Final Report

Making Jefferson County a Trauma-Informed Community: Recognizing Adverse Childhood Experiences (ACEs) as a Cause of Long-Term Health Concerns



Prepared for the Healthy Communities Initiative of Jefferson County and the Community Foundation of Madison and Jefferson County



March 2020

Report Summary

In February 2017, the Healthy Communities Initiative (HCI) of Jefferson County was created to address the physical and mental health needs of Jefferson County. The HCI has three pillars, Healthy Lifestyles, Substance Abuse, and Zero Suicide/Mental Health. The mission of the HCI is *Mobilizing our community to improve identified health needs in Jefferson County*.

In early spring of 2019, the Lilly Endowment Inc. (the Endowment) announced its G.I.F.T. VII planning grant opportunity to the community foundations in Indiana. The Community Foundation of Madison and Jefferson County (CFMJC) was already a partner of the HCI working to address the mental health issues that were of major concern in the county. In consultation with the HCI, the Foundation elected to develop a plan to address the Jefferson County's health needs at the root core, with a focus on Adverse Childhood Experiences (ACEs) and on becoming a trauma-informed community.

Information that helped to focus on ACEs was the 2019 Community Health Needs Assessment conducted by King's Daughters' Health which identified the community's top ten health concerns:

- 1. Substance Abuse
- 2. Mental Health
- 3. Tobacco Use
- 4. Nutrition, Physical Activity and Weight
- 5. Diabetes
- 6. Heart Disease & Stroke
- 7. Cancer
- 8. Respiratory Diseases
- 9. Injury and Violence
- 10. Access to Healthcare Services

The full Community Health Needs Report can be viewed at https://www.kdhmadison.org/about-us/community-needs-assessment/

Many of these health concerns have a connection to Adverse Childhood Experiences.

In May of 2019, the Community Foundation of Madison and Jefferson County was awarded a planning grant by the Lilly Endowment Inc. of Indianapolis to educate people in Madison and Jefferson County on the importance of community-wide, systematic, evidence based approaches to facing and overcoming our health related challenges. The process was to include the development of a community systems map to identify the assets, resources, and capacity of Jefferson County and community partners. The HCI and the Foundation hired Public Sector Consultants (PSC), from Lansing Michigan, to develop a plan, based on community input, which could be submitted to the Endowment in March 2020. PSC was chosen because it has a successful record of working with communities and state organizations on addressing ACEs.

PSC held two community sessions, one in November 2019, and a second one in January 2020 with around 40 people participating over the course of the two sessions. From those two meetings a commitment statement, an initial systems map, and a strategic plan was created. The sections of this report that contain the summaries of the community sessions and the strategic plan were prepared by PSC. All other parts of this document were prepared by the HCI.

A note on the strategic plan. It includes several blanks for completion of timelines and specific numbers or percentages of goals to be achieved. This is intentional. It was the decision of the Leadership Team to have the Six Goals teams review the plan and determine the appropriate timelines and percentages to complete.

The remainder of this report has the summary reports from the November and January community sessions, the list of attendees, and a list of community resources available in Jefferson County.



First Community Session



Summary

Healthy Communities Initiative of Jefferson County First Community Session

November 20, 2019

Introduction

On Wednesday, November 20, 2019, Public Sector Consultants (PSC) facilitated a half-day session in Jefferson County with more than 25 community members. Led by representatives from the Community Foundation of Madison and Jefferson County (Foundation), the Healthy Community Initiative of Jefferson County (HCI), and Ivy Tech Community College–Madison, participants from a variety of sectors—including education, healthcare, law enforcement, religion, and children's advocacy—came together to discuss the impact of adverse childhood experiences (ACEs) on the community. During the session, participants reviewed the current environment, identified existing resources to address ACEs, envisioned success, discussed the group's strengths and weaknesses, considered the benefits and dangers to the community of an ACEs initiative, and agreed upon a common statement of commitment. What follows is a brief summary of the activities, discussion, and planned next steps.

Context Setting

The community session began with HCI and Foundation leadership providing an overview of ACEs and how they may impact the community. Funded by the King's Daughters' Hospital Foundation, the HCI is focused on encouraging healthy lifestyles, reducing substance abuse, and improving awareness of mental health. Through this work, HCI has noted that Jefferson County falls behind the state of Indiana in several areas, including:

- Children in need of services
- Child abuse/neglect
- Ratio of the population to one mental health provider
- Obesity rates
- Health-related deaths
- Percentage of smoking adults

HCI recognized that ACEs may be impacting some of these outcomes, as studies have shown that individuals with four or more ACEs are more likely to abuse drugs, experience health problems, and die early. This community group was brought together to consider resource gaps, strategically align community goals, and identify upstream solutions to address ACEs in the community. Participants noted that it may be difficult to break the stigma around ACEs and obtain community buy-in, but also expressed excitement in engaging the community and finding alternative ways to take action. There is an opportunity to submit a grant proposal to the Lilly Endowment by March 13, 2020 for funding to implement identified strategies.

