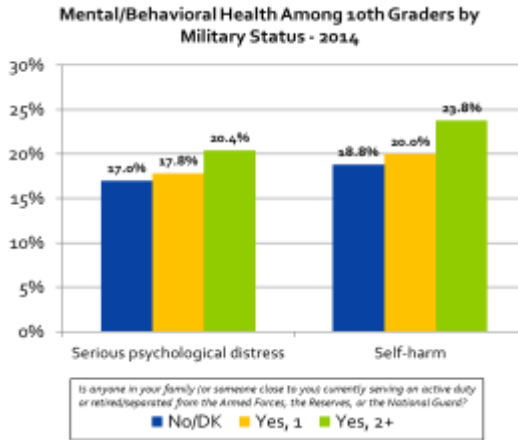


Opioid use among youth most at-risk (youth with two or more military connections) dropped from a baseline of 7.3% in 2014 to 5.9% in 2018. While use among youth with one military connection dropped from 6.3% to 4.7%. This report confirms that we are reaching military-connected youth through our universal prevention strategies.

Students in Military Families:  
Substance Abuse



- The SEOW analyzed KIP 2019 data for mental health indicators among military-connected youth compared to our 2014 baseline data and found that while substance use among military-connected youth has decreased, mental health indicators have not. These trends, however, are in line with those for non-military-connected youth. Overall Kentucky, as well as the rest of the nation, is seeing an increase in mental health issues among youth.





## Prevention interventions by program/grant

### PFS 2015

The Division of Behavioral Health Prevention and Promotion Branch is now in the fifth year of its Partnership for Success (PFS) 2015 Grant. The PFS 2015 grant focused efforts to address prescription drug misuse, opioids and suicide, especially among the SMVF population by reducing access and increasing awareness of these issues. The Communicare and Pennyroyal CMHC regions were target areas demographically as a result of the location of Fort Knox and Fort Campbell respectively, and the high numbers of military-connected individuals in those communities. RPC staff within these two regions, and throughout the state as a whole, market opioid prevention and suicide prevention services with a special focus on the SMVF population.

Centerstone, in partnership and coordination with DBH, is developing a plan to deliver evidence-based prevention education to military-connected youth. Planning sessions have been held with the Army National Guard Family Readiness program and the Kentucky Teen Council. The Family Readiness program is working to integrate evidence-based prevention programs into their Yellow Ribbon Reintegration Program events. The goal of the Reintegration Program is to assist, collaborate and collaborate with agencies to provide SMVF with information and activities, referrals and proactive outreach services throughout the phases of deployment or mobilization. These events generally last two days and include the whole family. The plan includes expansion statewide once the pilot programming is established.

Centerstone is also reaching military youth by offering a resiliency training at National Guard Youth Camps. This effort, launched in the last quarter of FFY 2019, has reached 150 Army National Guard youth.

Kentucky is writing curriculum for the PACT, an evidence-informed curriculum consisting of 12 half-hour episodes designed to enhance protective factors and build resiliency. The PACT began development in Kentucky River and has expanded statewide. The Program is an evidence-informed response to the Netflix series "Thirteen Reasons Why." The targeted priorities include prescription drug and other drug use, underage drinking, bullying, suicide prevention, and sexual assault prevention. The filming and editing have been completed. Maureen Underwood, the co-developer of Lifelines suicide prevention curriculum offered through

Hazelden, is providing curriculum writing services pro-bono for this project. She will work with the Prevention Program Manager Patti Clark, with guidance from youth, parents, and school staff on the materials to make them as relevant as possible. The goal is to roll out the curriculum for pilot schools in the spring. The Kentucky River PFS 2015 Regional Coordinator was interviewed on Kentucky Educational Television. This interview was aired statewide. She has also spoken about the PACT on several local radio programs. In September, a statewide press release was issued regarding the programming. For more information, please visit: <http://columbiamagazine.com/index.php?sid=105507>

The “Dinner Table Project” created by Four Rivers Behavioral Health Regional Prevention Center has expanded its scope to become a statewide program implemented by all 14 PFS 2015 sub-recipients. The program is based on research that shows that the children of families that share meals together also have better academic performance, higher self-esteem, and a greater sense of resilience, lower risk of teen pregnancy, lower risk of depression, lower rates of obesity, and a lower likelihood of developing an eating disorder! The Search Institute's 40 Developmental Assets, The Strengthening Families and Youth Thrive frameworks developed by the Center for the Study of Social Policy have been integrated into the Dinner Project Subject matter. It has been especially well-received by elementary-level families. For more information, please visit: [thedinnertableproject.org](http://thedinnertableproject.org). This project has also received press. See <https://www.lanereport.com/119768/2019/12/kentucky-project-aims-to-bring-families-together-at-the-dinner-table/> for more information.

Additional prevention strategies implemented through PFS 2015 in 2019 included:

- Reduction of access, including disbursal of prescription lockboxes and prescription disposal pouches, and prescription take back days
- Media campaigns focused on reduction of access (Monitor, Educate, Dispose or Secure)
- Cultural competency trainings to increase community awareness of risk factors for substance use related to military connectedness
- Gatekeeper trainings to increase identification of those at risk of suicide (e.g. Question Persuade and Refer, Sources of Strength, Applied Suicide Intervention Skills Trainings, Lifelines curriculum delivery)
- Education to youth (Too Good for Drugs)
- Community partnerships.
  - Communicare formed linkages with a local chapter of Heroes Helping Heroes, a peer-to-peer veteran suicide prevention program. The RPC and HHH are co-sponsoring prevention events for veterans.

- Outreach to organizations serving veterans and families (VFW, AMVETS American Legion)
- Involvement in SMVF state and local task forces
- Resiliency building efforts (Sources of Strength, The Dinner Table Project)

### **State Opioid Response (SOR) grant**

Kentucky is leveraging resources from the State Targeted Response and State Opioid Response grants to enhance Block Grant and other discretionary funding. The State Opioid Response Grant includes a strong prevention component with \$6 million to build prevention capacity. These prevention components are targeted at building the capacity of the statewide prevention network. Direct service prevention activities are included.

#### **SOR prevention activities include:**

- Capacity building (workforce, ability to deliver training and technical assistance, youth empowerment, collaboration) – 28 new positions, multiple trainings and access to resources to increase capacity of RPC staff to meet needs of their communities
- Too Good for Drugs – more than 200 schools and 130,000 students participated in the first semester of implementation (fall of 2019); additional schools are coming on board for the spring 2020 semester. More than 120 individuals have been trained to deliver the school-based programming
- Sources of Strength – more than 60 schools have begun implementation of the peer-led resiliency building program that empowers youth to create change in their schools around help seeking for substance use, suicide and violence.
- Positive Action- the Boys and Girls Clubs across Kentucky are implementing the evidence-based program Positive Action with their youth clients. More than 1,000 youth were served during the 2019 with this program.
- Youth Mental Health First Aid – training of trainers have been held to increase the capacity to deliver YMHFA across the state. New trainers total 30 with an additional 30 trainers to be trained in the spring of 2020.

### **Synar**

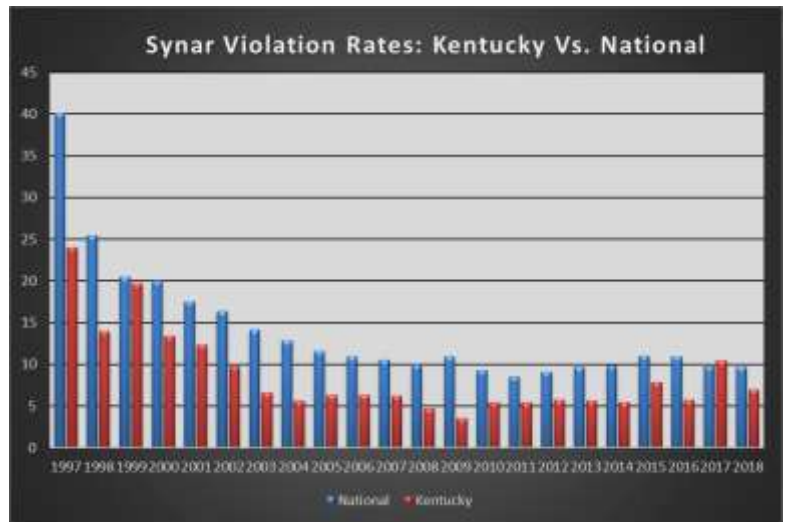
DBH also focuses efforts on prevention of tobacco among youth. The Synar program is federally mandated and managed by the Substance Abuse Mental Health Services Association (SAMSHA) through prevention block grant funds. The goal of the Synar program is to reduce accessibility of tobacco products and electronic nicotine devices to youth under the age of 18. This is accomplished through the implementation of three evidence-based strategies:

- Enforcement of state and federal tobacco laws
- Tobacco Retailer Education
- Community Mobilization

Enforcement

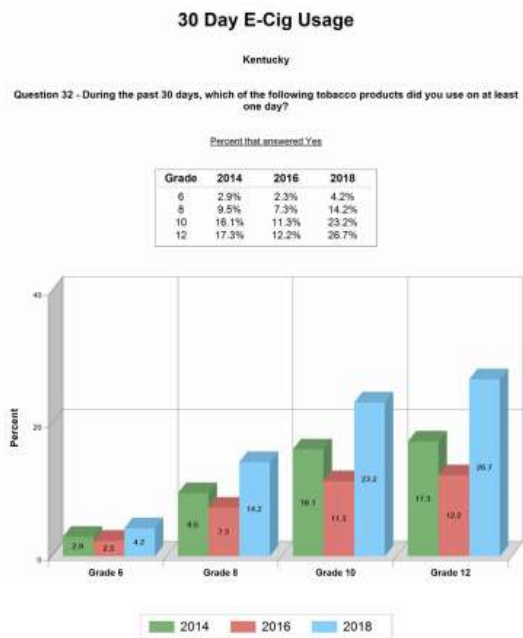
Enforcement efforts are implemented through random, unannounced inspections of tobacco retailers throughout the state conducted by the Department of Alcoholic Beverage Control. Following SAMSHA’s Synar Survey Estimate Sample Size statistical protocol, a sample is drawn from all the tobacco retailers in the state. Trained youth under the age of 18, accompanied by undercover Alcohol & Beverage Control (ABC) enforcement officers, attempt to purchase nicotine products from the randomly selected retailers. Stores who sell to youth are cited and fined.

During the 2020 Synar Survey, conducted in the summer of 2019, 364 tobacco retail outlets were inspected. This represented an increase of 116 inspections over 2018. This year’s violation rate (the percentage of stores that sold tobacco to underage youth) was 3%, Kentucky’s lowest violation rate since the Synar program began in 1997. Kentucky has routinely maintained a violation rate well below the national average for all years except 2017. (See graph below. National rates for 2019 and 2020 are currently not available).



This year, due to the alarming increases in youth consumption of e-cigarettes, the Synar program tripled its number of e-cigarette inspections from 35 in 2019 to 120. Our 2018 KIP data shows that E-cigarette consumption doubled in all grade levels.

Most alarming is the fact that in 2019 40% (8,152) of Kentucky youth who vaped in the past 30 days had never used a tobacco product in their life. Up from 18.2% in 2016. DBH partners with its state-level stakeholders and the RPCs



to increase awareness about the harmful effects of vaping and to counter the vaping industry's narrative that e-cigarettes have minimal or no negative impact on health.

DBH, in collaboration with the Department for Public Health's Tobacco Prevention and Cessation Branch, the University of Kentucky School of Nursing and the Kentucky Prevention Network, conducted three four-hour trainings in 2019. More than 200 teachers, school staff, health department staff and tobacco prevention coalition members attended these trainings. In addition, staff and regional prevention providers delivered multiple presentations to KY-ASAP Local Boards and high schools around the state.

The DBH Synar Program sponsors and coordinates the TRUST Compliance Check Program. The TRUST Compliance Check Program aims to reduce illegal sales of tobacco, perceived access to tobacco, and tobacco use prevalence rates by using rapid and public rewards and recognition for clerks and retailers/outlets that do not sell tobacco to minors. At the core of the program is the use of teams of underage youth (16-17) who, with parental permission and under the supervision of a law enforcement officer, enter stores and try to buy tobacco products. They provide immediate recognition and rewards, such as gift certificates, to clerks who do the "right thing" and give reminders to those who do not. The program works to reinforce and recreate positive behaviors as a means of reducing illegal tobacco sales to minors, or youth tobacco use. Tobacco retailers who do not sell tobacco products to underage youth often are publicly congratulated through newspaper articles or web sites to promote the positive norm. All retailers visited are given TRUST brochures, which provide up-to-date information on state and federal tobacco laws and are encouraged to take the online TRUST training. This year 10 coalitions from 10 different counties signed up to participate in the TRUST program. Each participant can do up to 20 compliance checks.

Through implementation of the TRUST Tobacco Compliance Check Program, the Division of Behavioral Health aims to promote positive community interactions with retailers and provide them with resources to further reduce access of tobacco products to underage youth.

#### Tobacco Retailer Education

During 2019, 1,427 tobacco clerks received training on state and federal tobacco laws through the online Kentucky Tobacco Retail Underage Sales training program. On December 20, Congress passed a law raising the minimum purchase age for tobacco in all states and territories to 21. The TRUST training will have to be revised to make it compatible with the new tobacco 21 environment. To access the TRUST online training please visit: <http://abc.ky.gov/Education/Pqages/default.aspx> Scroll down to Tobacco Retailer Underage Sales Training and click on "Begin Training."

## **Prevention Enhancement System**

Kentucky utilizes a Prevention Enhancement System (PES) to provide focus on certain priorities. The state currently funds four priority areas through Block Grant and one through suicide prevention and SOR funding. The Prevention Enhancement Site (PES) system was created in 1998 through a State Incentive Grant from the Center for Substance Abuse Prevention (CSAP), to do research and provide technical assistance and training to Regional Prevention Centers and local coalitions on best practices in Alcohol, Tobacco and Other Drug (ATOD) abuse prevention.

The PES has been restructured since the last report. An extensive evaluation was conducted to ensure that: 1) that PES were providing quality services to communities, 2) that the services provided aligned with service gaps, 3) and that services were not duplicative of the work of other agencies. The findings of the evaluation revealed that much of the work of the Substance Exposed Infants (SEI) PES was very similar in scope to the work already being done by the service providers of the KY Moms Matter program. These findings prompted the Prevention and Promotion Branch to close the SEI PES. The Tobacco Prevention Enhancement Site was renamed the Nicotine Prevention Enhancement Site to account for Electronic Nicotine Devices which use liquid nicotine rather than combustible tobacco. The site was moved from Ashland to Lexington Kentucky where it is more centrally located. The PES serve Regional Prevention Centers, who then serve KY-ASAP local boards, prevention coalitions, faith-based groups and other local stakeholders.

Working within the Strategic Prevention Framework process, the Prevention Enhancement Sites are instrumental in increasing the effectiveness of local community efforts to decrease the availability of alcohol, tobacco and other drugs. An evaluation of the PES system is currently being conducted to determine what impact it is having on the state's prevention goals. The following section highlights some of the major accomplishments of the Prevention Enhancement Sites for 2019.

### Alcohol Prevention Enhancement Site:

The Alcohol Prevention Enhancement Site, located in the New Vista Regional Prevention Center disseminates the latest research on alcohol environmental strategies, and provides technical assistance and training on implementing and evaluating effective environmental strategies to reduce alcohol availability to underage youth.

Youth alcohol use is decreasing. Based on the 2018 KIP,

- 10th grade alcohol 30-day use decreased by 2.4 percentage points in 2018 (17%) vs. 2016 (19.4%), and decreased in 9/13 regions (Centerstone RPC6 data could not be compared across years)

- KY 10th grade binge drinking in the last two weeks decreased by 1.4 percentage points in 2018 (9%) vs. 2016 (10.4%), and decreased in 10/13 regions (Centerstone RPC6 data could not be compared across years)
- The KY 10th grade alcohol 30-day use (16.8%) were below the 2018 national average from the 2018 monitoring the Futures Study (18.6%) (Monitoring the Futures Study)
- KY 10th grade youth access to alcohol decreased by 4.5 percentage points in 2018 (47%) vs. 2016 (51.5%) according to youth self-reported data for the question of how easy it would be if they wanted to get alcohol
- Data from the Kentucky Alcoholic Beverage Control suggest KY youth are likely to have more trouble buying alcohol as the state's non-compliance rate and youth retail access to alcohol are decreasing. KY underage youth decoys were able to purchase alcohol at KY alcohol retailers 1 in 11 times in 2018 (9%), compared to 1 in 10 times in 2017 (10%), 1 in 9 times in 2016 (12%), and 1 in 8 times in 2015 (13%). All alcohol retailers checked by the KY ABC in 2017 were in compliance with KY alcohol laws, meaning the retailers refused to sell alcohol to minors. The percentage of alcohol retailers in-compliance by refusing to sell alcohol to youth under-21 when checked by the ABC increased between 2016 and 2017 in 8 of 14 KY regions (KY ABC, 2015-2018).

The Alcohol PES activities for 2019 include:

- The Alcohol PES provided technical assistance to Regional Prevention Centers and community coalitions statewide to implement policies at the local level designed to have a positive and lasting effect on the community environment; thereby, reducing the harmful consequences of illegal use and abuse of alcohol. In 2019, five new ordinances and four state laws were passed relating to alcohol regulation, public consumption, overconsumption, age verification to reduce sales to minors, and impaired driving. Cumulatively, 30 Kentucky communities have enacted Social Host Ordinances, 113 Kentucky communities have Mandated Responsible Beverage Server (RBS) Training Ordinances, and 14 Kentucky communities have passed Mandated Keg Registration Ordinances.
- The Alcohol PES delivered 19 presentations and community-based trainings educating 479 youth and 434 adults on the latest underage and high-risk drinking research and evidence-based prevention strategies.

#### The Nicotine Prevention Enhancement Site

The Nicotine PES is based in Lexington and is operated through the New Vista Regional Prevention Center. The Nicotine PES completes research on tobacco/nicotine environmental strategies and distributes the latest research on nicotine and tobacco use, clean indoor air policies, secondhand smoke and other tobacco and nicotine health-related issues.

The Nicotine PES provides technical assistance and training on implementing and evaluating effective environmental strategies to Regional Prevention Centers and local prevention groups and coalitions. The Nicotine PES assumed other duties and offered technical assistance to Regional Prevention Centers and substance abuse prevention coalitions on nicotine related issues.

The Nicotine PES activities for 2019 include:

- Presented to middle schools and after-school groups on electronic cigarettes and the health effects with nicotine use.
- Presented to school system personnel on trends of electronic cigarettes in youth and health effects associated with youth usage.
- Researched information for school systems, coalitions, and other Regional Prevention Centers on nicotine, electronic cigarettes, and tobacco use in Kentucky.
- Provide technical assistance and support to tobacco subcommittees for Drug Free Lex (Fayette County ASAP) and Harrison/Bourbon County ASAP groups.
- Created information materials focusing on electronic cigarettes use and health effects for middle school, high school, parents/community members, and school systems to increase awareness of the consequences of e-cigarette use

#### Faith Based and Community Initiatives PES:

The Faith-Based and Community Initiatives Prevention Enhancement Site is managed through Communicare Regional Prevention Center. The goal of the Faith-Based PES is to provide resources to faith-based groups in order to increase their empowerment to engage in prevention efforts in their communities. Faith leaders can play a critical role in how prevention messages are received and having the support of the faith-based community strengthens the comprehensive and long-term initiatives of substance abuse prevention.

The Faith-Based PES 2019 activities include:

- Assisted Regional Prevention Centers in hosting local faith-based conferences and began the planning process with a third region to host a conference in Spring 2020. (Region 1, 8 and 7)
- Provided technical assistance to the Faith Based Coalition, YES Groups, and ASAP groups
- Provided technical assistance to staff of the Regional Prevention Center system on effective ways to engage the faith community in prevention
- Presented to the Boyle County ASAP Faith Lunch-n-Learn - Incorporating Prevention Into Faith
- Assisted Regional Prevention Centers in integrating projects within the community; including Sources of Strength, Too Good For Drugs, The PACT, and Dinner Table Project



### Marijuana PES:

The Marijuana Prevention Enhancement Site (MPES) is hosted by River Valley Behavioral Health Regional Prevention Center. The Marijuana PES utilizes the Strategic Prevention Framework to mobilize communities in assessing, building capacity for, planning, implementing, and evaluating marijuana prevention initiatives. The Marijuana Prevention Enhancement Site position is currently vacant efforts are under way to the fill the position.

The Marijuana PES 2019 activities include:

- Held statewide training in Elizabethtown on the consequences of recreational marijuana in Colorado. The presenter was from HIDTA.

