COMMONWEALTH OF KENTUCKY JUSTICE & PUBLIC SAFETY CABINET



2018 Combined Annual Report

Kentucky Office of Drug Control Policy

-AND-

Kentucky Agency for Substance Abuse Policy

John C. Tilley, Secretary Justice & Public Safety Cabinet

Van Ingram, Executive Director
Office of Drug Control Policy
March 2019



MATTHEW G. BEVIN GOVERNOR COMMONWEALTH OF KENTUCKY
OFFICE OF DRUG CONTROL POLICY

JUSTICE AND PUBLIC SAFETY CABINET 125 HOLMES STREET, 1ST FLOOR FRANKFORT, KENTUCKY 40601 (502) 564-9564 (502) 564-6104 - FAX March 6, 2019

JOHN C. TILLEY
SECRETARY

VAN INGRAM EXECUTIVE DIRECTOR

The Honorable Matthew Bevin, Governor The Honorable Jenean Hampton, Lt. Governor Commonwealth of Kentucky The State Capitol Frankfort, Kentucky 40601

Dear Governor Bevin and Lt. Governor Hampton:

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 2018 activities, 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 major partners in the substance abuse system. 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.

Although there is much to do in the ever changing substance 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,

Van Ingram

Executive Director

Van L. Ingran

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Executive Summary

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, and the Division of Mental Health and Substance Abuse in the Cabinet of Health and Family Services. 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.

Overarching Themes

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

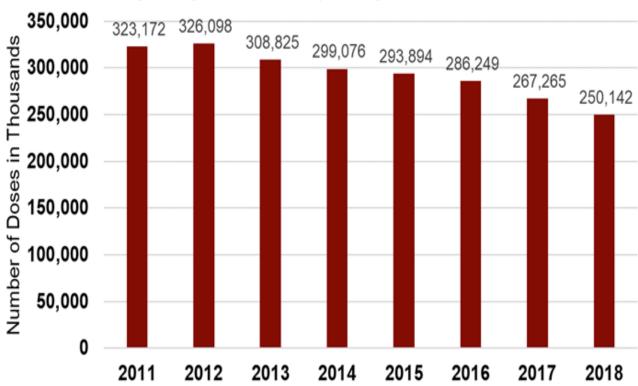
- Establish multi-jurisdictional enforcement efforts that contain a local, state and coordinate, and when possible, integrate publicly funded prevention, treatment and enforcement efforts
- Reduce the demand for prescription & illicit drugs in Kentucky
- Reduce the supply of prescription & illicit drugs 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

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 250,142 in 2018, a 75 million dosage decline. HB1 has had the intended effect of reducing the overprescribing of Rx painkillers.

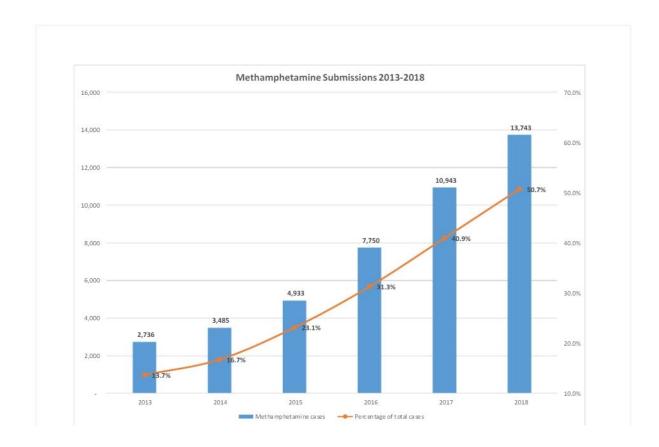
Annual Opioid Analgesic Doses (excluding Buprenorphine/Naloxone) as Reported to KASPER



Methamphetamine:

Domestic production of methamphetamine has continued to decline. Down from an all-time high in 2011 of 1235 labs, there were less than 38 in 2018. Unfortunately, meth produced in Mexico and South America has increased. In 2018, 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. The increasing dangerous drug now makes up 51 percent of the submissions.



Synthetic Drugs:

Previous legislation aimed at synthetic drugs was successful at eliminating retail over the counter sales of synthetic drugs. The threat in 2018 is from internet sales of the drugs from foreign sources. Several small communities saw devastating results from the introduction of "flakka" to their areas. The 2016 session of the General Assembly resulted in the increased penalties for trafficking in synthetic drugs.

In November 2016, Governor Bevin signed an emergency order outlawing U47700, a potentially deadly drug that is often mixed with heroin. Sometimes referred to as simply U4, the super-strong synthetic opioid has been cited as the cause of dozens of deaths across the U.S. in the last several months – including, most notably, the overdose death of Prince, caused by a "cocktail" that included Fentanyl and U-47700.

The new regulation would make it a schedule one controlled substance, putting it in the same category as heroin and fentanyl.

Marijuana:

Cannabis continues to be the most used illicit drug in Kentucky. In 2018, the marijuana eradication team seized over 420,000 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 Total Plants 421,202

Outdoor Total Plots 3,416

Indoor Total Plants 3,493

Indoor Total Plots 59

Total Plants by Kentucky State Police – 424,695

2017 Overdose Fatality Report

Highlights of the 2017 findings include:

Kentucky overdose fatalities increased in 2017. Overdose deaths of Kentucky residents, regardless of where the death occurred, and non-residents who died in Kentucky, totaled 1,565 as reported to the Office of Vital Statistics in June 2018. Of those, 1,468 were Kentucky residents¹. That's compared to 1,404 overdose deaths counted in the 2016 report. Within the 1,565 overdose deaths, toxicology was available for 1,468 of those. A review of cases autopsied by the Kentucky Medical Examiner's Office and toxicology reports submitted by coroners indicates that in 2017:

- People ages 35 to 44 were the largest demographic in overdose deaths. Followed by 45 to 54.
- Autopsies and toxicology reports from coroners show that approximately 22 percent of overdose deaths involved the use of heroin in 2017, down from 34 percent in 2016.
- Fentanyl was involved in 763 Kentucky resident overdose deaths. That accounts for 52 percent of all deaths, up from 47 percent in 2016.
- Jefferson County had the most overdose deaths of any county with 426, up from 364 in the 2016 report.
- The largest increase in overdose fatalities occurred in Jefferson County, where deaths increased by 62, from 364 deaths in 2016. Other counties with significant increases include Fayette County by 49, Campbell County by 26, and Kenton County by 17.
- The largest decrease occurred in Madison County, which had 9 fewer fatalities in 2017 compared to the previous year. Other counties with significant declines include Bell County, which declined by 10; and Knox County, which declined by 8. Breathitt and Scott Counties declined by 6.
- Morphine was detected in 627 cases and Monoacetylmorphine (heroin) in 327.
- Alprazolam was detected in approximately 36 percent of cases; gabapentin, 31 percent; methamphetamine, 29 percent (a 57 percent increase); oxycodone, 14 percent (a 6 percent decline); hydrocodone, 14 percent (a 2 percent decline).

6

¹ The stated statistics are presented from toxicology of overdose deaths of Kentucky residents

•	_	Centucky Medical Examiner and coroner reports, for overdose deaths by county, per capita, were:
	1) Estill County	77.00
	2) Kenton County	69.50
	3) Campbell County	66.00
	4) Boyd County	64.60
	5) Mason County	58.20
•	The top five counties	for heroin-related overdose deaths were:
	1) Jefferson County	135
	2) Fayette County 42	
	3) Campbell County	18
	4) Kenton County	16
	5) Boone County	11
•	The top five counties	for fentanyl-related deaths were:
	1) Jefferson County	274
	2) Fayette County 112	
	3) Kenton County 52	
	4) Campbell County	41
	5) Boone County	29
•	The top five counties combination were:	for deaths related to heroin and fentanyl in
	1) Jefferson County	94
	2) Fayette County	33
	3) Kenton County 15	
	4) Campbell County	13
	5) Boone County	8

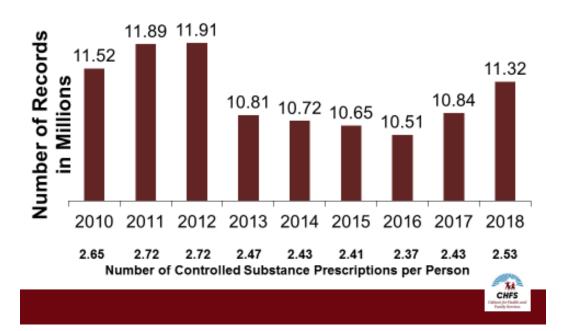
KASPER Summary

The year 2018 saw two significant enhancements to the Kentucky All Schedule Prescription Electronic Reporting System (KASPER). In February, KASPER implemented a new Prescriber Report Card that provides prescribing summary information and comparative statistics to help prescribers review their controlled substance prescribing patterns and to compare their prescribing with others in their specialty area. In June, KASPER implemented an interface with the Administrative Office of the Courts, CourtNet system. This interface allows KASPER users the option to request information on a patient's Class A Misdemeanor or Felony drug convictions for the prior five years. The following data highlight the increasing usage of KASPER and provide information on the quantities and categories of controlled substances dispensed in Kentucky.

Total Schedule II through V Controlled Substances Reported to KASPER

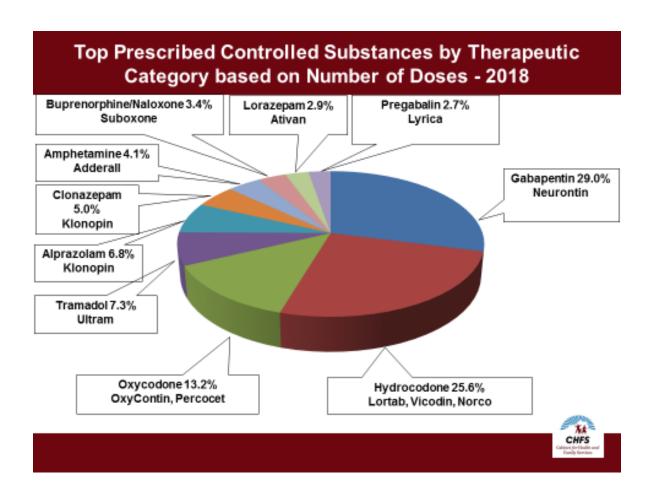
Kentucky made gabapentin a Schedule V controlled substance effective July 1, 2017, and gabapentin dispensing data is now tracked in KASPER and included on KASPER reports. As a result of scheduling gabapentin, the total number of controlled substances dispensed in Kentucky as reported to KASPER increased in 2017 and 2018.

Controlled Substance Records Reported to KASPER - Total/Per Person



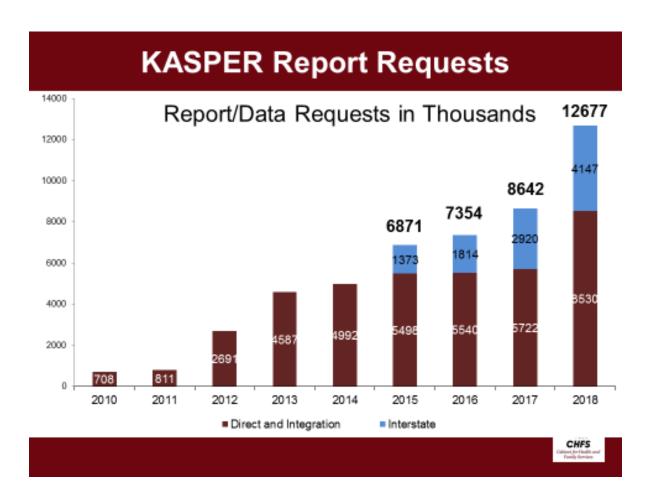
<u>Top 10 Controlled Substances Dispensed in Kentucky as Reported to KASPER:</u>

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 2018, there were over 12.6 million requests for KASPER reports and data, an increase of 47% from 2017. 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.

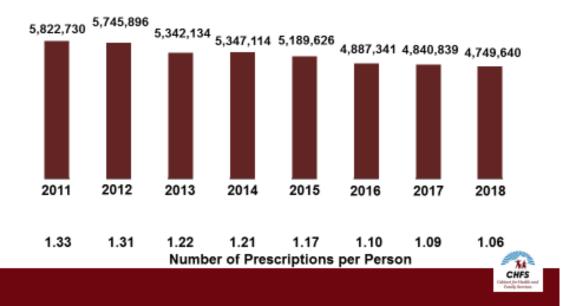


Total Opioid Prescriptions

The total number of opioid prescriptions dispensed in Kentucky as reported to KASPER continues to decline, with a 2018 per capita rate of 1.06 opioid prescriptions per person.

Opioid Prescriptions Total/Per Person

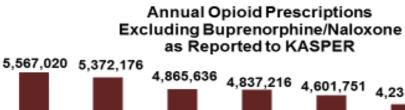
Total Opioid Prescriptions as Reported to KASPER

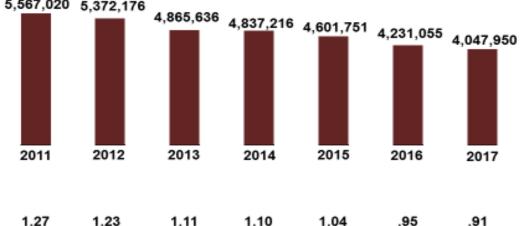


Total Opioid Prescriptions for Pain

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.

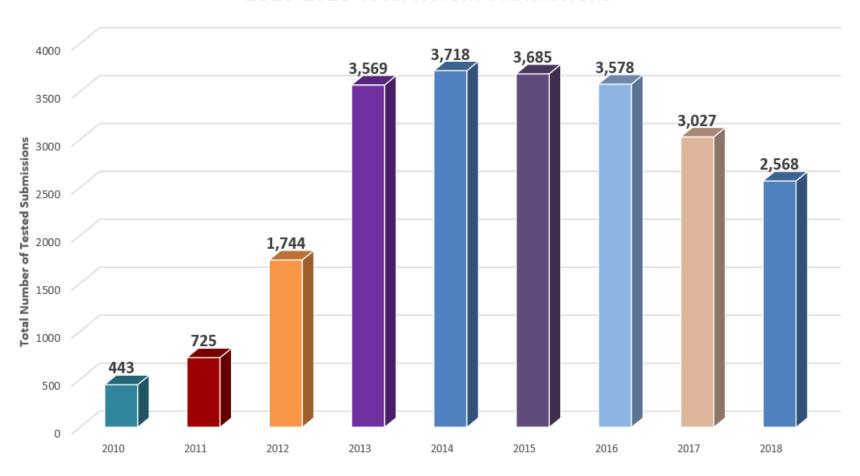
Opioid Prescriptions for Pain Total/Per Person



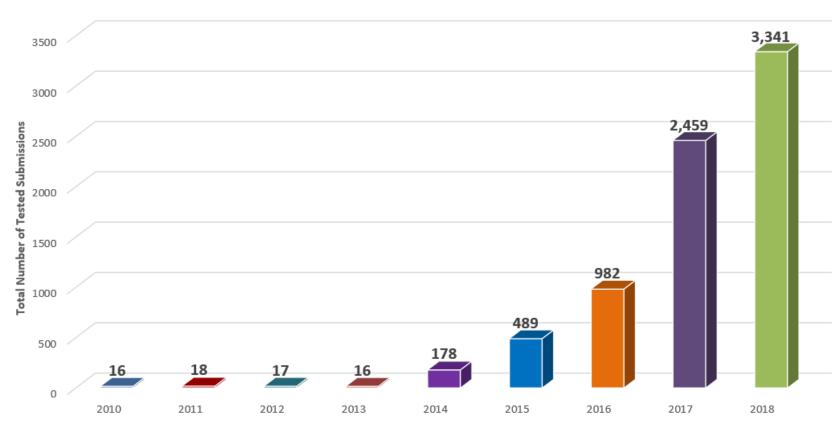


Number of Prescriptions per Person

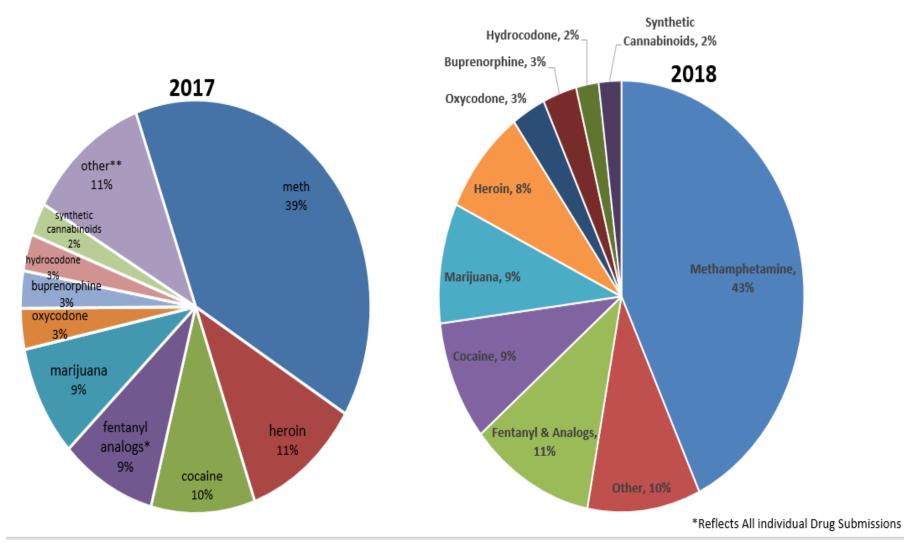
Kentucky State Police Laboratories 2010-2018 Total Heroin Submissions



Kentucky State Police Laboratories 2010-2018 Total Fentanyl Submissions



2017 and 2018 Lab Submission Comparison

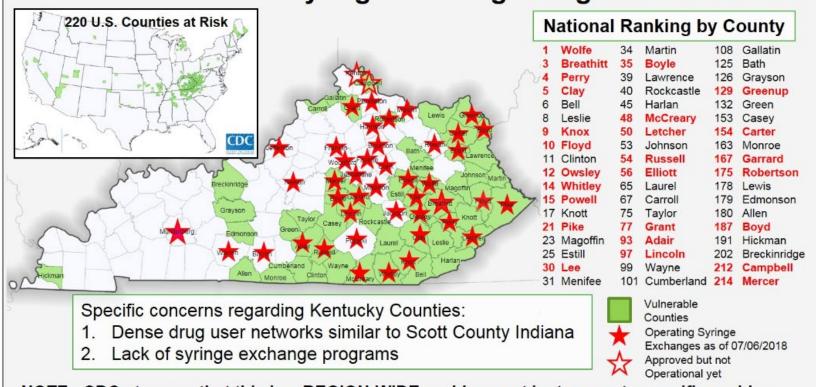


Drugs to Watch

	2014	2015	2016	2017	2018
Gabapentin	213	261	299	402	717
U-47700	0	0	5	59	11
Cannabidiol	1	0	3	9	11
5F-ADB	0	4	135	247	252
5F-AMB	2	28	37	25	6
FUB-AMB	2	25	129	269	154

Counties with Harm Reduction/Syringe Exchange Program Approval





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

Heroin - Fentanyl

Addiction has reached epidemic levels in Kentucky, where painkiller and heroin abuse are rampant. Kentucky is all too familiar with heroin overdoses. Especially hit hard have been Northern Kentucky, Louisville, and Lexington raising fears that the heroin scourge will soon ravage the entire Commonwealth.

Heroin – known by the nicknames such as Black Tar, Big H. Dog, Horse, and Puppy Chow, is a highly addictive drug derived from morphine, which is obtained from the opium poppy. Heroin can be injected, smoked in a water pipe, inhaled as smoke through a straw, or snorted as powder through the nose.

Heroin is especially deadly because it is both highly addictive and unpredictable. It is also dangerous because there is no way to know exactly what you're buying.

A key driver behind the uptick in heroin abuse was the reformulation of two widely abused prescription pain drugs, making them harder to crush and snort. Drug manufacturers reformulated OxyContin in 2010 and Opana in 2011.

Mixing fentanyl with street-sold heroin or cocaine markedly amplifies their potency and potential dangers, including the risk of death. Effects include: euphoria, drowsiness/respiratory depression and arrest, nausea, confusion, constipation, sedation, unconsciousness, coma, tolerance and addiction. It is up to 50 times more potent than heroin.

A dose as small as two milligrams – the size of Abraham Lincoln's cheek on a penny – can be lethal.

Because of its potency and toxicity, fentanyl can kill quickly. It is critical that people call 911 immediately when they suspect someone is having a drug overdose so they can receive a potentially life-saving medication called naloxone.

To impact the problem, the Kentucky Office of Drug Control Policy will continue to work towards increased public education, increased access to treatment, enhanced penalties for major traffickers, and greater access to Narcan (also referred to as Naloxone).