Systems Mapping

In small groups, participants considered existing community resources to prevent and respond to ACEs in Jefferson County. Exhibit 1 outlines the most commonly used resources for prevention and response for each of the ten ACEs as identified by participants.

ACEs Category	Common Resources for Prevention	Common Resources for Response
Emotional abuse	 Lifelines suicide prevention program Second Step Sources of Strength Social media training (e.g., digital citizenship, etc.) 	 Community mental health Department of Child Services
Physical abuse	 Safe Passage/Safe Place 	Department of Child ServicesSafe Passage/Safe Place
Sexual abuse		 Children's Advocacy Center Department of Child Services Law enforcement Mental health treatment
Domestic violence in household	Boys and Girls Club (Safe Passage training)Child abuse lessons in schools	 Safe Passage Law enforcement Emergency medical technicians
Separated or divorced parents		Counseling (in-school)
Mental illness in household	 Counselors and mental health providers Schools (early warning indicators) Break-the-stigma campaigns (e.g., Seize the Awkward, suicide support, etc.) National Alliance on Mental Illness Applied Suicide Intervention Skills Training (ASIST) Question, Persuade, and Refer Mental health first aid training Employee assistance program King's Daughters' Health 	 Community mental health Bloomington Meadows Hospital Law enforcement Telemedicine Wellstone Regional Hospital

ACEs Category	Common Resources for Prevention	Common Resources for Response
Substance abuse in household	CenterstoneLifeSpring Health Systems	CenterstoneLifeSpring Health SystemsLaw enforcement
Incarcerated household member	 In-school curricula (e.g., Second Step) 	 Schools (individual and small group sessions)
Emotional neglect	After-school programs	Department of Child ServicesCounseling
Physical neglect	CenterstoneLifeSpring Health Systems	 Department of Child Services Centerstone LifeSpring Health Systems

Following the systems mapping exercise, participants identified some resource gaps in the community. In particular, participants noted limited business involvement (e.g., lack of business leader participation, underutilized employee assistance programs, and limited benefits such as leave time), community awareness of services, and accommodations such as transportation support. Additionally, participants questioned the ability to engage parents, the impact of intergenerational ACEs, and whether services are reaching the right populations, such as suicide prevention services for older adults. Participants also noted that there are many unfunded legislative mandates, particularly those impacting schools that are tasked with providing many services to students. Finally, participants discussed the difficulty in determining which services are preventative and which are responsive.

Core Agreement

Envision Success

During the situation assessment, participants considered what a successful ACEs initiative would look like. Participants envisioned a community where there is transparency and awareness of ACEs and available resources. Participants also imagined working together to implement systemic process change and improve public policy to impact future generations. A successful initiative would empower community members and organizations, improve outcomes such as lowering substance abuse rates, and lead to healthier and happier residents.

Strengths, Weaknesses, Benefits, and Dangers

After brainstorming an ideal vision, participants identified the group's current strengths and weaknesses. Participants indicated the group's strengths as passion, established community relationships, and a commitment to action. The weaknesses participants identified include individual time constraints and an absence of key community member voices such as business leaders, elected officials, families, consumers of community services, and multigenerational representation. Participants also considered benefits and dangers to the community in implementing an ACEs initiative. Benefits include healthier outcomes and improved quality of life, increased resilience and coping skills, and reduced instances of suicide and substance abuse. Dangers noted by participants include increased negativity or denial, burnout, and the idea that acknowledging the existence of ACEs could cause misalignment with an ideal vision of the community.

Commitment Statement

Following the discussion around strengths, weaknesses, benefits, and dangers, participants developed individual commitment statements to address ACEs in Jefferson County. Participants then identified themes between their statements, including: community, resources, quality of life, resilience, engagement, transparency, generational, and systemic process change. As a group, participants agreed to the following statement:

We envision a collaborative that can impact ACEs in Jefferson County by engaging the community to honestly address our needs by enhancing and developing systems that foster resilience to ensure quality of life for generations to come.

Next Steps

At the end of the session, participants noted that they felt excited, encouraged, motivated, and powerful. The information from the first community session will be compiled for review by the leadership team before sharing with session participants. The next session is scheduled for January 23, 2020. That session will focus on developing goals to achieve the agreed-upon commitment statement, considering resource allocation, and building upon the systems mapping work.