### Zero Tolerance

Zero Tolerance is an assessment and referral program for individuals under the age of 21 who have been convicted of driving under the influence of alcohol. Participants are referred by the court system and are screened to determine if they are appropriate for education or treatment. For a first-offense under-21 DUI, Kentucky law requires a prevention assessment and an education or treatment component. If education is appropriate, Kentucky provides a 16-hour evidence-based alcohol and other drug education for individuals between 18 and 20. For those under the age of 18, the education is a 12-hour evidence-based alcohol and other drug education curriculum. If further assessment is needed, or treatment is appropriate, the individual is referred outside of prevention, but must complete the recommendation in order to clear the individual's driving record.

### Youth Empowerment System (YES)

The goal of the Youth Empowerment System (Y.E.S.) is to build capacity for Kentucky youth to plan, implement and evaluate substance use/misuse prevention strategies in their schools and communities. YES is led by a steering committee composed of representatives from each of the Regional Prevention Centers. A primary responsibility of the Y.E.S. steering committee is to evaluate and fund yearly grant applications and plans submitted by youth groups across the state. The plans are based on local substance use/misuse needs assessment data and contain appropriate evidence-based strategies. During 2019, the number of YES groups across the state increased from 32 to 36.

## **ADULT SUBSTANCE USE TREATMENT AND RECOVERY SERVICES BRANCH (Maggie Schroeder, Program Manager)**

### Kentucky Recovery-Oriented System of Care Initiative

Recognizing that gaps and barriers exist within our current system of treatment for substance use disorders, the Adult Substance Use Treatment and Recovery Services Branch of the Kentucky Department for Behavioral Health, Developmental, and Intellectual Disabilities (DBHDID) has taken the initiative to work in collaboration with the Community Mental Health Centers to assist and support the implementation of programs to enhance treatment services throughout the state.

CMHCs, along with the Departments of Public Health, Medicaid, Community Based Services, and other provider partners are working together to identify and integrate all fundamental components of prevention, treatment and recovery services to create a system that promotes sustainable recovery.

Recovery-Oriented Systems of Care (ROSC) aim to place focus on individualized, person-centered care by identifying and connected clients to the appropriate evidence-based services. ROSCs reach across the Continuum of Care to interact with clients from prevention to post-treatment with the understanding that there is no one way to recovery.

### Kentucky Opioid Response Effort (KORE)

Guided by the Recovery-Oriented System of Care Framework and funded by SAMHSA's State Targeted Response to the Opioid Crisis and State Opioid Response grants, the purpose of the Kentucky Opioid Response Effort (KORE) is to implement a comprehensive targeted response to Kentucky's opioid crisis by expanding access to a full continuum of high quality, evidence-based opioid prevention, treatment, recovery, and harm reduction services and supports in high-risk geographic regions of the state. Informed by data on populations most in need, the KORE focuses on four primary populations: opioid-related overdose survivors, pregnant and parenting women with an opioid use disorder (OUD), justice-involved individuals with an OUD, and children, transition-age youth, and families impacted by OUD. The KORE dedicates much needed resources to address eight overarching goals: 1) prevent the initiation of opioid use, 2) prevent the misuse of opioids, 3) expand harm reduction activities, 4) improve early identification of intervention need, 5) increase treatment access and retention, 6) increase access to evidence-based treatment including utilization of medications for opioid use disorder (MOUD), 7) expand recovery support, and 8) build a state infrastructure that supports the implementation of high-quality, evidence-based practices.

Examples of prevention programs and initiatives include: the delivery of primary prevention education curriculum such as Sources of Strength across 84 middle and high schools, with 3,974 peer leaders and 1,112 adult leaders trained, and Too Good for Drugs delivered to 72,545 youth across 172 elementary, middle and high schools; a Statewide Opioid Stewardship (SOS) Program to reduce opioid overprescribing and improve safe opioid use, which currently has signed commitments from 116 of the 127 hospitals in Kentucky to participate; and enhancements to the prescription drug monitoring program. Examples of Harm Reduction programs include: the implementation of a statewide naloxone distribution program that distributed over 20,000 naloxone kits in 2019; and an Opioid Overdose Toolkit training provided to 2,201 prescribers, first responders, and community members between 2017 and 2019.

Examples of treatment programs include: the establishment of bridge clinics in emergency departments within six hospital systems to increase rapid access to treatment; integrated obstetrics and substance use disorder treatment for pregnant and parenting women; treatment and methadone access programs to decrease barriers to residential and methadone treatment; provider education and trainings to improve and expand the workforce; expansion of access to medications for OUD (MOUD), including access to Vivitrol for individuals reentering the community from correctional settings; OUD training in primary care settings; the expansion of START (Services Sobriety Treatment and Recovery Team) and TAP (Targeted Assessment Program) programs to increase services for pregnant and parenting women involved with the child welfare system; and the development of eight Quick Response Teams that allow public safety officials to work with behavioral health providers to serve individuals who have experienced an opioid-related overdose or complication.

Examples of recovery support programs and initiatives include: employment support for people in recovery and the reentry population; an employer toolkit to help employers better support employees through increased knowledge of OUD, treatment options, and the impact of insurance and workplace policies on employees in recovery (available here: <https://www.khcollaborative.org/opioid-employer-toolkit/>); the expansion of recovery support groups and programs such as Young People in Recovery, Double Trouble in Recovery, and SMART Friends and Family; the expansion of the peer support workforce specifically around substance use disorders, whereby 117 Peer Support Specialists and Peer Support Supervisors received OUD-specific and recovery planning training; the expansion of peer support services in non-traditional settings including syringe service programs, emergency departments, primary care settings, and domestic violence shelters; the establishment of six recovery community centers in high-risk regions that provide centralized resources for community-based recovery supports including peer support,

housing, employment, transportation, and education; increase access to recovery housing that supports residents' access to and utilization of MOUD; and the development of the Access to Recovery (ATR) program that aims to reduce barriers to maintaining recovery by linking individuals to treatment and recovery support and providing vouchers for services that increase recovery capital for which there is no payer source.

Other initiatives include: OUD training that was delivered to 1,394 child welfare staff and 1,291 judges and other court staff to better equip the Kentucky child welfare and court systems with the knowledge and tools to make informed, evidence-based decisions that help guide children, families, and court-involved individuals toward quality treatment and lifelong recovery; Casey's Law trainings were delivered at 27 events reaching 237 families affected by OUD, medical and behavioral health providers, and circuit court staff; and the development of the Recovery Housing Network to oversee recovery residency certification (i.e., providing a safe housing environment conducive to recovery). The recovery housing network will also provide technical assistance around recovery residencies and their standardization.

#### KY Moms Maternal Assistance Towards Recovery (MATR)

The KY Moms program focuses on serving women who are pregnant and who are at-risk for alcohol, tobacco, and other drug use during their pregnancy. Specific prevention services are designed to provide prevention education services to this at-risk population of women. For women who meet the DSM substance use diagnostic criteria for a substance use disorder, case management services are also available. KY Moms connects pregnant women at the appropriate point during their care with prevention services through substance use treatment. These services assist in reducing harm to Kentucky children from maternal substance use during their pregnancy and up to 60-days post-partum. KY Moms is primarily funded by Tobacco Settlement funds through the Governor's Office of Early Childhood and the Substance Use Prevention and Treatment Block Grant.

As part of the KIDS NOW Early Childhood Development Initiative, which supports the KY Moms program, the Kentucky Behavioral Health, Adult Substance Use Treatment & Recovery Services Branch is implementing a statewide effort aimed at increasing the health of all Kentucky babies by decreasing the use of alcohol, tobacco, and other drugs during pregnancy.

KY Moms works to improve outcomes for mothers, infants and families receiving services. To achieve this, DBHDID is currently working with each CMHC region to identify evidence-based and promising practices and improve access to needed resources to increase the effectiveness of the KY Moms prevention and case management services. With the expansion of Medicaid services in 2014, the availability of substance use treatment services increased across the state. The ultimate goal of the KY Moms program is to provide

services to ensure that pregnant and parenting women, their infants and families receive the services they need to obtain and maintain safe, stable, and healthy lifestyles.

Currently, referrals to the program come from the Department for Community Based Services (DCBS), local public health departments, private doctors, public health programs, hospitals, other community agencies and self-referrals. Services are provided in 14 community mental health centers across Kentucky and include substance use prevention education and substance use case management services for pregnant and parenting women.

In July 2015, the KY Moms (previously known as KIDS NOW Plus) program expanded from eight (8) regions to fourteen (14) regions in Kentucky. The purpose of the program expansion was to provide an integrated continuum of services across Kentucky. In 2017, this program enhanced its program services once again and changed its name to KY Moms Maternal Assistance Towards Recovery (MATR).

Some components that comprise this initiative include:

- A Medicaid benefit package providing a full continuum of substance use prevention and treatment services to Medicaid-eligible women who are pregnant or are post-partum up to 60 days. Pregnant women are eligible for prevention education services if they are at risk for using substances during their pregnancy.
- A full continuum of substance use prevention and treatment services for non-Medicaid eligible pregnant women and women with dependent children during their pregnancy and up to 60-days post-partum.
- Outreach efforts aimed at better identifying pregnant and postpartum women in the community, who are in need of substance use prevention or treatment services and engaging them in those services.
- Collaborative efforts between substance use prevention and treatment services to provide a full continuum of care to pregnant women in need of all types of services.

#### Supporting Mothers to Achieve Recovery through Treatment and Services (SMARTS)

Beginning in 2015, the purpose of the SMARTS grant was to expand treatment services and to increase capacity for evidence-based medication assisted treatment (MAT) and other recovery support services to pregnant and postpartum women with opioid use disorders through a partnership with two Community Mental Health Centers (Cumberland River in Corbin and Bluegrass.org in Lexington). SMARTS has thus far provided services to 98 women. To date there have been thirty births in the SMARTS program. There have been fifteen (15) births among mothers on the no medication pathway, with zero (0) experiencing NAS symptoms. There have been fifteen (15) births among mothers receiving

MAT services, with six (6) children experiencing NAS symptoms with an average NICU stay of 7.2 days. Note that the standard of care requires a minimum 5-day NICU stay for opioid exposed infants so this average would never be below 5 days. The 7.2-day figure is well below average NICU stays for opioid exposed infants whose mothers are not receiving treatment.

The grant ended August 2018. However, services have continued with additional funding.

#### Serenity House

Established in 2016 in partnership with DBHDID, Serenity House is an eight (8) bed residential treatment program for pregnant women with substance abuse disorders that functions as part of the Mountain Comprehensive Care Center. Residents can stay at Serenity House up to nine (9) months during pregnancy and up to six (6) post-partum with their infant. A multidisciplinary approach to recovery from substance use is a critical focus for the staff of Serenity House. Residents of Serenity House receive counseling for Substance Use Disorder and other co-occurring mental health disorders, Trauma Informed Care, parenting, Certified Peer Support Specialist services, Targeted Case Management services, Hazelden-Betty Ford Comprehensive Opioid Response with the 12-Steps (COR-12) treatment and self- help groups, Drug Screening and other supportive services. Residents receive assistance in obtaining prenatal care and Medication Assisted Treatment (MAT) as an essential part of comprehensive treatment for opioid dependency. Serenity House offers an array of services that promote recovery, health and wellness of both the mother and the infant. Residents will receive ongoing assessment and aftercare planning that will include referrals to other professional services and community supports.

#### Women's Renaissance Center

The Women's Renaissance Center is a non-profit residential facility with eight (8) beds that provides services to pregnant women diagnosed with a substance use disorder. A multitude of services are provided including medication assisted therapy, trauma informed care, and parent-child interactional therapy as well as safe housing, food, and support in order to promote stability and safety during pregnancy and post-partum period of time. The goal is to provide a warm, nurturing environment for at-risk women with a substance use disorder. Services include mental health, addiction treatment, life skills and parenting skills for a healthy safe pregnancy for mother and child. The stay at the Women's Renaissance Center can last anywhere from 6-9 months. Clients will stay a minimum of six (6) months post-partum in order to manage any post-partum concerns, bonding with their infant and learning infant care, developing and implementing a recovery based lifestyle. Clients will be eligible at the time of discharge to transition into supported housing and outpatient services provided by Centerstone for continued support.

### Office of Drug Control Policy (ODCP) Funding Opportunity

Addressing Kentucky's opioid crisis continues to be a top priority across all levels of government. The General Assembly allocated funds to the Kentucky Agency for Substance Abuse Policy (KY-ASAP) to combat heroin and substance abuse in the Commonwealth and to development an expansion of substance use treatment service and recovery supports. As in previous years, KY-ASAP and the KDBHDID partnered in fiscal year 2020 to distribute up to \$3.25M in funds to twelve (12) CMHCs for expansion of evidence-based substance use treatment services, including medically assisted treatment, in local communities throughout the state. Additionally, in FY20 \$2.8M was awarded to ten (10) providers through a competitive grant application process. Providers addressing Neonatal Abstinence Syndrome (NAS) by developing or expanding comprehensive evidence-based residential treatment services and/or outpatient treatment and recovery supports to pregnant and parenting women with OUD who are transitioning from residential services. The Office of Drug Control Policy within the Kentucky Justice and Public Safety Cabinet entered into a memorandum of agreement with the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities to assist with the selection of provider agencies to receive funds, execute contracts with provider agencies, and provide technical assistance and oversight to awardees.

### Plan of Safe Care

In 2016, Kentucky began planning a project to create a model of Plan of Safe Care initiative that meets the Child Abuse Prevention and Treatment Act (CAPTA) requirements, is multi-disciplinary and intended to support the mother, infant and family prior to and after discharge from the hospital.

In 2017, DBHDID contracted with two CMHC's (Centerstone and Bluegrass.org) to implement a model of integrated services in support of the statewide Plan of Safe Care initiative for pregnant and parenting women with Substance Use Disorder and substance affected infants. In 2018, DBHDID contracted again with the two original CMHC's to continue the Pilot project and added two additional CMHC sites, Adanta and Mountain. In the fall of 2019, DBHDID contracted with an additional 3 CMHC's to expand the Pilot Initiative to a total of 7 sites.

The pilot project utilizes the CAPTA (Child Abuse Prevention and Treatment Act) requirements in developing a system of programs that provide integrated and collaborative services to pregnant and parenting women and their families. The plan is to develop a system of care that is multi-disciplinary, multi-agency, and intended to support pregnant and parenting women, substance affected infants and their families; with a goal of improving the immediate and long term outcomes for the child and family.

The pilot program is intended to identify and coordinate services and supports within each individual community that can be utilized to provide comprehensive, integrated and coordinated services to address the physical, behavioral health, developmental and social

support needs of the mother, infant and family. The project will focus on ensuring that interventions and services recognizes the important role of trauma and adverse childhood experiences in this population, the importance of stabilizing the mother both during pregnancy, in post-partum period, and beyond. In addition to addressing the treatment needs of the mother, the project will coordinate services to provide ongoing supports for the infant, mother and family that focuses on bonding and attachment, positive parenting, and a safe home environment for the infant.

As of January 1, 2020, the seven pilot projects had served over 1,013 pregnant or post-partum women and their infants.

#### Kentucky Care Integration (KCI)

In 2017, the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) was one of three states to be awarded a Promoting the Integration of Primary and Behavioral Health Care (PIPBHC) grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). KCI is a 5 year, 10-million-dollar grant project to improve overall health outcomes in focus populations who have, or are at risk of, developing chronic health conditions through the co-location and bi-directional integration of primary and behavioral healthcare services. The goals of KCI will be achieved via collaborative clinical practices and improved care models to offer a comprehensive service continuum that includes evidence-based screening, assessment, diagnosis, prevention, and treatment according to coordinated, person-centered care plans. KCI is a partnership between DBHDID and two community mental health centers, Centerstone and Mountain Comprehensive Care Centers, and has the broader goal of developing a sustainable model of integrated care that may be replicated and adapted for dissemination across the Commonwealth. Although this is the tenth cohort of integrated care grants awarded by SAMHSA, it is the first in which funding has been awarded to single, state entities. This strategic shift is intended to promote infrastructure development that will support the sustainability of integrated care by leveraging the knowledge and experiences gained through PIPBHC awards to effect change in statewide policies and regulations. To this end, KCI will enable the Commonwealth to identify, address, and eliminate procedural and systemic barriers that may hinder the adoption and sustainable provision of integrated primary and behavioral

#### Older Persons and SUD

While Kentucky has made great strides in addressing SUD in special populations, one population that has been largely unrecognized and underserved, not just in Kentucky, but across the nation is older persons, defined as individuals who are 60+ years in age. 2019 census bureau data projects that for Kentucky, persons who are 50 and older will comprise 38% of the total population by 2040. In looking at persons over the age of 50 with an SUD, a study in 2009 (Han et al) found that the prevalence of SUD in this population will increase



nationally from 2.8 million in 2006 to 5.7 million in 2020. With this in mind, the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) is taking action to developing awareness and link persons in this priority population with resources and programming aimed at providing treatment and supporting long term recovery. These efforts include providing trainings, in collaboration with the Community Mental Health Centers (CMHC's), across the state. A goal of this initiative is to develop a Lifespan Recovery Oriented System of Care. Additionally, DBHDID is developing workshops and other training resources for conferences and other training opportunities sponsored by DBHDID, including the annual Kentucky School on Alcohol and Other Drug Studies. The Adult Substance Use, Treatment and Recovery Services Branch is beginning a targeted public awareness campaign aimed at Older Persons, with the goal to increase access and availability of treatment services and recovery supports specific to this population. The Adult Substance Use, Treatment and Recovery Services Branch is building collaborations with Atom Alliance, DCBS, Area Agencies on Aging and Independent Living (AAAIL's), Local Coordinating Councils on Elder Abuse (LCCEA's) to develop an "all doors lead to recovery" Lifespan System of Care for our Commonwealth.

#### SUD Peer Support Services

The Kentucky DBHDID recognizes the value of having a strong Peer Support Specialist (PSS's) presence as part of the treatment and recovery teams across the state. In an effort to support the Peer Support community, the Adult Substance Use, Treatment and Recovery Services Branch has begun a quarterly newsletter, "The Peer Connection" that is distributed to Peers across the state. Additionally, through collaboration and grant funding with KORE, we have developed multiple Peer specific training opportunities. In understanding the importance of Person Centered Recovery Planning, we are offering training on Recovery Capital Assessment, to aide clients in identifying lasting foundational blocks aimed at sustaining their recovery. The Adult Substance Use Branch understands the unique challenges and insights needed to work with adults who have SUD in a community setting. To address the needs and challenges we have created a two and half day training curriculum that is taught to SUD Peer Support Specialists, as well as Peer Support Supervisors; which is in addition to the 30 hour certification training to become a PSS. We have also worked in partnership with "Intentional Beginnings" to develop a two day, 13 hour, train the trainers in SUD Peer Support where Peers can become certified to teach the supplemental SUD curriculum. This will greatly enhance our ability to provide quality training for our Peer workforce on a more regular basis. In an attempt to highlight the importance of Peers and the work they do, we also ensure that we provide cutting edge workshops for Peers at the annual Kentucky School for Alcohol and Other Drug Studies. Effective January 1, 2020 CMS is allowing for Peer Support Services to be a billable service for Medicare. This will be especially important to our Older Persons with SUD, and we expect to see an increase in the number of certified PSS's in our Commonwealth as a result.

### Cooperative Agreements to Benefit Homeless Individuals (CABHI) Kentucky Grant

In 2019, CABHI Kentucky wrapped up with a no-cost extension year focusing on sustainability and closeout. Beginning in 2015, Kentucky Department for Behavioral Health, Development and Intellectual Disabilities (DBHDID) was awarded a Cooperative Agreements to Benefit Homeless Individuals (CABHI) grant, a three-year, \$5.6 million project. The purpose of this grant was to enhance the infrastructure of treatment service systems to increase capacity and provide accessible, effective, comprehensive, coordinated/integrated, and evidence-based treatment services, permanent housing, peer supports, and other recovery support services to chronically homeless individuals and homeless veterans with substance use, mental health, and/or co-occurring disorders. Focusing on the areas with the greatest capacity to house individuals, DBHDID chose to work in partnership with Kentucky's three most urban Community Mental Health Center regions: Centerstone, Bluegrass, and NorthKey. Each region received funding to increase provision of Assertive Community Treatment (ACT), Housing First, Screening, Brief Intervention, and Referral to Treatment (SBIRT), and SSI/SSDI Outreach, Access, and Recovery (SOAR) models to engage the target populations and connect them with appropriate services. Since implementation began, a total 308 chronically homeless and veteran homeless individuals with serious mental illness (SMI) and/or substance use disorder (SUD) received services under the grant.