Opioid-Heroin Funding Update

In July of 2018 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

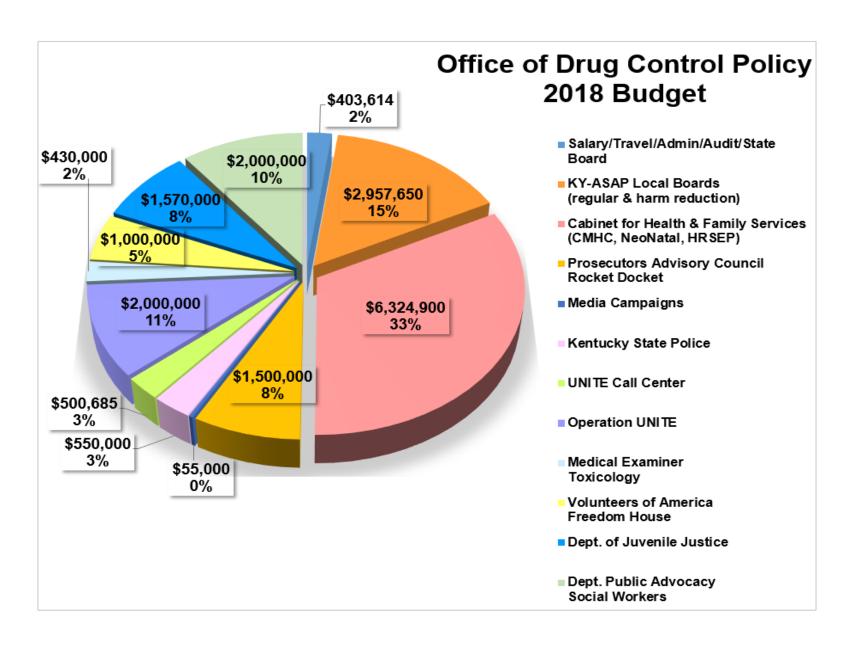
Eleven additional awards totaling \$3,246,000 were granted to providers to address Neonatal Abstinence Syndrome include:

•	Adanta, Somerset	\$50,000
•	Chrysallis 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.



Law Enforcement - Drug Task Forces

Kentucky's law enforcement community continued to perform at a high level during 2018. 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 2018, 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

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;
 - o The date the individual was discharged from incarceration; or
 - o The date the individual was released from probation or parole.

In 2018, The Office of Drug Control Policy assisted countless pharmacies and numerous customers

KENTUCKY METHAMPHETAMINE LAB RESPONSE

Numbers Provided by EPIC & ACS Container Program

										<u>.</u>				
Post Area ▼	↓ 1	Januar ▼	Februa *	March ▼	April *	May *	June *	July *	Augus	Septemt *	Octobe	Novemb *	Decemb *	Total 🔻
	PERRY			111.15.71	7.71	1113	- A.III		1110					0
9	PIKE													0
	POWELL													0
11	PULASKI													0
	ROBERTSON													0
	ROCKCASTLE													0
8	ROWAN													0
15	RUSSELL		2					1						3
12	SCOTT													0
12	SHELBY													0
3	SIMPSON													0
	SPENCER													0
	TAYLOR													0
2	TODD													0
1	TRIGG													0
5	TRIMBLE			1										1
16	UNION													0
3	WARREN		1								1			2
	WASHINGTON													0
	WAYNE													0
2	WEBSTER													0
	WHITLEY													0
	WOLFE													0
12	WOODFORD													0
		_	_	_	_	_	_	_		_				
	Incidents	5	9	6	2	0	1	5	4	2	1	1	2	38

Collaborative Partnerships

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
- Appalachian Regional Commission
- Kentucky Coalition of Nurse Practitioners & Nurse Midwives
- University of Kentucky
- Community Anti-Drug Coalitions of America (CADCA)
- Big Brothers / Big Sisters Youth of the Year
- Department of Education
- Department for Medicaid Services
- Department for Public Health
- Department for Behavioral Health, Development and Intellectual Disabilities
- 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 Department for Public Health
- Kentucky Center for School Safety
- Kentucky Child Now
- Kentucky College Network Steering Committee
- Kentucky County Attorneys Association
- Kentucky Crime Prevention Coalition
- Kentucky Injury Prevention Group
- 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
- JPSC Legislative Team
- 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
- 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)

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

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 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. ODCP has applied limited resources to support of the local boards and currently has less than two full-time positions dedicated to local boards². Fortunately, Regional Prevention Centers now provide technical assistance both to 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 118 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 that 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:

Faith Based Community **Judicial System** School Superintendent Law Enforcement Health Care Media Judge Executive University/College Mental Health Center 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.

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²staffing 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

Beth's Blessings Community Coalitions

Curriculum

DEA National Take Back Days Drug Court Staffing Training

DUI Checkpoints
Educational Meetings
GOALS Curriculum
HOT Conference
Juvenile Drug Court
Ladies Like Us Curriculum
Law Enforcement AlcoBlow Kits
Law Enforcement Crisis Intervention

Law Enforcement Overtime Leveraging Other Funding Messaging/Marketing Campaign Nicotine Replacement Therapy

Project Graduation

Protective Factor Building Recovery Month Activities

Responsible Beverage Server Training

Smoking Cessation Classes

Social Host Policy

Teens Against Tobacco Use (TATU)

Treatment Transportation Underage Drinking Campaigns

Youth Coalitions

Attitudes & Behavioral Surveys

Chad's Hope ATOD Assemblies Curricula Facilitation

Drug Court
Drug Testing

Educational Materials Family Learning Nights

Health Fairs

Indoor Smoking Ordinances
Keep a Clear Mind Curriculum
Law Enforcement K-9 Unit Support
Law Enforcement Breathalyzer
Law Enforcement Equipment
Law Enforcement Training
Life Skills Curriculum
Naloxone Distribution

Permanent Prescription Disposal

Project Prom

Random Student Drug Testing Policy

Red Ribbon Week School Resource Officer Smoke-Free Coalitions

Synthetics Educational Trainings

TEG/TAP Programs Treatment Vouchers

UNITE Clubs

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
- Pain Clinic Ordinances
- Synthetic Drug Ordinances
- 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 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 6th, 8th, 10th, and 12th 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. In addition to the KIP survey, many local boards also continually conduct other adult and youth surveys in an effort to ascertain the most current and relevant community data.



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, 2016 to June 30, 2017. 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, 2017, 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 23, 2018

209 St. CLAIR STREET FRANKFORT, KY 40601-1817 TELEPHONE 502.564.5841 FACSIMILE 502.564.2912

WWW.AUDITOR.KY.GOV





KY-ASAP: State Board Members

Ron Rice, Chairman

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

John C. Tilley

Secretary, Justice & Public Safety Cabinet

<u>Vacant</u>	Shannon Black Baker
KY Health Department Association	American Lung Association
Designee: Maria Hardy	Designee: None
Steve Shannon	<u>Jeff Jones</u>
KY Association of Regional Programs	Local Tobacco Addiction, Subs. Abuse Bd.
Designee: Tracie Noll	Designee: None
John C. Tilley, Secretary	Dr. Jeffery Howard, Commissioner
Justice & Public Safety Cabinet	Department for Public Health
Justice & Fubile Surety Cubinet	Department for Fublic Fleuren
Designee: Van Ingram	Designee: Rebecca Gillis
Christy Trout, Commissioner	<u>Tim Robinson</u>
Alcoholic Beverage Control	Private Community-Based Organization
Designate David Willeaman	Designant Name
Designee: David Wilkerson Laurie Dudgeon, Director	Designee: None Ronald J. Rice, Chief-Maysville PD
Administrative Office of the Courts	Local Tobacco Addiction, Subs. Abuse Board
Administrative office of the Courts	Local Tobacco Addiction, Subs. Abuse Board
Designee: Melynda Benjamin	Designee: None
<u>Tim Cesario</u>	James Sharp
Private Community-based Organizations	Kentucky Cancer Society
Designee: None	Designee: None
Terona Cobble-Johnson (TC)	David Sloane
KY Family Resource Youth Services	American Heart Association
Coalition	7 tillerican Ficare 7 to octation
Designee: Megan Nicademus	Designee:
Adam Meier, Secretary	Phyllis Millspaugh
Cabinet for Health & Family Services	Division or Behavioral Health, Dept. of Behavioral
	Health, Developmental & Intellectual Disabilities
Deciance: Maggie Cabra adam	Designed Batti Clark
Designee: Maggie Schroeder D Wayne Lewis, Commissioner	Designee: Patti Clark
Department of Education	
Department of Education	UPDATED 01/2019
Designee: Doug Roberts	0.0.1120 01/2019
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KY-ASAP State Boards (79 boards in 118 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-Metcalfe 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 Clinton County Local KY-ASAP Board 21 22 Crittenden County Local KY-ASAP Board Cumberland County Local KY-ASAP Board 23 24 Daviess County Local KY-ASAP Board 25 Edmonson County Local KY-ASAP Board 26 Estill-Powell Local KY-ASAP Board 27 Fayette County Local KY-ASAP Board 28 Floyd-Pike Local KY-ASAP Board 29 Franklin County Local KY-ASAP Board 30 Fulton-Hickman County Local KY-ASAP Board 31 Garrard County Local KY-ASAP Board 32 Graves County Local KY-ASAP Board 33 Grayson-Meade-Hardin Local KY-ASAP Board

KY-ASAP State Boards (79 boards in 118 counties) 34 Green County Local KY-ASAP Board 35 Hancock County Local KY-ASAP Board 36 Heartland Trail Local KY-ASAP Board 37 Henderson County Local KY-ASAP Board 38 Henry County Local KY-ASAP Board 39 Hopkins County Local KY-ASAP Board 40 Jessamine County Local KY-ASAP Board 41 Johnson-Martin Local KY-ASAP Board 42 Knott County Local KY-ASAP Board 43 LaRue County Local KY-ASAP Board 44 Laurel County Local KY-ASAP Board 45 Lawrence County Local KY-ASAP Board 46 Lee County Local KY-ASAP Board 47 Leslie County Local KY-ASAP Board 48 Letcher County Local KY-ASAP Board 49 Lincoln County Local KY-ASAP Board 50 Madison County Local KY-ASAP Board 51 Magoffin County Local KY-ASAP Board 52 Marshall County Local KY-ASAP Board 53 McCracken County Local KY-ASAP Board 54 McCreary County Local KY-ASAP Board 55 McLean County Local KY-ASAP Board 56 Menifee County Local KY-ASAP Board 57 Mercer County Local KY-ASAP Board 58 Monroe County Local KY-ASAP Board 59 Montgomery County Local KY-ASAP Board 60 Morgan County Local KY-ASAP Board 61 Nicholas County Local KY-ASAP Board Northern KY Local KY-ASAP Board (Carroll, Gallatin, Boone, Kenton, Campbell, 62 Pendleton, Grant, Owen) 63 Ohio County Local KY-ASAP Board 64 Owsley County Local KY-ASAP Board 65 Pennyrile Local KY-ASAP Board (Todd, Christian, Muhlenberg)

	KY-ASAP State Boards (79 boards in 118 counties)
66	Perry County Local KY-ASAP Board
67	Pulaski County Local KY-ASAP Board
68	Region 6 Local KY-ASAP Board (Trimble, Oldham, Jefferson, Bullitt, Spencer, Shelby)
69	Rockcastle County Local KY-ASAP Board
70	Rowan County Local KY-ASAP Board
71	Russell County Local KY-ASAP Board
72	Scott County Local KY-ASAP Board
73	Tri-County Local KY-ASAP Board (Carter, Greenup, Boyd)
74	Union County Local KY-ASAP Board
75	Warren County Local KY-ASAP Board
76	Wayne County Local KY-ASAP Board
77	Webster County Local KY-ASAP Board
78	Wolfe County Local KY-ASAP Board
79	Woodford County Local KY-ASAP Board

KY-ASAP: Program Expenditure Summary Fiscal Year 2018 – July 1, 2017 thru June 30, 2018

KENTUCKY AGENCY FOR SUBSTANCE SFY2018 BUDGET	E ABUSE POLICY
Description	Amount
Projected Annual Allotment	\$1,769,800.00
2017 Budget Carryover	\$668,633.69
65AH - SFY2018 Revised Budget	\$2,438,433.69
SFY2018 BEGINNING BALANCE	\$2,438,433.69
Salary & Fringe	\$0.00
Annual Allocations to Local Boards	\$1,729,676.86
New Board Start-Up Funding	\$0.00
Supplies, fees, etc.	\$0.00
Board Meetings	\$0.00
Employee Travel	\$0.00
Board Member Travel to Board Meetings	\$0.00
Commonwealth Office of Technology (computers, laptop, telephone)	\$0.00
Partnership for a Drug-Free Kentucky	\$0.00
Auditor's Office (annual audit report)	\$0.00
Other (cancel check fees, opioid planning mtg.)	\$0.00
TOTAL EXPENDITURES	\$1,729,676.86
BALANCE	\$708,756.83

KY-ASAP: SFY2018 Local Board Funding

KY-ASAP LOCAL BOARDS SFY2018 TRADITIONAL FUNDING

	Award
Board	Award Amount
Adair County Local KY-ASAP Board	\$15,500.00
Allen County Local KY-ASAP Board	\$16,000.00
Anderson County Local KY-ASAP Board	\$16,000.00
Ballard County Local KY-ASAP Board	\$16,000.00
Barren Hart Metcalfe Local KY-ASAP Board (BHM)	\$48,000.00
Bath County Local KY-ASAP Board	\$16,000.00
Bell Knox Whitley Local KY-ASAP Board (BKW)	\$48,000.00
Black Patch Council (BPC) Local KY-ASAP Board	\$64,000.00
Bourbon/Harrison Local KY-ASAP Board	\$32,000.00
Boyle County Local KY-ASAP Board	\$16,000.00
Breathitt County Local KY-ASAP Board	\$16,000.00
Breckinridge County Local KY-ASAP Board	\$16,000.00
Buffalo Trace Local KY-ASAP Board	\$80,000.00
Butler Logan Simpson Local KY-ASAP Board (BLS)	\$48,000.00
Calloway County Local KY-ASAP Board	\$16,000.00
Carlisle County Local KY-ASAP Board	\$16,000.00
Casey County Local KY-ASAP Board	\$16,000.00
Central KY Local KY-ASAP Board	\$16,000.00
Clark County Local KY-ASAP Board	\$16,000.00
Clay/Jackson Local KY-ASAP Board	\$32,000.00
Clinton County Local KY-ASAP Board	\$16,000.00
Crittenden County Local KY-ASAP Board	\$16,000.00
Cumberland County Local KY-ASAP Board	\$16,000.00
Daviess County Local KY-ASAP Board	\$16,000.00
Edmonson County Local KY-ASAP Board	\$16,000.00
Estill/Powell Local KY-ASAP Board	\$32,000.00
Fayette County Local KY-ASAP Board	\$16,000.00
Floyd/Pike Local KY-ASAP Board	\$32,000.00
Franklin County Local KY-ASAP Board	\$16,000.00
Fulton-Hickman Local KY-ASAP Board	\$32,000.00

KY-ASAP LOCAL BOARDS SFY2018 TRADITIONAL FUNDING

	Award
Board	Amount
Garrard County Local KY-ASAP Board	\$16,000.00
Graves County Local KY-ASAP Board	\$16,000.00
Grayson Meade Hardin Local KY-ASAP Board (GMH)	\$48,000.00
Green County Local KY-ASAP Board	\$16,000.00
Hancock County Local KY-ASAP Board	\$16,000.00
Heartland Trail Local KY-ASAP Board	\$48,000.00
Henderson County Local KY-ASAP Board	\$16,000.00
Henry County Local KY-ASAP Board	\$16,000.00
Hopkins County Local KY-ASAP Board	\$16,000.00
Jessamine County Local KY-ASAP Board	\$16,000.00
Johnson/Martin Local KY-ASAP Board	\$32,000.00
Knott County Local KY-ASAP Board	\$16,000.00
LaRue County Local KY-ASAP Board	\$16,000.00
Laurel County Local KY-ASAP Board	\$16,000.00
Lawrence County Local KY-ASAP Board	\$16,000.00
Lee County Local KY-ASAP Board	\$16,000.00
Leslie County Local KY-ASAP Board	\$16,000.00
Letcher County Local KY-ASAP Board	\$16,000.00
Lincoln County Local KY-ASAP Board	\$16,000.00
Madison County Local KY-ASAP Board	\$16,000.00
Magoffin County Local KY-ASAP Board	\$16,000.00
Marshall County Local KY-ASAP Board	\$16,000.00
McCracken County Local KY-ASAP Board	\$16,000.00
McCreary County Local KY-ASAP Board ³	\$0.00
McLean County Local KY-ASAP Board	\$16,000.00
Menifee County Local KY-ASAP Board	\$16,000.00
Mercer County Local KY-ASAP Board	\$16,000.00
Monroe County Local KY-ASAP Board	\$16,000.00
Montgomery County Local KY-ASAP Board	\$16,000.00
Morgan County Local KY-ASAP Board	\$16,000.00
Nicholas County Local KY-ASAP Board	\$16,000.00

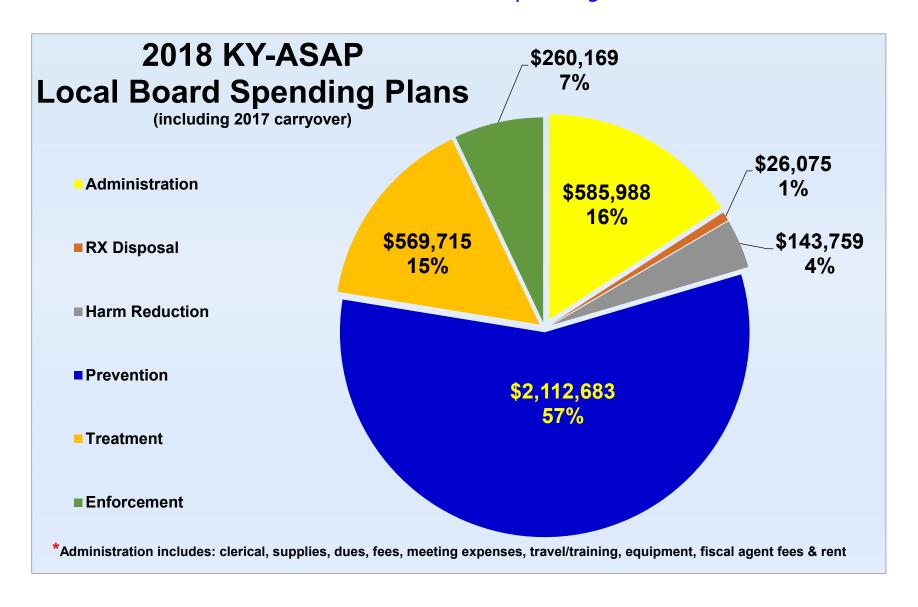
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 $^{{}^3\}text{McCreary}$ County rescinded its application for funding in SFY2017

KY-ASAP LOCAL BOARDS SFY2018 TRADITIONAL FUNDING

Board	Award Amount
Northern KY Local KY-ASAP Board	\$128,000.00
Ohio County Local KY-ASAP Board	\$16,000.00
Owsley County Local KY-ASAP Board	\$16,000.00
Pennyrile Local KY-ASAP Board	\$48,000.00
Perry County Local KY-ASAP Board	\$16,000.00
Pulaski County Local KY-ASAP Board	\$16,000.00
Region 6 Local KY-ASAP Board	\$96,000.00
Rockcastle County Local KY-ASAP Board	\$16,000.00
Rowan County Local KY-ASAP Board	\$16,000.00
Russell County Local KY-ASAP Board	\$16,000.00
Scott County Local KY-ASAP Board	\$16,000.00
Tri-County Local KY-ASAP Board	\$48,000.00
Union County Local KY-ASAP Board	\$16,000.00
Warren County Local KY-ASAP Board	\$16,000.00
Wayne County Local KY-ASAP Board	\$16,000.00
Webster County Local KY-ASAP Board	\$16,000.00
Wolfe County Local KY-ASAP Board	\$16,000.00
Woodford County Local KY-ASAP Board	\$16,000.00
TOTAL AMOUNT AWARDED	\$1,872,000.00

Kentucky Agency for Substance Abuse Policy SFY2018 Local Board Spending Plans



KY-ASAP: SFY2018 Harm Reduction Local Board Award Amounts & Projects

Local Board	Harm Reduction Award Amount	Funded Projects
Allen County	\$12,325.00	Opioid Prevention Training at High School Provider Forum Town Hall Meetings Narcan Nasal Doses
Anderson County	\$20,000.00	Narcan for EMTsNarcan for Law EnforcementNarcan 1st Responder Training
Barren Hart Metcalfe (BHM)	\$13,150.00	 Opioid OD Detection Training Narcan Nasal Kits Training for 1st responders Treatment Brochures Treatment Vouchers
Bath County	\$20,000.00	Narcan Nasal KitsHazmat CoverallsSyringes
Bell Knox Whitley (BKW)	\$18,614.90	 Posters & printed materials Treatment PSAs & printed treatment resources Nitrile gloves for 1st responders
Bourbon/Harrison	\$16,000.00	Narcan InjectablesSyringesEducational Materials/AdsTreatment vouchers
Boyle County	\$20,000.00	Overdose prevention trainingNaloxone Nasal KitsSEP ProgramTreatment vouchers
Breathitt County	\$11,400.00	 Naloxone Nasal Kits Naloxone Training Event Fees SEP Educational Brocuhres SEP Media Campaign SEP Communinity Forum Sharps Containers Safe Syringe Disposal

Local Board	Harm Reduction Award	Fundad Busiasta
Local Board	Amount	Funded Projects
Breckinridge County	\$15,000.00	 Narcan SEP Marketing/Advertising Treatment for pregnant/post-partum women Law Enforcement OT RX Drug/Heroin Trafficking Equipment
Buffalo Trace	\$20,000.00	Community trainingsNarcan Kits
Butler Logan Simpson (BLS)	\$18,074.62	 Health Dept. Training Presentations Narcan Nasal Kits Naloxone Training for 1st responders SEP Program HexArmor & Nitrile Gloves
Calloway County	\$4,720.00	Narcan Kits
Casey County	\$19,985.00	 Community forum Needle Exchange Education Safe Needle Disposal Ed EMS Training 1st Responders OD Training Narcan Interdiction Stops
Clark County	\$19,800.00	 Dangers of Opiate/Heroin PSAs Winchester Sun Ads Narcan for 1st Responders Narcan for Schools Narcan for Community
Clay/Jackson	\$18,026.36	Narcan 1st Responder TrainingSEP Support - Needles & DisposalOpiate Case Overtime
Daviess County	\$20,000.00	 Media Campaign Community Forums Prescribers' Forum Naloxone/Narcan Nitrile Gloves