Summary

Healthy Communities Initiative of Jefferson County Second Community Session

January 23. 2020

Introduction

On Thursday, January 23, 2020, Public Sector Consultants (PSC) facilitated a half-day session in Jefferson County with more than 35 community members. Led by representatives from the Community Foundation of Madison and Jefferson County, the Healthy Community Initiative of Jefferson County, King's Daughters' Health, and Ivy Tech Community College–Madison, participants from a variety of sectors—including business, education, healthcare, government, legal and law enforcement, media, religion, and children's advocacy—came together to discuss how to reduce adverse childhood experiences (ACEs) in the community. The session built upon work completed at the first community session in November 2019. During the session, participants reviewed the first session outcomes, confirmed the group commitment statement, developed goals to achieve their commitment, prioritized objectives, and identified strategies and timelines. The following is a brief summary of the activities, discussion, and planned next steps.

Confirm Commitment Statement

During the first session, participants considered the need for strategic community action, identified existing community resources to prevent and respond to ACEs, envisioned a successful ACEs initiative, and developed a commitment statement to address ACEs in Jefferson County. Following a review of these outputs, participants began the second session by confirming the previously developed commitment statement:

We envision a collaborative that can impact ACEs in Jefferson County by engaging the community to honestly address our needs by enhancing and developing systems that foster resilience to ensure quality of life for generations to come.

Participants discussed several possible changes to the commitment statement, such as clarifying that this is a collaborative *effort*, stating that the effort will *decrease* or *prevent* ACEs, indicating that the impact will be *measurable*, and establishing that the effort is *continuous* or *sustainable*. Participants also

considered simplifying that statement overall, particularly if it will be public facing. All participants agreed to move forward with a commitment statement that incorporates some of these minor revisions.

Consensus-building Goal Development

Participants developed ideas during a consensus-building activity to begin forming goals and objectives to achieve the agreed-upon commitment statement. Through this brainstorming, participants identified seven broad categories of actions needed to fulfill their commitment statement:

- 1. Collect and analyze data
- 2. Create a unified messaging plan
- 3. Engage employers and workforce strategies
- 4. Garner commitment among key stakeholders
- 5. Increase education and training
- 6. Increase mental health staff and services
- 7. Increase utilization of new or existing targeted strategies

Prioritize Objectives and Create Activities and Timelines

After developing categories, participants prioritized one idea they identified as most exciting or important from each of the seven categories.¹ Participants then worked in groups to determine actions to take within six months, one year, and two years to achieve the priority objective. Many groups discussed needing to establish who, when, and how within the first six months, and identified ongoing assessment and modifications to activities after two years. The prioritized objectives and a summary of the subsequent activities are as follows:

Category	Objective	Activities
Collect and analyze	Universal screening of ACEs	Determine:
data		Who will be screened
		 What screening form will be used
		 Who will conduct the screenings and when, where, and how the screenings will take place
		 Where the data will be stored and who will be authorized to access it
		 Identify funding for the screenings
		Conduct screenings
		 Analyze and benchmark screening data

¹ Note that there are eight prioritized objectives, as two ideas in one category received high prioritization scores from the group.

Category	Objective	Activities
	Determine and develop meaningful data measurements and outcomes	 Establish a subcommittee to determine: What outcomes to measure Who will collect and evaluate data When and how to collect and analyze data Collect and analyze countywide data Make data available via an annual data report, which may include recommendations Evaluate data collection processes and measurements and modify as needed
Create a unified messaging plan	Community messaging plan	 Determine the message to share throughout the community and how best to share it Develop messaging materials Disseminate the message through identified outlets Evaluate the impact of the message and refresh materials as needed
Engage employers and workforce strategies	Bring services to workplace environments to destigmatize	 Visit human resource groups to educate them about ACEs and identify possible collaborations Show the documentary <i>Resilience</i> to employees and provide ACEs screening Connect employees to available resources
Garner commitment among key stakeholders	Identify and engage key groups	 Identify and prioritize key stakeholders Meet with identified stakeholders to share key messages and establish expectations and commitments Monitor and redefine expectations as needed and engage new stakeholders
Increase education and training	Foundational knowledge of ACEs/trauma among all professionals working with children and families	 Identify: ACEs training resources Who will receive the training Who will conduct the training Initiate the training to prioritized populations via a train-the-trainer model
Increase mental health staff and services	Address mental health shortage	 Expand the community peer recovery coaching program Expand the justice partners initiative, clinic and corporation resources, and first-responder training Increase awareness of mental health resources Establish incentives to bring qualified providers to the community
Increase utilization of new or existing targeted strategies	Implement support systems for early childhood services to expand populations served	 Conduct systems mapping to identify gaps in services and children in need Develop goals based on the findings, such as increasing wraparound services Reach out to connect with families

Next Steps

PSC will work in collaboration with the leadership team to develop a grant proposal for the Lilly Endowment based on participant input at the first and second community sessions. The proposal, which is due in March, will outline a plan to address ACEs in Jefferson County. The leadership team will communicate with participants about opportunities for future engagement.