### Oxford House Recovery Housing

Oxford House is an evidence-based program that was implemented in Kentucky in 1989, and focuses on the development of self-sustaining, democratically operated recovery homes. At the beginning of 2016, DBHDID began an expansion project to increase the state's capacity to provide housing for those in recovery from substance use disorders. Contracting directly with Oxford House, Inc., Kentucky is provided seven and half staff supporting Oxford House Outreach Services charged with opening new houses and ensuring sustainability of the growing network. Thus far in FY20, 17 new houses been added to the growing network of recovery residences. Since the introduction of this expansion project, Kentucky has expanded to 70 Oxford Houses in the commonwealth, located in Northern Kentucky, Louisville, Owensboro, Henderson, Paducah, Lexington, Bowling Green, Morehead, Somerset, and Ashland.

### Kentucky Recovery Housing Network

Beginning in 2020, DBHDID will implement the Kentucky Recovery Housing Network (KRHN), a voluntary recovery home certification process throughout the commonwealth based on the national recognized standards developed by the National Alliance of Recovery Residences (NARR). Over the last year, DBHDID has been participating in a technical assistance opportunity through the Opioid Response Network (ORN) focused on the standardization and certification of recovery housing in Kentucky. Through this project, DBHDID decided to develop a NARR affiliate in Kentucky. NARR delineates recovery housing into four levels: residential, transitional, supervised, and peer-led. Given our

substance use treatment license, as well as our expanding Oxford House network, the focus of certification will be on supervised and transitional recovery housing help ensure a full continuum of recovery housing options. Additionally, a key component of KRHN will be providing technical assistance to recovery housing operators to ensure individuals in recovery have safe and appropriate recovery housing choices.

#### Service Members, Veterans, and their Families (SMVF) Behavioral Health Initiative

DBHDID and the Kentucky Army National Guard have teamed up to present Operation Immersion, an innovative four-day training event that engages behavioral health professionals and providers who treat SMVF and college students in respective areas of study, and allows them to explore issues unique to the SMVF population. Participants will experience “Basic Training” and some of the challenges faced by our military today, as well as have an opportunity to use virtual reality training simulators that are exclusively used by Service Members to train and prepare for combat. Workshops are provided on TBI, PTSD, Combat Stress, Suicide Prevention, Substance Abuse Prevention and Treatment, Military Sexual Assault and Prevention Program, Comprehensive Soldier and Family Fitness (CSF2), Trauma Informed Care and current best practices to treat military clients and their families.

Kentucky has held eight (8) Operation Immersion events since inception in 2012 at the Wendell H. Ford Regional Training Center. Four hundred and twenty-seven (427) behavioral health professionals/providers have attended this hands-on event to learn about military culture and focus on how to help the SMVF population in Kentucky.

DBHDID is developing a Military Behavioral Health Provider Designation. This designation offers providers an opportunity to receive coordinated training efforts to increase knowledge and provide care that is more adequate to Kentucky’s SMVF population. This designation targets clinical providers working in behavioral health. Prior to receiving the designation, providers will participate in Operation Immersion, complete web-based educational sessions, and receive 2-day in-depth training in suicide prevention assessment, management, and treatment. Following designation, providers will be required to maintain their designation through continued education opportunities, some of which will be provided through Operation Headed Home events. Providers that obtain this Designation will have the opportunity to be featured in a SMVF Resource Guide in order for potential clients to find quality Providers.

#### Kentucky DUI Program

The Kentucky DUI Program is located within the Substance Use Disorder Program Licensure Branch in the Division of Program Integrity. The DUI Program operates under the authority of KRS Chapter 189A and Administrative Regulation 908 KAR 1:310. The DUI regulation was enacted July 1, 1991 when KRS Chapter 189A was amended to mandate all individuals

convicted of a DUI to complete an alcohol or other drug education or treatment program prior to driver's license reinstatement. The DUI Program works to improve the delivery of services of the 130 private and public certified DUI programs conducting 60-65 on-site DUI program reviews annually, as well as conducting daily off-site monitoring via the web-based Kentucky DUI Assessment Instrument (KDAI). In 2016, these programs delivered alcohol and other drug services to approximately 17,859 individuals.

#### Narcotic Treatment Program (NTP)

There are a total of twenty-four (24) NTPs and four (4) medication stations within the state; each provides medication-assisted treatment for individuals whose goal is to reduce and eliminate dependence upon opioid substances. The primary treatment medication provided at these centers is methadone, but a number of sites also are qualified to treat individuals with the medication buprenorphine.

Included in Kentucky's statutory responsibility is the requirement to inspect and evaluate these programs on a periodic basis in order to assure the health and safety of the clients. This control involves the regulation, storage, dosing and administration of the medications to maintain efficacy and verify accountability. In addition, to the ongoing oversight of the NTPs, the Substance Use Disorder Program Licensure Branch in the Division of Program Integrity, is also responsible for the evaluation of requests from the NTPs for approval of waivers or exceptions to the regulations for individual clients.

#### Family Resource Youth Service Centers KY) (T.C. Johnson)

FRYSCKy Coalition promotes a network, including educators, family support practitioners and other human service providers, who strive to remove educational barriers to learning, in order to learn from each other, share resources and collaborate more effectively on behalf of families, children and youth.

The Kentucky Family Resource and Youth Services Centers were established as a component of the historic Kentucky Education Reform Act (KERA) of 1990. The mission of these school-based centers is to help academically at-risk students succeed in school by helping to minimize or eliminate non-cognitive barriers to learning.

These partnerships are critical in efforts on behalf of students to promote:

- early learning and successful transition to school;
- academic achievement and well-being; and
- graduation and transition into adult life.

Each center offers a unique blend of programs and services to serve the special needs of their students and families. Family Resource Centers address the needs of the elementary school population while the Youth Service Centers assists with Middle and High School students and families. Substance Abuse Prevention and Counseling is a **mandated** core component in the Youth Services Centers and is addressed by the Health Services and Referrals mandated component in many of the Family Resource Centers. FRYSC prevention efforts consist of campaigns, presentations, assemblies, Red Ribbon Week activities, Kick Butts Campaigns, student clubs, and brochures. Many of these programs are provided on an on-going basis.

The FRYSCy Coalition and the Division of FRYSC assists with statewide prevention efforts through the professional trainings provided to center coordinators. Information gleaned from these trainings is disseminated throughout the state through the 800+ Family Resource and Youth Service Centers. Coordinators are also representatives on many local community agency boards. As an FRYSCy Coalition representative on the KY ASAP board I have reported prevention efforts and initiatives to both the FRYSCy Coalition and at the local FRYSC regional meeting.

The Kentucky Division of Family Resource and Youth Services Centers in the Cabinet for Health and Family Services shall establish the national standard of excellence in the provision of school-based family support.

### [Kentucky Association of Regional Programs \(KARP\) \(Steve Shannon\)](#)

The Community Mental Health Centers (CMHCs) continue to be very supportive of the initiatives and projects of local ASAP boards either through financial administration and/or participation. The funding from KY-ASAP has been and continues to be a vital sources of funding which can be tailored to the unique needs of local ASAP boards. Local ASAP boards are very similar to CMHCs since both are focused upon community needs as opposed to top-down driven initiatives. The local focus allows for community partners to address initiatives and projects which will impact their respective communities by increasing prevention initiatives and treatment availability both of which are key to the addressing substance use disorders.

The CMHCs have partnered and participated in several distinct activities. Some of which include: school-based awareness and prevention events such as Youth Coalitions and Project Graduation; assist community partners with organizing NARCAN training and distribution; and, Red Ribbon Week activities.

In closing, CMHCs continue to be committed to working with Local ASAP boards to make their communities better!

### [Kentucky Department of Education \(Kevin Brown\)](#)

The Kentucky Department of Education (KDE) continues to prepare and distribute an Annual Safe Schools Statistical Report. This report provides a summary of all behavior violations, including those associated with drugs, alcohol or tobacco use, along with general Safe Schools data in Kentucky public schools. In addition, KDE is working with three (new) Kentucky school districts (Warren County Schools, Henderson County Schools and Bullitt County Schools) as part of the KY AWARE II grant. The purpose of the grant is to improve access to school and community based behavioral health awareness, prevention, early intervention, and treatment services for school age youth. The collaboration between the original districts (KSD, Fayette and Pulaski Counties) and KDE (through the KY AWARE I grant) is completed. However, the KY AWARE grant program will continue into the 2<sup>nd</sup> phase.

Youth Mental Health First Aid (YMHFA) is an evidence-based wellness promotion/mental illness prevention program required to be implemented by all AWARE grantees. Youth Mental Health First Aid builds schools' early intervention and prevention capacity by creating school communities in which all adults are aware of early indicators of mental health concerns and where to find help.

In addition, KDE (through KY AWARE, YMHFA) is increasing help-seeking behaviors and treatment/assessment referrals for youth enrolled in Kentucky's schools. KY AWARE (KDE) is helping schools implement practices that are trauma-sensitive and encourage student resilience. One area of focus is to improve the equity of service access and outcomes, and optimize use of available resources through formalized school mental health referral pathways. Youth Mental Health First Aid (YMHFA) and Trauma Informed Care (TIC) trainers are currently housed in the co-ops, Kentucky Academic & Behavioral Response to Intervention (ABRI), Kentucky Center for Instructional Discipline (KYCID), and KDE provides instruction for school personnel.

The Safe & Supportive Schools Branch (Office of Continuous Improvement & Support, KDE) provides Suicide Prevention training through KDE and the Department of Behavioral Health. This grant targets Opioid use / abuse across Kentucky. KDE has trained over forty (40) schools as of December (2019) with additional schools expressing interest for the coming year. In addition to the 40 schools trained by KDE, additional schools have been trained by the (Sources of Strength) national trainers.

The Safe & Supportive Schools Branch (KDE), (Safe Schools) team has developed and continues to distribute a Safe Schools newsletter to all Safe Schools Coordinators as well

as Directors of Pupil Personnel (DPP's) across the Commonwealth. This newsletter targets topics such as: Opioid use / abuse among KY youth, Missing Children, Child Trafficking, Bus Safety, Persistence to Graduation / Early Warning Tool, Suicide Prevention, Mental Health support for school youth, among other topics as requested.

### Kentucky Department for Public Health (Dr. Steven Stack)

No Report Submitted

### Kentucky Public Health Association (Dana Nickles)

The Kentucky Public Health Association and the Kentucky Health Departments Association continue to engage in advocacy and education with other partners to advance smoke free, harm reduction, and other public health initiatives. Many of our local ASAP organizations have strong involvement with and from the local public health community, including in some instances the local health department director serving as a member of the local ASAP board. Additionally, local health departments have been engaged at various levels in implementing syringe exchange programs and also transitioning the participants in those programs to substance abuse treatment.

### Local Tobacco Addiction Substance Abuse Board – Addiction Recovery Care (Tim Robinson)

Addiction Recovery Care (ARC) operates a network of 38 addiction treatment centers in 16 Eastern and Central Kentucky counties. The organization, headquartered in Louisa, Kentucky, offers a full continuum of care including detox, residential, transitional, intensive outpatient, outpatient, medically assisted treatment (MAT), vocational rehabilitation, and job training. The treatment centers are holistic with CARF-accredited clinical programs, medical services directed by an addictionologist, a Christ-centered spiritual emphasis that includes the 12 steps and chaplaincy care, and a broadening scope of vocational training opportunities for clients.

2019 was a year of growth for ARC, both as an organization and for the clients it serves. Throughout its entire continuum of care, ARC completed 6,165 intakes. The company grew to 548 full time employees and 41 part time employees. During 2019 ARC added 10 new facilities in six different Kentucky counties.

Tim Robinson, CEO and Founder, has represented ARC at various summits and conferences nationwide in 2018. In addition to these speaking opportunities, ARC has continued to grow multiple partnerships with various organizations and agencies including UNITE, Goodwill, SOAR, EKCEP, FAHE, KCTCS, UPike, Pikeville Medical Center, Sullivan University, and others.

ARC has continued to see success in their vocational programs. The Peer Support Specialist Academy (PSSA), a culmination of efforts by ARC, Sullivan University, EKCEP, and SOAR, graduated 75 students throughout the year. The PSSA has continued to see a high success rate, with 80% of all program graduates employed and sober.

In 2019 ARC gained national attention for its “Crisis to Career” approach. The U.S. Department of Health and Human Services launched the Building Evidence on Employment Strategies (BEES) project to study programs taking people from government assistance to taxpayer. ARC has been selected to be one of the 12 programs to participate. Study building occurred during 2019 and the study will kick off February 2020.

[Local Tobacco Addiction Substance Abuse Board – Law Enforcement – Buffalo Trace Local KY-ASAP Board – Maysville Police Department \(Chief Ronald J Rice\)](#)

See Addendum A

[Local Tobacco Addiction Substance Abuse Board – Daviess County Local KY-ASAP Board \(Jeff Jones\)](#)

See Addendum B

[Private Community-Based Organizations - Cumberland River Comprehensive Care Center \(Tim Cesario\) \)](#)

Cumberland River  
Regional Prevention Center  
Accomplishments  
January, 2018 – December, 2019  
RPC Staff  
Jill Owens – Director  
Deborah Hampton – Prevention Specialist  
Rachel Cooper – Prevention Specialist  
Emily Tuttle – Youth Empowerment Prevention Specialist  
Bobbi Jones – Collaboration Prevention Specialist

Our methods for activities, projects, trainings, coalition work, etc. are found in RPC Work Plan, PFS 2015 Work Plan and SOR Work Plan



## January

- \*Completed and submitted Step 3 in Needs Assessment process to DBHDID
- \*Completed and submitted required Monthly Opioids Report to DBHDID
- \*Completed and submitted required PFS Quarterly Report to DBHDID
- \*Worked on Step 4 in Needs Assessment process
- \*Provided KORE Community Training in Harlan County on January 10, 2019, at Cumberland Hope Center. Trained 19 community members.
- \*Provided KORE Community Training in Clay County on January 17, 2019, at Cumberland Valley District Health Department. Trained 26 community members.
- \*Provided KORE Community Training in Laurel County on January 22, 2019, at Laurel County Public Library. Trained 13 community members.
- \*Provided KORE 1<sup>st</sup> Responders Training in Whitley County on January 11, 2019, at Whitley County Emergency Management. Trained 15 1<sup>st</sup> Responders
- \*Provided KORE 1<sup>st</sup> Responders Training in Laurel County on January 15, 2019, at Laurel County Emergency Management. Trained 22 1<sup>st</sup> Responders
- \*Provided KORE 1<sup>st</sup> Responders Training in Rockcastle County on January 15, 2019, at Rockcastle County Emergency Management. Trained 25 1<sup>st</sup> Responders
- \*Provided KORE 1<sup>st</sup> Responders Training in Knox County on January 17, 2019, at Barbourville Volunteer Department Station 2. Trained 25 1<sup>st</sup> Responders
- \*Provided KORE 1<sup>st</sup> Responders Training in Harlan County on January 24, 2019, at Harlan County Emergency Management. Trained 16 1<sup>st</sup> Responders
- \*Attended and participated in Saving Bell January 4, 2019. Provided updated information regarding KY Dept of Ed new law requiring all schools to implement an evidenced based drug prevention curriculum beginning 2019-2020 school year.
- \*Attended and participated in Saving Bell Board meeting January 9, 2019. Approved bi-laws to continue process to become 501 c3
- \*Attended and participated in meeting with Rape Crisis Director/Green Dot Coordinator to discuss SOR grant, Youth Summit and process to recruit youth
- \*Filled Prevention Specialist position
- \*Attended and participated in RPC Director's meeting January 28, 2019 in Lexington, KY
- \*Attended and participated in Step 5 and Step 6 Needs Assessment training January 29-30, 2019 in Lexington, KY

## February

- \*Completed and submitted Step 4 in Needs Assessment process to DBHDID
- \*Worked on Step 5 and 6 in Needs Assessment process
- \*Modified budgets for KORE, SOR, PFS and RPC
- \*Completed and submitted required quarterly reports, 110B, 110D and 110E to DBHDID
- \*Completed and submitted required monthly Opioid Report to DBHDID
- \*Provided KORE 1<sup>st</sup> Responders Training in Clay County on February 8, 2019, at Clay County EMS. Trained 7 1<sup>st</sup> Responders.

- \*Attended Saving Bell coalition meeting February 1, 2019. Networked with new members to build capacity.
- \*Provided consultation and technical assistance to FYRSC coordinators regarding the importance of their participation in future Saving Bell coalition meetings.
- \*Reviewed applications and completed interviews for 2 SOR positions.
- \*Filled Youth Empowerment Prevention Specialist position, applicant completing hiring process
- \*Attended Clay/Jackson ASAP February 14, 2019. Shared follow up on KORE trainings.
- \*Attended in Laurel Health in Motion February 15, 2019.
- \*Attended LCRCORP February 19, 2019. Assisted in planning process of Regional Conference for Rural Community Opioid Response scheduled May 15-16, 2019
- \*Provided consultation and technical assistance to Laurel County Health Department February 19, 2019, regarding RPC's participation in Laurel County's Child Fatality Review Team
- \*Completed Mental Health and Suicide Prevention Awareness training for Whitley County Detention Center February 22, 2019
- \*Participated in power session call February 21, 2019 with Paula Brown, RPC Liaison, DBHDID
- \*Reviewed PFS logic model and budget. Began process to implement PFS projects in local Bell, Knox and Laurel counties.
- \*Attended CFI Supervision in Bell (February 26, 2019) and Knox (February 28, 2019) counties. Shared information regarding PFS grant and provided staff with tools to assist in increasing awareness of behavioral health, SMVF, and suicide prevention needs/resources among youth.
- \*RPC staff participated in My Strength Training, provided by our CMHC.
- \*Called in and listened to Youth Summit Planning meeting, which took place in Frankfort February 27, 2019.

### **March**

- \*Attended Saving Bell coalition meeting March 1, 2019. Attended presentation on marijuana by UNITE. Discussed voucher program for R-Tec, printing of Resource Guide and submission of final paperwork to become 501 3c.
- \*Attended Regional Interagency Council (RIAC) meeting at CAPERS March 7, 2019. Encouraged to attend by DBHDID to see how our programs can collaborate.
- \*Worked on step 5 and 6 in Needs Assessment process
- \*SOR Youth Empowerment Prevention Specialist started March 8, 2019
- \*New SOR staff and Prevention Specialist attended Prevention Academy in Louisville, KY, required by DBHDID
- \*Implemented PFS School Spirit/School and Community Bonding projects at Bell County High School March 26, 2019
- \*Implemented PFS Drug Prevention Education Program at Bell County High School, Bell

County Alternative School and Middlesboro Alternative School March 18, 2019

\*Implemented PFS School Spirit/SMVF Awareness Campaign project at Knox Central High School March 27, 2019

\*Implemented PFS Drug Prevention Education Program at Knox County Day Treatment, Knox County Learning Academy and CRBH Barbourville Outpatient TOPS Program March 27, 2019

\*Staff attended Prevention Academy in Louisville, KY, March 11, 12 and 14, 2019

\*Completed and submitted Monthly Opioid Report to DBHDID March 15, 2019

\*Attended LCRCORP and Laurel Health in Motion March 19, 2019

\*Called in and listened to Youth Summit Planning meeting, which took place in Frankfort March 27, 2019.

\*Attended Knox County Forum on Substance Abuse Prevention March 21, 2019

\*Attended Bell County Forum on Substance Abuse Prevention March 21, 2019

\*Completed and submitted required monthly Opioid Report to DBHDID

\*Participated in power session call March 21, 2019 with Paula Brown, RPC Liaison, DBHDID

\*Provided Consultation and TA to Bell and Knox County Schools FRYSC and YSC Coordinators regarding KDE Elementary Bullying Resiliency lessons available

\*Implemented School/Community Bonding Project at Middlesboro Middle School March 2, 2019

\*Participated in Frakes School Center Health and Career Fair March 29, 2019. Distributed and provided prevention information on ATOD.

\*Contacted school districts in our region and promoted TGFD

## April

\*Completed and submitted all remaining steps in Needs Assessment process

\*Filled Collaboration Specialist position

\*Completed FY20 RPC Spending Plan and KY Moms Application/Budget - emailed to corporate office to be uploaded to DBHDID

\*Attended Saving Bell coalition meeting April 5, 2019

\*Completed and submitted Monthly Opioid Report to DBHDID

\*Completed and submitted PFS Quarterly Report to DBHDID

\*New SOR staff and Prevention Specialist attended SAPST in Lexington, KY, required by DBHDID

\*Attended Regional Interagency Council (RIAC) meeting at CAPERS April 5, 2019. Encouraged to attend by DBHDID to see how our programs can collaborate.

\*Met with Clay County Schools administration staff and promoted TGFD

\*Participated in phone call with Shelly Steiner, DBHDID April 17, 2019 and received technical assistance and consultation regarding SOR

\*Staff attended RPC Directors Meeting and PDS Training April 30-May 2, in Lexington, KY

\*Attended LCRCORP meeting. Participated in mini Emergents workshop to learn how

this process will assist in building capacity of coalition members

\*Provided training to new staff (Collaboration Specialist, Youth Empowerment Specialist and Prevention Specialist)

### May

\*Staff attended RPC Directors Meeting and PDS Training April 30-May 2, in Lexington, KY

\*Staff attended Saving Bell coalition meeting May 3, 2019. New staff were introduced.