Local Board	Harm Reduction Award Amount	Funded Projects
Estill/Powell	\$19,312.50	 SPARK Community Rally Estill Co. Community Drug March & Resource Fair naloxone Nasal Kits Nasal Atomizer CPR Community Trainings/Advertising Law Enforcement Training K-9 Unit Kennel
Fayette County	\$20,000.00	Sharps Container Supplies & Syringes Marketing & Printing Voices of Hope - Telephone Recovery Services
Floyd/Pike	\$47,245.00	 Town hall meetings Printing & advertising Prevention materials Training for medical community Naloxone for 1st responders SEP Program Supplies SEP Educational Materials
Franklin County	\$19,980.00	 Community trainings Clinical staff training Educational Materials Narcan Sharps Containers Harm Reduction Kits Wound Care Items Recovery Support Pilot Fitness/Exercise Voucher Transportation Voucher Recovery Support Eval Needle resistant gloves
Garrard County (remainder of 2017)	\$0.00	 Naloxone for 1st responders Hep A&B Vaccines Syringes & Supplies Printing & Marketing Hep A&B Vaccines Syringes & Supplies Printing & Marketing Treatment vouchers/services

Local Board	Harm Reduction Award Amount	Funded Projects
Grayson Meade Hardin (GMH)	\$30,000.00	 Education for pregnant women Comunity OD Education Narcan for EMS Syringe Exchange Marketing/Advertising Treatment for Pregnant Women Law Enforcement OT RX Drug/Heroin Trafficking Equipment
Hancock County (remainder of 2017)	\$0.00	•Treatment vouchers
Heartland Trail	\$32,000.00	 Opioid Education Narcan for EMS Training for EMS Syringe exchange program Treatment for Pregnant Women Law Enforcement OT
Henderson County	\$10,000.00	Social Media Advertising Nitrile Gloves
Henry County	\$10,200.00	 Door hangers Brochures & flyers Naloxone for EMS & Law Enforcement Opioid Response Team Support
Hopkins County	\$15,675.00	Naloxone for law enforcementNaloxone training for law enforcement
Jessamine County	\$20,000.00	•Resilence Treatment Program for Inmates
Johnson/Martin	\$42,900.00	 Town hall meetings Printing costs Prevention materials Social media campaign Naloxone for law enforcement Informational materials for 1st responders SEP supplies (wipes, swabs, syringes, needles) HCV/HIV/STD Ed Materials
LaRue County	\$10,010.00	Opioid education SEP Promotion Treatment for pregnant/post-partum

Local Board	Harm Reduction Award Amount	Funded Projects
Local Board	Amount	women
		•Law enforcement OT
Laurel County	\$20,000.00	Media campaign
·		Naloxone for law enforcement
		Narcan Kit Instruction Inserts
		Printing policy & procedures
		Needle resistant gloves
Lawrence County	\$20,000.00	
Letcher County	\$19,950.00	•Education
		Website support
		Promotion & advertising
		Naloxone for law enforcement
		Naloxone for fire dept.
		•CPR non Re-Breather Mask
Lincoln County	¢10.042.26	Needles & sharps containers Narcan for EMS
Lincoln County	\$19,943.36	Narcan for EMS Narcan for law enforcement
		•SEP supplies (syringes, sharps
		containers, gloves, alcohol pads, HEP C
		kits)
		•Educational Material Printing
Madison County	\$20,000.00	•Too good for drugs
, , , , , , , , , , , , , , , , , , , ,	4-0/00000	•KY School
		•Too good for drugs facilitator training
		•PSAs
		•Billboards
		Safety Monitor Training
		Narcan for EMS
		Community training
		•SEP supplies (syringes, shrap containers,
		candisters, pouches, bags, business
		cards, treatment guides)
		•Treatment vouchers
		Transportation for treatment

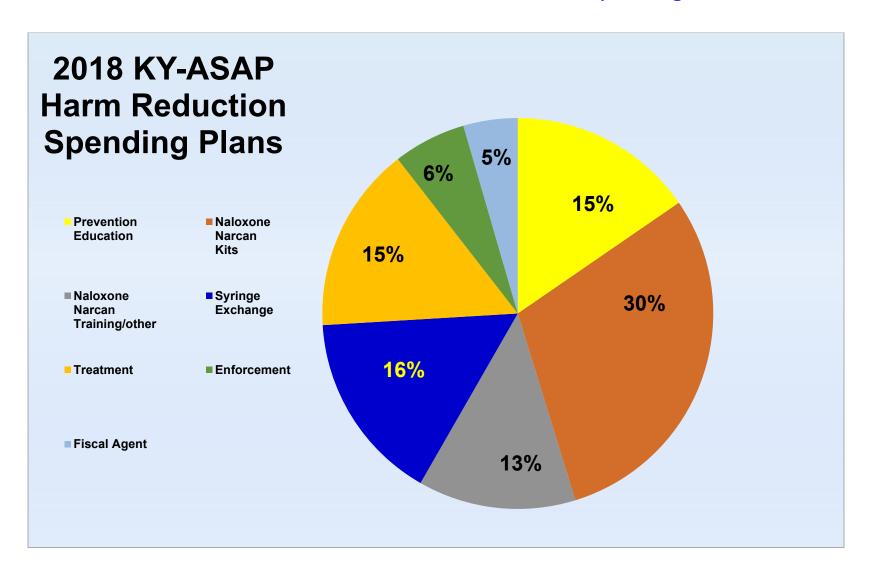
Local Board	Harm Reduction Award Amount	Funded Projects
Magoffin County	\$15,050.00	 Teen coalition support Naloxone Community training SEP start-up supplies (sharps, syringes, kit supplies, disposal), •Marketing, advertising, meeting expenses, agency training Treatment support
McCracken County	\$20,000.00	Community forum Film Social marketing campaign Narcan for law enforcement & 1st responders Narcan shipping costs
McLean County	\$19,999.19	 Marketing Narcan for law enforcement Treatment vouchers Drug testing kits Nitrile Gloves Drug field tests
Mercer County	\$20,000.00	 Narcan for law enforcement, 1st responders & community Training for law enforcement, 1st responders, community Syringes, sharps disposal, literature Treatment vouchers
Montgomery County	\$20,000.00	Narcan for law enforcement, EMS & FireCommunity awareness campaignTreatment vouchers
Northern KY	\$20,000.00	•Treatment services
Ohio County	\$18,700.00	 Medi campaign RX Disposal Boxes Narcan for law enforcement, jail, & fire Treatment vouchers Transportation for treatment
Owsley County	\$10,655.49	Narcan for communityNarcan adsNarcan trainingNarcan flyers

	Harm Reduction Award	
Local Board	Amount	Funded Projects
Pulaski County	\$20,000.00	 Physicians training Narcan for law enforcement & 1st responders Community education for SEP Travel/Treatment Vouchers
Region 6	\$168,248.00	 Regional community awareness Statewide media awareness Narcan for law enforcement Narcan for community Narcan other supplies (gloves, masks, bags, etc.)
Rockcastle County	\$20,300.00	 Labels for awareness building Naloxone for law enforcement & community Naloxone speaker Promotion of training Treatment vouchers Sharps containers Labels for containers
Rowan County	\$20,000.00	 Casey's Law educational campaign Casey's Law - Attorney Fees, transportation, evaluation Hazmat suits Nitrile gloves Masks
Tri-County	\$20,000.00	 Prevention Activity/ Informational Brochures Narcan for community Needles for SEP
Warren County	\$8,616.00	 Narcan for community Narcan training Supplies for SEP (sharps bin, alcohol swabs, cotton balls, antiboitic ointment, bandages, etc.)

Local Board	Harm Reduction Award Amount	Funded Projects
Webster County	\$20,000.00	 Community opioid training Lunch & learns town hall meetings Coffee & conversations town hall meetings Narcan for law enforcement Drug court drug testing DCBS/Family Court drug testing Treatment vouchers Nitrile gloves
Woodford County	\$19,770.00	 Naloxone for law enforcement Naloxone law enforcement training Staff & community training Materials (needles, gloves, sharps containers, disposal, treatment info, etc.)

\$1,085,650.42

Kentucky Agency for Substance Abuse Policy SFY2018 Local Board Harm Reduction Spending Plans



KY-ASAP: State Board Agency Report

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.

<u>Administrative Office of the Courts (Laurie Dudgeon)</u>

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—The Administrative Office of the Courts, Department of Specialty Courts has partnered with Morehead State University, Department of Social Work to secure numerous federal grants with the Substance Abuse and Mental Health Service Administration (SAMHSA) and the Bureau of Justice Assistance (BJA). In 2018, SAMHSA awarded the Muhlenberg Drug Court Enhancement grant for a 5-year period with a budget in the amount of \$1,841,062 for each year and Knott/Magoffin Drug Court Enhancement grant for a 5-year period with a budget in the amount of \$1,307,692 for each year. BJA awarded the Carroll/Grant/Owen Drug Court Implementation grant for a 3-year period for a total of \$500,000 each year.

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 9, 2019, there were 33 programs in 25 counties in which participants utilize Vivitrol (29 participants), Methadone (8 participants), Suboxone (98 participants).

Regional - RJOI - The Division of Specialty Courts participated 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.

Regional Rural Judges and Sheriffs Workshop – December 2018, AOC Division of Specialty Courts Executive Officer participated in the National Center for State Courts Rural Sheriff and Rural Opioid Workshop provided by the Bureau of Justice Assistance and the Comprehensive Opioid Abuse Program. Judges, sheriffs and state drug court coordinators from Kentucky, Tennessee, North Carolina, Virginia and West Virginia, discussed resources available to aid naloxone access and use (law enforcement, courts, jails, community, law enforcement diversion programs, reentry programs, treating families, harm reduction, integration of cases across case types that involve a specific person/family and involuntary commitments for persons with a substance use disorder.

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 - 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 2019.

State - Operation UNITE—The Division 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 2019 National Rx Drug Abuse & heroin Summit.

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 2018, the Department of Specialty Courts conducted performance measures trainings across the state to enhance and adhere fidelity to the national drug court model.

In May 2018, over 90 Kentucky Specialty Court employees attended the National Association of Drug Court Professionals Conference held in Houston Texas.

The Department of Specialty Courts is planning a statewide conference in August 2019 at the Louisville Marriott Downtown Kentucky. Attendees will include: specialty court employees, Judges, prosecutors, attorneys, law enforcement, probation and parole and community members.

Pretrial Services — The AOC Division of Pretrial Services provides investigations on all incarcerated defendants. This investigation includes a thorough examination of each defendant's criminal history through the application of a validated risk assessment instrument that assesses risk of failure to appear and risk of re-arrest. To assure the department is furnishing courts with accurate risk assessment information, the department recently restructured to allow more skilled employees to advance to the position of Risk Assessment Specialist. Pretrial Officers are still necessary and assure that defendants are interviewed so that contact information is obtained to provide court reminders and to meet statutory obligations. Pretrial Officers are statutorily required to identify defendants with veteran and/or combat service and, with the defendant's permission, provide veterans contact information to the Depart of Veterans Affairs. This partnership is an effort to connect the veteran to services such as substance abuse treatment, mental health treatment, housing, education and counseling. Additionally, Pretrial Services partners with several Veteran Treatment Court (VTC) programs to guickly identify veterans in the criminal justice system who could benefit from the services of the VTC. Pretrial Officers are also required by statute to screen for recent and relevant substance abuse.

Through a recently expanded Supreme Court order, Pretrial Services may release certain eligible defendants charged with non-violent, non-sexual offenses. 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 supervision for defendants released and awaiting trial until the disposition of the case.

<u>Alcoholic Beverage Control (Christy Trout, Commissioner)</u>

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 almost 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 2018, 3 in-seat STAR classes were held with 12 individuals being trained. The online version was utilized by 8,081 students who participated in the online training program. The total number of students trained by the Department in 2018 was 8093. Our passage rate overall was 95.44%.

In addition to the STAR training program, the Department conducted special event training to organizations that sell and serve alcohol at temporary locations during 2018, such as music festivals, civic organizations and schools. Further, upon request, the Department coordinates with various industry and community awareness groups, city councils, 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 2018 calendar year, the Division conducted 930 OZT checks resulting in 81 alcohol purchases with a compliance rate of increased compliance rate of 91%.

In addition, Enforcement Division conducts Cops-In-Shops details. The Cops-In-Shops program is targeted at deterring minors from obtaining alcoholic beverages at the point of sale. During Cops-In-Shops details, Investigators work alongside local law enforcement personnel and pose as employees or customers at a specific retail location. When an underage person purchases or attempts to purchase alcoholic beverages, they are cited to district court. During 2017, the division reported working at 11 retail locations with a total of 51 citations issued.

In 2018, ABC submitted a proposal for and was awarded 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 4190 FDA inspections at retail establishments across the Commonwealth of Kentucky in 2018. This represents a 35% increase in FDA inspections conducted over that of 2017. The inspections resulted in 205 underage tobacco purchases for a 95% compliance rate up from 2017.

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 2018, the Enforcement Division conducted 309 SYNAR tobacco checks resulting in 26 violations and a compliance rate of 92%.

Please contact Commissioner Christine Trout Van Tatenhove at the Department of Alcoholic Beverage Control at 502-782-1000, or email at info@abc.ky.gov, with any questions or for additional information.

<u>American Cancer Society - Kentucky Chapter (James Sharp)</u>

No Report Submitted

<u>American Heart Association (David Sloane- Shannon Smith)</u>

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 (Secretary Vickie Yates Brown Glisson)

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

Behavioral Health Prevention and Promotion Branch (Phyllis Millspaugh, Branch Manager)

No less than 20% set aside for primary prevention programs for individuals who do not require treatment for substance abuse. The majority of this prevention set aside is allocated to the state's network of Regional Prevention Centers (RPCs) housed within the Community Mental Health Centers (CMHCs) and Kentucky's network of Prevention Enhancement Sites (PES). These prevention funds allow the RPCs to deliver high quality training and technical assistance on the Strategic Prevention Framework (the Center for Substance's Abuse prevention planning model), to KY-ASAP Local Boards and prevention coalitions throughout the state. RPC staff are Certified Prevention Specialists who work with communities to ensure that the prevention strategies that they implement address the needs of the community and that they are evidence-based or best practice programs and strategies,

and that these interventions and strategies are sustained over time. The RPCs are excellent community consensus builders and have been instrumental in assisting their communities to establish tobacco and alcohol related ordinances such as smoke free policies, keg registration, mandatory responsible beverage server training.

Accomplishments - The Prevention Branch continues to pursue 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 abuse 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 Division of Behavioral Health Prevention and Promotion Branch is now in the third year of its Partnership for Success (PFS) 2015 Grant. The goals of Kentucky's PFS 2015 Grant as laid out in the original grant application are listed below along with accomplishments for each goal.

1. Continue and intensify the prescription drug abuse initiatives within Communicare and Pennyroyal and other regions throughout the state.

The Penny Royal and Communicare regions were provided additional PFS funding because the magnitude of their prescription drug abuse, as measured through the Kentucky Incentives for Prevention Survey was higher than any other regions in the state. They also have the highest number of service members, veterans and family members (SMVF) and their youth have higher incidences of behavioral health issues such as anxiety, depressive episodes, and suicide ideation. RPC staff within these two regions, and throughout the state as a whole have begun to market substance opioid prevention and suicide prevention services with a special focus on the SMVF population.

These activities and strategies include:

- ASSIST and Question Persuade and Refer Trainings,
- Collaborating with local pharmacies to raise awareness about proper use of Rx medication and disposal methods.
- Outreach to KY National Guard families
- Working with schools to implement Opioid and Suicide prevention curriculums in middle, junior high and high school.

2. Expand prevention capacity at state and community levels using the Strategic Prevention Framework (SPF) to address the needs of the military and their families.

Sub recipient capacity building to address the SMVF population began in year one and has continued throughout FFY 2017 in all regions. Some sub recipients have created Regional SMVF Task Forces to coordinate PFS 2015 services delivered to this population. Training of the community at large about the how military service, regardless of whether a soldier is deployed or not, can heighten certain substance abuse and mental health risk factors is ongoing across all regions.

At the State level the PFS 2015 Coordinator continues to be actively involved in the State SMVF Task Force. He has provided information to the Task Force's Resource Directory on Substance Abuse Prevention and Treatment and Suicide Prevention resources across the state. Once the Resource Directory is completed it will be sent to all our sub recipients to supplement their SMVF toolbox

3. Align and leverage resources to institutionalize an integrated prevention system that focuses on substance abuse prevention and behavioral health promotion.

State Prevention Staff continue to work with PFS sub recipients to ensure that shared risk and protective factors enter into the needs assessment and PFS planning mechanisms. The PFS Project Director is also a member of the Kentucky Opioid Response Effort (KORE/Cures Grant) Planning committee. Membership on this committee has ensured that KORE prevention efforts are consistent with the SPF planning model.

4. Strengthen and empower the State Epidemiological Workgroup (SEOW) for continued data-driven capacity at all steps of the SPF.

The SEOW has created three subcommittees:

- 1) Evidence-based practice subcommittee to research effective prevention media campaigns, specifically relating to opioids.
- 2) Policy Subcommittee: The Policy subcommittee is tasked with looking at prevention policies that can be implemented on a local level, and developing a plan to promote them.
- 3) Evaluation Subcommittee: Teresa McGeeney will be the chair of the subcommittee. The Evaluation subcommittee plans to focus evaluation efforts on legislation that passes this session because that is commonly not included as a component of legislation. After the session ends, the subcommittee will have a phone meeting to discuss the key pieces of legislation and start to discuss evaluation for these.

Additionally. The SEOW is looking at the correlation between past 30 substance abuse and military status from our KIP 2016 data. As part of the SEOW's assessment submitted in Kentucky's PFS 2015 grant proposal, the correlation between past 30 day opioid use, alcohol use, depression and sucidial ideation and attempts was found to be significantly higher among students who reported that someone close to them served in the military. These figures were based on 2014 KIP data. We will compare the 2016 results with 2014 to see if the trend has changed.

5. Educate first responders, family members and prescribers about opioid abuse and prevention strategies using SAMHSA's Opioid Overdose Tool Kit.

The toolkit has been provided to all sub recipients. All sub recipients were required to hold at three opioid toolkit trainings in every county in their region – one training that targeted prescribers, one that targeted first responders and one for community members. State prevention staff developed a supplement to this tool kit to facilitate implementation.

6. Prevent and reduce the prevalence of serious psychological distress (SPD), deliberate self-harm, suicide ideation, suicide plans and suicide attempts among 12-25 year olds in the two target regions and the state.

All sub recipient PFS 2015 Strategic Plans contain a suicide prevention component. Thus far, through our suicide prevention efforts Question, Persuade and Refer,

(QPR) and Applied Suicide Intervention Skills Training (ASSIST) adult and youth gatekeeper trainings, and mental health first aide trainings are being implemented by all sup recipients.

7. Prevent and reduce the incidence of completed suicides in the two target regions and the state.

A full report on the statewide suicides for youth and adults for 2017 is not yet available through CDC Wonder. However, in comparing the 2015 data with the 2016 there has not been does not indicate any significant increase. There was some concern that the Television show "13 Reasons Why" might push the rates up this year. Our suicide prevention coordinator has not had any reports of contagion after the show's airing. Regional data for 2017 is not yet available either so we do not know how the state 2017 rates compare with those in our two target regions.

Summary of key PFS 2015 program accomplishments to date:

- ❖ Approval of the State PFS 2015 Evaluation Plan
- ❖ Approval of all sub recipient PFS 2015 strategic plans

- ❖ Development and statewide dissemination of two opioid infographics, one which targets prescribers, the other which targets community members and agency stakeholders.
- Creation of an in-house Substance Abuse Skills Prevention Training team to provide ongoing, high quality training on the SPF to all new Regional Prevention Staff, Public Health and Behavioral Health advocates and community substance abuse coalition members training team.
- Creation of a mechanism to deliver SAPST training twice a year.
- ❖ Formed linkage with the Kentucky National Guard Youth Services Coordinator. The Youth Services Coordinator provides services that specifically target the children of parents serving in the Kentucky National guard. This has provided our sub recipients with a venue to reach children of military parents with selected prevention programs.
- ❖ Prescriber training consistent with new CDC guidelines offered to pharmacists and doctors by sub recipients.
- Creation of a statewide opioid media campaign. The media campaign has specific messages for each targeted group:
 - 1) Ages 10 16 (Perception of risk message- and there is hope with help)
 - 2) Ages 17 29 (Perception of risk message and/or How to get help when you are concerned for others).
 - 3) Ages 30 70+ (Communicate risk associated with use, target concern as a parent, grandparent, close relative, coworker, securing medications, and/or how to find help)
 - 4) SMVF (Target specific messages to Military Service Members, Veterans and specific military and also civilian based resources for referral and support.