Adverse Childhood Experiences Strategic Plan

Healthy Communities Initiative of Jefferson County

Introduction: What are ACEs?

The Healthy Community Initiative of Jefferson County (HCI) is focused on encouraging healthy lifestyles, reducing substance abuse, and improving awareness of mental health. HCI recognizes that some of the poor health outcomes it seeks to address in the community are driven by adverse childhood experiences (ACEs). Adverse childhood experiences are any of the following experiences occurring to an individual before age 18:

- Emotional abuse
- Physical abuse
- Sexual abuse
- Domestic violence in the household
- Separated or divorced parents
- Mental illness in the household
- Substance abuse in the household
- Incarcerated household member
- Emotional neglect
- Physical neglect

Studies have shown that individuals with four or more ACEs are more likely to engage in health-risk behaviors, experience health problems, and die early. In response, HCI engaged the community to collectively identify and implement solutions to address ACEs in Jefferson County.

Commitment Statement

We envision a collaborative effort to prevent and measurably reduce adverse childhood experiences in Jefferson County through honest, continuous community engagement. We will enhance and develop systems that foster resilience and quality of life for generations to come.

Goals and Objectives

Goal One: Collect and analyze actionable data on ACEs, health-related risk behaviors, and health outcomes.

- 1.1 By [DATE] [NUMBER or PERCENT] of clinical, educational, and judicial settings within Jefferson County will conduct routine ACEs screening.
- 1.2 By [DATE], hold [NUMBER] key stakeholder focus groups to refine meaningful metrics for desired short-, intermediate-, and long-term health outcomes.
- **1.3** By [DATE], monitor and manage key metrics on a shared platform in order to increase transparency and accountability and to demonstrate combined impact.²

Goal Two: Formalize commitments to strategic plan implementation among key stakeholders.

- 2.1 By [DATE], expand and prioritize key stakeholder lists from November 20, 2019 and January 23, 2020 strategic planning sessions to include additional decisionmakers, where necessary.
- 2.2 By [DATE], formalize at least [NUMBER] partnership agreements (e.g., memorandums of understanding) with key stakeholders.
- 2.3 Monitor and redefine expectations quarterly and engage new stakeholders as needed.

Goal Three: Provide ACEs/trauma training opportunities for Jefferson County professionals working with children and families.

- 3.1 By [DATE], provide professional, evidence-based ACEs/trauma education to 80 percent of professionals working with children and families in Jefferson County.
 - 3.1.1 Identify who will receive the training.
 - 3.1.2 Identify ACEs training resources.
 - 3.1.3 Identify who will conduct the training.
 - 3.1.4 Initiate the training to prioritized populations.
 - 3.1.5 Evaluate the training and refine as necessary³.

² For an example, see Bill Barberg's 2019 webinar, *Comprehensive Strategy Map Template for Minimizing and Addressing Adverse Childhood Experiences (ACES).*

³ For an example, see the New World Kirkpatrick Model at <u>https://www.mindtools.com/pages/article/kirkpatrick.htm</u>

Goal Four: Address the mental health shortage by increasing mental health staff and services available to Jefferson County residents.

- 4.1 By [DATE], expand the community's peer recovery coaching program by [NUMBER or PERCENT] [UNITS]
- 4.2 By [DATE], expand the Justice Partners Initiative⁴ by [NUMBER or PERCENT] [UNITS].
- 4.3 By [DATE], evaluate and benchmark employer-provided mental health resources⁵ and usage rates.
- 4.4 By [DATE], expand training to [NUMBER or PERCENT] of first responders serving Jefferson County.
- 4.5 By [DATE], establish incentives to bring qualified providers to the community.

Goal Five: Increase utilization of new or existing strategies to prevent ACEs and increase resilience among priority populations.

- 5.1 By 2021, refine and expand the Jefferson County ACEs prevention and treatment systems map created November 20, 2019, with input from key stakeholders to address specific gaps in services (e.g., sexual abuse prevention and divorce prevention⁶) and identify children in need.
- 5.2 By 2021, complete a comprehensive literature review to identify evidence-based best practices for preventing (e.g., self-regulation) and treating or mitigating known effects (e.g., smoking⁷) of three prevalent ACEs (e.g., child abuse and neglect⁸) in Jefferson County.
- 5.3 By [DATE], [NUMBER or PERCENT] of Jefferson County employers will adopt at least one new workforce strategy to prevent ACEs or build resilience among their employee's families.
 - 5.3.1 Bring services to workplace environments to destigmatize ACEs.