\*Met with Horizon Heath, May 10, 2019 regarding partnering on prevention efforts and becoming member of their coalition, in which they are applying for HRSA grant to address opioid issues in our region

\*Worked on entering our counties substance abuse priorities, as identified in our needs assessment, into the new Prevention Data System

\*Attended "The PACT" meeting in Frankfort, May 8, 2019, in which we set on planning the committee. "The PACT" consist of videos (13 episodes), teacher curriculum, parent curriculum and has peer led youth components. "The PACT" addressing SA, suicide prevention, violence, trauma, bullying and military issues and is primarily for high school aged youth.

\*Participated in power session call May 9, 2019 with Paula Brown, RPC Liaison, DBHDID

\*Attended Clay/Jackson ASAP meeting May 9, 2019. Provided consultation on SOR and TGFD

\*Attended Laurel ASAP meeting, meeting May 9, 2019. Provided consultation on TGFD

\*Completed and submitted Monthly Opioid Report to DBHDID

\*Staff attended and participated in Laurel County Regional Opioid Response Conference may 16, 2019

\*Staff presented at CRBH Motivational Interviewing training May 17, 2019. Shared information on prevention efforts related to PFS work plan.

\*RPC Director provided training for CRBH Board Members on RPC Drug Prevention Education and Suicide Prevention Cinema Ads. May 20, 2019. 14 CRBH Board Members present.

\*Staff attended JCHIPS Health Coalition in Jackson County May 21, 2019. Shared information on SOR Grant. Gathered contact information and resources for Collaboration Specialist and Youth Empowerment Specialist deliverables.

\*Worked on finalizing budgets for RPC, PFS, SOR and KY Moms

\*Participated in conference call regarding final Youth Summit Planning meeting May 22, 2019

### June

\*Completed preparation for Joint Commission visit week of June 3-7, 2019

\*Staff attended Marijuana Prevention Training specifically provided for RPC staff, through Marijuana PES, June 5, 2019

\*Entering our counties substance abuse priorities, as identified in our needs assessment, into the new Prevention Data System

- \*Partnered with Crossroads and implemented Drug Prevention Education Program at Compass and London Outpatient Adolescent IOP June 4, 2019
- \*Staff provided Substance Abuse Prevention and Treatment Resources for Laurel County Health Department and HOFNOD Program (Hook On Fishing Not On Drugs) in Clay County
- \*Staff attended and participated in RIAC meeting June 6, 2019
- \*Staff attended and participated in Saving Bell June 7, 2019
- \*Completed and submitted Monthly Opioid Report to DBHDID June 15, 2019
- \*Participated in power session call June 13, 2019 with Paula Brown, RPC Liaison, DBHDID
- \*Staff provided Harlan County Deputy Judge Executive with information to assist with application process for ASAP Board funding
- \*Completed and submitted Monthly Opioid Report to DBHDID
- \*Finalized budgets for RPC, PFS, SOR and KY Moms
- \*Staff attended RPC Directors Meeting June 19-20, in Lexington, KY
- \*Staff participated in conference call June 14, 2019 regarding development of state wide project “Partners In Prevention” to share information and resources regarding substance abuse prevention to community partners.
- \*Staff attended Rockcastle UNITE meeting June 12, 2019 and shared information about Youth Empowerment and Collaboration positions/job duties regarding working with our county’s coalitions
- \*Staff attended Laurel Health in Motion June 21, 2019
- \*Staff attended LCRCORP June 25, 2019

## July

- \*Staff received Prevention Data System Technical Assistance from DBHDID July 10, 2019
- \*Staff participated in Southern KY AHEC conference, Practitioners Role: Safe Opioid Prescribing and Misuse July 11, 2019
- \*Completed and submitted Monthly Opioid Report to DBHDID July 15, 2019
- \*Completed and submitted PFS Quarterly Report to DBHDID July 15, 2019
- \*Director participated in Marijuana Work Plan call with Marijuana PES July 16, 2019
- \*Staff participated in the filming of The PACT in Hazard in conjunction with KY River Regional Prevention Center July 17, 2019
- \*Staff participated in conference call for statewide project Partners in Prevention July 18, 2019
- \*Our RPC was randomly selected to participate in Kentucky’s Synar Cover Study to assist in obtaining an updated list of tobacco outlets in select area in our region (Corbin, London, Harlan County and Whitley County). Staff conducted Synar visits July 19, 30, and 31 2019.
- \*Staff attended KY School of Alcohol and Other Drug Studies July 22-25, 2019
- \*Staff attended an special session on Collaboration with Carlton Hall for RPC system ,

following KY School, July 26, 2019, as required by DBHDID

\*Staff attended meeting with DBHDID and SAMHSA regarding SOR evaluation. Discussed benefits of program and utilization of funds. Cumberland River Youth Empowerment Specialist served as representative for all Youth Empowerment Specialist's in KY

\*Staff participated in Lone Jack School Center Readifest (Bell County) July 29, 2019. Disseminated SA prevention/Suicide prevention information and resources to students and parents.

### August

\*Staff attended Too Good For Drugs Implementation Training at Lake Cumberland State Park August 1-2, 2019

\*Staff attended Saving Bell coalition meeting August 2, 2019

\*Staff participated in Back-To-School Fairs for Yellow Creek Elementary School (Aug 1), Bell County High School Freshmen (Aug 1) Bell County High School 10<sup>th</sup>-12<sup>th</sup> Grades (Aug 5), Frakes School Center (Aug 5) and Bell Central School Center (Aug 6). Disseminated SA prevention/Suicide prevention information and resources to students and parents.

\*Staff participated in a call with State Suicide Prevention Enhancement Specialist, August 7, 2019, regarding providing TA to schools on recommendations for suicide prevention training for staff/students

\*Completed and submitted Monthly Opioid Report to DBHDID August 15, 2019

\*Staff provided Mental Health Awareness/Suicide Prevention training for Knox County Detention Center staff August 13, 2019

\*Staff participated in meeting with DBHDID and discussed program deliverables for Youth Empowerment Prevention Specialist and Collaboration Prevention Specialist August 14, 2019

\*Staff participated in Laurel Health in Motion coalition meeting August 16, 2019

\*Staff attended meeting at Bell County High School August 19, 2019, regarding implementation of TGFD

\*Staff provided TA to Knox County School District ,August 21, 2019, regarding SB1 and Suicide Prevention Trainings for staff/students

\*Staff provided TA to Lone Jack School Center FRYSC August 21, 2019, regarding available prevention resources/programs available

\*Staff provided TA to Bell Alternative School, August 22, 2019 regarding TGFD

\*Staff provided TA to ASAP coalitions, UNITE coalitions, health coalitions and other opioid prevention coalitions August 22, 2019 regarding available substance use prevention resources and programs

\*Staff attended Bell/Knox/Whitley ASAP August 22, 2019 and provided TA regarding TGFD and Sources of Strength

\*Staff provided TA to Modern Media Solution August 21 and 26, 2019 regarding Suicide Prevention media messages for restaurants and other local businesses in Laurel County

\*Staff provided TA to Bell/Knox/Whitley ASAP, August 27, 2019, regarding available

substance use prevention resources and programs

- \*Staff provided TA to Harlan Independent Schools August 27, 2019, regarding accessing SA/MH services for students
- \*Staff provided TA to Rockcastle ASAP, August 29, 2019, regarding available substance use prevention services/resources available
- \*Staff provided TA to Knox County School District August 22, 2019, regarding TGFD
- \*Staff provided TA to Bell UNITE August 22, 2019 regarding attending meeting with Middlesboro Independent School Board/Principals in September on TGFD
- \*Staff completed Synar Cover Study on August 23, 2019 and submitted documentation to DBHDID
- \*Staff participated in meeting with DBHDID and discussed program deliverables for Youth Empowerment Prevention Specialist and Collaboration Prevention Specialist August 26, 2019
- \*Staff attended Knox County Health Coalition August 27, 2019
- \*Staff attended Bell, Knox, Whitely ASAP August 27, 2019 and provided TA on vaping/e-cig radio/TV PSA's
- \*Staff attended LCRCORP August 27, 2019. Provided TA on RPC services and scholarships available to attend Kentucky Prevention Network in Sept 2019.
- \*Staff provided TA to Laurel County ASAP Coordinator August 27, 2019 regarding scholarships available to attend Kentucky Prevention Network in Sept 2019.
- \*Staff attended Town Hall in Bell County August 27, 2019
- \*Staff visited Clay County School Board of Ed. and provided TA regarding TGFD checklist and LOA August 28, 2019.
- \*Staff provided Mental Health Awareness/Suicide Prevention training for Clay County Detention Center staff August 28, 2019
- \*Staff provided Mental Health Awareness/Suicide Prevention training for Harlan County Detention Center staff August 30, 2019

### **September**

- \*Staff provided TA to ASAP coalitions, UNITE coalitions, health coalitions, other opioid prevention coalitions and Regional FRYSC Director September 4, 2019 regarding available KPN scholarships
- \*Staff provided TA to Knox County Detention Center, September 3 and 10, 2019 regarding Jail Triage process for suicidal inmates
- \*Staff met with administrative staff at North Laurel Middle School and North Laurel High School, September 4, 2019 and provided TA regarding TGFD and completed TFGD Checklist and LOA
- \*Staff met with administrative staff at South Laurel Middle School, South Laurel High School and East Bernstadt, September 4, 2019, and provided TA regarding TGFD
- \*Staff attended RIAC, September 5, 2019, and presented on TGFD, Sources of Strength and other available prevention programs/resources

- \*Staff met with administrative staff at Yellow Creek School Center, Corbin Middle School and Corbin Elementary School September 5, 2019 and provided TA regarding TGFD and completed TGFD Checklist and LOA
- \*Staff attended Saving Bell, September 6, 2019, and provided TA regarding Harm Reduction/Needle Exchange and available KPN Scholarship
- \*Staff partnered with pharmacies on an awareness project to educate consumers on where to dispose of unwanted, unused and expired medications. Our RPC disseminated education information and materials (foam imitation bottles, which display the web address for medication disposal drop box locations) September 9, 2019, to the following Taylor Drug Pharmacy, Walgreens Pharmacy, Kroger Pharmacy, Crater City Pharmacy, Fountain Square Pharmacy, Family Discount Drug Pharmacy, Wal-Mart Pharmacy, Jeff's Pharmacy, Food City Pharmacy and People's Choice Pharmacy
- \*Staff began TGFD implementation (10 sessions) at Bell County Alternative, Page School Center, Right Fork School Center and Cawood Elementary, September 9-10, 2019
- \*Staff met with administrative staff at Page School Center, Bell Central School Center, Lone Jack School Center, Bell County High School and Bell County Alternative School, September 9, 2019 and provided TA regarding TGFD and completed TFGD Checklist and LOA
- \*Staff attended Bell County High School YSC Advisory Board Meeting, September 10, 2019, and provided TA on available tobacco prevention programs.
- \*Staff arranged for DBHDID to present at Whitley County School District and Williamsburg Independent School District Grandparent Support Group on September 10, 2019. Presentation included information on Juuling and Vaping to increase awareness of effects and use.
- \*Staff met with administrative staff at Wallins Elementary, Cawood Elementary and Right Fork School Center, September 10, 2019 and provided TA regarding TGFD and completed TGFD Checklist and LOA
- \*Staff participated in a Zoom Meeting, September 11, 2019, regarding "The PACT", a state project projected to launch Spring 2020
- \*Staff attended Rockcastle County UNITE and Rockcastle ASAP, September 11, 2019, and provided TA regarding available substance use prevention resources and programs
- \*Staff met with administrative staff at Frakes Elementary and provided TA regarding TGFD and completed TGFD Checklist and LOA
- \*Staff attended Clay/Jackson ASAP, September 12, 2019, and provided TA regarding TGFD and other available substance use prevention resources/programs
- \*Staff attended Laurel ASAP, September 12, 2019, and provided TA regarding KPN Scholarships and available substance use prevention resources/programs
- \*Staff has completed Key Informant Interview, Member Assessment and TA/Training forms with Laurel Health in Motion, LCRCORP, Laurel UNITE, Clay/Jackson ASAP, Rockcastle ASAP, Rockcastle UNITE, and Saving Bell
- \*Completed and submitted Monthly Opioid Report to DBHDID September 15, 2019



- \*Staff participated in TA call with RPC Liaison, September 13, 2019, and discussed progress and challenges with RPC projects and activities
- \*Staff participated in College Career Day at Bell County High School, September 17, 2019. Disseminated substance use prevention information to 9<sup>th</sup>-12<sup>th</sup> grade students
- \*Staff provided Mental Health Awareness/Suicide Prevention training for Bell County Detention Center staff September 10, 2019
- \*Staff provided Mental Health Awareness/Suicide Prevention training for Jackson County Detention Center staff September 19, 2019
- \*Staff attended Bost Forum, Kentucky Prevention Network and Prevention Data Manual Training Sept 23-26, 2019
- \*Four community member representing Knox Unite (1) and Knox County Health Coalition (3) attended Kentucky Prevention Network through scholarships offered through SOR funds
- \*Staff attended Middlesboro Independent School Board meeting and provided information on TGFD and process to begin implementation, September 24, 2019
- \*Staff attended Empower Kentucky meeting, in conjunction with KASAP, September 27, 2019
- \*Staff contacted and spoke with all 37 schools in our region that are participating in TGFD, regarding completion of Checklist and LOA

## October

- \*Staff participated in Teens, E-Cigarettes and Vaping Webinar October 1, 2019
- \*Staff continued to implement TGFD at Bell County Alternative, Page School Center, Right Fork School Center and Cawood Elementary
- \*Staff completed and submitted required checklist and LOA's from all 37 schools in our region that are participating in TGFD to DBHDID by October 2, 2019
- \*Staff provided a speaking engagement to CRBH Impact Workers, October 2, 2019, regarding services offered through RPC, including Sources of Strength, TGFD and other evidenced based prevention programs.
- \*Staff participated in Synar conference call on October 2, 2019 and debriefed on 2019 Synar Coverage Study to assist in improving methods for next coverage study (Our RPC has participated in the last 2 Synar Coverage study's (2016 and 2019)
- \*Staff attended RIAC meeting October 3, 2019. Learned about possible grant opportunity to provide community trainings to improve knowledge of MH and SA risk/protective factors and discussed collaborating with members on Partners in Prevention (providing hair dressers suicide prevention information/resources to their clientele)
- \*Staff prepared for a presentation on proper disposal of unused, unwanted and expired medications for Relatives Raising Relatives meeting at Bell Central School Center that will take place next month
- \*Staff provided technical assistance to Bell, Harlan and Whitley School Districts, regarding

TGFD Implementation Training, in which our RPC will provide in December

\*Staff marketed TGFD Implementation Training scheduled for Dec 2-3, 2019. Emailed SAVE the DATE flyer, October 4, 2019, to local schools in need of this training to begin implementing in Spring 2020

\*Staff attended Rockcastle Healthy Coalition, October 8, 2019 and provided information on services offered through RPC and current prevention projects

\*Staff attended Rockcastle ASAP and Rockcastle UNITE, October 9, 2019 and provided information on services offered through RPC and current prevention projects

\*Staff provided TA to Rockcastle UNITE, Rockcastle ASAP and Rockcastle Health Coalition, October 8, 2019, regarding prevention opportunities for schools, including Sources of Strength and TGFD. Staff also provided TA on how these coalitions could partner with local pharmacies to educate consumers on disposal of prescription drugs and advertisement of local disposal drop box locations.

\*Staff provided TA to UNITE coalitions, ASAP Boards, and health coalitions October 9, 2019, regarding KY Opioid Response Network Training Opportunity

\*Staff attended Youth Empowerment System meeting in Bowling Green, KY, October 10, 2019. The Youth Empowerment Specialist from our region and New Vista presented on their Dover Youth to Youth experience and how our regions can market, pilot and utilize the Dover Youth to Youth toolkit to empower youth to address substance use issues through prevention

\*Staff provided a speaking engagement to Saving Bell coalition members, October 11, 2019, regarding services offered through RPC, including Sources of Strength, TGFD and other evidenced based prevention programs.

\*During the month of September and October staff partnered with CRBH Impact Workers, through RIAC, and Saving Bell coalition members on disseminating Partners in Prevention "Hope Push Cards" to Hair Dressers throughout our region.

\*Implemented suicide prevention media campaign (30 sec ad) in local cinemas September/October 2019

\*RPC Director and one staff member participated in RPC Director's meeting October 14-15, 2019

\*All prevention staff participated in TA Training October 16-17, 2019

\*Staff provided speaking engagement to regional FRYSC Coordinators, October 18, 2019, and provided information on CRBH/RPC services and prevention opportunities for schools

\*Staff attended and participated in Horizon Health's first consortium meeting, October 21, 2019. Discussed responsibilities/deliverables of the consortium, provided information regarding RPC's role and learned of other community partners

\*Staff attended LCRCORP meeting, October 22, 2019. Provided TA on moving forward past grant funds.

\*Staff provided Drug Prevention Education, October 23, 2019, to Middlesboro HS, Bell County HS and Lone Jack School Center

- \*Staff met with Crater of Hope, October 23, 2019, and discussed how our programs can collaborate on SA Prevention efforts in Bell County
- \*Staff attended and participated in Clay/Jackson ASAP, October 24, 2019. Provided information on current prevention efforts in schools (TGFD) and other prevention resources
- \*Staff served on panel for Town Hall meeting in Bell County, October 24, 2019. Provided information on RPC services, importance of drug abuse prevention education in schools, importance of evidenced-based prevention curriculums and current prevention efforts and practices in Bell County schools.
- \*Staff attended Laurel Health in Motion, October 25, 2019. Reviewed new action plan and provided TA on RPC's role and contributions
- \*Staff attended Bell Knox Whitley ASAP, October 29, 2019. Provided TA on TGFD and other prevention resources available for schools.
- \*Staff participated in meeting with RIAC Coordinator, October 30, 2019. Provided TA on how RIAC and RPC can collaborate to provide prevention services as stated in FY20 Action Plan and discussed RPC role.
- \*Staff attended meeting with CRBH Regional Director of SA Services, October 31, 2019. Discussed how RPC and SOR funded positions can assist with ROSOC deliverables.
- \*Staff completed 16 Key Informant Interviews, 142 Coalition Member Assessments, Training & Technical Assistance Resource Form and excel spreadsheet of our regions current coalitions, as required by DBHDID, and submitted by Oct 31, 2019

### **November**

- \*Staff continued to implement TGFD at Bell County Alternative, Page School Center, Right Fork School Center and Cawood Elementary
- \*Staff meeting and collaborating with Regional Director of Substance Abuse Services on Recovery Oriented System of Care grant for our region.
- \*Staff attended and participated in Saving Bell, November 1, 2019. Provided information on ROSC and importance of collaborating with community partners. Scheduled first meeting for Bell/Harlan ROSC Coalition on Jan 9, 2020 at Bell County Health Department.
- \*Staff scheduled first meeting for Laurel, Whitley and Rockcastle ROSC Coalition on December 5, 2019 at KY Highlands in Laurel County
- \*Staff Scheduled first meeting for Clay, Jackson and Knox ROSC Coalition on January 15, 2020 at Cumberland Valley District Health Department in Clay County
- \*Staff participated in Vaping Webinar November 1, 2019, recommended by DBHDID, to learn up to date information and increase staff knowledge
- \*Staff collaborated with Laurel UNITE and Laurel County Public Library on an event for SMVF population, November 5, 2019, "Interview with a Veteran". Provided presentation on PFS initiative and importance of SMVF having awareness of and access to MH and SA resources. Set up as vendor and disseminated CRBH brochures on services/programs offered through our agency.

\*Staff participated in College and Career Transition Fair for high school students at Union College November 7, 2019. Provided information to assist students in learning requirements to obtain employment at CRBH and also provided MH and SA resources.

\*Staff participated in Collaboration Specialist Zoom meeting, November 8, 2019. Received updates on Collaboration deliverables, deadlines, etc. Zoom meetings will occur monthly.

\*Staff participated in Bell County Veterans Program, at Bell County High School, November 11, 2019. Staff collaborated and provided materials to assist in celebrating veterans and also provided MH and SA resources for SMVF and community members.

\*Staff received assistance from Adanta RPC on updating and editing Prevention Data System, November 12, 2019.

\*Staff reviewed RIAC FY20 Action Plan, which includes our Youth Empowerment Specialist providing TA to schools regarding the Dover Youth 2 Youth Program and our Collaboration Specialist assisting in maintaining a community training directory data base. Staff met with RIAC Coordinator November 14, 2019 and shared our recommendations and suggestions for the FY20 Action Plan, which will be submitted November 15, 2019

\*Staff presented and shared information on TGFD during CFI Supervision November 14, 2019.