Social Media Ads will appear on multiple platforms: Instagram, You Tube Facebook etc. All ads will include where viewers can click to go to a (phone based and/or web-based) "Landing Site" which will include multiple pieces of content for viewers to select and also multiple selection of links to other reliable government and or evidence-based sites.

Kentucky has received an invitation to partner with the Rand Corporation to incorporate a medication opioid curriculum into Project Alert an evidence-based youth drug prevention curriculum. A part of this effort includes a comprehensive and multi-state evaluation project. The Rand Corporation is in the process of applying for a federal grant to provide funding for evaluation of the new opioid medication component. If funding is secured Kentucky will be one of the fist states to pilot the new curriculum. If the evaluation shows positive results, the Kentucky Prevention System will initiate wide scale implementation of the program to assist in its opioid misuse and abuse prevention efforts.

- ❖ The SEOW created regional data reports specific to each sub recipient. These reports mirror the state report that was produced for the PFS 2015 proposal. The data reports cross tabulate past 30 day prescription drug abuse, past 30 day depression, suicide ideation, suicide attempts with youth who reported having no family members in the military, at least one family member in the military and two or more families in the military. This information was essential in needs assessment phase of our PFS planning.
- The work of Kentucky's SEOW epidemiologist, was recently recognized on a national scale. Both of the SEOW's proposals ""Exploring Military Youth's Increased Risk for Suicide Attempts" and "Military Youth and Prescription Opioid Abuse Risk Factors," were accepted by the American Academy of Health Behavior for their conference in September. "Exploring Military Youth's Increased Risk for Suicide Attempts" seeks to identify whether youth with a personal connection to the military is at an increased risk for suicidal behavior, and to identify potential causal pathways. "Military Youth and Prescription Opioid Abuse Risk Factors seeks to determine whether parental, peer, and personal disapproval of nonmedical opioid use (NMOU) and perceived risk of NMOU mediated the relationship between military connection and NMOU. This research is a direct outcome of the SEOW's needs assessment conducted for the initial PFS 2015 funding application.

I Assess Needs

Extensive needs assessment activities were completed on both the state and sub recipient level during FFY 2016. New data indicators have been added to the substance abuse prevention data warehouse which include newly developed data dashboards and a data visualizer for all regions in the state. The dashboards and data visualizer can be found at http://sig.reachoflouisville.com/

new regional needs assessments will be conducted this year by all regions of the state in accordance with RPC contract requirements. Based on the data provided by the SEOW epidemiologist, past 30 day consumption of alcohol was determined to be a state priority.

II Capacity Building

The major capacity building accomplishments on the state this year have been directed at filling gaps in our workforce development. Last year an three Regional Prevention Directors and a number of key RPC staff left prevention. The new directors, hired by the Community Mental Health Centers, had no previous prevention experience. To fill this capacity gap, the Prevention and

Promotion Branch, with training and technical assistance from the Center for Applied Prevention Technology, created a cadre of Substance Abuse Prevention Skills Trainers to deliver SAMSHA approved training on implementation of the Strategic Prevention Framework (the state prevention planning model) to all RPC Directors and staff. The SAPST is a foundational course in how to implement SAMSHA's Strategic Prevention Framework, which serves as is Kentucky's Strategic Planning Model for Substance Abuse Prevention. The SAPST is made up of a four-day face to face training that blends theory and applied learning through the use of case studies with an interactive online unit. The SAPST provides knowledge and skills to implement effective, data-driven prevention programs, practices, and policies that reduce behavioral health disparities and improve wellness.

III Planning

The RPC annual regional planning template has been revised to make it more consistent with the SPF, specifically with regard to the process for determining county priorities. PFS 2015 Sub recipients will be required to submit a new plan by the end of SFY 2018. Planning priorities related to opioid misuse and abuse will be funded through the PFS 2015 grant aand the Kentucky Opioid Response effort (KORE). All other alcohol, tobacco and other drug prevention efforts will be funded through the Federal Substance Abuse Prevention set aside of the Substance Abuse Prevention and Treatment Block Grant. DBH completed a new Block Grant Plan in December. The goals and objectives of the plan will drive our prevention efforts for the next two year Block Grant planning cycle.

IV Implementation

While not an exhaustive list, the following prescription drug strategies and programs will provide some idea of the types of interventions and strategies that are being implemented across the state to address Kentucky's alcohol tobacco and other drug priorities.

- Monitor, Educate, Dispose or Secure (MEDS) awareness campaigns
- Prescription drug lock boxes to identified sectors of the population
- Generation Rx curriculum
- Too Good for Drugs curriculum
- Question Persuade and Refer (Suicide Prevention Curriculum)
- Neonatal Abstinence Syndrome trainings for healthcare providers
- Rx awareness campaigns delivered to Jr ROTC members
- Naloxone training to law enforcement and other first responders
- Town Hall meetings to raise awareness about heroin abuse
- SAMSHA's Opioid Tool Kits
- CDC guideline training for prescribers
- Evidence-based alcohol, tobacco and other drug prevention curriculums delivered through schools.

- Information Dissemination to provide knowledge and increases awareness of the nature and extent of alcohol and other drug use, abuse, and addiction, as well as their effects on individuals, families, and communities. It also provides knowledge and increases awareness of available prevention and treatment programs and services.
- Strategies to reduce underage youth retail and social access to alcohol and tobacco. (Retailer education, compliance checks, social host ordinances)
- Targeting at risk populations such as children of military parents, LGBTQ, with selected prevention programs.
- Assessment and referral which aims to identify individuals who have indulged in illegal or age-inappropriate use of tobacco or alcohol and individuals who have indulged in the first use of illicit drugs. The goal is to assess if their behavior can be reversed through education. This strategy does not include any activity designed to determine
- Community-based Process to provide ongoing networking activities and technical assistance to community groups or agencies. It encompasses neighborhood-based, grassroots empowerment models using action planning and collaborative systems planning.

Progress on the Four Goals of SAMSHA's Strategic Initiative # 1

Goal # 1

With primary prevention as the focus, build emotional health, prevent or delay onset of, and mitigate symptoms and complications from substance abuse and mental illness

The integration of mental health and substance abuse prevention continues to be a priority. During 2016, Service Members, Veterans and Families (SMVF) Task Force was created. The purpose of the Task Force is to enhance collaboration between state-level stakeholders and local provider networks to provide substance abuse prevention, suicide prevention, treatment and behavioral health services to Kentucky's 62,180 active duty service, Reserve and National Guard members and their families. The Regional Prevention Center Network continues to provide Mental Health First Aid training to prevention coalitions around the state.

Goal #2

Prevent or reduce consequences of underage drinking and adult problem drinking.

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 our SAMSHA Block Grant plan. As can be evidenced from the data below, the work of Regional Prevention Centers, KY-ASAP Local Boards and prevention coalitions have had a sizable, measurable impact in reducing youth and adult alcohol consumption. The Kentucky Prevention system continues to reduce underage drinking. According to the Kentucky Incentives for Prevention Survey past 30 underage drinking went down in all grade levels surveyed in 2016 compared to 2014

- 1. 6th grade declined from 1.8% to 1.6% in
- 2. 8th grade declined from 8.7% to 7%
- 3. 10th grade sent down from 21% to 19.4%
- 2. 12th grade drinking rate was reduced from 30.7 % to 28.8%

Past 30 day binge drinking also decreased in all grade levels surveyed. Youth in all grades surveyed reported that alcohol was harder to for them to obtain

in in 2016 than in 2014. obtain 10th grade youth access to alcohol decreased by 3.9 percentage points in 2014 (54.3%) vs. 2012 (58.2%) according to youth self-reported data if they wanted to get some alcohol it would be "sort of easy" or "very easy" to access (KIP Survey by REACH, Inc., 2012-2014). The number of students reporting that they had had an alcohol related car wreck decreased in all grade levels except the 10th grade where it remained at the same level as in 2014.

Past 30 usage rates went down in every grade level in 2016 for all other substances as well (Inhalants. Steroids, Pain Killers, Marijuana, Synthetic Marijuana, Cocaine Methamphetamine, tranquilizers and over the counter drugs.

Despite these positive outcomes achieved, much still needs to be done to reduce the negative effects of drug abuse use in Kentucky.

For more information on efforts to prevent underage drinking in Kentucky please go to:

http://www.kyprevention.com/

Goal # 3

Prevent suicides and attempted suicides among populations at high risk, especially military families, LGBTQ youth, and American Indians and Alaska Natives.

The Division of Behavioral Health continues to pursue strategic initiatives relating to populations of high risk. Suicide Prevention efforts are being conducted primarily through the Prevention and Promotion Branch's Zero Suicide Initiative. Accomplishments related to that grant and our state suicide prevention outcomes are related below.

Zero Suicide Grant

In 2014 the DBH Prevention Branch applied for and received SAMSHA's Suicide Prevention grant. The project, titled Zero Suicide Initiative (KIZS), is a five-year \$3.6 million dollar grant. Kentucky's Zero Suicide Initiative will provide suicide safer communities and suicide safer care services for youth and young adults ages 10-24 who are at high risk of suicide. Initially, this comprehensive approach will be implemented in the Adanta community mental health center (region 14) and will then be expanded throughout the Commonwealth.

Key Activities:

During year three of the grant, KIZS supported numerous training opportunities in order to continue building capacity and to fulfill grant goals.

1. Workforce Development:

Kentucky Zero Suicide Academy

- ❖ 70 Behavioral healthcare providers and senior leaders from 11 CMHCs, Western State Hospital and Robley Rex VA Hospital attended a 2-day training to learn how to implement the Zero Suicide Framework to incorporate best and promising practices to improve care and safety of individuals at risk for death by suicide.
- 2. Assessing and Managing Suicide Risk (AMSR)
 - AMSR is a one-day training workshop for behavioral health professionals. The 6.5-hour training program is based on the latest research and designed to help participants provide safer suicide care.
 - ❖ 30 participants completed AMSR Training of Trainers
 - 179 providers trained at 6 AMSR trainings
- 3. Applied Suicide Intervention Skills Training (ASSIST):

Applied Suicide Intervention Skills Training (ASIST) is a two-day interactive workshop in suicide first aid. ASIST teaches participants to recognize when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety.

- 273 participants were trained in ASSIST
- ❖ 15 Instructors received certification, Community of Learning created to support implementation efforts
- 4. Question, Persuade & Refer
 - 41 Instructors received re-certification training

❖ DBHDID, KY Bar Association & Admin. Office of Courts partnered to offer QPR training to 3,000 attorneys at the 3 locations (Covington, Louisville & Ashland) during the Kentucky Law Update CLE program

5. Youth Gatekeeper Trainings:

Sources of Strength evidenced based, peer led program Training of Trainers.

❖ 30 participants completed Sources of Strength Instructor Training.

6. Sources of Strength

Sources of Strength is best practice youth suicide prevention project designed to harness the power of peer social networks to change unhealthy norms and culture, ultimately preventing suicide, bullying, and substance abuse. The mission of Sources of Strength is to prevent suicide by increasing help seeking behaviors and promoting connections between peers and caring adults.

Thirty schools received Sources of Strength training. This included adult advisors as well as student.

Goal #4

Reduce prescription drug misuse and abuse.

The PFS 2015 (see above) 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.

As evidenced by the Kentucky Incentives for Prevention Survey, our Prescription Drug abuse prevention efforts have been effective in reducing illicit use or prescription. Past 30 day illicit use of Rx drugs decreased among 8th, 10th and 12th graders as reported on our KIP 2016 Survey as compared to the 2014 base line. 1.8% - 1.5% for 8th graders, 3.6% -2.7% for 10th graders, and 4.2%-3.1% for 10th graders. The 6th grade rate remained at 0.5%, where it has been since 2012. The decreases are even more significant when the compared to the initial KIP 2004 baseline. In 2004 6th grade use was 1.5% 8th grade use stood at 4.2% 10th at 9.7% and 10th grade at 10.9%. Cumulatively we have reduced illicit prescription drug use across all grades surveyed by 17 percentage points.

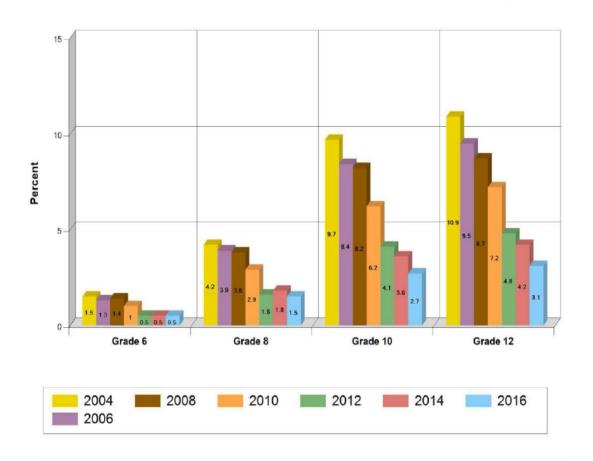
30 Day Prescription Drug Usage

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	2004	2006	2008	2010	2012	2014	2016
6	1.5%	1.3%	1.4%	1%	0.5%	0.5%	0.5%
8	4.2%	3.9%	3.8%	2.9%	1.6%	1.8%	1.5%
10	9.7%	8.4%	8.2%	6.2%	4.1%	3.6%	2.7%
12	10.9%	9.5%	8.7%	7.2%	4.8%	4.2%	3.1%



KIP SURVE

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Note: In order to be in full compliance with new Drug Free Communities (DFC) grant reporting requirements, the wording of this question was revised in 2014.

Other Accomplishments:

State Epidemiological Outcomes Workgroup (SEOW)

The SEOW continues to provide valuable data analysis for our substance abuse and suicide prevention planning efforts. SEOW accomplishments for 2017 include:

❖ The creation of two one page opioid infographics – one for prescribers and one for community members. The Infographics are intended to increase awareness of Kentucky's opioid overdose problem with easy to understand graphs and to provide talking points to prevention specialists in their work with prescribers, first responders and community members.

Synar Program – 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 done by 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. 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. The sample size for this year's inspections was significantly increased per the Center for Substance Abuse Prevention's directive. (From 329 to 650.) This was done to increase the accuracy rate of our inspections. Typically, a third or more of the outlets in the sample cannot be inspected because they have gone out of business, or do not sell tobacco products. Kentucky has no tobacco licensing law that allows us to keep our tobacco retailer list up to date. Instead, the state must purchase commercial lists that are only updated annually or biannually. The lag time between the updating of these commercial lists means that the accuracy rate of our inspections typically falls far below the federal minimum requirement of 80%. This year's expanded sample enabled us to achieve an accuracy rate of 90.5%, the highest ever in Kentucky's history of Synar inspections. (For the purposes of comparison the average accuracy rate for the last 5 years of Synar inspections is 68.1%.

There were a total of 41 violations this year, which put our state retail violation rate at 7.0% – down from 10.4% last year.

This year's inspections included E-cigarettes for the first time. There was no noticeable difference in the violation rate for combustible cigarettes and e-cigarettes. However the number of e-cigarette inspections were relatively small. We plan to increase the number of e-cigarette inspections next year.

Tobacco Retailer Education

During Calendar year 2017, 1,153 tobacco clerks received training on State and federal tobacco laws through the online Kentucky Tobacco Retail Underage Sales training program. Since the program's creation in 2012, 4,489 retailers have been trained.

(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."

The Prevention Enhancement Sites (PES) - 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 system consists of five sites, each with a particular area of expertise: alcohol, tobacco, marijuana, substance exposed infants and faith-based initiatives.

The PES system serves Regional Prevention Centers, KY-ASAP Local Boards, prevention coalition's faith-based groups and other local stakeholders. PES services are provided to prevention groups in Kentucky free of charge.

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. The following report highlights some of the major accomplishments of the Prevention Enhancement Sites for 2016.

Alcohol PES:

The Alcohol Prevention Enhancement Site (PES), 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.

- One community, Glasgow in Barren County, enacted a Social Host Ordinance during 2017. Ten communities passed Responsible Beverage Server Ordinances in the past year including Auburn, Barlow, Barren County, Burkesville, Edmonton, Grand Rivers, Hanson, LaCenter, Morgantown, and Park City. While no new Keg Registration policies were enacted in KY during 2017, the Alcohol PES provided technical assistance to KY communities in the process of passing new policies and seeking to increase enforcement of existing policies.
- ❖ The Alcohol PES delivered 21 presentations and trainings educating nearly 1,000 youth and adults on the latest underage and high-risk drinking research and evidence-based prevention strategies.
- ❖ The Alcohol PES utilized social media to reach nearly 18,000 Facebook users and create more than 77,000 unpaid impressions on Twitter and Facebook through 419 posts with information on environmental strategies to reduce underage and binge drinking, model alcohol prevention ordinances, state and local alcohol policy changes, upcoming state and regional alcohol prevention trainings and events, and the latest scientific research on alcohol prevention. Alcohol PES social media accounts: www.Facebook.com/KYPrevention/ and www.Twitter.com/KYPrevention/. Alcohol PES social media followers increased by 11% from 2016 to 2017.

Tobacco PES

The Tobacco Prevention Enhancement Site is located in Ashland, Kentucky and is operated through the ALERT Regional Prevention Center. The Tobacco PES does research on tobacco environmental strategies and distributes the latest research on smoking and tobacco use, clean indoor air policies, secondhand smoke and other tobacco health-related issues.

The Tobacco PES provides technical assistance and training on implementing and evaluating effective environmental strategies to Regional Prevention Centers and local prevention groups.

During FY17, the Tobacco PES focused efforts on e-cigarette education and the promotion of tobacco-free policies. While years of state-wide efforts around a smoke-free state law have stalled, local communities and school systems are moving forward to adopt smoke-free or tobaccofree policies. There was a tobacco-free schools bill proposed during the 2017 legislative session but it became stuck in committee and failed to move. In addition to assisting with policy, the Tobacco PES also collected and analyzed data from regional youth focus groups on youth and e-cigarettes. This information was compiled into a report shared statewide. The Tobacco PES was able to support smoke-free policy efforts through mini-grants to the following coalitions and agencies: Monroe County CARES (via Monroe County Health Department) smoke-free school policy implementation

- Monroe County CARES (via Monroe County Health Department) smoke-free park effort
- Purchase District Health Department smoke-free school policy efforts at Paducah Independent Schools
- Purchase District Health Department smoke-free school policy efforts at Hickman County Schools
- Purchase District Health Department smoke-free school policy efforts at McCracken County Schools
- Menifee County Wellness Coalition smoke-free ordinance efforts
- Menifee County Schools smoke-free policy implementation efforts
- C.O.P.E. Youth Service Center smoke-free policy promotion
- Northeast Kentucky AHEC smoke-free ordinance promotion

Faith Based PES:

The Faith-Based Initiatives Prevention Enhancement Site is managed through Communicare Regional Prevention Center. The goal of the Faith-Based PES is to combine resources with faith-based groups in order to have a greater impact on youth and adults when promoting messages for the prevention of alcohol and drug use.

Faith leaders can play a critical role in how prevention messages are received, so having the support of the faith-based community strengthens the comprehensive and long-term initiatives of substance abuse prevention.

The Faith-Based PES accomplishments include

- ❖ Faith Based Prevention Conference- 173 participants.
- Continued work with the Kentucky Faith Based Coalition, TA to assist with prevention strategies to stay evidence based

Substance Abuse Exposed Infants (SEI) PES:

Kentucky's Substance Exposed Infant Prevention Enhancement Site (SEI PES) is managed by Bluegrass Regional Prevention Center in Lexington, Kentucky, through Bluegrass Regional MH/ID Board Inc.

The SEI PES was not active during 2017 due to staff changes. Plans are underway to hire a new SEI PES Specialist.

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. Marijuana PES accomplishments for 2017 include:

- Training for substance abuse prevention coalitions on risks and consequences of marijuana use and legalization (medical and recreational).
- Co-sponsored community trainings in McLean, Webster and Monroe Counties.
- Provided latest information on Kentucky marijuana issues at the community events.
- Provided classroom instruction for 180 high school freshmen on risks of marijuana use. (Apollo High School)
- ❖ Supported the Faith Partner training in Muhlenberg County and offered TA on risks of marijuana.
- ❖ Partnered with Green River Health Coalition in identifying strategies to reduce smoking of any product.
- ❖ Attended and supported testimony on marijuana before the Joint Committee for Veterans and Military Affairs.
- Co-sponsored the Teen Leadership Conference at Mount Saint Joseph Retreat Center with 87 participants.

Zero Tolerance

Zero Tolerance is an education program for individuals under the age of 21 who have been cited for drinking and driving. Participants are referred by the court system and are screened to determine if they are appropriate for the program. For a first offense DUI Kentucky Law requires an assessment and an education or treatment component. If education is appropriate, Kentucky's standard is twenty hours of evidence-based alcohol and other drug education. If further assessment or treatment is appropriate then the amount of treatment, determined at the time of the assessment, must be completed in order for Kentucky to clear the individual's driving record. The State has been without a Zero Tolerance Coordinator for three years. That position was filled during this reporting period. The Zero Tolerance coordinator has been surveying each Regional Prevention Center with a Zero Tolerance program to find out more about how each region is providing ZT. One Zero Tolerance provider meeting was held in 2017. Four more are scheduled in the upcoming year. The two goals of the program thus far are to update the provider manual and work more closely with the Kentucky Department of Transportation.

Youth Empowerment System (Y.E.S.)

The goal of the Youth Empowerment System (Y.E.S.) is to build capacity for Kentucky youth to plan, implement and evaluate substance abuse prevention strategies in their schools and communities. Y.E.S. 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 abuse needs assessment data and contain appropriate evidence-based strategies. This year the Substance Abuse Prevention and Promotion Branch allocated \$65,000 dollars to fund YES activities for 37 YES groups across the state.