⁴ The Justice Partner's Initiative is a collaborative effort to intercept people at different points within the criminal justice system who are suffering from mental health and substance use disorders in order to provide treatment options and prevent them from progressing further into the criminal justice system.

⁵ In partnership with the Human Resources Association's Wage and Benefits Survey.

⁶ See the Public Sector Consultants report, Healthy Communities Initiative of Jefferson County: First Community Session Summary.

⁷ Adverse childhood experiences are linked to increase use of tobacco products, a preventable health-risk behavior. According to King's Daughters' Health's *2019 Community Health Needs Assessment Report,* which examines Jefferson and Switzerland Counties, Indiana, and Trimble County, Kentucky, tobacco use and environmental exposure to household tobacco use are much higher in this service area than both the state and national averages and are highest among low-income adults ages 18–64. Successful tobacco cessation programs exist that, when paired with prevention efforts, could significantly reduce this long-term ACEs-related health impact. According to Pro-Change Behavior Systems, multiple transtheoretical model tobacco cessation programs produce long-term abstinence rates among participants from 22 percent to 26 percent which, when enhanced with fully-tailored text messaging, can increase this effectiveness rate to nearly 40.3 percent (Pro-Change Behavior Systems).

⁸ According to the Indiana Department of Child Services, Jefferson County's child abuse and neglect rate per 1,000 children is 16.3 percent higher than the Indiana average and has more than doubled since 2015 (Annie E. Casey Foundation). Goals and objectives throughout this plan were recommended by community members. Strategies will be implemented in adherence with the National Center for Injury Prevention and Control's report, *Preventing Child Abuse and Neglect: A Technical Package for Policy, Norm, and Programmatic Activities*.

- 5.3.2 Visit human resource groups and human resources staff at Jefferson County's top ten employers (Infogroup 2020) to educate them about ACEs and identify possible collaborations.
- 5.3.3 Share the *Resilience* documentary with employees and provide ACEs screening.
- 5.3.4 Connect employees to available resources.
- 5.4 By [DATE], directly engage high-risk children and parents with new and existing local resources.
- 5.4.1 Implement support systems, such as transportation or afterhours care, for early childhood services to expand enrollment by [PERCENT] among populations currently underserved.
- 5.4.2 Provide evidence-based self-regulation tools to [PERCENT] of children and parents accessing early childhood services.
- 5.4.3 Connect [PERCENT] of high-risk children to after-school activities, such as sports or clubs.
- 5.4.4 Expand at least one additional transportation option to assist [PERCENT] children to [ACTIVITY].
- 5.4.5 Develop [NUMBER] advocates to help high-risk families navigate the different local resources and systems to address their needs.

Goal Six: Develop and implement a county-wide communications plan to advance strategic plan goals one through five and educate the community about ACEs.

- 6.1 Communications to advance strategic plan goals one through five.
 - 6.1.1 On an annual basis, within one year of collecting the data, share key findings on short-, intermediate-, and long-term health outcomes identified in goal one via [METHOD].
 - 6.1.2 By [DATE], develop targeted materials to share key messages when engaging new stakeholders in meetings to fulfill goal two.
 - 6.1.3 Following identification of who will receive and conduct ACEs training, share training opportunities to targeted professionals working with children and families via social media, emails, flyers, or other identified means.
 - 6.1.4 By [DATE], increase awareness of new and existing mental health resources expanded under goal four.
 - 6.1.5 Once finalized in 2021, share the expanded systems map with appropriate audiences who may help to connect families to resources.

- 6.1.6 By [DATE], conduct targeted outreach to increase use of existing services among key populations, such as employers and high-risk children and parents, by [PERCENT].
- 6.1.7 Utilize social marketing approaches to encourage adoption of at least one desired behavior/ behavior change by high-risk populations, where feasible and effective.
- 6.2 By [DATE], educate the community to increase ACEs awareness and understanding.
 - 6.2.1 Determine the message(s) to share throughout the community and how best to share them.
 - 6.2.2 Develop messaging materials.
 - 6.2.3 Disseminate the message through identified outlets.
 - 6.2.4 Evaluate the impact of the message and refresh materials as needed.

References

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- Infogroup. "Major Employers for Jefferson County." *Hoosiers by the Numbers*. Accessed February 10, 2020. <u>http://www.hoosierdata.in.gov/major_employers.asp?areaID=077</u>
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- Pro-Change Behavior Systems. 2018. "Tobacco Cessation." *Pro-Change Behavior Systems*. Accessed February 10, 2020. https://www.prochange.com/tobacco-cessation-program
- Professional Research Consultants. 2019. 2019 Community Health Needs Assessment Report. Omaha: Professional Research Consultants.