\*Staff attended Laurel ASAP coalition meeting November 14, 2019.

\*Staff completed and submitted Monthly Opioid Report, to DBHDID, November 15, 2019.

\*Staff partnered with Laurel County pharmacies on an awareness campaign to educate consumers on where to dispose of unwanted, unused and expired medications. Our RPC disseminated education information and materials (foam imitation bottles, which display the web address for medication disposal drop box locations) November 14, 2019

\*Staff provided Drug Prevention Education, November 18, 2019, to Bell County High School and Bell County Alternative

\*Staff participated in TGFD TOT Training, November 19-20, 2019, in Frankfort.

\*Staff made preparations for TGFD Implementation Training, which will take place December

3-4, 2019 for schools in our regions that will begin implementing TGFD Spring 2020

\*Staff provided technical assistance to Middlesboro Independent Schools and Whitley county Schools on TGFD. Staff obtain signed LOA and Checklist to move forward.

### December

\*Staff completed implementation of TGFD at Bell County Alternative, Page School Center, Right Fork School Center and Cawood Elementary

\*Staff provided TGFD Implementation Training December 3-4, 2019, for schools in our region that will begin implementing TGFD Spring 2020.

\*Staff assisted Regional Director of Substance Abuse Services in planning and hosting the first Recovery Oriented System of Care (ROSC) meeting, held December 5, 2019 in Laurel County for Laurel, Rockcastle and Whitley counties. Agencies, businesses, and providers

whom serve pregnant and parenting women attended and participated.

\*Staff participated in Youth Empowerment Zoom meeting with DBHDID, December 6, 2019.

\*Staff attended Saving Bell coalition, December 6, 2019. Provided TA for Bell County Town Hall meeting, scheduled for December 9, 2019, to provide information in support of a Syringe Exchange Program.

\*Staff assisted Saving Bell coalition and Bell County Health Department (Harm Reduction Program) in hosting a Town Hall meeting December 9, 2019, in Bell County. A panel, including Office of Drug Control Policy, University of Kentucky and a person in long term recovery provided information in support of Syringe Exchange Program in Bell County.

\*Staff attended and participated in Laurel County Child Fatality Review Team meeting, December 9, 2019. Provided TA on substance use prevention efforts to assist in preventing future child deaths.

\*Staff attended Rockcastle ASAP coalition meeting, December 11, 2019. Provided TA on RPC services/programs and TGFD.

\*Staff attended meeting with CRBH and UK College of Nursing Behavioral Health Wellness Program, December 12, 2019. Shared information regarding CRBH and RPC services/programs and discussed Tobacco Treatment Specialist Scholarships available to our agency. Also discussed how our programs can partner on additional tobacco treatment and prevention efforts.

\*Staff attended Clay/Jackson ASAP, December 12, 2019. Provided TA on TGFD and information on TGFD Implementation training in January 2020.

\*Staff participated in Collaboration Zoom meeting with DBHDID, December 13, 2019.

\*Staff completed and submitted Monthly Opioid Report, to DBHDID, by December 15, 2019.

\*Staff participated in a focus group for Maternal and Child Health, through Laurel County Health Department, December 18, 2019. The mission was to identify needs, barriers and gaps to assist in improving health issues for infants, children, adolescents and women. Responses will be shared with Maternal and Child Health Division through KY Department of Public Health.

\*Staff updated SOR budget and submitted to DBHDID, December 19, 2019, due to a staff member graduating with her Bachelor's (December 2019) and going from non-degree pay to degree pay.

\*Staff made preparations for Recovery Oriented System of Care meeting, to be held January 14, 2020, at Laurel County Health Department.

## [KY-ASAP: Prescription Drug Disposal](#)

Unused or expired prescription medications are a public safety issue, leading to potential accidental poisoning, misuse, and overdoses. Proper disposal of unused drugs saves lives and protects the environment.

Understanding the necessity for Kentuckians to have a safe, convenient, and responsible means of disposing prescription drugs, in 2011 the Kentucky Agency for Substance Abuse Policy created and published a statewide directory identifying prescription drug disposal locations. At its inception, the directory identified 69 locations in 42 Kentucky counties. The directory makes it easier for citizens of the Commonwealth to dispose of their expired or unwanted medications, both prescription and over-the-counter. Prescription drop boxes are available across Kentucky in conjunction with law enforcement agencies and local governments. There are now 198 locations in 116 counties, with sites being added daily.

### [Collection Site Locator:](#)



Find a Prescription Drug Disposal Location

Search by County

Adair

Search

To make it easier for citizens of the Commonwealth to dispose of their expired or unwanted medications, both prescription and over-the-counter, prescription drop boxes are available across Kentucky in conjunction with law enforcement agencies and local governments. There are now 199 locations in 116 counties, with sites being added daily.

We want to encourage every Kentuckian to learn how to take, store and dispose of prescription medicine properly. By doing so, we can help prevent drug abuse, diversion, accidental ingestions and loss of medical privacy.

By working together, we can help keep our homes and communities healthy and secure.



**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| County   | Location  | Hours Open                                     | Phone        |
|----------|---|--|--------------|
| Adair    | <b>Kentucky State Police, Post 15</b><br>1118 Jamestown Street<br>Columbia, KY      | 24/7   | 270-384-4796 |
| Anderson | <b>Anderson County Sheriff</b><br>208 S. Main Street<br>Lawrenceburg, KY            | Mon - Fri<br>8-6                               | 502-839-4021 |
| Allen    | <b>Allen County Sheriff's Dept.</b><br>194 Wood Street<br>Scottsville, KY           | 24/7   | 270-237-3210 |
| Ballard  | <b>Ballard County Sheriff's Dept.</b><br>437 Ohio Street<br>Wickliffe, KY           | Mon-Fri<br>8-4<br>or anytime city hall is open | 270-335-3561 |
| Barren   | <b>Cave City Police Dept.</b><br>103 Duke Street<br>Cave City, KY                   | Mon.-Fri<br>8-4                                | 270-773-2441 |
| Barren   | <b>Barren County Sheriff's Dept.</b><br>117 N. Public Square, #3a<br>Glasgow, KY    | Mon.-Fri<br>8-4<br>Sat.-8-Noon                 | 270-651-2771 |
| Barren   | <b>Glasgow Police Dept.</b><br>201 S. Broadway Street<br>Glasgow, KY                | Open 24/7                                      | 270-651-5151 |
| Bath     | <b>Owingsville Police Dept.</b><br>19 Goodpaster Avenue<br>Owingsville, KY 40360    | 24/7   | 606-674-2341 |
| Bell     | <b>Pineville Police Dept.</b><br>300 Virginia Ave.<br>Pineville, KY 40977           | City Hall<br>Mon-Fri<br>8-4                    | 606-337-2207 |
| Bell     | <b>Middlesboro Police Dept.</b><br>150 N. 20th Street<br>Middlesboro, KY 40965      | 24/7   | 606-248-2020 |
| Bell     | <b>Bell County Sheriff's Office</b><br>101 Courthouse Square<br>Pineville, KY 40906 | Mon-Fri<br>8am - 4pm<br>or by appointment      | 606-337-3102 |
| Boone    | <b>Florence Police Dept.</b><br>8100 Ewing Blvd.<br>Florence, KY                    | Mon-Fri<br>8:30-5                              | 859-647-5420 |
| Boone    | <b>Boone County Sheriff's Office</b><br>3000 Conrad Lane<br>Burlington, KY          | Mon-Fri<br>8-5                                 | 859-334-2234 |



**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>       | <b>Location</b>  | <b>Hours Open</b>                        | <b>Phone</b> |
|---------------------|--|--|--------------|
| <b>Bourbon</b>      | <b>Paris Police Dept.</b><br>545 High Street<br>Paris, KY                              | 24/7                                     | 859-987-2100 |
| <b>Boyd</b>         | <b>Boyd County Sheriff's Dept.</b><br>2900 Louisa Street<br>Catlettsburg, KY 41129     | Mon-Friday<br>8:00 a.m. - 4:00 p.m.      | 606-739-5135 |
| <b>Boyle</b>        | <b>Danville Police Dept.</b><br>445 West Main Street<br>Danville, KY                   | Mon - Fri<br>9:00 a.m. - 4:00 p.m.       | 859-238-1224 |
| <b>Boyle</b>        | <b>Boyle County Sheriff's Office</b><br>321 West Main Street<br>Danville, KY           | Mon - Fri<br>8:30 a.m. - 4:00 p.m.       | 859-238-1123 |
| <b>Bracken</b>      | <b>Bracken County Sheriff's Office</b><br>116 W. Main<br>Brooksville, KY               | M-Tu-Th-Fri.<br>8-4<br>Wed/Sat-8:00-Noon | 606-735-3233 |
| <b>Breathitt</b>    | <b>Jackson Police Dept.</b><br>333 Broadway<br>Jackson KY 41339                        | 24/7                                     | 606-666-2424 |
| <b>Breckinridge</b> | <b>Breckinridge Co. Sheriff's Dept.</b><br>208 S. Main Street, #210<br>Hardinsburg, KY | Mon. thru Fri. - 8-4<br>Saturday 8-12    | 270-756-2361 |
| <b>Breckinridge</b> | <b>Irvington Police Dept.</b><br>109 W. Caroline<br>Irvington, KY                      | Mon - Friday 8-5<br>Saturday - 9-12      | 270-547-3835 |
| <b>Breckinridge</b> | <b>Cloverport Police Dept.</b><br>212 W. Main Street<br>Cloverport, KY                 | Mon - Fri<br>8 -4                        | 270-788-3751 |
| <b>Bullitt</b>      | <b>Bullitt County Sheriff's Office</b><br>300 Preston Hwy.<br>Shepherdsville, KY       | Mon-Fri<br>8-4                           | 502-543-2514 |
| <b>Bullitt</b>      | <b>Mt. Washington Police Dept.</b><br>180 Landis Lane<br>Mt. Washington, KY            | Mon-Fri<br>8-5                           | 502-538-4216 |
| <b>Bullitt</b>      | <b>Hillview Police Dept.</b><br>283 Crestwood Lane<br>Louisville, KY                   | Mon-Fri<br>8-4:30<br>can vary            | 502-955-6808 |

**Kentucky Permanent Prescription Drug Disposal Locations  
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| <b>County</b>   | <b>Location</b>   | <b>Hours Open</b>                              | <b>Phone</b> |
|-----------------|---|--|--------------|
| <b>Bullitt</b>  | <b>Lebanon Junction Police Dept.</b><br>271 Main Street<br>Lebanon Junction, KY 40150       | Mon-Fri<br>8:00 - 5:00                         | 502-833-2244 |
| <b>Butler</b>   | <b>Butler County Sheriff's Office</b><br>110 North Main Street<br>Morgantown, KY            | Mon-Fri<br>8-4                                 | 270-526-3676 |
| <b>Butler</b>   | <b>Morgantown City Police</b><br>2800 Sailing Circle<br>Huff Ingram Drive<br>Morgantown, KY | 24/7   | 270-526-3662 |
| <b>Caldwell</b> | <b>Caldwell County Sheriff's Office</b><br>100 E. Market Street, #25<br>Princeton, KY       | no box<br>drop off at office<br>Mon-Fri<br>8-4 | 270-365-2088 |
| <b>Calloway</b> | <b>Calloway County Sheriff's Office</b><br>701 Olive Street<br>Murray, KY                   | 24/7   | 270-753-3151 |
| <b>Calloway</b> | <b>Murray Police Department</b><br>407 Poplar Street<br>Murray, KY                          | 24/7   | 270-753-1621 |
| <b>Campbell</b> | <b>Newport Police Dept.</b><br>998 Monmouth Street<br>Newport, KY                           | Mon-Fri<br>8:30-4:30                           | 859-292-3625 |
| <b>Campbell</b> | <b>Highland Heights Police Dept.</b><br>176 Johns Hill Road<br>Highland Heights, KY         | Call officer<br>8-4                            | 859-441-8956 |
| <b>Campbell</b> | <b>Fort Thomas Police Dept.</b><br>130 N. Fort Thomas Avenue<br>Fort Thomas, KY             | Mon-Fri<br>8-4:30<br>anytime city hall is open | 859-292-3622 |
| <b>Campbell</b> | <b>Campbell County Police Dept.</b><br>8774 Constable Drive<br>Alexandria, KY               | Mon-Fri<br>8-4<br>except holidays              | 859-547-3100 |
| <b>Campbell</b> | <b>Wilder Police Dept.</b><br>520 Licking Pike<br>Wilder, KY 41070`                         | Mon-Fri<br>7-5                                 | 859-581-8863 |
| <b>Campbell</b> | <b>Dayton Police Dept.</b><br>514 6th Avenue<br>Dayton, KY 41074                            | Mon-Fri<br>9-5                                 | 859-261-1471 |

**Kentucky Permanent Prescription Drug Disposal Locations  
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| <b>County</b>     | <b>Location</b>  | <b>Hours Open</b>                                   | <b>Phone</b> |
|-------------------|--|---|--------------|
| <b>Campbell</b>   | <b>Southgate Police Dept.</b><br>122 Electric Avenue<br>Southgate, KY 41071                  | Mon-Thur<br>8-4                                     | 859-441-0075 |
| <b>Carlisle</b>   | <b>Carlisle County Sheriff's Dept.</b><br>985 US Hwy 62<br>Bardwell, KY                      | Mon-Fri<br>8-4                                      | 270-628-3377 |
| <b>Carroll</b>    | <b>Carroll County Sheriff's Office</b><br>440 Main Street, 1st Floor<br>Carrollton, KY 41008 | Mon-Fri<br>8:30 - 4:30                              | 502-732-7010 |
| <b>Carroll</b>    | <b>Carrollton Police Dept.</b><br>750 Clay Street<br>Carrollton, KY                          | 24/7  | 502-732-6621 |
| <b>Carter</b>     | <b>Carter Co. Sheriff's Dept.</b><br>300 W. Main Street<br>Grayson, KY                       | Mon - Fri - 8:30 - 4<br>&<br>Saturday - 8:30 - noon | 606-474-5616 |
| <b>Casey</b>      | <b>Liberty Police Dept.</b><br>51 Jockey Street<br>Liberty, KY 42539                         | 24/7  | 606-787-6371 |
| <b>Clark</b>      | <b>Winchester Police Dept.</b><br>16 South Maple Street<br>Winchester, KY                    | 24/7  | 859-745-7400 |
| <b>Clark</b>      | <b>Clark County Sheriff's Office</b><br>17 Cleveland Avenue, #1<br>Winchester, KY            | Monday-Friday<br>8:00 a.m.-4:00 p.m.                | 859-744-4390 |
| <b>Clay</b>       | <b>Manchester Police Dept.</b><br>200 White Street<br>Manchester, KY 40962                   | 24/7  | 606-598-8411 |
| <b>Clinton</b>    | <b>Albany Police Department</b><br>204 E. Water Street<br>Albany, KY 42602                   | 24/7  | 606-387-4482 |
| <b>Christian</b>  | <b>Hopkinsville Police Dept.</b><br>101 N. Main Street<br>Hopkinsville, KY                   | Mon-Friday<br>8:00 a.m. - 4:00 p.m.                 | 270-890-1500 |
| <b>Christian</b>  | <b>Christian County Sheriff's Dept.</b><br>215 W. 7th Street<br>Hopkinsville, KY             | Mon-Fri<br>8:00 - 4:30                              | 270-887-4141 |
| <b>Christian</b>  | <b>Oak Gove Police Dept.</b><br>8505 Pembroke Oak Grove Rd<br>Oak Grove, KY 42262            | Mon-Fri<br>8:00 am - 4:00 pm                        | 270-439-5979 |
| <b>Crittenden</b> | <b>Marion Police Dept.</b><br>217 S. Main Street, #102<br>Marion, KY                         | 24/7  | 270-965-3500 |