Adult Substance Use Treatment and Recovery Services Branch (Maggie Schroeder, Branch 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 Opioid State Targeted Response, 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 will focus on four primary populations: opioid overdose victims, pregnant and parenting women, individuals re-entering society upon release from criminal justice settings, and adolescents and young adults. The KORE dedicates much needed resources to address five overarching goals: (1) prevent opioid misuse and abuse; (2) increase access to OUD treatment services, including Medication-Assisted Treatment; (3) increase the availability of recovery support services designed to improve treatment access and retention and support long-term recovery; (4) increase availability of naloxone; and (5) enhance statewide coordination and evaluation of healthcare and public safety strategies targeting opioid misuse and overdose. Examples of prevention projects include distribution of 5000 naloxone kits, opioid overdose prevention training, and expansion of the Sources of Strength program across 115 middle and high schools, SBIRT education to physicians, and enhancements to the prescription drug monitoring program. Examples of treatment projects include establishing bridge clinics in emergency departments to increase rapid access to treatment, integrated obstetrics and substance use disorder treatment for pregnant and parenting women, a treatment stipend program to decrease barriers to residential treatment, provider education and trainings to improve and expand the workforce, and expanded access to Vivitrol for individuals reentering the community following detention. Examples of recovery support projects include employment support for reentering individuals, expanding recovery support groups and programs such as Young People in Recovery and Double Trouble in Recovery, and expanding the peer support workforce specifically around substance use disorders.

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 whom meet the DSM substance use diagnostic criteria for a substance use disorder, case management services are also available. KY Moms connects this population at the appropriate point during their care with prevention services through substance use treatment, assisting in reducing harm to Kentucky children from maternal substance use during their pregnancy and up to 60-days post-partum. This program is primarily funded by Tobacco Settlement funds through the Governor's Office of Early Childhood in conjunction with a limited amount of Substance Use Prevention and Treatment Block Grant dollars.

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.

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 are 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.

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

KY Moms works to improve outcomes for the mothers, infants and families receiving services. To achieve this, DBHDID is currently working with each CMHC region to identify evidence-based practices, promising practices and improve access to needed resources to increase the effectiveness of the KY Moms prevention and case management service delivery. With the expansion of Medicaid services in 2014, more substance use treatment services are available throughout Kentucky. 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, healthy lifestyles.

<u>Supporting Mothers to Achieve Recovery through Treatment and Services</u> (SMARTS)

Beginning in 2015, the purpose of the SMARTS grant is 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.

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 assists in obtaining prenatal care and Medicated 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. For FY 2017 thirty-eight (38) clients received treatment and services while some remain in aftercare through the Women's Renaissance Center in Shelbyville, KY.

Office for Drug Control Policy (ODCP) Funding Opportunity

In 2016, Kentucky Governor Matt Bevin signed a two-year budget with a total of \$15.7M in FY2107 and \$16.3M in FY2018 allocated to the Kentucky Justice and Public Safety Cabinet to combat heroin and substance abuse in the Commonwealth. Community Mental Health Centers were allotted \$3M in FY2018 for expansion of evidence-based substance use treatment services, including medically assisted treatment, in local communities throughout the state. Additionally, \$3M in FY2018 was used to fund ten (10) programs focusing on neonatal abstinence syndrome (NAS) by developing or expanding comprehensive evidence-based residential treatment services, increasing transitional housing, and other recovery supports to pregnant and parenting women with opioid use disorders. 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 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. The pilot project utilizes the CAPTA (Child Abuse Prevention and Treatment Act) requirements in developing a program of integrated and collaborative services that is multi-disciplinary, multi-agency, and intended to support the mother and substance affected infant and their identified needs during pregnancy and after delivery, 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 the 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 December 1, 2017 the two pilot projects had served 60 pregnant or postpartum women and their infants.

Kentucky Care Integration (KCI)

In 2017 the Kentucky Department of 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 that seeks to implement bi-directional primary care and behavioral healthcare integration collaborative clinical practices, improved care models, comprehensive service continuum for focus populations who have, or at risk of, developing chronic health conditions. DBHDID is partnering with two CMHCs, Centerstone and Mountain Comprehensive Care Centers to develop a sustainable model of integrated care that can be duplicated. While this is the tenth cohort of care integration grants, this is the first to be awarded to single state entities, which is a deliberate strategy to increase the likelihood of sustainability with the goal of leveraging knowledge to impact statewide policy. This project will enable the Commonwealth to identify, address and eliminate barriers that prevent the provision of bidirectional, integrated behavioral health and primary care across Kentucky systems of care.

<u>Cooperative Agreements to Benefit Homeless Individuals (CABHI) Kentucky</u> <u>Grant</u>

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 is 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, BDHDID chose to work in partnership with Kentucky's three most urban Community Mental Health providers: Centerstone, Bluegrass, and NorthKey. Each region receives 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. In 2017, 128 chronically homeless and veteran homeless individuals with serious mental illness (SMI) and/or substance use disorder (SUD) have been identified and received services under the grant. Total clients served across the life of the grant is 208. As we enter the third and final year of the grant, focus will transition towards sustainability of the local CABHI projects.

Kentucky DUI Program

The Kentucky DUI Program is located within the Division of Behavioral Health. 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 (27) NTPs 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 branch

is also responsible for the evaluation of requests from the centers for approval of waivers or exceptions to the regulations for individual clients

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 currently provided three full-time Oxford House Outreach Services Representatives (one male and two female) charged with opening 7 new houses annually, with an overall goal of developing and maintaining 40 additional homes across the Commonwealth. In 2017, 16 new houses were added with expansion in the new territories of Lexington and Morehead. Since the introduction of this expansion project, Kentucky has added 24 new recovery homes in the state, totaling 28 houses located in Northern Kentucky, Louisville, Owensboro, Paducah, Lexington, and Morehead.

<u>Service Members, Veterans, and their Families (SMVF) Behavioral Health</u> 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 seven (7) Operation Immersion events since inception in 2012 at the Wendell H. Ford Regional Training Center. Three hundred and fifty-two (352) behavioral health professionals/providers have attended this handson 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 more adequate care 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, 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 Providers Guide in order for potential clients to find quality care.

2017 Office for Drug Control Policy (ODCP) Funding Opportunity

In 2016, Kentucky Governor Matt Bevin signed a two-year budget with a total of \$15.7M in FY2107 and \$16.3M in FY2018 allocated to the Kentucky Justice and Public Safety Cabinet to combat heroin and substance abuse in the Commonwealth. Within the FY2017 funding allocation, up to \$4.3M was allotted for community mental health centers to expand evidence-based substance use treatment services, including medically-assisted treatment, in local communities throughout the state and up to \$2.5M was set aside for established programs to address neonatal abstinence syndrome by developing or expanding comprehensive evidence-based residential treatment services, transitional housing, and other recovery supports to pregnant and parenting women with opioid use disorders. 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 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.

T.C. Johnson (FRYSCKy)

The FRYSCKy Coalition was established as a professional organization to enhance and promote the work of the Kentucky Family Resource and Youth Services Centers. The 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 FRYSCKy 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 FRYSCKy Coalition representative on the KY ASAP board I have reported prevention efforts and initiatives to both the FRYSCKy 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.

<u>Kentucky Association of Regional Programs (KARP)</u> (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!

<u>Kentucky Department of Education (D. Wayne Lewis, Interim Commissioner)</u>

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 Kentucky school districts (KY School for the Deaf, Fayette County Schools and Pulaski County Schools) as part of the KY AWARE 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 these districts and KDE (through the KY AWARE grant) will be completed soon. The KY AWARE grant program will continue however. The (new) districts that will operate under the same guidelines are being finalized at the time of this report.

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 and Trauma Informed Care trainers are currently

housed in the co-ops, ABRI, KYCID, and KDE provides instruction for school personnel.

The Student Engagement and Support 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 twenty (20) schools as of February (2019) with additional schools scheduled for the coming year. In addition to the 20 schools trained by KDE, additional schools have been trained by the (Sources of Strength) national trainers.

The Student Engagement & Support Branch (KDE), Safe Schools team has developed and is now distributing a Safe Schools newsletter to all Safe Schools Coordinators as well as Directors of Pupil Personnel (DPP's). 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.

<u>Kentucky Department for Public Health (Jeffrey D. Howard M.D.)</u>

Tobacco use is the number one public health threat in Kentucky. Our adult and youth smoking rates, annual deaths related to smoking, and lung cancer death rates are among the highest in the country. Tobacco-related diseases cause more deaths in Kentucky and across the nation than AIDS, automobile accidents, homicides, suicides, alcohol, and illicit drug use combined.

The Tobacco Prevention and Cessation Program (KTPC) is primarily funded by Kentucky's Master Settlement Agreement (MSA). Approximately eighty percent of Public Health MSA funds for tobacco prevention and cessation are distributed to local health departments. KTPC also receives grant funds from the Centers for Disease Control and Prevention (CDC). Grant funds cover KTPC staff, administrative costs, and a local grants program.

All local health departments have a Tobacco Prevention and Cessation Specialist, whose activities include educating about youth prevention in schools, promoting smoking cessation, conducting community assessments, providing technical assistance to schools and businesses, and developing youth

and adult coalitions to promote policy and environmental changes such as local smoke-free ordinances.

KTPC is an active partner on the KY-ASAP Board and through local health departments work together at the local level to reduce youth smoking, illegal sales to minors, and the percentage of Kentuckians exposed to secondhand smoke. They also partner in supporting 100% Tobacco Free Schools and promoting tobacco cessation, including providing Nicotine Replacement Therapy (NRT).

2018 Highlights:

- ❖ Comprehensive smoke-free workplace ordinances now protect 35.2% of Kentuckians from the harmful effects of secondhand smoke exposure in public places and the workplace. In 2018, these laws protected approximately 109,077 more Kentuckians.
- ❖ Kentucky Public Housing Authority owned properties (PHAs) funded by HUD report 100% of properties having a smoke-free policy as ordered by the 2018 Smoke-free Public Housing HUD Mandate.
- Currently 740 schools in 74 school districts (42% of KY districts) have adopted a 100% Tobacco Free School (TFS) Policy through the combined efforts of Coordinated School Health and Tobacco programs.
 - A 100% TFS policy prohibits tobacco use, including e-cigarettes, by staff, students, and visitors inside Board-owned buildings or vehicles, on school-owned property, and during schoolsponsored student trips and activities, twenty-four hours a day, seven days a week.
- ❖ There has been a nationwide increase in youth using e-cigarettes; KTPC is currently coordinating a response to educate youth, parents, school administrators and community members about the risks posed by youth e-cigarette use.
- ❖ According to the 2017 Youth Risk Behavior System (YRBS) survey, current smoking among Kentucky high school students has decreased from 24.1% in 2011 to 14.3% in 2017.
- ❖ Since 2002, Kentucky's adult smoking rate has declined from 28.3% in 2012 to 24.6% in 2017, according to BRFSS.
- Quit Now Kentucky (QNK), Kentucky's Quit Line, provides cessation assistance by calling 1-800-QUITNOW, 1-800-DeJeloYa, or online at www.QuitNowKentucky.org.
- ❖ In 2017, the 30-day guit rate at 6 months for QNK was 26%.
- ❖ In FY 18, QNK received 4,689 calls, sent 68,515 text messages, had 23,139 unique visits for web-based services, received 902 fax referrals, 781 provider web referrals, and 203 referrals via electronic health records (EHR).
- Since 2012, Quit Now Kentucky has expanded services beyond traditional telephone coaching to enhanced, integrated services including:

- Web-based services
- E-referrals
- E-messaging
- Specialized protocols for priority populations
- Text messaging
- Bidirectional EHR referral
- Trilingual call center (English, Spanish, Arabic)

Kentucky Public Health Association (Vacant)

No Report Submitted for 2018

Kentucky Health Departments Association (KHDA) and Kentucky Public Health Association (KPHA) have not been as involved with the reduced actives of the Smoke Free Coalition as last year, as that Organization has not been nearly so active in 2017. However, we now are working on the Coalition to put a fee on tobacco products. There have been local Board of Health anti-smoking resolutions passed by more local health departments as well as numerous discussions with local elected and business leaders. The emphases in 2017 has been on local level activity dealing with local smoking ordinances authorized by local governments. There have been several communities in Kentucky that have passed local smoke free ordinances in 2016 with the strong support of the local health department. Also, KHDA and KPHA have worked through me and several members of our Board to create specific legislation on the smoking subject such as the Bill introduced this session by Senator Ralph Alvarado which prohibits smoking on school campuses. It is our intention to continue this support as long as it is supported by the Kentucky Department of Public Health.

As to other substance abuse issues each local health department (KHDA member) has worked to varying extents in their local community to be supportive from a public health perspective in education and treatment with other appropriate entities in their locale. We feel our activities have continued to raise local awareness about the significance of substance abuse and I believe we are making an impact. I feel comfortable that our efforts are instrumental at the local level in calling attention to the need for solutions. 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 that is a sitting member of the local ASAP board. A good example of this is Buffalo Trace Health District (Mason and Robertson Counties) where Allison Adams the local health department (LHD) Director and the KHDA President also is the chair of the local ASAP.

The activity level varies by local health departments. As an example, in Jefferson County, over 13,000 participants are being helped with substance abuse use disorder by the local health department.

Additionally, the local health departments continue to be very active in addressing specifically heroin issues and legislative solutions in their service areas. Local health departments have been engaged at various levels in continuing to try to implement syringe exchange programs and also transitioning the participants in those programs in substance abuse treatment. Approximately 20 additional communities have implemented syringe exchange programs in the past year. Also I continue to have regular communication with Department of Public Health on the subject of substance abuse, as well as, trying to stay in touch with Van Ingram and Secretary Tilley to aid in their legislative efforts while I am active in other public health initiatives with the Legislature.

Other LHD's like Powell County are active in needle exchange distribution and teaching use of Naloxone kits locally and support for school programs targeting drug and alcohol prevention. Many LHD's have Board members on the local ASAP such as Lawrence County with two. Some LHD's such as Knox County received special ASAP grants that allowed expanded activity frequently with Narcan related and/or education projects. In some areas such as Hopkins County LHD there were grants that allowed joint programs with law enforcement usually on some aspect of Naloxone.

In closing I am attaching one annual report from Boyle County as an example, see Attachment 1) that is typical for most LHD's and indicative of the valuable activities performed by and through ASAP with the public health communities at the local LHD level.

There is no question about the involvement of the local health department Directors through KHDA in fighting the fight against substance abuse in their respective communities. Further, there is a strong commitment with KPHA in continuing the support of substance abuse prevention at the State level in addition to whatever support they can provide locally. We feel that we are making progress in conveying a message and hopefully will soon make more progress in solving the problem.

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
FY 19 Accomplishments
July 1, 2018 – June 30, 2019

RPC Staff

Jill Owens - Director

Deborah Hampton - Prevention Specialist

Our methods for activities, projects, trainings, coalition work, etc. are found in RPC FY 19 Work Plan and PFS 2015 Work Plan

<u>July</u>

- *Attended Knox UNITE and provided information about KY statewide NMUPD Media Campaign and promoted seethesignsky.com website
- *Attended Saving Bell and provided technical assistance on development of the resource directory and process to become 501c3
- *Finalized cinema ads for Suicide Prevention Campaign and sent to contractors for Regency Cinema in London and Tri-County Cineplex in Corbin. Regency Cinema will begin showing ads August 15, 2018 and Tri-County Cineplex will begin showing ads July 13, 2018. Both cinemas will show ads in every theater, before every movie, every day, for one year.
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Completed and submitted required Quarterly PFS Report to DBHDID
- *Provided technical assistance to Knox County Attorney and Bell/Knox/Whitley ASAP regarding possible funding sources for

transportation, evaluations for persons court ordered for treatment through Casey's Law

- *Delivered suicide prevention, substance abuse prevention and treatment resources to Bell County Sheriff's Department. Discussed importance of increasing the community's awareness of these issues and local resources available
- *Attended and participated in Laurel County's Consortium for Opioid Response meeting, through Laurel County Health Department. The health department is working on a grant opportunity provided by HRSA for Rural Communities Opioid Response Program Planning. Provided technical assistance on possible strategies that could impact Laurel County regarding prevention.
- *Prepared for our Prescriber's KORE training that will address the prescriber's role in addressing the opioid crisis. This training is August 3 in Laurel County at the "27th Annual AHEC Summer Conference"

<u>August</u>

- *Attended Bell County High School Open House and provided information on various substances for parents and students, suicide prevention materials, and prevention/treatment resources
- *Presented Prescribers KORE material, which addressed the prescriber's role in addressing the opioid crisis, to over 160 prescribers from Cumberland River Regions and surrounding counties in KY and also surrounding states. The training was in Laurel County at the 27ath Annual AHEC Summer Conference
- *Attended Long Jack Back to School Bash and provided information on various substances for parents and student, suicide prevention materials, and prevention/treatment resources
- *Attended Knox UNITE and provided consultation and technical assistance to address county's substance abuse issues
- *Requested Bell County leaders to attend an Opioid discussion/meeting with a representative from Senator McConnel's office.
- *Attended and participated in opioid discussion with a representative from Senator McConnell's office, county leaders and CRBH program directors. Discussed our regions issues with opioid misuse and interventions needed *Visited and met with Bell County Sheriff's Dept. and provided substance abuse prevention and treatment resources to assist staff when community members request or are in need of information.
- *Attended Clay/Jackson ASAP and provided information on KORE. District Health Dept member present and discussed possibly partnering in providing Prescriber and Community Trainings.

- *Attended Laurel ASAP, Rockcastle ASAP, Knox Health Coalition and Rockcastle Health Coalition monthly meeting
- *RPC Director and Prevention Specialist attend Zero Suicide meeting and provided information on how PFS funding can assist to increases awareness of opioid misuse and suicide prevention and assisted in planning suicide prevention awareness activities for CRBH in September for Suicide Prevention Month
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Participated in power session call with Patti Clark, Prevention Branch Manager, DBHDID
- *Provided Suicide Prevention Training for Harlan Independent School staff
- *Attended Laurel Health in Motion (Health Coalition) meeting and shared information about KORE trainings
- *Provided technical assistance to Whitley County Health Department regarding CRBH treatment partnering during Suicide Prevention activities
- *Provided technical assistance to Whitley County High School regarding suicide prevention resources for students/parents/caregivers
- *Provided substance abuse prevention and suicide prevention materials to Harland Independent School District for student/parents/caregivers
- *Talked with St. Joseph of London Hospital regarding possibly partnering to provide KORE prescribers training

September

- *RPC Director and Prevention Specialist attended Child Fatality Review team meeting. Provided information and discussed connection between opioid misuse and suicide. Also provided information on PFS and KORE, including suicide prevention/opioid cinema ads and resources available through seethesignsky.com website
- *Provided technical assistance to Clay/Jackson ASAP board members on how RPC, ASAP and community entities can partner to provide KORE trainings and Naloxone trainings for first responders and community members
- *Provided technical assistance to Zero Suicide committee members on how RPC and Zero Suicide can continue to partner on opioid misuse/suicide prevention efforts.
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Provided Mental Health Awareness and Suicide Prevention Training to detention center staff in Bell, Harlan, Whitley and Clay Counties
- *Attended and participated in Clay/Jackson ASAP, Laurel ASAP, Rockcastle ASAP, Bell UNITE monthly coalition meetings
- *Discussed partnering to provide KORE trainings with Clay/Jackson ASAP and Saving Bell
- *Provided information about RPC services and KY Moms program/services to

- CRBH substance abuse treatment staff during in-service meeting *Attended and participated in Laurel County Health in Motion (Health Coalition) meeting
- *Attended and participated in Bell UNITE coalition meeting
- *Attended and participated in the Foundation for a Healthy Kentucky's annual Bost Memorial Health Policy Forum in Lexington September 24. The forum focused on the health impact and economic cost of Kentucky's opioid addiction crisis
- *Attended and participated in Kentucky Prevention Network Conference September 25
- *in collaboration with REACH discussed importance of participating in KIP survey with local county and independent school districts in our region (Middlesboro Ind Schools, Pineville Ind Schools, Barbourville Ind Schools, Knox County Schools)
- *Provided requested self-injury information to CRBH clinical staff
- *Provided information on RPC program/services to National Public Radio

October

- *Provided Mental Health Awareness and Suicide Prevention Training to detention center staff in Knox, Rockcastle and Jackson Counties
- *Attended Saving Bell coalition and assisted in finalizing needs/treatment resource guide for community members
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Completed and submitted required Quarterly PFS Report to DBHDID
- *Attended and participated in Bell/Knox/Whitley ASAP meeting
- *Worked on scheduling and securing KORE Trainings for community, first responders and prescribers. List of scheduled trainings are due to DBHDID by end of October
- *Contacted Kentucky Cabinet of Transportation in Manchester to inquire about bridges in our region where suicide attempts/suicides may have occurred or bridges that may be a concern. This information was requested by our state suicide prevention coordinator. A state project may be developed to provide bridge signs/messages for suicide prevention efforts.
- *Partnered with Cumberland Hope and provided drug prevention education for Lone Jack School Center grades 6th-8th.
- *Worked on Needs Assessment Step 3
- *Attended mandated Prevention Data System Training and RPC Directors Meeting in Louisville

October 9-11

*Completed and submitted required Schedule of KORE Trainings to DBHDID

*Participated in required webinar regarding Step 4 in Needs Assessment process, which is due to DBHDID in December

November

- *Attended Saving Bell coalition. Guest speaker shared information about housing program for recovery addicts...this coalition is in process of learning how to enhance resources for our community's recovery addicts.
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Provided KORE Bell County Community Training at Bell County Health Department November 2, 2018
- *Provided KORE Whitley County Community Training at Corbin Center November 8, 2018
- *Attended Bell/Knox/Whitley ASAP and reviewed three mini grants
- *Provided KORE Rockcastle County Community Training at Marcells Farm to Fork November 14, 2018
- *Attended Laurel County Health Coalition November 16, 2018. Assisted in Laurel County needs assessment process and steps in place to move forward *Attended Knox County Health Coalition November 27, 2018 and participated in their needs assessment process
- *Provided KORE Jackson County Community Training at Opals November 20, 2018
- *Provided KORE Bell County First Responders Training at Bell County Ambulance Service November 28, 2018
- *Worked on scheduling additional KORE community and first responder trainings.
- *Worked on Step 3 and began Step 4 in Needs Assessment process, required by DBHDID
- *Scheduled and additional KORE trainings for December 2018 and January 2019.