Persons Who Attended One or Both of the Community Sessions Attendees for Becoming a Trauma-Informed Community First Meeting - November 20, 2019

<u>Name</u>	<u>Title</u>
Tim Armstrong	School Resource Officer - Madison Schools
Susan Stahl	Executive Director, Girls Inc.
Heather Foy	Heather Foy, Jefferson County Council and KDH
Carol Dozier	CEO, King's Daughters' Health
Lisa Morgan	Vice President, KDH
Jill Turner	Pediatric Social Worker, KDH Madison Ministerial Association and Pastor at Hanover
Katrina Pekich-Bundy	Presbyterian Church
Kori Jones	Indiana Youth Institute
Emily McDarment	Manager of LifeSpring Health in Madison
Sue Melton	Manager of Centerstone
Kenny Garrett	Hanover Town Council
Tammy Monroe	Jefferson County Health Department
Becky Staub	Community Volunteer
David Sutter	Jefferson County Prosecutor
Diamond Harris, MD	Pediatrician
Margo Olson	Exec. Dir. River Valley Resources
Jeff Bates	Superintendent, Southwestern Jefferson Consolidated Schools
Jeff Studebaker	Superintendent, Madison Consolidated Schools
Betsy Sullivan	Madison Consolidated Schools
Lori Slygh	Southwestern Jefferson Consolidated Schools
Angie Vaughn	Madison Consolidated Schools
Jessica Whitham	Children's Advocacy Center
Bill Barnes	CEO, Community Foundation of Madison and Jefferson County
Molly Dodge	Chancellor, Ivy Tech Community College - Madison Board of Directors, Community Foundation of Madison and
Ann Suchocki	Jefferson County
Keith Howard	Healthy Communities Initiative of Jefferson County, Coordinator
Lauren Fournier	Public Sector Consultants
Scott Dzurka	Public Sector Consultants

Attendees for Becoming a Trauma-Informed Community Second Meeting - January 23, 2020

<u>Name</u>

<u>Title</u>

<u>itume</u>	<u>mic</u>
Amber Finnegan	Jefferson County Court Services Director
Angie Vaughn	Director of Special Education & Student Services/Compliance Officer
Becky Staab	Community Volunteer
Beth Lichlyter	CFO, SuperATV
Betsy Sullivan	School Counselor, Madison Jr. High School
Curt Jacobs	Publisher, Madison Courier
Honorable D.J.	
Mote	Judge, Jefferson County Circuit Court
Carol Dozier	President and CEO, King's Daughters' Health
Dr. Diamond	
Harris	MD, Pediatrics, King's Daughters' Health
Dr. John Hossler	Health Officer, Jefferson County Health Department and MD, King's Daughters' Health
Emily McDarment	Jefferson County Clinical Manager, Lifespring Health Systems
•	Jefferson County Council and Wellness Coordinator, King's Daughters'
Heather Foy	Health
Gary Keith	Indiana Department of Child Services, Jefferson County Office Director
Susan Stahl	Executive Director, Girls Inc.
	Superintendent, Southwestern Jefferson County Consolidated School
Jeff Bates	Corporation
Kevin Turner	Vice President of Operations/Director, Madison Precision Products
Kenny Garrett	Hanover Town Council and SuperATV
Katrina Pekich-	President, Greater Madison Ministerial Association, Minister, Hanover
Bundy	Presbyterian Church
T ' (1) 1	School Counselor, Southwestern Jefferson County Consolidated School
Lori Slygh	Corporation
Margo Olsen	Executive Director, River Valley Resources Inc.
Honorable Bob	Marron City of Madigan
Courtney	Mayor, City of Madison
Melanie Harrell	Program Director, Head Start, Ohio Valley Opportunities
Lisa Morgan Chief Shane	Vice President of Outpatient Services, King's Daughters' Health
Caldwell	Town Marshall, Town of Hanover
Stephanie Back	Executive Director, Children's Advocacy Center of Southeastern Indiana
Kelly Bridges	Associate Director, Children's Advocacy Center of Southeastern Indiana
Susan Melton	Manager of Adult Services, Centerstone Madison
1'll m	Pediatric Medical Home Care Coordinator/Mother Baby Social Worker, King's
Jill Turner	Daughters' Health