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| <b>County</b>     | <b>Location</b>  | <b>Hours Open</b>                    | <b>Phone</b> |
|-------------------|--|--------------------------------------|--------------|
| <b>Crittenden</b> | <b>Crittenden County Sheriff's Dept.</b><br>Crittenden County Courthouse<br>Marion, KY 42064   | Monday-Friday<br>8:00 a.m.-4:00 p.m. | 270-965-3400 |
| <b>Cumberland</b> | <b>Cumberland County 911</b><br>299 Glasgow Road<br>Burkesville, KY 42717<br>(behind Hospital) | 24/7                                 | 270-864-4141 |
| <b>Daviess</b>    | <b>Daviess County Sheriff's Dept.</b><br>212 Saint Ann Street #103<br>Owensboro, KY            | Mon-Fri<br>8-4:30                    | 270-685-8444 |
| <b>Daviess</b>    | <b>Owensboro City Police Dept.</b><br>222 East 9th Street<br>Owensboro, KY                     | 24/7                                 | 270-687-8888 |
| <b>Edmonson</b>   | <b>Edmonson County Sheriff's Dept.</b><br>110 Jackson Street<br>Brownsville, KY                | Mon-Fri<br>8-4                       | 270-597-2157 |
| <b>Edmonson</b>   | <b>Brownsville Police Dept.</b><br>121 Washington Street<br>Brownsville, KY                    | Mon-Fri<br>8-4                       | 270-597-3814 |
| <b>Elliott</b>    | <b>Elliott County Sheriff's Dept.</b><br>118 S. KY 7<br>Sandy Hook, KY                         | Mon - Fri<br>8 - 4                   | 606-738-4167 |
| <b>Estill</b>     | <b>Irvine Police Dept.</b><br>101 Chestnut Street<br>Irvine, KY                                | Mon. - Fri.<br>8-4                   | 606-723-2221 |
| <b>Estill</b>     | <b>Ravenna Police Dept.</b><br>620 Main Street<br>Ravenna, KY                                  | Mon. - Fri.<br>8-3                   | 606-723-3332 |
| <b>Fayette</b>    | <b>Fayette County Sheriff's Dept.</b><br>150 N. Limestone, Suite 236<br>Lexington, KY          | Mon - Fri<br>8 - 4                   | 859-252-1771 |
| <b>Fayette</b>    | <b>Lexington Division of Police</b><br>150 E. Main Street<br>Lexington, KY                     | 24/7                                 | 859-258-3600 |
| <b>Fleming</b>    | <b>Flemingsburg Police Dept.</b><br>116 South Main Cross<br>Flemingsburg, KY 41041             | Sat<br>8 - 5                         | 606-845-2121 |
| <b>Floyd</b>      | <b>Prestonsburg Police Dept.</b><br>200 N. Lake Dr.<br>Prestonsburg, KY 41653                  | 24/7                                 | 606-886-1010 |
| <b>Franklin</b>   | <b>Frankfort Police Dept.</b><br>300 West 2nd Street<br>Frankfort, KY                          | 24/7                                 | 502-875-8525 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| County   | Location  | Hours Open  | Phone        |
|----------|---|---|--------------|
| Franklin | Franklin County Sheriff's Dept.<br>Franklin County Public Safety Bldg<br>974 River Bend Road<br>Frankfort, KY 40601 | Mon - Fri<br>8-4  | 502-875-8740 |
| Fulton   | Fulton County Sheriff's Dept.<br>2216 Myron Cory Dr. #4<br>Hickman, KY  | Mon - Fri<br>8-4  | 270-236-2545 |
| Gallatin | Gallatin County Sheriff's Office<br>106 West Main Street<br>Warsaw, KY  | Mon-Fri<br>8-4:30 .<br>weekends-deputies accept<br>at local banks | 859-567-5751 |
| Garrard  | Garrard County Sheriff's<br>15 Public Square<br>Lancaster, KY   | Mon, Tues, Thur, Fri<br>7:30 - 4:30<br>Wed & Sat<br>8 - 12        | 859-792-3591 |
| Garrard  | Lancaster Police Dept.<br>308 West Maple Avenue<br>Lancaster, KY  | 24/7  | 859-792-6000 |
| Grant    | Grant County Sheriff's Office<br>212 Barnes Road, Suite A<br>Williamstown, KY 41097                                 | Mon-Fri<br>8:00 - 4:00  | 859-824-3333 |
| Graves   | Graves County Sheriff's Office<br><i>(Temporarily Closed)</i>   |   |              |
| Grayson  | Leitchfield Police Dept.<br>117 S. Main Street<br>Leitchfield, KY   | 24/7  | 270-259-3850 |
| Grayson  | Grayson Co. Sheriff's Dept.<br>44 Public Square<br>Leitchfield, KY  | Mon-Fri<br>8:00 - 4:00  | 270-259-3024 |
| Grayson  | Caneyville City Hall<br>304 East Maple Street<br>Caneyville, KY 42721   | Mon, Tues, Wed, Fri<br>8:00 - 4:00                                | 270-879-9701 |
| Green    | Greensburg Police Dept.<br>105 West Hodgenville Avenue<br>Greensburg, KY 42743                                      | 24/7  | 270-932-4202 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>    | <b>Location</b>  | <b>Hours Open</b>   | <b>Phone</b> |
|------------------|--|---|--------------|
| <b>Hancock</b>   | <b>Hancock County Sheriff's Office</b><br>225 Main Cross Street<br>Hawesville, KY  | Mon-Fri<br>8-4  | 270-927-6247 |
| <b>Hancock</b>   | <b>Lewisport Police Dept.</b><br>405 2nd Street<br>Lewisport, KY 42351             | Mon-Fri<br>9:00 - 3:00<br>&<br>Mon-Sun<br>5:00pm - 12:00 am | 270-295-6188 |
| <b>Hardin</b>    | <b>Elizabethtown Police Dept.</b><br>300 S. Mulberry Street<br>Elizabethtown, KY   | 24-7  | 270-765-4125 |
| <b>Hardin</b>    | <b>Radcliff Police Dept.</b><br>220 Freedoms Way<br>Radcliff, KY                   | 24-7  | 270-351-4479 |
| <b>Hardin</b>    | <b>West Point Police Dept.</b><br>509 Elm Street<br>West Point, KY                 | Mon-Fri<br>8 - 4:30   | 502-922-4135 |
| <b>Hardin</b>    | <b>Vine Grove Police Dept.</b><br>300 W. Main Street<br>Vine Grove, KY 40175       | Mon-Fri<br>8 - 5:00   | 270-877-2262 |
| <b>Hardin</b>    | <b>Kentucky State Police, Post 4</b><br>1055 North Mulberry<br>Elizabethtown, KY   | 24/7  | 270-766-5078 |
| <b>Harlan</b>    | <b>Harlan County Sheriff's Office</b><br>210 E. Central Street<br>Harlan, KY 40831 | Mon-Fri<br>8:30 - 4:30                                      | 606-573-1313 |
| <b>Harrison</b>  | <b>Harrison County Sheriff's Office</b><br>113 W. Pike Street<br>Cynthiana, KY     | Mon-Fri<br>8:30-4:30  | 859-234-7135 |
| <b>Harrison</b>  | <b>Cynthiana Police Dept.</b><br>420 E. Pleasant Street<br>Cynthiana, KY           | Mon-Fri<br>8:00 - 4:30                                      | 859-234-7157 |
| <b>Hart</b>      | <b>Hart County Sheriff's Dept.</b><br>116 East Union Street<br>Munfordville, KY    | Mon.-Fri 8-4  | 270-524-2341 |
| <b>Hart</b>      | <b>Horse Cave Police Dept.</b><br>121 Woodlawn Avenue<br>Horse Cave, KY            | Mon-Fri<br>8-4:30   | 270-786-4357 |
| <b>Henderson</b> | <b>Henderson Police Dept.</b><br>1990 Barrett Court<br>Henderson, KY 42420         | Mon-Fri<br>8:00-5:00  | 270-831-1295 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>    | <b>Location</b>  | <b>Hours Open</b>  | <b>Phone</b> |
|------------------|--|--|--------------|
| <b>Henry</b>     | <b>Henry County Sheriff's Department @ the Courthouse</b><br>30 North Main Street<br>New Castle, KY        | Mon - Fri<br>8-4:30  | 502-845-2909 |
| <b>Hopkins</b>   | <b>Madisonville Police Dept.</b><br>99 E. Center Street<br>Madisonville, KY 42431                          | 24/7   | 270-821-1720 |
| <b>Hopkins</b>   | <b>Hopkins County Sheriff's Office</b><br>56 N. Main Street<br>Government Center<br>Madisonville, KY 42431 | Mon - Fri<br>8:00 - 4:00                                       | 270-825-5661 |
| <b>Hickman</b>   | <b>Hickman County Sheriff's Dept.</b><br>110 E. Clay Street, Suite B<br>Clinton, KY                        | Mon-Fri<br>8-4   | 270-653-2241 |
| <b>Jackson</b>   | <b>Jackson Co. Sheriff's Office</b><br>1st & Main Street<br>McKee, KY 40407                                | Mon-Fri<br>8-4   | 606-287-4460 |
| <b>Jefferson</b> | <b>Jefferson Co. Sheriff's Office</b><br>531 Court Place Suite #600<br>Louisville, KY                      | Mon-Fri<br>8 - 4   | 502-574-5400 |
| <b>Jefferson</b> | <b>St. Matthews Police</b><br>3940 Grandview Avenue<br>Louisville, KY                                      | Mon-Fri<br>8 - 4   | 502-893-9000 |
| <b>Jessamine</b> | <b>Nicholasville Police Department</b><br>510 North Main St.<br>Nicholasville, KY                          | Mon-Fri<br>8-5   | 859-885-9468 |
| <b>Jessamine</b> | <b>Jessamine County Sheriff Ofc.</b><br>101 South Second Street<br>Nicholasville, KY 40356                 | Mon, Tues & Wed<br>8:00 - 4:00<br>Thurs. & Sat<br>8:00 - 12:00 | 859-885-4139 |
| <b>Johnson</b>   | <b>Johnson Co. Sheriff's Office</b> 342<br>Second Street<br>Paintsville, KY 41240                          | Mon-Fri<br>8-4   | 606-789-3411 |
| <b>Johnson</b>   | <b>Paintsville Police Dept.</b><br>101 Euclid<br>Paintsville, KY 41240                                     | 24/7   | 606-789-4221 |
| <b>Kenton</b>    | <b>Covington Police Department</b><br>1 Police Memorial Drive<br>Covington, KY 41014                       | 24/7   | 859-356-3191 |
| <b>Kenton</b>    | <b>Erlanger Police Department</b><br>505 Commonwealth Avenue<br>Erlanger, KY                               | Mon-Fri<br>8-5   | 859-727-5660 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b> | <b>Location</b>  | <b>Hours Open</b>  | <b>Phone</b> |
|---------------|--|--|--------------|
| Kenton        | <b>Edgewood Police Dept.</b><br>385 Dudley Road<br>Edgewood, KY                        | Mon-Fri<br>8 a.m.-6 p.m.   | 859-331-5911 |
| Kenton        | <b>Villa Hills Police Dept.</b><br>719 Rogers Road<br>Villa Hills, KY                  | Mon-Fri during business<br>hours-then by appt. through<br>dispatch | 859-341-3535 |
| Kenton        | <b>Park Hills Police Dept.</b><br>1106 Amsterdam Road<br>Park Hills, KY                | 24/7   | 859-431-6172 |
| Kenton        | <b>Fort Wright Police Dept.</b><br>409 Kyle's Lane<br>Fort Wright, KY                  | Mon.-Fri<br>7:30-5   | 859-331-2191 |
| Kenton        | <b>Kenton County Police Dept.</b><br>11777 Madison Pike<br>Independence, KY            | 24/7   | 859-392-1983 |
| Knott         | <b>Knott County Sheriff's Office</b><br>54 Main Street W.<br>Hindman, KY               | Mon - Fri<br>8-4<br>Saturday - 8-noon                              | 606-785-5354 |
| Knox          | <b>Knox County Sheriff's Office</b><br>401 Court Square #105<br>Barbourville, KY 40906 | Mon - Fri<br>8-4   | 606-546-3181 |
| Knox          | <b>Barbourville Police Dept.</b><br>196 Daniel Boone Drive<br>Barbourville, KY         | Mon - Fri<br>8 - 4   | 606-546-4562 |
| LaRue         | <b>Hodgenville Police Dept.</b><br>200 W. High Street<br>Hodgenville, KY               | 24/7   | 270-358-3013 |
| Laurel        | <b>Laurel County Sheriff's Dept.</b><br>203 S. Broad Street<br>London, KY 40741        | Mon - Fri<br>8 - 5   | 606-864-6600 |
| Laurel        | <b>London Police Dept.</b><br>503 S. Main Street<br>London, KY 40741                   | 24/7   | 606-878-7004 |
| Lawrence      | <b>Lawrence Co. Sheriff's Office</b><br>310 E. Main Street<br>Louisa, KY 41230         | Mon-Fri 8:30-4:30<br>Sat-8:30-12:00                                | 606-638-4368 |
| Lee           | <b>Beattyville Police Dept.</b><br>61 River Drive<br>Beattyville, KY 41311             | 24/7   | 606-464-5030 |
| Leslie        | <b>Leslie Co. Sheriff's Office</b><br>22010 Main Street<br>Hyden, KY 41749             | 24/7   | 606-672-2200 |
| Letcher       | <b>Jenkins Police Dept.</b> 9409<br>Hwy 805<br>Stanford, KY 41537                      | M-F<br>9-5   | 606-365-2696 |



**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b> | <b>Location</b>   | <b>Hours Open</b>                                   | <b>Phone</b>              |
|---------------|---|---|---------------------------|
| Letcher       | <b>Letcher Co. Sheriff's Office</b><br>6 Broadway St.<br>Whitesburg, KY 41858           | Mon-Sat<br>7-12 midnight                            | 606-633-2293              |
| Lewis         | <b>Lewis County Sheriff's Office</b><br>112 2nd Street, Room 102<br>Vanceburg, KY 41056 | M,T,TH,F<br>8:30 - 4:30<br>Wed & Sat<br>8:30 - Noon | 606-796-2912              |
| Lincoln       | <b>Lincoln Co Sheriff's Office</b><br>104 N 2nd St.<br>Stanford, KY 40484               | Mon-Fri 8-4<br>Sat-9-12                             | 606-365-2696              |
| Livingston    | <b>Livingston County Sheriff's Dept.</b><br>321 Court Street<br>Smithland, KY 42081     | Mon-Fri<br>8-4                                      | 270-928-2122              |
| Logan         | <b>Logan County Sheriff's Dept.</b><br>100 North Owen Street<br>Russellville, KY        | Mon-Fri<br>8:00 - 4:30                              | 270-726-2244              |
| Logan         | <b>Russellville Police Dept.</b><br>104 SW Park Square<br>Russellville, KY              | Mon-Fri<br>8:00 - 4:00                              | 270-726-7669              |
| Lyon          | <b>Eddyville Police Dept.</b><br>419 Dogwood Avenue<br>Eddyville, KY                    | Mon-Fri<br>8:00 - 4:00                              | 270-388-2287              |
| Lyon          | <b>Lyon County Sheriff's Office</b><br>500 W. Dale Street, 100<br>Eddyville, KY         | Mon-Fri<br>8-4                                      | 270-388-2311<br>ext. 2038 |
| Madison       | <b>Richmond Police Dept.</b><br>1721 Lexington Road<br>Richmond, KY                     | 24/7  | 859-623-1714              |
| Madison       | <b>Berea Police Dept.</b><br>212 Chestnut Street<br>Berea, KY                           | 24/7  | 859-986-8456              |
| Magoffin      | <b>Magoffin County Sheriff's Office</b><br>201 East Maple Street<br>Salyersville, KY    | Mon.-Fri<br>8-4                                     | 606-349-2914              |
| Marion        | <b>Lebanon Police Dept.</b><br>124 W. Mulberry Street<br>Lebanon, KY                    | 24/7  | 270-692-2121              |
| Marshall      | <b>Marshall County Sheriff's Office</b><br>52 Judicial Drive<br>Benton, KY              | Mon.-Fri<br>8-4:30                                  | 270-527-3112              |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>    | <b>Location</b>   | <b>Hours Open</b>   | <b>Phone</b> |
|------------------|---|---|--------------|
| <b>Martin</b>    | <b>Martin Co. Sheriff's Office</b><br>100 East Main Street<br>Inez, KY 41224        | Mon-Fri<br>8-4:30   | 606-298-3572 |
| <b>Mason</b>     | <b>Mason County Sheriff's Office</b><br>120 West 3rd Street<br>Maysville, KY 41056  | Mon-Fri<br>9-4:30   | 606-564-3309 |
| <b>Mason</b>     | <b>Maysville Police Dept.</b><br>212 Government Street<br>Maysville, KY 41056       | 24/7  | 606-564-9411 |
| <b>McCracken</b> | <b>Paducah Police Dept.</b><br>1400 Broadway<br>Paducah, KY 42001                   | Mon-Fri<br>8-6  | 270-444-8550 |
| <b>McCreary</b>  | <b>McCreary Co. Sheriff's Office</b><br>36 Court Street<br>Whitley City, KY 42653   | Mon-Fri<br>8-4:30   | 606-376-2322 |
| <b>McLean</b>    | <b>McLean County Sheriff's Office</b><br>135 E. Second Street<br>Calhoun, KY        | Mon - Fri<br>8:00 - 4:30                                  | 270-273-3276 |
| <b>Meade</b>     | <b>Meade Co. Sheriff's Dept.</b><br>516 Hillcrest Drive<br>Brandenburg, KY          | Mon, Tue, Wed, Friday<br>8 - 4:30<br>Thursday<br>8 - 6:30 | 270-422-4937 |
| <b>Meade</b>     | <b>Muldraugh Police Dept.</b><br>120 S. Main Street<br>Muldraugh, KY                | Mon - Fri<br>8:30 - 4:00                                  | 502-942-2824 |
| <b>Menifee</b>   | <b>Menifee Co. Sheriff's Office</b><br>192 Dale Back Street<br>Frenchburg, KY 40322 | M-T-W-FR- 8:30-4:00<br>Thurs-Sat 8-11:30                  | 606-768-3875 |
| <b>Mercer</b>    | <b>Mercer County Sheriff's Office</b><br>207 W. Lexington<br>Harrodsburg, KY        | Mon - Fri<br>8 - 4:30                                     | 859-734-4221 |
| <b>Mercer</b>    | <b>Harrodsburg Police Dept.</b><br>411 N. Greenville Street<br>Harrodsburg, KY      | Mon - Sun<br>24/7   | 859-734-3311 |
| <b>Metcalfe</b>  | <b>Metcalfe County Sheriff's Dept.</b><br>106 S. Main Street<br>Edmonton, KY        | Mon-Fri<br>8-4  | 270-432-3041 |
| <b>Monroe</b>    | <b>Monroe County Sheriff's Dept.</b><br>200 N. Main Street, #E<br>Tompkinsville, KY | Mon-Sat<br>8-4  | 270-487-6622 |
| <b>Monroe</b>    | <b>Tompkinsville Police Dept.</b><br>201 E. 2nd Street<br>Tompkinsville, KY         | 24/7  | 270-487-6191 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b> | <b>Location</b>  | <b>Hours Open</b>                           | <b>Phone</b> |
|---------------|--|---|--------------|
| Montgomery    | <b>Mt. Sterling Police Dept.</b><br>35 South Bank Street<br>Mt. Sterling, KY 40353 | Mon - Sun<br>24/7                           | 859-498-8899 |
| Montgomery    | <b>Montgomery County Sheriff's Office</b><br>1 Court Street<br>Mount Sterling, KY  | Mon-Fri<br>8-4                              | 859-498-8704 |
| Morgan        | <b>West Liberty Police Dept.</b><br>561 Main<br>West Liberty, KY 41472             | 24/7  | 606-743-4385 |
| Muhlenberg    | <b>Greenville Police Dept.</b><br>200 Court Street<br>Greenville, KY               | Mon-Fri<br>24 hrs. a day                    | 270-754-2464 |
| Muhlenberg    | <b>Powderly Police Dept.</b><br>211 Hillside Road<br>Powderly, KY 42367            | Mon - Fri<br>8-4                            | 270-338-5123 |
| Muhlenberg    | <b>Muhlenberg Sheriff's Office</b><br>100 Main Street<br>Greenville, KY            | Mon-Fri<br>8-4                              | 270-338-3345 |
| Nelson        | <b>Bardstown Police Dept.</b><br>212 Nelson County Plaza<br>Bardstown, KY          | Mon-Fri<br>24 hrs a day                     | 502-348-6811 |
| Nicholas      | <b>Nicholas County Sheriff's Office</b><br>125 E. Main Street<br>Carlisle, KY      | 24/7  | 859-289-3740 |
| Ohio          | <b>Ohio County Sheriff's Office</b><br>301 South Main Street<br>Hartford, KY 42347 | Mon-Fri<br>8:00 - 4:30                      | 270-298-4444 |
| Oldham        | <b>LaGrange Police Dept.</b><br>121 West Main Street<br>LaGrange, KY               | Mon-Fri<br>9:00 - 12:00<br>&<br>1:00 - 4:00 | 502-225-0444 |
| Oldham        | <b>Oldham County Police Dept.</b><br>1855 N. Hwy 393<br>LaGrange, KY               | Mon-Fri<br>8:30 - 4:30                      | 502-222-1300 |
| Owsley        | <b>Owsley Co. Sheriff's Office</b><br>P. O. Box 70<br>Booneville, KY 41314         | Mon-Fri.<br>8-4                             | 606-593-5161 |
| Pendleton     | <b>Pendleton County Sheriff's Office</b><br>202 Chapel Street<br>Falmouth, KY      | Mon-Fri<br>9-4.                             | 859-654-4511 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>     | <b>Location</b>   | <b>Hours Open</b>                         | <b>Phone</b> |
|-------------------|---|---|--------------|
| <b>Perry</b>      | <b>Hazard Police Dept.</b><br>800 High Street<br>Hazard, KY 41702                   | 24/7                                      | 606-436-2222 |
| <b>Pike</b>       | <b>Pikeville Police Dept.</b><br>101 Division Street<br>Pikeville, KY 41501         | 24/7                                      | 606-437-6236 |
| <b>Powell</b>     | <b>Powell County Courthouse</b><br>Court Street<br>Stanton, KY 40380                | Mon-Fri<br>7-5                            | 606-663-1459 |
| <b>Powell</b>     | <b>Clay City Municipal Building</b><br>4651 Main Street<br>Clay City, KY 40312      | Mon-Fri<br>7-5                            | 606-663-2224 |
| <b>Pulaski</b>    | <b>Pulaski County Sheriff's Office</b><br>100 North Main Street<br>Somerset, KY     | 24/7                                      | 606-678-5145 |
| <b>Pulaski</b>    | <b>Pulaski 911 Center</b><br>145 North Highway 27<br>Somerset, KY                   | 24/7                                      | 606-678-5008 |
| <b>Pulaski</b>    | <b>Somerset Police Dept.</b><br>306 E. Mt. Vernon Street<br>Somerset, KY 42501      | Mon-Fri<br>8:00 - 4:30                    | 606-678-5176 |
| <b>Pulaski</b>    | <b>Burnside Police Dept.</b><br>7933 S. Hwy. 27<br>Burnside, KY 42519               | Mon-Fri<br>8-5                            | 606-561-3405 |
| <b>Rockcastle</b> | <b>Mount Vernon Police Dept</b><br>125 Richmond St.<br>Mt. Vernon, KY 40456         | Mon.-Fri.call<br>606-256-2427 for officer | 606-256-3437 |
| <b>Rowan</b>      | <b>Rowan County Sheriff's Office</b><br>600 W. Main Street<br>Morehead, KY 40351    | Mon - Fri<br>8:00 - 4:00                  | 606-784-5446 |
| <b>Rowan</b>      | <b>Morehead Police Department</b><br>100 University Boulevard<br>Morehead, KY 40351 | Mon - Fri<br>7:00 - 7:00                  | 606-783-2035 |
| <b>Scott</b>      | <b>Scott County Sheriff's Dept.</b><br>120 N. Hampton Street<br>Georgetown, KY      | Mon - Fri<br>8:30 - 4:30                  | 502-863-7855 |
| <b>Scott</b>      | <b>Georgetown Police Dept.</b><br>550 Bourbon Street<br>Georgetown, KY              | Mon - Fri<br>8:00 - 4:00                  | 502-863-7826 |
| <b>Simpson</b>    | <b>Simpson County Sheriff's Dept.</b><br>203 East Kentucky Street<br>Franklin, KY   | Mon-Fri<br>8-4                            | 270-586-7425 |
| <b>Simpson</b>    | <b>Franklin Police Dept.</b><br>100 S. Water Street<br>Franklin, KY                 | Mon-Fri<br>8-4                            | 270-586-7167 |