December

- *Attended Zero Suicide meeting December 13, 2018 and shared number of community members whom viewed suicide prevention 30 second ad at our two local cinemas and provided information on how our communities are becoming more aware of suicide prevention information and treatment resources.
- *Attended Laurel ASAP meeting December 13, 2019. Shared information about KORE trainings and invited coalition members to attend Laurel KORE Community training on January 15, 2019.
- *RPC Director completed and submitted application for CPS recertification
- *As part of the NMUPD statewide media campaign, Media Works also developed Suicide Prevention ads for cinemas. Our RPC contracted with our

local cinemas in Laurel County and Whitley County to run these ads for one year. These ads ran in November and December 2018 in Whitley County (Corbin Tri-County Cineplex) and Laurel County (Regency Cinemas). The ads promoted the seethesignsky.com website, which provides resources for Opioid Abuse and Suicide

- *Provided technical assistance to Middlesboro High School FRYSC on how our RPC can partner with the school and Cumberland Hope Center to provide drug prevention education program for students.
- *Partnered with Cumberland Hope and provided drug prevention education for Middlesboro High School December 13, 2018.
- *Attended Clay/Jackson ASAP meeting December 13, 2018 and provided technical assistance on the difference between effective and ineffective strategies our RPC promotes, to provide more understanding of RPC services. *Provided Lone Jack School Center in Bell County with drug/suicide/bullying prevention materials and brochures on December 12, 2018 to be displayed and made available for students, parents, and caregivers.
- *Provided KORE Community Training in Knox County on December 4, 2018, at Union College Student Center. Trained 27 community members.
- *Provided KORE 1st Responders Training in Jackson County on December 12, 2018, at Jackson County Emergency Management. Trained 11 1st Responders
- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Attended Laurel County Consortium December 18, 2018. Assisted in identifying barriers, gaps and needs to address opioid issues
- *Worked on Step 3 and Step 4 in Needs Assessment process, required by DBHDID
- *Interviewed applicants for SOR positions and vacant Prevention Specialist positions

January

*Completed and submitted Step 3 and Step 4 in Needs Assessment process to

DBHDID

- *Completed and submitted required Monthly Opioids Report to DBHDID
- *Completed and submitted required PFS Quarterly Report to DBHDID
- *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 1st Responders Training in Whitley County on January 11, 2019, at Whitley County Emergency Management. Trained 15 1st Responders *Provided KORE 1st Responders Training in Laurel County on January 15, 2019, at Laurel County Emergency Management. Trained 22 1st Responders *Provided KORE 1st Responders Training in Rockcastle County on January 15, 2019, at Rockcastle County Emergency Management. Trained 25 1st Responders

*Provided KORE 1st Responders Training in Knox County on January 17, 2019, at Barbourville Volunteer Department Station 2. Trained 25 1st Responders

*Provided KORE 1st Responders Training in Harlan County on January 24, 2019, at Harlan County Emergency Management. Trained 16 1st 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 January9, 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 vacant 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

KY-ASAP: Prescription Drug Disposal

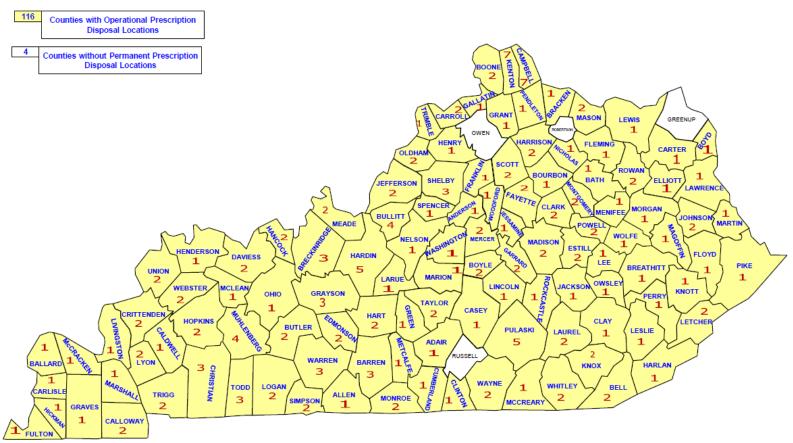
Two-thirds of teens who report abuse of prescription medicine are getting it from friends, family and acquaintances⁴. Understanding the necessity for Kentuckians to have a safe, convenient, and responsible means of disposing prescription drugs, in 2011 the Kentucky Agency for Substance Abuse Policy created 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.

Additionally, on October 18, 2016, the Kentucky of Drug Control Policy-Kentucky Agency for Substance Abuse Policy, along with the Cabinet of Health & Family Services, Kentucky State Police and the Pharmaceutical Research and Manufacturers of America were joined by First Lady Glenna Bevin to formally launch "MYOLDMEDS Kentucky", a public information campaign to drive awareness around safe prescription drug use, storage and disposal. MyOldMeds Kentucky complements the existing efforts by the Kentucky Office of Drug Control Policy–Kentucky Agency for Substance Abuse Policy to combat prescription drug abuse and encourage safe medicine disposal. The also highlights existing resources for returning unused medicines to drug take-back locations throughout the state and provides instructions for secure in-home disposals of medicines.

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⁴ Partnership for Drug-Free Kids: https://drugfree.org/article/secure-dispose-of-medicine-properly/?gclid=Cj0KCQiAs9zSBRC5ARIsAFMtUXGUcGfXUT-FthoZoHcLUE0EgZy6EnsKJs4igUWdoF6o rgabBDDJuoaAhQnEALw wcB

Kentucky Permanent Prescription Drug Disposal Locations 198 locations in 116 counties



updated: October 17, 2016

County	Location	Hours Open	Phone
	Kentucky State Police, Post	•	
Adair	15 1118 Jamestown Street Columbia, KY	24/7	270-384- 4796
Addii	Anderson County Sheriff		
Anderson	208 S. Main Street Lawrenceburg, KY	Mon - Fri 8-6	502-839- 4021
	Allen County Sheriff's Dept.		270 227
Allen	194 Wood Street Scottsville, KY	24/7	270-237- 3210
	Ballard County Sheriff's Dept.	Mon-Fri 8-4	
Ballard	437 Ohio Street Wickliffe, KY	or anytime city hall is open	270-335- 3561
Barren	Cave City Police Dept. 103 Duke Street Cave City, KY	MonFri 8-4	270-773- 2441
Barren	Barren County Sheriff's Dept. 117 N. Public Square, #3a Glasgow, KY	MonFri 8-4 Sat8-Noon	270-651- 2771
Barren	Glasgow, K1 Glasgow Police Dept. 201 S. Broadway Street Glasgow, KY	Open 24/7	270-651- 5151
Bath	Owingsville Police Dept. 19 Goodpaster Avenue Owingsville, KY 40360	24/7	606-674- 2341
Bell	Pineville Police Dept. 300 Virginia Ave. Pineville, KY 40977	City Hall Mon-Fri 8-4	606-337- 2207
Bell	Middlesboro Police Dept. 150 N. 20th Street Middlesboro, KY 40965	24/7	606-248- 2020
Bell	Bell County Sheriff's Office 101 Courthouse Square Pineville, KY 40906	Mon-Fri 8am - 4pm or by appointment	606-337- 3102
Boone	Florence Police Dept. 8100 Ewing Blvd. Florence, KY	Mon-Fri 8:30-5	859-647- 5420
Boone	Boone County Sheriff's Office 3000 Conrad Lane Burlington, KY	Mon-Fri 8-5	859-334- 2234

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

County	Location	Hours Open	Phone
•	Lebanon Junction Police	_	
	Dept. 271 Main Street	Man Fol	502-833-
Bullitt	Lebanon Junction, KY 40150	Mon-Fri	2244
Builitt	Lebanon Junction, KT 40130	8:00 - 5:00	2244
	Butler County Sheriff's Office		
	110 North Main Street	Mon-Fri	270-526-
Butler	Morgantown, KY	8-4	3676
	Morgantown City Police	-	
	2800 Sailing Circle		
	Huff Ingram Drive		270-526-
Butler	Morgantown, KY	24/7	3662
	Caldwell County Sheriff's	no box	
	Office	drop off at office	270-365-
Caldwell	100 E. Market Street, #25	Mon-Fri 8-4	
Caldwell	Princeton, KY Calloway County Sheriff's	8-4	2088
	Office		
	701 Olive Street		270-753-
Calloway	Murray, KY	24/7	3151
	Murray Police Department	,	
	407 Poplar Street		270-753-
Calloway	Murray, KY	24/7	1621
	Newport Police Dept.		
	998 Monmouth Street	Mars Fui	859-292-
Campbell	Newport, KY	Mon-Fri	
Campbell		8:30-4:30	3625
	Highland Heights Police Dept.		050 444
	176 Johns Hill Road Highland Heights, KY	Call officer	859-441-
Campbell	Highland Heights, Kt	8-4	8956
	Fort Thomas Police Dept.	Mon-Fri	
	130 N. Fort Thomas Avenue	8-4:30 anytime city hall is	859-292-
Campbell	Fort Thomas, KY	open	3622
Campbell	Campbell County Police Dept.	Mon-Fri	3022
	8774 Constable Drive	8-4	859-547-
Campbell	Alexandria, KY	except holidays	3100
	Wilder Police Dept.		
	520 Licking Pike	Mon-Fri	859-581-
Campbell	Wilder, KY 41070`	7-5	8863
	Dayton Police Dept.		050.064
	514 6th Avenue	Mon-Fri	859-261-
Campbell	Dayton, KY 41074	9-5	1471

County	Location	Hours Open	Phone
	Southgate Police Dept.		
	122 Electric Avenue	Mon-Thur	859-441-
Campbell	Southgate, KY 41071	8-4	0075
	Carlisle County Sheriff's Dept.	Man Fui	270-628-
Carlisle	985 US Hwy 62 Bardwell, KY	Mon-Fri 8-4	3377
Carrisie	,	0-4	3377
	Carroll County Sheriff's Office		F00 700
	440 Main Street, 1st Floor Carrollton, KY 41008	Mon-Fri	502-732-
Carroll	Carrollon, KT 41000	8:30 - 4:30	7010
	Carrollton Police Dept.		
	750 Clay Street		502-732-
Carroll	Carrollton, KY	24/7	6621
	Carter Co. Sheriff's Dept.	Mon - Fri - 8:30 - 4	
	300 W. Main Street	&	606 474
0	Grayson, KY	Saturday - 8:30 -	606-474-
Carter	, .	noon	5616
	Liberty Police Dept.		606-787-
Casey	51 Jockey Street Liberty, KY 42539	24/7	6371
Casey	Winchester Police Dept.	24/ /	03/1
	16 South Maple Street		859-745-
Clark	Winchester, KY	24/7	7400
	Clark County Sheriff's Office	= 1/1	
	17 Cleveland Avenue, #1	Monday-Friday	859-744-
Clark	Winchester, KY	8:00 a.m4:00 p.m.	4390
	Manchester Police Dept.		404 -00
	200 White Street		606-598-
Clay	Manchester, KY 40962	24/7	8411
	Albany Police Department		606-387-
Clinton	204 E. Water Street Albany, KY 42602	24/7	4482
Ciliton	Hopkinsville Police Dept.	24/7	4402
	101 N. Main Street	Mon-Friday	270-890-
Christian	Hopkinsville, KY	8:00 a.m 4:00 p.m.	1500
	Christian County Sheriff's	2.30 a 1100 p	
	Dept.		
	215 W. 7th Street	Mon-Fri	270-887-
Christian	Hopkinsville, KY	8:00 - 4:30	4141
	Oak Gove Police Dept.		
	8505 Pembroke Oak Grove Rd	Mon-Fri	270-439-
Christian	Oak Grove, KY 42262	8:00 am - 4:00 pm	5979
	Marion Police Dept.		270.065
Cuittoradara	217 S. Main Street, #102	24/7	270-965-
Crittenden	Marion, KY	24/7	3500

County	Location	Hours Open	Phone
	Crittenden County Sheriff's	-	
	Dept.		270.065
	Crittenden County Courthouse	Monday-Friday	270-965-
Crittenden	Marion, KY 42064	8:00 a.m4:00 p.m.	3400
	Cumberland County 911		
	299 Glasgow Road		270-864-
Council and an al	Burkesville, KY 42717	24/7	4141
Cumberland	(behind Hospital)	24/7	4141
	Daviess County Sheriff's Dept.		
	212 Saint Ann Street #103	Mon-Fri	270-685-
Daviess	Owensboro, KY	8-4:30	8444
Daviess	Owensboro City Police Dept.	8-4.30	0777
	222 East 9th Street		270-687-
Daviess	Owensboro, KY	24/7	8888
Davicss	Edmonson County Sheriff's	2-7/7	0000
	Dept.		
	110 Jackson Street	Mon-Fri	270-597-
Edmonson	Brownsville, KY	8-4	2157
	Brownsville Police Dept.		
	121 Washington Street	Mon-Fri	270-597-
Edmonson	Brownsville, KY	8-4	3814
	Elliott County Sheriff's Dept.		
	118 S. KY 7	Mon - Fri	606-738-
Elliott	Sandy Hook, KY	8 - 4	4167
	Irvine Police Dept.		
	101 Chestnut Street	Mon Fri.	606-723-
Estill	Irvine, KY	8-4	2221
	Ravenna Police Dept.		
	620 Main Street	Mon Fri.	606-723-
Estill	Ravenna, KY	8-3	3332
	Fayette County Sheriff's Dept.		050 353
_	150 N. Limestone, Suite 236	Mon - Fri	859-252-
Fayette	Lexington, KY	8 - 4	1771
	Lexington Division of Police		050 250
	150 E. Main Street	24/7	859-258-
Fayette	Lexington, KY	24/7	3600
	Flemingsburg Police Dept.	C .	606 945
Elamin :	116 South Main Cross	Sat	606-845-
Fleming	Flemingsburg, KY 41041	8 - 5	2121
	Prestonsburg Police Dept.		606-886-
Elove	200 N. Lake Dr.	24/7	
Floyd	Prestonsburg, KY 41653	24/7	1010

County	Location	Hours Open	Phone
Franklin	Frankfort Police Dept. 300 West 2nd Street Frankfort, KY	24/7	502-875- 8525
Franklin	Franklin County Sheriff's Dept. Franklin County Public Safety Bldg 974 River Bend Road Frankfort, KY 40601	Mon - Fri 8-4	502-875- 8740
Fulton	Fulton County Sheriff's Dept. 2216 Myron Cory Dr. #4 Hickman, KY	Mon - Fri 8-4	270-236- 2545
Gallatin	Gallatin County Sheriff's Office 106 West Main Street Warsaw, KY	Mon-Fri 8-4:30 . weekends-deputies accept at local banks	859-567- 5751
Garrard	Garrard County Sheriff's 15 Public Square Lancaster, KY	Mon, Tues, Thur, Fri 7:30 - 4:30 Wed & Sat 8 - 12	859-792- 3591
Garrard	Lancaster Police Dept. 308 West Maple Avenue Lancaster, KY	24/7	859-792- 6000
Grant	Grant County Sheriff's Office 212 Barnes Road, Suite A Williamstown, KY 41097	Mon-Fri 8:00 - 4:00	859-824- 3333
	Graves County Sheriff's Office 101 East South Street #3 2nd Floor Courthouse Annex Mayfield, KY 42066		270-247-
Graves	Leitchfield Police Dept. 117 S. Main Street	Mon-Fri 8-4:30 (CT)	6501 270-259-
Grayson	Leitchfield, KY Grayson Co. Sheriff's Dept.	24/7	3850
Grayson	44 Public Square Leitchfield, KY	Mon-Fri 8:00 - 4:00	270-259- 3024

0			Dia a se a
County	Location	Hours Open	Phone
	Caneyville City Hall 304 East Maple Street		
	Caneyville, KY 42721	Mon, Tues, Wed, Fri	270-879-
Grayson	Carrey ville, RT 42/21	8:00 - 4:00	9701
	Greensburg Police Dept.		
	105 West Hodgenville Avenue		
	Greensburg, KY 42743		
			270-932-
Green		24/7	4202
	Hancock County Sheriff's		
	Office 225 Main Cross Street	Man Fri	270-927-
Hancock		Mon-Fri 8-4	6247
HallCOCK	Hawesville, KY Lewisport Police Dept.	Mon-Fri	0247
	405 2nd Street	9:00 - 3:00	
	Lewisport, KY 42351	8	
	12001	Mon-Sun	270-295-
Hancock		5:00pm - 12:00 am	6188
	Elizabethtown Police Dept.	·	
	300 S. Mulberry Street		270-765-
Hardin	Elizabethtown, KY	24-7	4125
	Radcliff Police Dept.		
	220 Freedoms Way		270-351-
Hardin	Radcliff, KY	24-7	4479
	West Point Police Dept.	Man Fri	502-922-
Hardin	509 Elm Street West Point, KY	Mon-Fri 8 - 4:30	4135
пагин	Vine Grove Police Dept.	8 - 4.30	4133
	300 W. Main Street	Mon-Fri	270-877-
Hardin	Vine Grove, KY 40175	8 - 5:00	2262
	Kentucky State Police, Post 4	3 2.20	_
	1055 North Mulberry		270-766-
Hardin	Elizabethtown, KY	24/7	5078
	Harlan County Sheriff's Office		
	210 E. Central Street	Mon-Fri	606-573-
Harlan	Harlan, KY 40831	8:30 - 4:30	1313
	Harrison County Sheriff's		
	Office	М Г.:	859-234-
Usuries:	113 W. Pike Street	Mon-Fri	
Harrison	Cynthiana, KY Cynthiana Police Dept.	8:30-4:30	7135
	420 E. Pleasant Street	Mon-Fri	859-234-
Harrison	Cynthiana, KY	8:00 - 4:30	7157
1101113011	Hart County Sheriff's Dept.	0.00 7.30	, 13,
	116 East Union Street		270-524-
Hart	Munfordville, KY	MonFri 8-4	2341
	•		

County	Location	Hours Open	Phone
_	Horse Cave Police Dept.	-	
	121 Woodlawn Avenue	Mon-Fri	270-786-
Hart	Horse Cave, KY	8-4:30	4357
	Henderson Police Dept.		
	1990 Barrett Court	Mon-Fri	270-831-
Henderson	Henderson, KY 42420	8:00-5:00	1295
	Henry County Sheriff's		
	Department @ the		
	Courthouse		
	30 North Main Street	Mon - Fri	502-845-
Henry	New Castle, KY	8-4:30	2909
	Madisonville Police Dept.		
	99 E. Center Street		270-821-
Hopkins	Madisonville, KY 42431	24/7	1720
	Hopkins County Sheriff's		
	Office		
	56 N. Main Street		272 225
	Government Center	Mon - Fri	270-825-
Hopkins	Madisonville, KY 42431	8:00 - 4:00	5661
	Hickman County Sheriff's		
	Dept.		270 652
	110 E. Clay Street, Suite B	Mon-Fri	270-653-
Hickman	Clinton, KY	8-4	2241
	Jackson Co. Sheriff's Office		606-287-
3	1st & Main Street	Mon-Fri	
Jackson	McKee, KY 40407	8-4	4460
	Jefferson Co. Sheriff's Office	Mary Ful	502-574-
7-66	531 Court Place Suite #600	Mon-Fri	
Jefferson	Louisville, KY	8 - 4	5400
	St. Matthews Police	Mars Est	502-893-
10ff0400	3940 Grandview Avenue	Mon-Fri	
Jefferson	Louisville, KY Nicholasville Police	8 - 4	9000
	Department 510 North Main St.	Mon Fri	859-885-
Jessamine	Nicholasville, KY	Mon-Fri 8-5	9468
Jessaiiiiie	·	Mon, Tues & Wed	7700
	Jessamine County Sheriff Ofc.	8:00 - 4:00	
	101 South Second Street	Thurs. & Sat	859-885-
Jessamine	Nicholasville, KY 40356	8:00 - 12:00	4139
Je330111111E	Johnson Co. Sheriff's Office	0.00 12.00	1133
	342 Second Street	Mon-Fri	606-789-
Johnson	Paintsville, KY 41240	8-4	3411
JUIIIISUII	i aiiitsviiic, KT 41240	0-4	D-111