Hannah Fagen	Director of Community Relations, City of Madison
Troy Hedges	Executive Director, Jefferson County Youth Shelter
Julie Mitchell	Jefferson County Chief Probation Officer
Keith Howard	Coordinator, Healthy Communities Initiative of Jefferson County Board of Directors, Community Foundation of Madison and Jefferson
Ann Suchocki	County Director of Marketing/Community Relations/Development, King's Daughters'
Nadja Boone	Health
Molly Dodge	Chancellor, Ivy Tech Community College - Madison
Bill Barnes	President and CEO, Community Foundation of Madison and Jefferson County
Justin Fast Lauren Fournier	Public Sector Consultants Public Sector Consultants



JEFFERSON COUNTY RESOURCE & REFERRAL GUIDE Updated 11/26/19

RESOURCE & REFERRAL

(*) Clearinghouse Resource & Referral (812) 265-2652 Hours available: Monday - Friday, 8:00 a.m. - 4:30 p.m.

211 (Information updated by organizations) 211 or (513) 721-7900

(*) Jefferson County United Way Indiana Family Helpline www.uwgc.org/211 (812) 265-2036 (855) 233-1325

CLOTHING Salvation Army (812) 265-2157 351 S. Mein St. Medison Morday – Friday, 10 a.m. to 5 p.m.; Saturday, 10 a.m. to 3 p.m. Goodwill, Madison (812) 273-7121 3200 English Station, Madison Jesus Clothes Closet, Trinity United Methodist (812) 265-3059

Open Mendays, 9 a.m. to 11 a.m. except Holdays

DENTAL SERVICES

Salvation Army (812) 265-2157 331 S. Mah St. Madison

Call for an appointment, \$10.00 donation suggested.

EDUCATION

(*) River Valley Resources: Adult Education (HSE or College Prep) Monday and Wednesday: 9 A.M. – 8 P.M. (812) 265-2652 (855) 591-7849

Program Director:

Konnie McCollum: kmccollum@rivervalleyresources.com

(*) Adult Literacy: tracy@rivervallevresources.com (*) High School Equivalency Diploma (formerly the GED):

inda@rivervalleyresources.com (*) College Prep (Ivy Prep): debby@rivervalleyresources.com

(*) WorkiNdiana certification:

mandi@rivervalleyresources.com

(812) 265-8228

For a copy of HSE and transcriptions: (855) 313-5/99 www.diplomasender.com

All Kide Can Preschool 2420 Wilson Avenue, Medison

Madison Cons. Education Center (preschool) (812) 273-8528 Hanover College (812) 866-7000 ivy Tech Community College (812) 265-2580 x. 4102 Jefferson County School Systems (812) 839-0003 Canaan Academy Christian Academy of Madison (812) 273-5000 Madison Consolidated School Corporation (812) 274-8001 (812) 274-8007 Deputy Elementary (812) 274-8004 EO Muncle Lydia Middleton Elementary (812) 274-8005 (812) 274-8006 Rykers Ridge Elementary (812) 274-8003 Madison Consolidated Jr. High Madison Consolidated High School (812) 274-8002 Shawe Memorial High School & Jr. High (812) 273-2150 (812) 866-6250 (812) 866-6200 Southwestern School Corporation Southwestern Elementary Southwestern High School & Jr. High (812) 866-6230 La Casa Amiga, (ESL/Billingual services/Interpretation)

9/0 Gross Avenue, Madison (\$12) 273-2394 (\$12) 273-4350 Shirley Kloepfor: kloepfershirley@gmail.com

Tuas: 9 a.m. to 3 p.m. & 7 p.m. to 9 p.m.; Wed: 2:30 p.m. – 5:30 p.m. Thurs: 7 p.m. – 9 p.m., Sat. 9 a.m. to 12 noon

 Ohio Valley Opportunities: Head Start
 (\$12) 265-4877

 Hours available Monday – Friday, 8 a.m. to 4 p.m.
 Applications available; www.ovo.org

Purdue University Extension – Jefferson Co. (812) 265-8919 https://cxtension.purduc.cdu/Jefferson/pages/default.aspx Southeastern Career Center (812) 689-5253 x 232

EMERGENCY/DISASTER SERVICES

Jefferson County Emergency Management	(812) 235-7616
Jefferson Co. Red Cross	(812) 265-3818
404 F. Main St., Madison	•
Salvation Army	(812) 265-2157
331 S. Main St. Madison	1.50 0.73 0.50 0.50 1.50 0.00