**Kentucky Permanent Prescription Drug Disposal Locations  
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| <b>County</b> | <b>Location</b>  | <b>Hours Open</b>   | <b>Phone</b> |
|---------------|--|---|--------------|
| Shelby        | <b>Shelbyville Police Dept.</b><br>303 Main Street<br>Shelbyville, KY                      | Mon-Fri<br>8:30 - 4:30  | 502-633-2326 |
| Shelby        | <b>Simpsonville Police Dept.</b><br>108 Old Veechdale Road<br>Simpsonville, KY             | Mon-Fri<br>8:00 - 4:00  | 502-722-8110 |
| Shelby        | <b>Shelby County Sheriff's Dept.</b><br>501 Main Street #8<br>Shelbyville, KY              | Mon-Fri<br>8:30 - 4:30  | 502-633-4324 |
| Spencer       | <b>Taylorsville Police Dept.</b><br>72 Taylorsville Road<br>Taylorsville, KY 40071         | Mon-Sun<br>8:30 - 5:00<br>no box call - 477-3231 for<br>officer | 502-477-3231 |
| Taylor        | <b>Campbellsville Police Dept.</b><br>100 Terri Street<br>Campbellsville, KY 42718         | 24/7  | 270-465-4122 |
| Taylor        | <b>Taylor County Sheriff's Dept.</b><br>203 North Court Street<br>Campbellsville, KY 42718 | Mon - Fri<br>8-4:30   | 270-465-4351 |
| Todd          | <b>Todd County Sheriff's Dept.</b><br>202 East Washington Street<br>Elkton, KY             | Mon-Fri<br>8-4  | 270-265-9966 |
| Todd          | <b>Elkton Police Dept.</b><br>73 Court Square<br>Elkton, KY                                | Mon-Fri<br>8-4:00   | 270-265-9879 |
| Todd          | <b>Guthrie Police Dept.</b><br>110 3rd Street<br>Guthrie, KY                               | Mon-Fri<br>8-4  | 270-483-2520 |
| Trigg         | <b>Trigg County Sheriff</b><br>31 Jefferson Street<br>Cadiz, KY 42211                      | 24/7<br>(after hours ring bell for entry)                       | 270-522-6661 |
| Trigg         | <b>Cadiz Police Dept.</b><br>11 Marion Street<br>Cadiz, KY 42211                           | Mon-Fri<br>8-4  | 270-522-8369 |
| Trimble       | <b>Trimble County Sheriff's Dept.</b><br>30 US Hwy 42E<br>Bedford, KY                      | Mon-Fri<br>8-4  | 502-255-7138 |
| Union         | <b>Union County Sheriff's Office</b><br>100 East Main Street<br>Morganfield, KY            | box in vault inside<br>Mon-Fri<br>8-4                           | 270-389-1303 |
| Union         | <b>Methodist Hospital Union County</b><br>4604 US Hwy 60 West<br>Morganfield, KY 42437     | 24/7  | 270-389-5000 |

**Kentucky Permanent Prescription Drug Disposal Locations  
(as of 09-04-2018)**

| <b>County</b>     | <b>Location</b>   | <b>Hours Open</b>            | <b>Phone</b> |
|-------------------|---|------------------------------|--------------|
| <b>Warren</b>     | <b>Warren County Sheriff's Office</b><br>429 E. 10th Street<br>Bowling Green, KY            | Mon-Fri<br>8 - 4:30          | 270-842-1633 |
| <b>Warren</b>     | <b>Bowling Green Police Dept.</b><br>911 Kentucky Street<br>Bowling Green, KY               | 24/7                         | 270-393-2473 |
| <b>Warren</b>     | <b>Kentucky State Police - Post 3</b><br>3119 Nashville Road<br>Bowling Green, KY           | 24/7                         | 270-782-2010 |
| <b>Washington</b> | <b>Springfield Police Dept.</b><br>1 Police Drive<br>Springfield, KY                        | 24/7                         | 859-336-5450 |
| <b>Wayne</b>      | <b>Monticello City Police Department</b><br>195 North Main Street<br>Monticello, KY         | Mon-Fri<br>24 hrs.           | 606-348-9313 |
| <b>Wayne</b>      | <b>Wayne County Sheriff's Office</b><br>55 North Main Street<br>Monticello, KY 42633        | Mon-Fri<br>8-4:30            | 606-348-5416 |
| <b>Webster</b>    | <b>Webster Co. Sheriff's Office</b><br>25 US HWY 41A<br>South Dixon, KY 42409               | Mon-Fri<br>8-4               | 270-639-5067 |
| <b>Webster</b>    | <b>Providence Police Dept.</b><br>200 N. Willow Street<br>Providence, KY 42450              | 24-7                         | 270-667-2022 |
| <b>Whitley</b>    | <b>Williamsburg Police Dept.<br/>City Hall</b><br>423 Main Street<br>Williamsburg, KY 40768 | Mon-Fri 9-4                  | 606-549-6023 |
| <b>Whitley</b>    | <b>Corbin City Police Dept.</b><br>805 S. Main Street<br>Corbin, KY 40701                   | 24/7                         | 606-528-1122 |
| <b>Wolfe</b>      | <b>Wolfe Co. Sheriff's Office</b><br>10 Court St.<br>Campton, KY 41301                      | Mon-Fri - 8-4<br>Sat-8-12    | 606-668-3569 |
| <b>Woodford</b>   | <b>Woodford County Sheriff's Office</b><br>103 South Main Street<br>Versailles, KY          | Mon-Thur - 8-5<br>Fri-8-5:30 | 859-873-3119 |

# National Drug Take Back Initiative

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## NATIONAL TAKE-BACK INITIATIVES

April 27, 2019

October 26, 2019

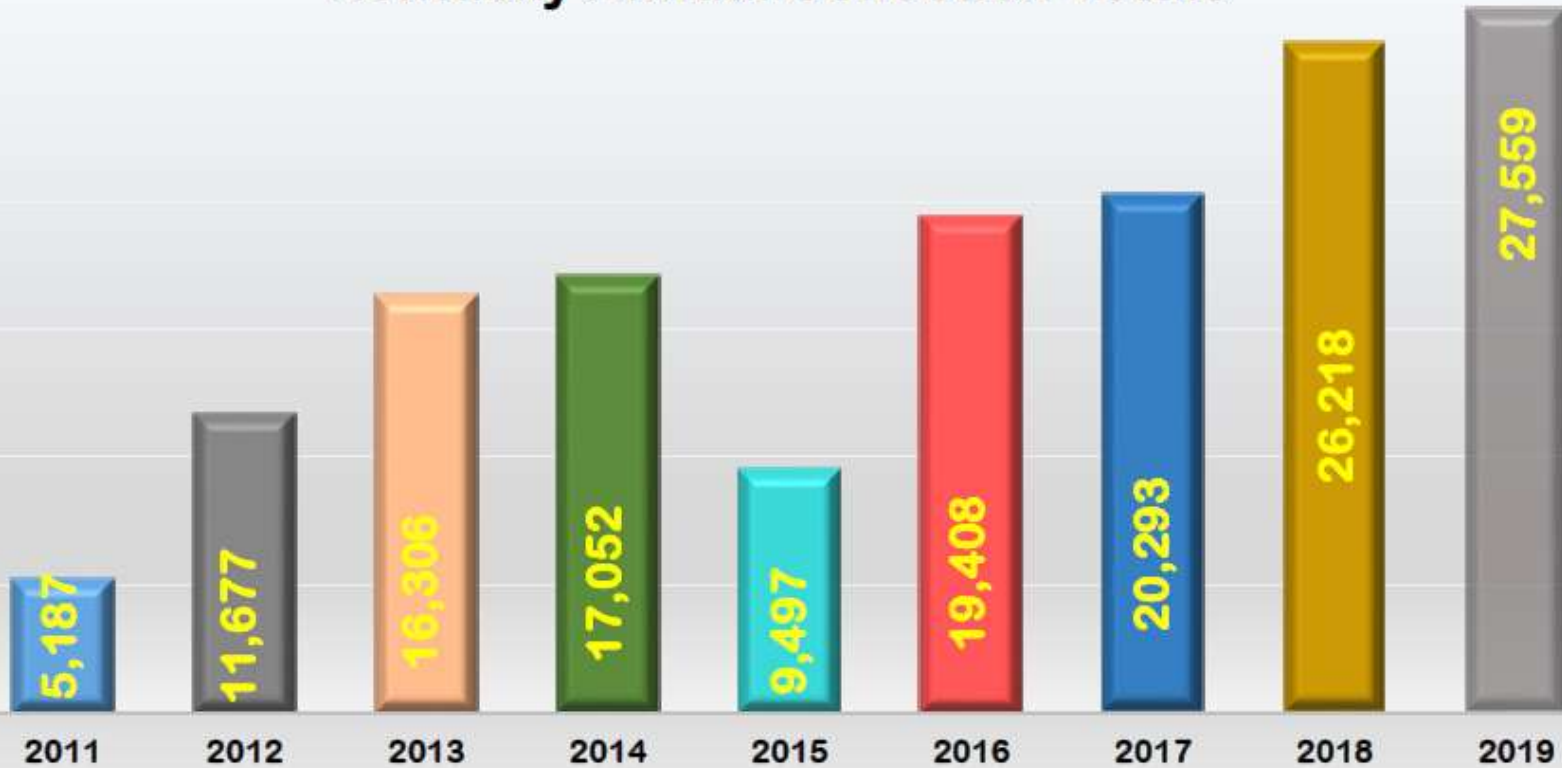
10:00 am – 2:00 pm

The National Prescription Drug Take Back Day addresses a crucial public safety and public health issue. According to the 2018 National Survey on Drug Use and Health, **9.9 million Americans misused controlled prescription drugs**. The study shows that a majority of abused prescription drugs were obtained from family and friends, often from the home medicine cabinet.

In Kentucky, 89 law enforcement agencies participated at 94 collection sites and collected 14,102 pounds of unused, unwanted, and expired prescription drugs. In all, Kentucky has collected a total of 153,197 pounds of unused and/or unwanted prescription medications at all Drug Take-Back vents and locations since October 2011.

To make it easier for citizens of the Commonwealth to dispose of their expired or unwanted medications, both prescription and over-the-counter, prescription drop boxes are available across Kentucky. There are now 198 locations in 116 counties, with sites being added daily. Citizens can search by county for the closest to them by visiting the Kentucky Office of Drug Control Policy website at <https://odcp.ky.gov/Pages/Prescription-Drug-Disposal-Locations.aspx>

## National Drug Take Back Day Kentucky Annual Collection Totals\*



*updated 11-5-2019*



## [KYStopOverdoses Website](#)

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As the heroin epidemic rages on with other deadly opioids sneaking into the supply, we want to link more people to the medication that can reverse an overdose.

The Kentucky Office of Drug Control Policy – Kentucky Agency For Substance Abuse Policy launched the website [KyStopOverdoses.ky.gov](http://KyStopOverdoses.ky.gov) which allows people to search for pharmacies that carry naloxone by city, county, or Zip code. The site also allows users to locate syringe exchange locations on the searchable database and map, along with hours of operation.

The drug naloxone, also known by its brand name Narcan, blocks the effects of heroin and opioids to the brain. However, the drug can also pull someone who is overdosing into immediate withdrawal and restore a normal pattern of breathing.

The new website also serves as an information portal as well. Visitors can get information on how to recognize and react to an overdose, how Kentucky’s Casey’s Law can help parents petition the court to get treatment for an unwilling loved one and how Kentucky’s Good Samaritan law works to protect people from prosecution when they report a drug overdose.

The Kentucky Office of Drug Control Policy- Kentucky Agency for Substance Abuse Policy collaborated with the Advancing Pharmacy Practice in Kentucky Coalition, and the Kentucky Board of Pharmacy to develop the website.

The map includes more than 372 pharmacies and will be updated as new pharmacies are added.

## KY-ASAP: Drug-Free Communities Support Program

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The Drug Free Communities program is directed by the White House Office of National Drug Control Policy, in partnership with the Substance Abuse and Mental Health Services Administration (SAMHSA). The DFC program provides grants of up to \$625,000 over five years to community coalitions that facilitate youth and adult participation at the community level in local youth drug prevention efforts, including prescription drug diversion and prevention initiatives, as well as underage drinking prevention programs. Coalitions are comprised of community leaders, parents, youth, teachers, religious and fraternal organizations, health care and business professionals, law enforcement, and the media. Data show that communities receiving DFC funding have seen significant reductions in past 30-day use of alcohol, tobacco, and marijuana among middle and high school students.

### **FY 2019 New Drug-Free Communities Grantees**

Casey County KY-ASAP – Liberty

The Greymoor-Devondale Healthy Community Coalition – Louisville

Boone County Alliance for Healthy Youth- Florence

Coalition for a Healthy Oldham County – LaGrange

### **FY 2019 DFC Continuation Grantees**

Youth Impact Team – Berea

Drug-Free Warren County – Bowling Green

Wolfe County Coalition UNITED Against Drugs - Campton

Champions for a Drug-Free Gallatin County- Warsaw

Champions for a Drug-Free Pendleton County - Falmouth

Campbell County Drug-Free Alliance – Cold Spring

Shawnee Transformation Youth Coalition – Louisville

Butler County Drug-Free Coalition – Morgantown

Champions for a Drug-Free Lyon County – Eddyville

Champions for a Drug-Free Grant County – Williamstown

Owen County Drug Prevention Coalition – Owenton

Webster County KY-ASAP Coalition – Dixon

Bullitt County Partners in Prevention - Shepherdsville

Trimble County CARES Coalition – Bedford

The Scottsville Allen County Faith Coalition – Scottsville

Scott Countians Against Drugs, Inc. – Georgetown

## KY-ASAP: Partnership for a Drug-Free Kentucky

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Beginning January 2008 the Kentucky Office of Drug Control Policy (KY-ODCP) became an Affiliate/Alliance member with the Partnership for a Drug-Free America.

The Office of Drug Control Policy, as a Communication Partner (formally Local Alliance), in collaboration with the Partnership for a Drug-Free Kids, continues its statewide PSA campaign to bring professionally produced localized award-winning media messages to supportive media along with tracking data that lets us know the frequency and value of the donated media in your community.

The tremendous benefits that we receive from the Partnership allow us to counter all negative messages with positive prevention strategies. This is an excellent opportunity for a positive story on another initiative KY-ASAP & the KY-ODCP is doing to support the reduction of youth & adult substance use.

Addiction is the single greatest preventable illness in the country, and like other diseases, it affects not just the person with the illness but also family and friends. Ninety percent of addictions get started in their teenage years. Parents are more pressed for time than ever, and in addition to finding the time to talk with their children about the health risks of drugs and alcohol, they tell us they need new information, tools, support and help on what to say and do.

Because our mission is to serve as a leader and catalyst for improving the health and safety of all Kentuckians by promoting strategic approaches and collaboration to reduce drug use and related crime this is a perfect opportunity for the KY-ODCP and KY-ASAP to collaborate and be a part of such an important and proactive issue.

KY-ODCP and KY-ASAP continues to take advantage of the many collaborative opportunities and outreach responsibilities it has to share our mission regarding prevention, treatment, and law enforcement. It is necessary for us to be able to disseminate that information statewide.

KY-ODCP collaborates with the local KY-ASAP boards across the Commonwealth to assist us in the distribution of the powerful PSA's to insure the message is disseminated across Kentucky.

## Treatment

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### KY HELP Call Center:

The Kentucky Justice and Public Safety Cabinet and Operation UNITE are launched a new substance abuse call center that will connect people across the state with drug treatment.

Kentuckians struggling with a substance use disorder, either themselves or within their families, can call [1-833-8KY-HELP \(1-833-859-4357\)](tel:1-833-8KY-HELP) toll-free to speak with a specialist about treatment options and available resources. The specialist will conduct a brief screening assessment in order to connect callers with the most

Options will include everything from medication-assisted treatment to faith based care, and a live specialist will help callers work through all the variables, such as location and cost.

Callers can speak to a specialist from 8:30 a.m. to 5:30 p.m. (EST), Monday through Friday. During non-business hours, callers may leave a message and the call center staff will get back in touch with them.

Operation UNITE already fields about 1,000 inquiries each month from desperate residents seeking help with a substance use disorder. The new KY HELP Call Center will provide referrals across the state to both public and private treatment providers.

### Casey's Law:

The Matthew Casey Wethington Act for Substance Abuse Intervention is named for Matthew Casey Wethington, who died in 2002 from a heroin overdose at the age of 23. Casey was an energetic young man who enjoyed life until it was "taken" by drugs. Casey never intended to become addicted to drugs when he used the first time. What he did not realize was that his using would progress from abusing to dependence and then to the disease of addiction. Although his parents tried to get him help, there was no law that could force someone into treatment because he was an adult. After Casey's death his parents lobbied for a change. "Casey's Law" passed on April 9, 2004, and took effect July 13, 2004.

The act provides a means of intervening with someone who is unable to recognize his or her need for treatment due to their impairment. This law will allow parents, relatives and/or friends to petition the court for treatment on behalf of the substance abuse-impaired person.

Denial and distorted thinking impedes a person's ability to make a rational decision. The "bottom" for many is death. Addiction is a progressive, life-threatening disease. The best hope of survival for a person who is substance abuse impaired is intervention. Studies show that involuntary treatment can be just as successful as voluntary treatment. Most individuals who are substance abuse-impaired receive court-ordered treatment only after they have become arrested for a crime while under the influence of a substance. Drugs and crime often go hand-in-hand because people who are substance abuse impaired are forced by their disease to resort to any means necessary to procure their drug. Court-ordered treatment can be effective regardless of who initiates it. Not all people who are substance abuse impaired are arrested or, in the event that they are, may not receive the necessary treatment.

The following steps must be taken in order to involuntarily commit someone to treatment:

- Obtain a copy of the petition from the District Court clerk's office by requesting Form 700A – the Verified Petition for Involuntary Treatment of Alcohol/Drug Abuse – or [click here](#) to download.
- A spouse, relative, friend or guardian of the substance abuse-impaired person completes the petition and files it with the District Court clerk.
- The court reviews the allegations in the petition and examines the petitioner under oath.
- The court determines whether there is probable cause to order treatment for the person named in the petition (the respondent).
- If probable cause is established a judge appoints an attorney to represent the respondent, order the respondent to be evaluated, and schedule a hearing within 14 days.
- The respondent is notified of the date and purpose of the hearing.
- The respondent is evaluated by two qualified health professionals, at least one of whom is a physician, to determine if the respondent could benefit from treatment.
- If the judge finds the respondent should undergo treatment, the court shall order treatment from 60 days up to 360 days, depending upon the request in the petition and the result of the evaluation. Treatment options vary depending upon each individual's circumstances and can range from detoxification to intensive treatment through recovery.

As the law is currently written the petitioner is obligated to pay all costs incurred in the process as well as for the court-ordered treatment. The petitioner must sign a guaranty for payment.

### [The Angel Initiative:](#)

The Angel Initiative is a program started by the Kentucky State Police in 2016 with one goal: save lives. Walk in. Ask for help.

The Angel Initiative is a pro-active approach offering an alternative escape to those battling addiction. Under this initiative, anyone battling addiction can come to ANY KSP post and get help finding a treatment center. No questions asked.

To date, KSP has helped to place countless individuals, who asked for help, in treatment. We will continue to pursue and prosecute those trafficking drugs and feeding the addiction epidemic. But if you find yourself needing help to escape the grip of addiction, this program is the help you need.

Just show up at any of the 16 KSP posts across the Commonwealth. You can even call in ahead of time to schedule a meeting.

An "Angel" at the post will meet you and will connect you with one of the many nearby treatment centers with health professionals that are experts in helping



## [Find Help Now:](#)



A new website will provide a vital link for Kentucky health care providers, court officials, families and individuals seeking options for substance abuse treatment and recovery. “[Find Help Now KY](#)” ([www.findhelpnowky.org](http://www.findhelpnowky.org)) will deliver real-time information about available space in substance use disorder treatment program, and guide users to the right type of treatment for their needs.

The website is a project of the [Kentucky Injury Prevention and Research Center \(KIPRC\)](#) at the [University of Kentucky College of Public Health](#), a bona fide agent of the Kentucky Department for Public Health. The project is in partnership with the Office of Kentucky Governor and the Kentucky Cabinets for Health and Family Services and Justice and Public Safety. The site, funded by the Centers for Disease Control and Prevention (CDC), will link to Kentucky’s current, “[Don’t Let Them Die](#)” website. The “Find Help Now KY” website also includes the statewide hotline number (1-833-8KY-HELP) for direct assistance.

“Find Help Now KY” features a near real-time treatment opening locator for substance use disorder (SUD, commonly known as addiction). The locator guides individuals to available SUD treatment openings based on the type of treatment needed. It takes into consideration the substance(s) being used, payment options including commercial and public insurance programs, gender identity, preference for in- or out-patient treatment, and needed co-occurring treatments

such as mental health care, plus 30 more criteria. The site provides daily availability information for treatment openings, to enable rapid admission to addiction programs. The “Find Help Now KY” landing page also allows high priority populations, such adolescents and those who are pregnant, to find treatment availability options more easily.

## Personalized, compassionate assistance

Staffed by Operation UNITE, the KY HELP Statewide Call Center provides Screening and Referral Specialists who:

- Speak with *each* caller seeking resources for those needing substance use disorder treatment;
- Provide comfort and guidance to family members confronted with a loved one's addiction;
- Respond to questions about substance use disorders and the disease of addiction;
- Assist each client by completing the "leg work" of making contact with facilities to ensure that they accept the client's insurance and to determine the estimated time before the client will be able to begin treatment.