County	Location	Hours Open	Phone
	Paintsville Police Dept.		606 700
	101 Euclid		606-789-
Johnson	Paintsville, KY 41240	24/7	4221
	Covington Police Department		050 256
	1 Police Memorial Drive	24/7	859-356-
Kenton	Covington, KY 41014	24/7	3191
	Erlanger Police Department	Mars Fol	859-727-
Wantan	505 Commonwealth Avenue	Mon-Fri	
Kenton	Erlanger, KY	8-5	5660
	Edgewood Police Dept.	Mars Fol	859-331-
Mandan	385 Dudley Road	Mon-Fri	
Kenton	Edgewood, KY	8 a.m6 p.m.	5911
	Villa Hills Police Dept.	Mon-Fri during business	
	719 Rogers Road		859-341-
Kenton	Villa Hills, KY	hours-then by appt. through dispatch	3535
Kenton	Park Hills Police Dept.	tillough dispatch	3333
	1106 Amsterdam Road		859-431-
Kenton	Park Hills, KY	24/7	6172
Kenton	Fort Wright Police Dept.	24/ /	0172
	409 Kyle's Lane	MonFri	859-331-
Kenton	Fort Wright, KY	7:30-5	2191
Kenton	Kenton County Police Dept.	7.30 3	2131
	11777 Madison Pike		859-392-
Kenton	Independence, KY	24/7	1983
	Knott County Sheriff's Office	Mon - Fri	
	54 Main Street W.	8-4	606-785-
Knott	Hindman, KY	Saturday - 8-noon	5354
	Knox County Sheriff's Office	,	
	401 Court Square #105	Mon - Fri	606-546-
Knox	Barbourville, KY 40906	8-4	3181
	Barbourville Police Dept.		
	196 Daniel Boone Drive	Mon - Fri	606-546-
Knox	Barbourville, KY	8 - 4	4562
	Hodgenville Police Dept.		
	200 W. High Street		270-358-
LaRue	Hodgenville, KY	24/7	3013
	Laurel County Sheriff's Dept.		
	203 S. Broad Street	Mon - Fri	606-864-
Laurel	London, KY 40741	8 - 5	6600
	London Police Dept.		
	503 S. Main Street		606-878-
Laurel	London, KY 40741	24/7	7004

County	Location	Hours Open	Phone
County	Lawrence Co. Sheriff's Office	riours open	Filone
	310 E. Main Street	Mon-Fri 8:30-4:30	606-638-
Lawrence	Louisa, KY 41230	Sat-8:30-12:00	4368
	Beattyville Police Dept.		
	61 River Drive		606-464-
Lee	Beattyville, KY 41311	24/7	5030
	Leslie Co. Sheriff's Office		
	22010 Main Street		606-672-
Leslie	Hyden, KY 41749	24/7	2200
	Jenkins Police Dept.		
	9409 Hwy 805	M-F	606-365-
Letcher	Stanford, KY 41537	9-5	2696
	Letcher Co. Sheriff's Office		606 600
_	6 Broadway St.	Mon-Sat	606-633-
Letcher	Whitesburg, KY 41858	7-12 midnight	2293
	Lewis County Sheriff's Office	M,T,TH,F	
	112 2nd Street, Room 102	8:30 - 4:30	COC 70C
	Vanceburg, KY 41056	Wed & Sat	606-796-
Lewis	Lincoln Co Chariffic Office	8:30 - Noon	2912
	Lincoln Co Sheriff's Office 104 N 2nd St.	Man Fri Q 4	606-365-
Lincoln	Stanford, KY 40484	Mon-Fri 8-4 Sat-9-12	2696
Lilicolli	Livingston County Sheriff's	381-9-12	2090
	Dept.		
	321 Court Street	Mon-Fri	270-928-
Livingston	Smithland, KY 42081	8-4	2122
	Logan County Sheriff's Dept.	5 .	
	100 North Owen Street	Mon-Fri	270-726-
Logan	Russellville, KY	8:00 - 4:30	2244
	Russellville Police Dept.		
	104 SW Park Square	Mon-Fri	270-726-
Logan	Russellville, KY	8:00 - 4:00	7669
	Eddyville Police Dept.		
	419 Dogwood Avenue	Mon-Fri	270-388-
Lyon	Eddyville, KY	8:00 - 4:00	2287
	Lyon County Sheriff's Office		270-388-
	500 W. Dale Street, 100	Mon-Fri	2311
Lyon	Eddyville, KY	8-4	ext. 2038
	Richmond Police Dept.		050 633
	1721 Lexington Road		859-623-
Madison	Richmond, KY	24/7	1714
	Berea Police Dept.		050.006
	212 Chestnut Street	24/7	859-986-
Madison	Berea, KY	24/7	8456

County	Location	Hours Open	Phone
	Magoffin County Sheriff's		
	Office	Man Fri	606-349-
Magaffin	201 East Maple Street Salyersville, KY	MonFri 8-4	2914
Magoffin	Lebanon Police Dept.	0-4	2314
	124 W. Mulberry Street		270-692-
Marion	Lebanon, KY	24/7	2121
Piditoli	Marshall County Sheriff's	27//	2121
	Office		
	52 Judicial Drive	MonFri	270-527-
Marshall	Benton, KY	8-4:30	3112
	Martin Co. Sheriff's Office		
	100 East Main Street	Mon-Fri	606-298-
Martin	Inez, KY 41224	8-4:30	3572
	Mason County Sheriff's Office		
	120 West 3rd Street	Mon-Fri	606-564-
Mason	Maysville, KY 41056	9-4:30	3309
	Maysville Police Dept.		
	212 Government Street		606-564-
Mason	Maysville, KY 41056	24/7	9411
	Paducah Police Dept.		270 444
M - Core - In -	1400 Broadway	Mon-Fri	270-444-
McCracken	Paducah, KY 42001	8-6	8550
	McCreary Co. Sheriff's Office	Mon Eri	606-376-
McCroory	36 Court Street Whitley City, KY 42653	Mon-Fri 8-4:30	2322
McCreary	McLean County Sheriff's	6-4.30	2322
	Office		
	135 E. Second Street	Mon - Fri	270-273-
McLean	Calhoun, KY	8:00 - 4:30	3276
		Mon, Tue, Wed, Friday	-
	Meade Co. Sheriff's Dept.	8 - 4:30	
	516 Hillcrest Drive	Thurdsay	270-422-
Meade	Brandenburg, KY	8 - 6:30	4937
	Muldraugh Police Dept.		
	120 S. Main Street	Mon - Fri	502-942-
Meade	Muldraugh, KY	8:30 - 4:00	2824
	Menifee Co. Sheriff's Office		606 760
	192 Dale Back Street	M-T-W-FR- 8:30-4:00	606-768-
Menifee	Frenchburg, KY 40322	Thurs-Sat 8-11:30	3875
	Mercer County Sheriff's Office	M 5 :	0E0 724
Managa	207 W. Lexington	Mon - Fri	859-734-
Mercer	Harrodsburg, KY	8 - 4:30	4221

County	Location	Hours Open	Phone
_	Harrodsburg Police Dept.		
	411 N. Greenville Street	Mon - Sun	859-734-
Mercer	Harrodsburg, KY	24/7	3311
	Metcalfe County Sheriff's		
	Dept.		
	106 S. Main Street	Mon-Fri	270-432-
Metcalfe	Edmonton, KY	8-4	3041
	Monroe County Sheriff's Dept.		
	200 N. Main Street, #E		270 407
	Tompkinsville, KY	Mon-Sat	270-487-
Monroe	· ·	8-4	6622
	Tompkinsville Police Dept.		
	201 E. 2nd Street		270-487-
Monroe	Tompkinsville, KY	24/7	6191
	Mt. Sterling Police Dept.		050 400
	35 South Bank Street	Mon - Sun	859-498-
Montgomery	Mt. Sterling, KY 40353	24/7	8899
	Montgomery County Sheriff's		
	Office	Mara Erri	859-498-
Montgomory	1 Court Street Mount Sterling, KY	Mon-Fri 8-4	8704
Montgomery	West Liberty Police Dept.	0-4	0704
	561 Main		606-743-
Morgan	West Liberty, KY 41472	24/7	4385
	Greenville Police Dept.	, .	1000
	200 Court Street	Mon-Fri	270-754-
Muhlenberg	Greenville, KY	24 hrs. a day	2464
	Powderly Police Dept.		
	211 Hillside Road	Mon - Fri	270-338-
Muhlenberg	Powderly, KY 42367	8-4	5123
	Muhlenberg Sheriff's Office		270 220
	100 Main Street	Mon-Fri	270-338-
Muhlenberg	Greenville, KY	8-4	3345
	Bardstown Police Dept.	M F:	E02 240
Nolcon	212 Nelson County Plaza	Mon-Fri	502-348-
Nelson	Bardstown, KY	24 hrs a day	6811
	Nicholas County Sheriff's Office		
	125 E. Main Street		859-289-
Nicholas	Carlisle, KY	24/7	3740
Hichoras	Ohio County Sheriff's Office	<u> </u>	37.10
	301 South Main Street	Mon-Fri	270-298-
Ohio	Hartford, KY 42347	8:00 - 4:30	4444
J		3.00	

County	Location	Hours Open	Phone
	LaGrange Police Dept.	Mon-Fri	
	121 West Main Street	9:00 - 12:00	F02 22F
61.11	LaGrange, KY	&	502-225-
Oldham	<u> </u>	1:00 - 4:00	0444
	Oldham County Police Dept. 1855 N. Hwy 393	Mon-Fri	502-222-
Oldham	LaGrange, KY	8:30 - 4:30	1300
Olulialli	Owsley Co. Sheriff's Office	0.30 - 4.30	1300
	P. O. Box 70	Mon-Fri.	606-593-
Owsley	Booneville, KY 41314	8-4	5161
	Pendleton County Sheriff's	<u> </u>	
	Office		
	202 Chapel Street	Mon-Fri	859-654-
Pendleton	Falmouth, KY	9-4.	4511
	Hazard Police Dept.		
	800 High Street		606-436-
Perry	Hazard, KY 41702	24/7	2222
	Pikeville Police Dept.		606 427
Dil	101 Division Street	24/7	606-437-
Pike	Pikeville, KY 41501	24/7	6236
	Powell County Courthouse Court Street	Mon-Fri	606-663-
Powell	Stanton, KY 40380	7-5	1459
rowen	Clay City Municipal Building	7 3	1433
	4651 Main Street	Mon-Fri	606-663-
Powell	Clay City, KY 40312	7-5	2224
	Pulaski County Sheriff's	-	
	Office		
	100 North Main Street		606-678-
Pulaski	Somerset, KY	24/7	5145
	Pulaski 911 Center		606 670
	145 North Highway 27	24/7	606-678-
Pulaski	Somerset, KY	24/7	5008
	Somerset Police Dept. 306 E. Mt. Vernon Street	Man Eri	606-678-
Pulaski	Somerset, KY 42501	Mon-Fri 8:00 - 4:30	5176
Fulaski	Burnside Police Dept.	0.00 - 4.50	3170
	7933 S. Hwy. 27	Mon-Fri	606-561-
Pulaski	Burnside, KY 42519	8-5	3405
	Mount Vernon Police Dept	MonFri.call	
	125 Richmond St.	606-256-2427 for	606-256-
Rockcastle	Mt. Vernon, KY 40456	officer	3437
	Rowan County Sheriff's Office		
	600 W. Main Street	Mon - Fri	606-784-
Rowan	Morehead, KY 40351	8:00 - 4:00	5446

County	Location	Hours Open	Phone
Country	Morehead Police Department	nouis open	T HOHE
	100 University Boulevard	Mon - Fri	606-783-
Rowan	Morehead, KY 40351	7:00 - 7:00	2035
11011011	Scott County Sheriff's Dept.		
	120 N. Hampton Street	Mon - Fri	502-863-
Scott	Georgetown, KY	8:30 - 4:30	7855
	Georgetown Police Dept.		
	550 Bourbon Street	Mon - Fri	502-863-
Scott	Georgetown, KY	8:00 - 4:00	7826
	Simpson County Sheriff's		
	Dept.		
	203 East Kentucky Street	Mon-Fri	270-586-
Simpson	Franklin, KY	8-4	7425
	Franklin Police Dept.		
	100 S. Water Street	Mon-Fri	270-586-
Simpson	Franklin, KY	8-4	7167
	Shelbyville Police Dept.		F02 622
	303 Main Street	Mon-Fri	502-633-
Shelby	Shelbyville, KY	8:30 - 4:30	2326
	Simpsonville Police Dept.		F02 722
a	108 Old Veechdale Road	Mon-Fri	502-722-
Shelby	Simpsonville, KY	8:00 - 4:00	8110
	Shelby County Sheriff's Dept.		E02 622
Ch allas	501 Main Street #8	Mon-Fri	502-633-
Shelby	Shelbyville, KY	8:30 - 4:30	4324
	Taylorsville Police Dept.	Mon-Sun 8:30 - 5:00	
	72 Taylorsville Road	no box call - 477-3231	502-477-
Spencer	Taylorsville, KY 40071	for officer	3231
Spericer	Campbellsville Police Dept.	101 Officer	3231
	100 Terri Street		270-465-
Taylor	Campbellsville, KY 42718	24/7	4122
- 47:01	Taylor County Sheriff's Dept.	21/	
	203 North Court Street	Mon - Fri	270-465-
Taylor	Campbellsville, KY 42718	8-4:30	4351
	Todd County Sheriff's Dept.		
	202 East Washington Street	Mon-Fri	270-265-
Todd	Elkton, KY	8-4	9966
	Elkton Police Dept.		
	73 Court Square	Mon-Fri	270-265-
Todd	Elkton, KY	8-4:00	9879
	Guthrie Police Dept.		
	110 3rd Street	Mon-Fri	270-483-
Todd	Guthrie, KY	8-4	2520

County	Location	Hours Onen	Phone
County	Trigg County Sheriff	Hours Open 24/7	Pilolie
	31 Jefferson Street	•	270-522-
Tuina		(after hours ring bell	6661
Trigg	Cadiz, KY 42211	for entry)	0001
	Cadiz Police Dept.	Man Fui	270-522-
-	11 Marion Street	Mon-Fri	
Trigg	Cadiz, KY 42211	8-4	8369
	Trimble County Sheriff's		
	Dept.		502-255-
	30 US Hwy 42E	Mon-Fri	
Trimble	Bedford, KY	8-4	7138
	Union County Sheriff's Office	box in vault inside	270 200
	100 East Main Street	Mon-Fri	270-389-
Union	Morganfield, KY	8-4	1303
	Methodist Hospital Union		
	County		
	4604 US Hwy 60 West		270-389-
Union	Morganfield, KY 42437	24/7	5000
	Warren County Sheriff's		
	Office		
	429 E. 10th Street	Mon-Fri	270-842-
Warren	Bowling Green, KY	8 - 4:30	1633
	Bowling Green Police Dept.		
	911 Kentucky Street		
	Bowling Green, KY		270-393-
Warren	,	24/7	2473
	Kentucky State Police - Post		
	3		
	3119 Nashville Road		270-782-
Warren	Bowling Green, KY	24/7	2010
	Springfield Police Dept.		
	1 Police Drive		859-336-
Washington	Springfield, KY	24/7	5450
	Monticello City Police		
	Department		
	195 North Main Street	Mon-Fri	606-348-
Wayne	Monticello, KY	24 hrs.	9313
	Wayne County Sheriff's Office		
	55 North Main Street	Mon-Fri	606-348-
Wayne	Monticello, KY 42633	8-4:30	5416
-	Webster Co. Sheriff's Office		
	25 US HWY 41A	Mon-Fri	270-639-
Webster	South Dixon, KY 42409	8-4	5067
	Providence Police Dept.		
	200 N. Willow Street		270-667-
Webster	Providence, KY 42450	24-7	2022
		_ · · ·	

County	Location	Hours Open	Phone
	Williamsburg Police Dept.		
	City Hall		
	423 Main Street	Mon-Fri	606-549-
Whitley	Williamsburg, KY 40768	9-4	6023
	Corbin City Police Dept.		
	805 S. Main Street		606-528-
Whitley	Corbin, KY 40701	24/7	1122
	Wolfe Co. Sheriff's Office		
	10 Court St.	Mon-Fri - 8-4	606-668-
Wolfe	Campton, KY 41301	Sat-8-12	3569
	Woodford County Sheriff's		
	Office	Mon-Thur- 8-5	
	103 South Main Street		859-873-
Woodford	Versailles, KY	Fri-8-5:30	3119





NATIONAL TAKE-BACK INITIATIVES

April 28, 2018 October 27, 2018 10:00 am - 2:00 pm

The U.S. Drug Enforcement Administration and more than 5,900 of its law enforcement and community partners collected more unused prescription drugs than at any of the 13 previous National Prescription Drug Take Back Day events.

On April 28, 2018, Kentucky turned in 12,684 pounds of medication to DEA. Over the life of the program, 121,944 pounds of prescription drugs have been removed from medicine cabinets, kitchen drawers, and nightstands by citizens around the Commonwealth.

The National Prescription Drug Take Back Day Initiative addresses a crucial public safety and public health issue. According to the 2015 National Survey on Drug Use and Health, 6.4 million Americans abused 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. The DEA's Take Back Day events provide an opportunity for Americans to prevent drug addiction and overdose deaths.

"Too often, unused prescription drugs find their way into the wrong hands. That's dangerous and often tragic," said Acting DEA Administrator Chuck Rosenberg. "That's why it was great to see thousands of folks from across the country clean out their medicine cabinets and turn in - safely and anonymously - a record amount of prescription drugs."

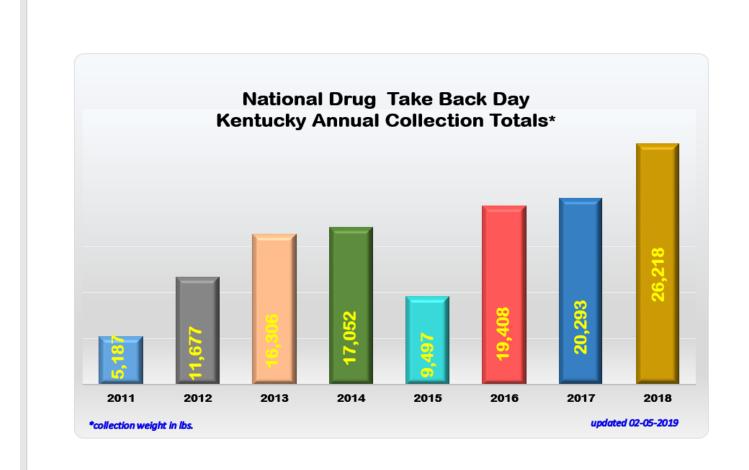
The second National Prescription Take Back Day was **Saturday, October 27**, **2018** from 10:00 am – 2:00 p.m.

The U.S. Drug Enforcement Administration and more than 4,770 of its law enforcement and community partners collected more unused prescription drugs than at any of the 13 previous National Prescription Drug Take Back Day events.

On October 27, 2018, Kentucky turned in 13,534 pounds of medication to DEA. Over the life of the program, 135,478 pounds of prescription drugs have been removed from medicine cabinets, kitchen drawers, and nightstands by citizens around the Commonwealth.

In the more than two years since new regulations made the disposal of controlled prescription drugs easier for patients and their caregivers, law enforcement agencies, pharmacies, hospitals and clinics have begun continuous collection of these medications.

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



KYStopOverdoses Website

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 in early November which allows people to search for pharmacies that carry naloxone by city, county, or Zip code. Soon we will add health departments that offer the antidote to the searchable database and map.

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

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 2018 New Drug-Free Communities Grantees

Champions for a Drug Free Gallatin County – Warsaw Bullitt County Partners in Education – Shepherdsville Youth Impact Team – Berea Wolfe County Coalition UNITED Against Drugs – Campton Drug Free Warren County – Bowling Green

FY 2018 DFC Continuation Grantees

Butler County Drug Free Coalition - Morgantown Knox County UNITE Coalition - Barbourville 7th Street Corridor PAL Coalition - Louisville Shelby County Drug/Alcohol Advisory Council - Shelbyville Coalition for a Healthy Oldham County - LaGrange Carter County Drug Free Coalition - Grayson Casey County Kentucky Agency for Substance Abuse Policy – Liberty Scott Countians Against Drugs, Inc. - Georgetown The Scottsville Allen County Faith Coalition - Scottsville Shawnee Transformation Youth Coalition - Louisville Boone County Alliance For Healthy Youth - Florence Campbell County Drug Free Alliance - Cold Spring Louisville Metro Alliance for Youth - Louisville Pendleton County Champions - Falmouth Champions for a Drug-Free Lyon County – Eddyville Champions for a Drug-Free Grant County – Williamstown Hopes Hands – Owenton Trimble CARES Coalition - Bedford Webster County KY-ASAP Coalition – Dixon

KY-ASAP: Partnership for a Drug-Free Kentucky

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

The Office of Drug Control Policy in collaboration with the Partnership for a Drug-Free America continues its statewide PSA campaign to bring professionally produced localized media messages to supportive media partners in a sustained effort to reduce the incidence of substance abuse in the Commonwealth. Our collaboration with the Partnership for a Drug-Free America continues to bring over \$6 million in professionally produced PSAs to Kentucky each year.

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 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 ODCP/KY-ASAP to collaborate and be a part of such an important and proactive issue.

The PSA's are powerful prevention messages that have gotten excellent media coverage this past year and have been an excellent opportunity for a positive story on another initiative the ODCP is doing to reduce substance abuse.

Parents and children are inundated with media messages about drug use and abuse among celebrities and major sports figures. The benefits we receive from these PSA's allowed ODCP to counter those negative messages with positive prevention messages.

ODCP/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.

ODCP has also collaborated 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

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)** 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:

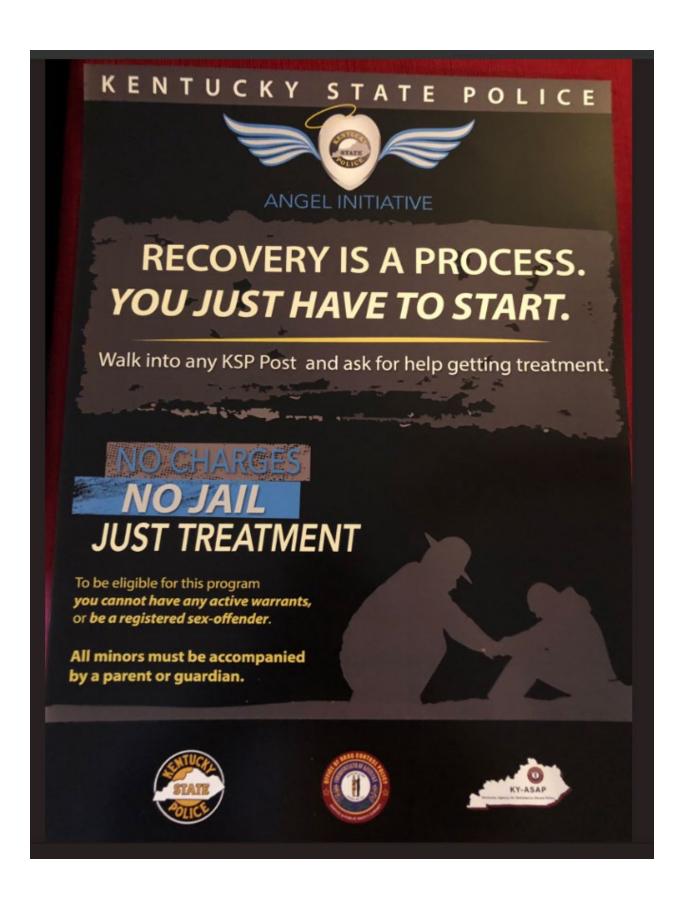
The Angel Initiative is a program started by the Kentucky State Police in 2016 with one goal: save lives. Walk in. Ask for help.

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. "<u>Find Help Now KY</u>" (<u>www.findhelpnowky.org</u>) 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 <u>Kentucky Injury Prevention and Research Center (KIPRC)</u> at the <u>University of Kentucky College of Public Health</u>, a bona fide agent of the Kentucky Department for Public Health. The project is in partnership with the office of Kentucky Gov. Matt Bevin 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, "<u>Don't Let Them Die"</u> 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 outpatient 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.



Kentucky Department of Corrections:

Substance Abuse Program (SAP)

The Division of Substance Abuse Services is responsible for the clinical and administrative oversight of all substance abuse treatment related to inmates, parolees and probationers within our care as determined by statute. This oversight includes treatment in prisons, jails, halfway houses, Recovery Kentucky Centers, and Intensive Outpatient Programs through a partnership with regional Community Mental Health Centers as well as substance abuse clinical determination for probationers and parolees through a network of social service clinicians in the Probation & Parole districts. To date, the department has programs in the following:

- 10 programs in 7 Institutions
- 26 programs in 23 Jails
- 11 Halfway House Programs
- 13 Recovery Kentucky Centers
- 14 Intensive Outpatient Programs-Community Mental Health Centers
- 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 5,901 treatment slots. This is an overall growth of over 1300%.

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.

In 2004, the Office of Drug Control Policy was allocated funding to develop substance abuse recovery programs in local jails across the Commonwealth. Nine programs were funded as pilots in the initial round of funding. In the 2008 General Assembly, funding was appropriated to the Department of Corrections to provide residential services in the existing sixteen jail sites. The Department of Corrections is currently providing residential substance abuse recovery services to state inmates housed in selected county jails.

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

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

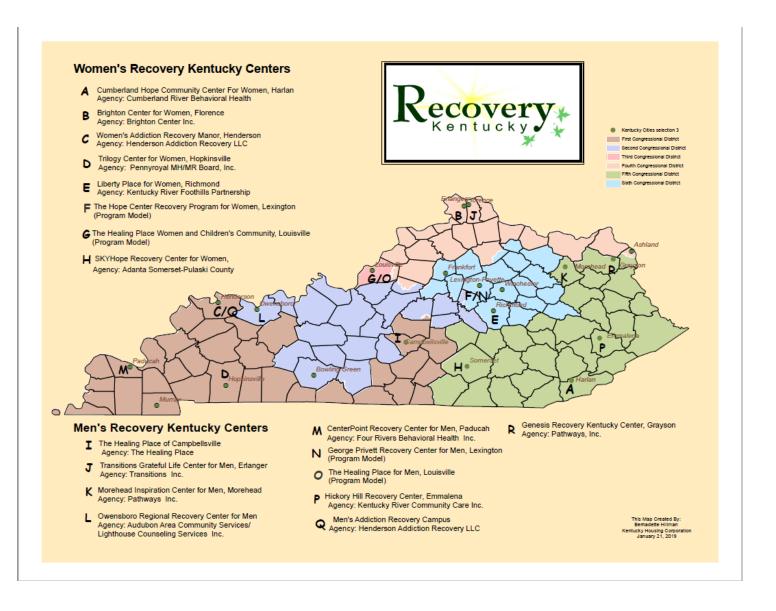
CenterPoint Recovery Center for Men 530 County Park Rd. Paducah, KY 42001 270-444-3640

FOR MORE INFORMATION

Mike Townsend

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





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

Addendum A

Following is a brief overview of the accomplishments of the Buffalo Trace Agency for Substance Policy representing Bracken, Fleming, Lewis, Mason and Robertson Counties, Kentucky.

- Awareness Campaigns: Projects or programs funded directly by BT-ASAP to bring awareness to certain issues:
 - a. "What's My Anti-Drug" slogan-contest? Middle school students in region to draw their reason for not using drugs. Drawings are reproduced on banners.
 - Fetal Alcohol Spectrum Disorders Awareness Month In September board uses funds to remind physicians to urge prenatal patients not to consume alcohol. PSA's are produced for local radio and social media.
 - Family Day In September, recipe cards are made and distributed to families via the school systems promoting family dinner time and conversation.
 - d. Alcohol Awareness Month In April the board uses funds to place an article in the newspaper and online to urge adults not to provide alcohol to youth.
- 2. Drug Tip Hotline
- School Prevention Education/Alternative Activities Grants In the fall and spring the board provided \$500. to schools in the region to help with prevention programs or activities.
- STOP Regional Youth Coalition The board entirely funds this youth coalition comprised of 9th12th grade students from across the Buffalo Trace Region. The students complete the following
 activities/projects:
 - Bulletin Boards; Students create bulletin boards on drug prevention topics and change the boards every other month.
 - Social Media Messages: Each school in the region has an Instagram page for their STOP coalition promoting health behaviors each week.
 - c. Drug Prevention Information/Dissemination: At ball games, health fairs, community events and other locations the coalition will disseminate prevention and educational resources.
 - Prevention Programs in Schools: Students go to elementary and middle schools and present on drug prevention topics and healthy choices and behaviors.
 - e. Prom Promise: The students work with elementary school to have 2nd-4th grade students write high school students and ask what they will be wearing/driving to the 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.

- Sticker Shock: During Alcohol Awareness month students, under supervision, will
 place stickers on alcohol packaging that remind adults not to provide alcohol to
 underage youth.
- 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
 business, churches, law enforcement, schools and others.
 - a. Report card stuffers: Coalition members create two-sided cards that contain prevention information and education for parents of Middle school students. These go home with students four time a year with their report cards.
 - New Teen Drivers: Funds are used to create information packets for youth and parents when a student gets their permit. Packets contain drug prevention education.
 - Adult Attitudinal Survey: Members have created a survey for adults in the region to gather missing data gaps to use for projects implementation and awareness campaigns.
 - d. Social Host Ordinance Meetings: Provide information to local council members to discuss and encourage a Social Host Ordinance; which may enhance the enforcement of underage drinking charges.
 - Super Bowl Sunday Flyers: Members create and disseminate flyers to pizza businesses within the BT-Region to encourage adults not to provide alcohol to underage youth.

6. Mini-Grants also provided to:

- Augusta Independent School, (Bracken County)
- b. City of Maysville-Chaplaincy Program, (Mason County)
- c. Kick-IT Substance Abuse Prevention Coalition
- 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

7. Other Initiatives:

- ASAP partnered with KORE (Harm Reduction Grant) with training of eleven first responders and community members.
- b. Held power of prescribing training at Primary Plus, training 120 individuals.
- c. Currently in the planning phase of hosting town-hall meetings throughout the BT-Region for additional training on the effects of substance use.

Addendum B

RIVERVALLEY BEHAVIORAL HEALTH

Deterra Drug Bags

MEDICATION: DISPOSED

Photo Report September 5, 2018

Thanks to the Kentucky Attorney General and the Henderson County Sheriff's Office, the Regional Prevention Center at RiverValley Behavioral Health received 127 Deterra Drug Deactivation Bags to help combat the opioid crisis. Some studies estimate that 70% of opioid users first encounter the drug through a family or friend. By disposing of unused medication, we can all do our part to help reduce the supply of unused medications in our community.





Right: Bags are counted in bunches of 10 for easy distribution to stakeholders in the community

Left: One medium bag of Deterra can dispose of 45 pills



Kentucky Attorney General launched the Kentucky Opioid Disposal Program in August 2017. According to Lt. Dwight Duncan of the Henderson County Sheriff's Office, the Attorney General distributed over two pallets of deactivation bags for community distribution in Henderson. Lt. Duncan conveyed that the community has embraced the practice of medication disposal and his Sheriff's office has already distributed over 1.5 pallets of bags









Regional Prevention Center

MARIJUANA PREVENTION ENHANCEMENT SITE (MJPES): TRAINING

PRESENTERS: DIANNE MCFARLING AND MONTE STILES FRANKFORT, KY 6.14.2018

INTRODUCTION

The Marijuana Prevention Enhancement Site (MJPES) is hosted by River Valley Behavioral Health Regional Prevention Center. The MPES utilizes the Strategic Prevention Framework to mobilize communities in assessing, building capacity for, planning, implementing, and evaluating marijuana prevention initiatives. The MPES was excited to host Marijuana Prevention Training for change agents across the state at the Franklin County Sheriff's Office in Frankfort, Kentucky





PRESENTATION

Over the course of a 6-hour period, Stiles delivered an indepth overview of the impact of drugs on a community, what the legalization landscape looks like for Kentucky, and the incentives behind the opposition. Stiles also provided vivid anecdotes about his time as a Federal Drug Prosecutor.

ENGAGEMENT

Accompanying the presentation, groups were created and facilitated by Dianne McFarling, who charged members to come up with innovative solutions to inform policy makers about the dangers of legalization.

MONTE STILES

Monte Stiles is a highly sought-after motivational speaker who has inspired countless audiences in the United States and abroad through his multi-media presentations. By combining almost three decades of experience as a federal drug prosecutor with a passion for wildlife and outdoor photography, Monte can provide your organization with valuable insights about everything that is wonderful about life - a world full of amazing people, beautiful landscapes, fascinating creatures, and boundless opportunities. The end result is a powerful and unique message of hope and inspiration.



Drug Court Graduation

WORDS OF WISDOM

Photo Report October 29, 2018

13 individuals graduated from Drug Court this October. Drug Court was established 18 years ago to help individuals with substance use disorders get their life back on the right track.

Dr. RonSonlyn Clark and Lora McCarty were both honored at the Drug Court Graduation. Lora McCarty was one of the first employees of Drug Court and she later went on to oversee Drug Courts in 15 counties. Dr. Clark was the keynote speaker after a new role at her agency will take her away from seeing clients. Dr. Clark and Lora have been actively involved with and in the Kentucky Agency for Substance Abuse Policy. Dr. Clark is currently a board member on the Daviess County ASAP.







Above: Dr. Clark and Lora McCarty were honored at the ceremony for their service to Drug Court.

Left: Dr. Clark gives her keynote speech about how she found herself in substance use treatment and what it has meant to work with the graduating individuals

Below: Partners that contributed to this event. Daviess County ASAP donated funds to help support the graduation





Drug Court Holiday Party

HAPPY HOLIDAYS!

Photo Report December 18, 2018

Every year, the Daviess County Drug Court Team puts on a Holiday Party to celebrate the achievements of the year and to show appreciation for their staff. This year was no different. Audrey Collins, Daviess County Drug Court Supervisor was one of the individuals who coordinated the event.

There was a lot to celebrate this year, including a successful graduation of 13 individuals in October from the Drug Court program. Audrey has been happy with the progress that the program has made over the past year and is excited to continue her role as supervisor into 2019.





Above: The Daviess County Agency for Substance Abuse Policy (DC-ASAP) donated funds to help support the holiday party

Below: The Daviess County Drug Court Team gathers for a picture at their holiday party. Audrey Collins—Daviess County Drug Court Supervisor (Far right in the picture) helped coordinate the event. Audrey is also a voting board member on the DC-ASAP





OWENSBORO REGIONAL SUICIDE PREVENTION COALITION, INC.

Life Saver's Walk



RAINY DAY: NO MATTER

Photo Report September 9, 2018

Even with Saturday's storms, over 150 people (and dogs!) showed up to walk in the Owensboro Regional Suicide Prevention Coalition's: Life Saver's Walk. It was an impressive turnout with live music from Jeff "Wild Man" Hardesty and Taylor Cole.





Above: Dog walking in memory of a lost loved one

Left: Participants walk along Frederica Street escorted by the Owensboro Police Department

Below: Some walkers remember loved ones by walking with their names on their back









Above: A group gathers for a picture before the race. Many groups dressed in specific colors or themes for the walk

Left: Mike Flaherty, head of the Suicide Prevention Coalition, photographs the crowd at Saturday's event. Mike, along with the committee and board helped organized the day's events.



Lock Boxes Distributed

MEDICATION SECURED

Photo Report January 3, 2019

Christy Bartley, an AmeriCorps VISTA (Volunteers in Service to America) who services both St. Benedict's Homeless Shelter and Lighthouse Recovery Services, recently received 16 medication lock boxes from the Regional Prevention Center at RiverValley Behavioral Health. Four lock boxes were originally requested for door prizes for the Homeless Council of Ohio Valley's Resource Fair, as raffle prizes. The Regional Prevention Center provided an additional 12 lock boxes for Christy to distribute to clients at Lighthouse Recovery Services, who needed a secure place to store their medications.





Above: LockMed lock boxes were purchased by the Regional Prevention Center to combat medication theft among community members. Many of those who have experimented with prescription drugs first acquire the drugs througha family or friend's medicine cabinet.

Left: A notice is posted on the inside of the lock box to remind the user of the various locations throughout our region where unused or unwanted medication can be disposed of.







Senior Day Out

EDUCATING SENIORS

Photo Report September 20, 2018

Senior Day Out is an event hosted at the Towne Square Mall in Owensboro, Kentucky to educate seniors about services in our community. This year's focus was on prescription drugs and how senior citizens in our community can help fight prescription drug abuse. Daviess County Kentucky Agency for

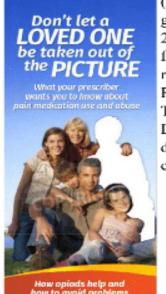
Substance Abuse Policy
(DC KY-ASAP)
graciously donated over
200 pharmacy bags,
four lock boxes to be
raffled off, and around 300
Regional Opioid Brochures (left).
These materials, along with 127
Deterra deactivation bags, were
distributed to senior citizens who
came to the event.



Above: Deterra bags are counted in bunches of 10 for easy distribution to stakeholders in the community

Left: Towne Square Mall was the site of this year's Senior Day Out

Below: Partners for the event, including the Green River Area Development District, RVBH, and KY-ASAP









A Special Note of Thanks to Our Sponsors:

Daviess County ASAP, McLean County Community Coalition and ASAP, Chin County ASAP, Union County ASAP Webster County ASAP Webster County True Blue Coalition, Bowless County Coroner, Bowless County Sheriff's Office, Green Piver Tobacco Control, Rivervalley Regional Prevention Center and Kentucky Manusca Prevention Enhancement Site

Thank You, Thank You, Thank You to Our School Sponsors!!!

Deviess County High School - Deputy Torn Whitford and
Ms. Lura McEllneann
McLean County High School - Ms. Becky Tanner and
Ms. Tracy Kinney
Chic County High School - Ms. Kathy Glachill
Ownshore Catholic High School - Ms. Sherry Krampe,
Ms. Cheryl Jarboe, Ms. Connie McFarland and Ms. Bev Howard
Owenshore High School - Ms. Michelle Mayfield and Ms. Summer Bell
Union County High School - Ms. Jennifer Pinkston and
Ms. Nichole Thomas

Ms. Nichole Thomas
Webster County High School – Ms. Countriey Menser and
Ms. Kevin Ranes

Webster County True Blue KY-ASAP Coalition - Donne Bumpus

Contact information for Dianne McFerling/lice Kline/ Nikki Slobig at the Regional Prevention Center: (270) 689-6563 or subabusegerviolucom



RIVERVALLEY BEHAVIORAL BEAUTH

Teen Leadership Conference

NEW LEADERS EMERGE

September 27, 2018

The 27th annual Teen Leadership Conference hidded off on Weshesday, September 28th at Mount Saint Joseph Retriet Center with a bouning, "TLC, HOW DO YOU FEEL?" - which is an enteracted tradition among TLC attenders. The conference played host to over 70 youth from 10 high schools in the surrounding region. The goal of the conference is to empower youth with the Stuttagle Prevention Framework (SPF) through a series of engaging activities and lectures or that the youth may lead their peers in thrug and also had prevention when they return to their respective schools.



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ends the youth out with

inspiring messages about taking accountability for their future and the importance of funding

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Uniting Daviess County

UNITED WE STAND

Photo Report September 16, 2018

Orphan Care Alliance, an adoption agency based out of Louisville, KY alongside First Lady Glenna Bevin, hosted the Uniting Daviess County event at the H.L. Neblett Community Center on Sunday. The event was centered around parents looking to adopt children in the Daviess County area. RVBH was represented by Dianne McFarling and Joe Kline at a resource table in the gymnasium.



Right: Dianne McFarling at the RVBH resource table on Sunday

Left: First Lady Glenna Bevin whose initiative as First Lady centers around adoption in Kentucky. With nine children of her own (including four adopted), First Lady Bevin is all too familiar with the state's adoption process



Right (Middle): RVBH resource table displayed many marketing materials, from programs provided by RVBH, to a resource guide to help community members navigate the resources that exist in our community

Right (Bottom): The H.L. Neblett Community Center graciously hosted Sunday's event

Below (Logos): Orphan Care Alliance and CASA were two of the organizations also at Sunday's event









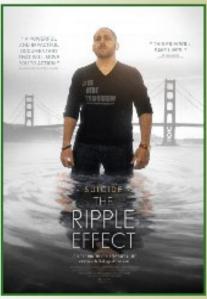


One hundred thirty community members view special screening of "Suicide the Ripple Effect"

On a balmy July evening, 130 ticket holders attended a special screening of
"Suicide the Ripple Effect: Join the Movement, Help Save a Life" at the
MALCO Cinema which was sponsored by Brentwood Springs of Newburg,
Indiana and Owensboro Regional Suicide Prevention Coalition. The local suicide prevention coalition joins forces with local service providers, community
leaders and family members impacted by the loss of loved ones. Before the
film, Kamille Stich, Director of Business Development at Brentwood Springs,
welcomed the audience and introduced coalition president and mental health
counselor, Mike Flaherty. Mike shared that due to the emotional nature of the
film, there were a number of mental health professionals available to speak to
any individual needing support. If your group would like to sponsor a screen-

ing in your community, go to: Suicide the Ripple Effect

http://suicidetherippleeffect.com/



Gathr Films is now promoting the showing of "The Ripple Effect" nationwide.



MALCO Owensboro Cinema graciously provided a large screen for showing the film to community members.



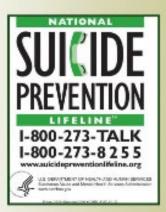
After screening of film, Kamille Stich, Director of Business Development at Brentwood Springs converses with Owensboro Catholic Diocese Superintendent of schools, Ann Flaherty.



There's hope. There's help."







Report and Information

Suicide: The Ripple Effect



Screening on 7/17/2018

AmeriCorps VISTA: RiverValley Behavioral Health - Joe Kline

Report:

Suicide: The Ripple Effect screening took place at Malco Theatre in Owensboro
7:30 PM start time, 1 hr 33 min documentary about Kevin Hines – who survived an attempted suicide
130+ attended, even after postponement due to water outage. Hosted by Gathr films, a "Theatrical On
Demand" film distribution service Kamille Stich, Director of Business Development at Brentwood Springs,
coordinated the screening Information tables displayed information about resources for suicide prevention
outside of the theater

Further Information:

Gathr Films: https://gathr.us/

Suicide: The Ripple Effect http://suicidetherippleeffect.com/

Kevin Hines biography: http://www.kevinhinesstory.com/

For questions about setting up a screening:

Contact Kamille Stich - KamilleStich@SPSH.com

Setting up a screening through Gathr: https://gathrfilms.zendesk.com/hc/en-us/articles/200246469-How-do-l-sign-up-to-host-a-screening-

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