Every caller is offered the option of being contacted by an Outreach Specialist within a 30-day period (for up to a year) to determine their progress and to provide additional assistance that may be needed.

## Hours of Operation

Monday to Friday  
8:30 am to 5:30 pm (EDT)

*Messages left after business hours  
are returned the next business day.*

1-833-8KY-HELP  
Fax: 606-886-9461



350 CAP Drive  
London, KY 40744  
1-866-678-6483  
OperationUNITE.org



DON'T  
LET  
THEM  
DIE

The KY HELP Statewide Call Center is an initiative of the Commonwealth's "Don't Let Them Die" campaign. The Call Center is staffed by Operation UNITE utilizing funding from the Kentucky Justice & Public Safety Cabinet.



The Angel Initiative, provided by the Kentucky State Police, allows anyone battling an addiction to come to any KSP Post and receive help finding a treatment facility - no questions.

FindHelpNowKY.org

FindHelpNowKY.org, provided by the Kentucky Injury Prevention and Research Center, is a listing of treatment centers in the state accepting new patients.



**KYHELP**  
STATEWIDE CALL CENTER

*Providing resources  
for Kentuckians  
seeking help for  
a substance use  
disorder and  
offering support  
to their families.*

**833-8KY-HELP  
(833-859-4357)**

or **text**

**HOPE to 96714**



## Kentucky Department of Corrections:

### Addiction Services of Kentucky

Recovery is possible if you **ASK** for help!

The Division of Addiction Services is responsible for the clinical and administrative oversight of all Substance Use Disorder (SUD) treatment related to inmates, parolees, and probationers within our care as determined by statute. This oversight includes treatment in prisons, jails, reentry service centers (RSCs), recovery Kentucky Centers (RKC), and Intensive Outpatient Programs (IOPs) through a partnership with regional Community Mental Health Centers (CMHCs). Substance Use Disorder clinical determination for probationers and parolees through a network of social service clinicians in the Probation & Parole districts are also included in this oversight.

To date, the Division has programs in the following:

- 11 programs in 8 prisons with a total of 853 beds
  - 1 private prison program with 112 beds at Lee Adjustment Center (LAC)
- 29 programs in 22 detention centers/jails with a total of 1,555 beds
- 11 Reentry Service Centers with a total of 1,131 beds
- 14 Recover Kentucky Centers with a total of 840 beds
- 14 Intensive Outpatient Programs - Community Mental Health Centers with a total of 1,450 beds
- 3 Regional Intensive Outpatient Programs (Louisville, Lexington, Northern Kentucky)
- 36 Social Service Clinicians assigned to Probation & Parole Districts

The Department has expanded programming from 475 treatment beds in 2004, to a current level of 5,941 treatment slots in 2019. This is an overall growth of over 1,300%. We continue to monitor for the necessity of additional programs. All prison and jail programs are licensed through the Office of Inspector General (OIG). The Division of Addiction Services has been providing a Substance Use Disorder treatment curriculum that is consistently becoming more clinically driven instead of punitively driven.

In 2015, the Kentucky General Assembly allocated \$10 million to the Justice and Public Safety Cabinet under Senate Bill 192. Of that, \$3 million was for the Department of Corrections (DOC) to fund Medically Assisted Treatment (MAT) in jails and prisons. In March 2016, the KY Division of Addiction Services was one of the first prison jurisdictions in the nation to initiate a protocol for

MAT, utilizing the injectable opioid antagonist Naltrexone (Vivitrol®) with inmates who meet the criteria for high risk alcohol, opioid, and heroin abuse. Our protocol and implementation has resulted in our designation as a Center of Innovation by the United States Bureau of Justice.

## [Recovery Kentucky](#)

Recovery Kentucky was created to help Kentuckians recover from substance abuse, which often leads to chronic homelessness. There are 14 Recovery Kentucky centers across the Commonwealth. They are in Bowling Green, Campbellsville, Erlanger, Florence, Grayson, Harlan, Henderson, Hopkinsville, Morehead, Owensboro, Paducah, Richmond, Somerset, and Knott County. These centers provide housing and recovery services for up to 2,000 Kentuckians simultaneously across the state.

The Recovery Kentucky centers were designed to reduce the state's drug problem and resolve some of the state's homeless issues. They help people recover from addiction and help them gain control of their lives to eventually reside in permanent housing.

Thousands of Kentuckians experience homelessness each year. Many of them are "chronically homeless," meaning they remain homeless for extended or repeated periods of time, often due to chemical dependency and other special needs. While the chronically homeless only represent a fraction of the homeless population, they consume over 50 percent of homeless resources.

As supportive housing projects, each center uses a recovery program model that includes peer support, daily living skills classes, job responsibilities, and establishes new behaviors.

This type of supportive housing and recovery program is proven to help people who face the most complex challenges to live more stable, productive lives. It has been demonstrated successfully by both the Hope Center in Lexington and The Healing Place in Louisville, which were models for the program, and was named "A Model That Works" by the U.S. Department of Health and Human Services.

Without a stable place to live and a support system to help them address their underlying problems, most homeless people who also suffer from substance abuse and addiction bounce around between shelters, public hospitals, prisons, psychiatric institutions, and detoxification

centers. Recovery Kentucky was designed to save Kentuckians millions in tax dollars that would have been spent on emergency room visits and jail costs.

#### Partnerships and Funding:

Recovery Kentucky is a joint effort by the Department for Local Government (DLG), the Department of Corrections, and KHC. These agencies developed a financial plan that has provided construction and operational financing, including a \$2.5 million annual allocation of Low Income Housing Tax Credits from KHC, which will generate a total equity investment of approximately \$30 million for construction costs. Operational funding includes approximately \$3 million from DLG's Community Development Block Grant program and approximately \$5 million from the Department of Corrections.

The local governments and communities at each Recovery Kentucky center location have also contributed greatly in making these centers a reality.

## WOMEN'S CENTERS

**Evarts - Harlan County**  
*Cumberland Hope Community  
Center for Women*  
6050 Hwy 38  
Evarts, KY 40828  
606-837-0100 or 606-837-0200

**Florence - Boone County**  
*Brighton Center for Women*  
375 Weaver Rd.  
Florence, KY 41042  
859-282-9390

**Henderson - Henderson County**  
*Women's Addiction  
Recovery Manor*  
56 North McKinley  
Henderson, KY 42420  
270-826-0036

**Hopkinsville - Christian County**  
*Trilogy Center for Women*  
100 Trilogy Ave.  
Hopkinsville, KY 42240  
270-885-2902

**Lexington (Program Model) -  
Fayette County**  
*The Hope Center Recovery  
Program for Women*  
1524 Versailles Rd.  
Lexington, KY 40504  
859-252-2002

**Louisville (Program Model) -  
Jefferson County**  
*The Healing Place Women  
and Children's Community*  
1503 S. 15th St.  
Louisville, KY 40210  
502-568-6680

**Richmond - Madison County**  
*Liberty Place for Women*  
218 Lake St.  
Richmond, KY 40475  
859-625-0104

**Somerset - Pulaski County**  
*SKYHope Recovery Center  
for Women*  
77 Union Street  
Somerset, KY 42501  
606-425-4787

## FOR MORE INFORMATION

**Mike Townsend**  
Toll-free in Kentucky: 800-633-8896  
502-564-7630, extension 715  
TTY 711  
mtownsend@kyhousing.org

## MEN'S CENTERS

**Bowling Green-Warren County**  
*Men's Addiction Recovery  
Campus*  
1791 Old Louisville Road  
Bowling Green, KY 42101  
270-715-0810

**Campbellsville - Taylor County**  
*The Healing Place of  
Campbellsville*  
105 Hiestad Rd.  
Campbellsville, KY 42718  
270-789-0176

**Emmalena - Knott County**  
*Hickory Hill Recovery Center*  
100 Recovery Way  
Emmalena, KY 41740  
606-785-0141

**Erlanger - Kenton County**  
*Transitions Grateful Life  
Center for Men*  
305 Pleasure Isle Dr.  
Erlanger, KY 41018  
859-359-4500

**Grayson - Carter County**  
*Genesis Recovery  
Kentucky Center*  
400 CW Stephen Blvd.  
Grayson, KY 41143  
606-898-2111

**Lexington (Program Model) -  
Fayette County**  
*George Privett Recovery  
Center for Men*  
250 W Loudon Ave.  
Lexington, KY 40508  
859-225-4673

**Louisville (Program Model) -  
Jefferson County**  
*The Healing Place for Men*  
1020 W. Market St.  
Louisville, KY 40202  
502-585-4848

**Morehead - Rowan County**  
*Morehead Inspiration Center  
for Men*  
1111 W US 60  
Morehead, KY 40351-9271  
606-783-0404  
Fax: 606-783-0422

**Owensboro - Daviess County**  
*Owensboro Regional Recovery  
Center for Men*  
4301 Veach Rd.  
Owensboro, KY 42303  
270-689-0905

**Paducah - McCracken County**  
*CenterPoint Recovery Center  
for Men*  
530 County Park Rd.  
Paducah, KY 42001  
270-444-3640

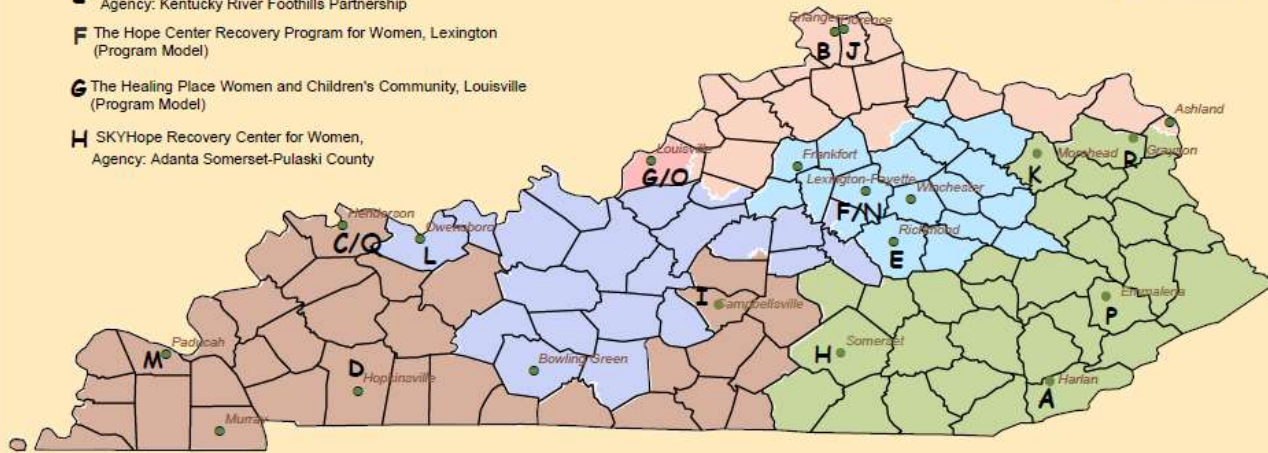


## Women's Recovery Kentucky Centers

- A** Cumberland Hope Community Center For Women, Harlan  
Agency: Cumberland River Behavioral Health
- B** Brighton Center for Women, Florence  
Agency: Brighton Center Inc.
- C** Women's Addiction Recovery Manor, Henderson  
Agency: Henderson Addiction Recovery LLC
- D** Trilogy Center for Women, Hopkinsville  
Agency: Pennyroyal MH/MR Board, Inc.
- E** Liberty Place for Women, Richmond  
Agency: Kentucky River Foothills Partnership
- F** The Hope Center Recovery Program for Women, Lexington  
(Program Model)
- G** The Healing Place Women and Children's Community, Louisville  
(Program Model)
- H** SKYHope Recovery Center for Women,  
Agency: Adanta Somerset-Pulaski County



- Kentucky Cities selection 3
- First Congressional District
- Second Congressional District
- Third Congressional District
- Fourth Congressional District
- Fifth Congressional District
- Sixth Congressional District



## Men's Recovery Kentucky Centers

- I** The Healing Place of Campbellsville  
Agency: The Healing Place
- J** Transitions Grateful Life Center for Men, Erlanger  
Agency: Transitions Inc.
- K** Morehead Inspiration Center for Men, Morehead  
Agency: Pathways Inc.
- L** Owensboro Regional Recovery Center for Men  
Agency: Audubon Area Community Services/  
Lighthouse Counseling Services Inc.
- M** CenterPoint Recovery Center for Men, Paducah  
Agency: Four Rivers Behavioral Health Inc.
- N** George Privett Recovery Center for Men, Lexington  
(Program Model)
- O** The Healing Place for Men, Louisville  
(Program Model)
- P** Hickory Hill Recovery Center, Emmalena  
Agency: Kentucky River Community Care Inc.
- Q** Men's Addiction Recovery Campus  
Agency: Henderson Addiction Recovery LLC
- R** Genesis Recovery Kentucky Center, Grayson  
Agency: Pathways, Inc.

This Map Created By:  
Bernadette Hillman  
Kentucky Housing Corporation  
January 21, 2015

# ADDENDUMS

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Local Tobacco Addiction Substance Abuse Board  
Buffalo Trace Local KY-ASAP Board (Ron Rice)

## Addendum A

### Buffalo Trace Local ASAP Board - 2019-2020 Program Update

1. Awareness Campaigns: Projects or programs funded directly by BT-ASAP to bring awareness to certain issues
  - a. "What's My Anti-Drug" Slogan Contest- for middle school students in region to draw their reason for not using drugs. Drawings are reproduced on banners.
  - b. Family Day- In September the board uses funds to make recipe cards to be distributed to families via the school systems promoting family dinner time and conversation
  - c. Alcohol Awareness Month- In April the board uses funds to place an article in the paper and online to urge adults not to provide alcohol to youth
2. Drug Tip Hotline
3. School Prevention Education/Alternative Activities Grants- In the fall and spring the board provides \$500 to schools in the region to help with prevention programming or activities
4. STOP Regional Youth Coalition- The board entirely funds this youth coalition made up of 9<sup>th</sup>-12<sup>th</sup> grade students from across the BT Region. They complete the following activities/projects:
  - a. Bulletin Boards: Students create bulletin boards on drug prevention topics and change the boards every other month
  - b. Social Media Messages: Each school in the region has an Instagram page for their STOP coalition and they promote healthy behaviors by posting every week
  - c. Drug Prevention Information/Dissemination: At ball games, health fairs, community events and other locations the coalition will disseminate prevention education/resources
  - d. Prevention Programs in Schools: The students go to elementary and middle schools and present on drug prevention topics and healthy choices/behaviors
  - e. Prom Promise: The students works with elementary schools to have 2<sup>nd</sup>-4<sup>th</sup> grade students write high school students and ask them about what they are wearing/driving to prom, but also ask them not to use alcohol or drugs on prom night. High school students who are willing to make that pledge respond back to the students with a letter.
  - f. Fans for Fans: Students created a design with prevention information on fans to be given to people attending sports events.
  - g. Stick Shock: Students go out during Alcohol Awareness month in April and place stickers on alcohol packaging that remind adults not to provide alcohol to underage youth.
5. Buffalo Trace Champions for a Drug-Free KY- BT ASAP entirely funds this grass roots coalition made up of members from throughout the Buffalo Trace region representing many sectors from businesses, to churches, to law enforcement, schools and more
  - a. Report card stuffers: Coalition members create two-sided cards that contain prevention information and education for parents on middle school students. These go home to students four times a year with their report cards

- b. Juuling Awareness Campaign: Funds will be used to create a comprehensive awareness campaign around Juuling that targets youth and adults
6. Mini-Grants also provided to:
- a. Augusta Independent School
  - b. Flemingsburg Police Department - Prevention Education
  - c. Mason County Smoke-Free Partnership – Funds will be used for a cinema ad promoting a smoke-free Mason County
  - d. Comprehend, Inc. Children Services- For summer youth programs using drug prevention curriculum and to assist with school-based therapists
  - e. Comprehend, Inc. Intensive Outpatient Services- Funds used to provide drug testing to clients in program and provision of curriculum
  - f. Comprehend, Inc. January House – Funds used to provide curriculum and supplies for the sober living facility
  - g. Redeemed Outreach from House of Mercy Ministries – Funds will be used to purchase curriculum for recovery classes
  - h. Lewis County High School Sources of Strength – Funds will be used to purchase supplies for Sources of Strength Campaigns

**Addendum B**  
**Local Tobacco Addiction Substance Abuse Board**  
**Daviess County Local KY-ASAP Board (Jeff Jones)**

Whitesville Community Kick-Off

Over 100 people attended the Resource Fair and presentations from Casey's Law, Mother's Against Drunk Driving, Tobacco Control Specialists on new trends

Support to McLean County on KIP Survey Results

Brescia Spring Break Awareness Activity

Support to Youth Coalitions to secure YES Grant funding

Marijuana Presentation at Kentucky Prevention Academy

Partnership with Emerson Academy students and administration

Superintendent Roundtable to discuss juul/marijuana/vaping and suggested policies to address students

Developed the Green River Regional Teen Council

Green River Teen Leadership Conference

Over 110 participants in the annual conference, that featured the Green River Regional Teen Council as facilitators, in addition to Health Department, Owensboro Police Department and additional RPC staff

Convened the Regional Faith Leader Breakfast with focus on mental health and substance misuse issues

Supported Sources of Strength training in McLean County

Supported Truth and Consequences in McLean and Webster Counties

Recruited Daviess County students (Owensboro, Owensboro Catholic, Apollo and Daviess County) to be trained in Voluntary compliance

Provided Mental Health First Aid for First Responders, Faith-Based, Higher Education, CMHC Staff (Adult) And McLean County High School and Ohio County Schools in addition to RVBH staff (Youth)

Provided protective gloves for first responders

Provided treatment vouchers for Drug Court participants and others in community

Supported disposal of drug boxes maintained by Sheriff and Police Departments



## Office of Drug Control Policy Staff

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### Van Ingram [van.ingram@ky.gov](mailto:van.ingram@ky.gov)

Van Ingram is the Executive Director for the Kentucky Office of Drug Control Policy. Van joined the KY-ODCP in **November 2004**, shortly after the office was created with the mission of coordinating Kentucky's substance abuse efforts in enforcement, treatment and prevention/education.

Van served with the Maysville Kentucky Police Department for more than 23 years, the last six as Chief of Police. He is a former President of the Kentucky Association of Chiefs of Police, and was named "Kentucky Chief of the Year" in 2001. He is the 2004 recipient of the Governor's Award for Outstanding Contribution to Law Enforcement, as well as, the Melvin Shein Award for distinguished service to Kentucky law enforcement.

Van is a certified law enforcement instructor and has trained officers across the state on a variety of topics, including community oriented policing, case management, and "Kentucky Substance Abuse Issues" for Chiefs, Sheriff's and command staff. He is a frequent speaker on a variety of substance abuse issues both in Kentucky and nationally.

### Heather Hogan Wainscott [heather.wainscott@ky.gov](mailto:heather.wainscott@ky.gov)

Heather Wainscott joined the Kentucky Office of Drug Control Policy in **March 2005** as Branch Manager. Heather began her public service career in 1997 serving as the Executive Assistant to the Franklin County Judge Executive, as well as, the Payroll & Human Resources Administrator at the Franklin County Fiscal Court.

Heather has an extensive background in Local Government Administration and Public Relations. She also worked as a contract lobbyist, and served as Director of Marketing for Junior Achievement, a not-for-profit organization whose purpose is to inspire young people to succeed in a global economy. Heather also has a breadth of high-school and middle-school classroom teaching experience in World History, American History, and Political Science.

Heather holds a Bachelor of Arts degree in Political Science and Education from the University of Kentucky.

**Amy Andrews** [amy.andrews@ky.gov](mailto:amy.andrews@ky.gov)

Amy Andrews joined KY-ODCP as the Program Manager for the Kentucky Agency for Substance Abuse Policy in **July 2007**. She began her service with the State of Kentucky in 2004 working with the Kentucky Office of Homeland Security, the Kentucky Personnel Cabinet, the Governor's Office of General Counsel and the Office of the Governor's Chief of Staff. Additionally, Amy worked as a legal assistant with the U.S. Attorney's Office for both the Middle District of Georgia as well as the Western District of Kentucky. Her duties included working with the Anti-Terrorism Advisory Council and the Law Enforcement Coordinating Committee. Amy attended Columbus State University where she majored in Criminal Justice.

OFFICE OF DRUG CONTROL POLICY  
JUSTICE AND PUBLIC SAFETY CABINET  
125 HOLMES STREET  
FRANKFORT, KENTUCKY 40601  
502-564-9564  
502-564-6104 (FAX)  
1-888-414-ODCP  
[WWW.ODCP.KY.GOV](http://WWW.ODCP.KY.GOV)

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