EMPLOYMENT

Lini Lo Iniziti	
(*) Rural Works Employment Program	(812) 801-6210
Brad Wood: bwood@rivervalleyres	sources.com
Jaamine Mardello: Jmardello@rive	rvalleyresources.com
(*) RVR/WorkOne Youth Services Program	(812) 801-3343
Amanda Liter: aliter@rivervalleyre	BOUICEB.com
(*) WorkOne, Madison	(812) 265-3734
HIRE Program (re-entry):	(812) 265-3734
(*) Ticket to Work	(812) 514-1251
(*) Vocational Rehabilitation	(812) 288-8261
Denise Loaring: Sue loaring@fssa	in gov
(*) National Able (Seniors 55 and older)	(812) 657-2138
Scott Bate, Career Coach, www.na	tonalable.org
Resource Mfg.	(812) 574-5500
Malone Staffing	(812) 590-7310
Manpower	(812) 273-3013

(*) Children's Advocacy Center of Southeas	stern IN: (812) 432-320
Stephanic Back: stephan	
(*) Jane's Kids (Summer Scholarship Progra	am) (812) 265
A DEPARTMENT OF A DEPARTMENTA DEPA	2652
(*) National Youth Advocate Program	(812) 274-0948
April Frieske: afrieske@nyap.org	9-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
(*) RVR Child Care Voucher Program:	(812) 273-9270
Arth and dare roughter rogan.	(855) 591-7848
Leslie Abboth leslie@rivervalleyre	
(*) Safe Passage, Inc. (domestic violence)	(812) 363-5844
	#: (877) 773-1990
Chelsea Marcum: cmarcum@safe	
(*) Safe Place, Inc. (sexual assault)	(812) 363-4969
Irena Sorrels: isomels@safepassa	
Irena Sorres. Isorreisrusalepassa	genic.org
First Steps South East	1-866-644-2454
rinar ateps adulti Laar	1-000-044-2404
Big Brothers, Big Sisters	(812) 273-0797
411 West Main St., Madison	(012) 213-0131
Center for Woman and Families	(077) 003 7577
	(877) 803-7577
DCS Child Abuse 24 hr. Hotline	(800) 800-5556
Dockside Services	(812) 273-7103
319 East Main Street	
Girls Inc.	(812) 265-5863
Hoosier Healthwise Insurance for Children	
	www.in.gov/fesa
Ireland Home Based Services	(877) 403-0380
	(812) 479-1856
	www.ihba.ua
Lide White Boys & Girls Club	(812) 265-5811
Birthline	(812) 265-4140
One Community, One Family	(877) 967-6263
Jefferson County Youth Shelter	(812) 265-3777
212 Ess. Street, Madison https://joysinc.org/	(0.1) 2010.11
Second Storles	(502) 241 -5483
	oursecondatories.com
Southeastern Indiana Voices for Children	(612) 599-2630

TANF (Temporary Assistance for Needy Families) (\$12) 265-4379 493 W. Futchinson Lana

http://www.in.gov/fssa/dfr/3157.htm Nurse-Family Partnership (812) 207-2269

1329 Applogate Lanc. Clarksville IN 4/129 Pairs mothers pregnant with their first child with a registered nurse for ongoing home visits aimed at supporting mothers and families. Serving Barthotomew, Clark, Crawford, Floyd, Harrison, Jackson, Jefferson, Jennings, Boott & Weshington counties

FINANCIAL

 (*) "Where Does the Money Go" budget workshop (812) 265-2652 offered by Jellerson County Pardae Extension on a monthly basis is the Clearinghouse. Open to Rural Works participants.
 (*) VITA Free Tax Preparation (812) 265-2652 Jefferson County United Way

FOOD PANTRIES (*) Jofferson County House of Hope (812) 274-0349 Open to the public: Tuesdays 5 pm to 7/45 pm & Fridays 9 am 11/45 am (812) 866-3073 Hanover Baptist Church 151 Weet Main St., Tanover Open 14 and 34 Wodhosdays, 9 a.m. to 11 a.m. Hanover United Methodist Church (812) 866-3101 220 E. LaCrange Road, Hanover Open 4* Friday of each month. Lexington and Hanover residents only. Proof of residence required. North Madison Christian Church (812) 273-1601 1400 E. Sl. Rd., Madison Giveaway, 4³ Saturday of the month, 9 am 11:00 am Point of Grace (812) 273-7177 3364 N. US 421, Madison Giveaway, 14 Saturday of the month: 10 am - noon Resurrection Lutheran Church (812) 273-3525 1429 Cilly Drive: Madison Open 3rd Tuesday of each month, 4 p.m. - 5 p.m. St. Vincent DePaul Society (812) 265-2920 By appointment only. (812) 265-2157 Selvation Army 331 S. Main St., Madison. Feeding breaklast at 9 s m. and lunch at noon. Monday - Friday Other Food Sources (*) Summer Meals for Kida (812) 265-2652 Tins Jones, Volunteer Coordinator, tinajones28@hotmail.com SNAP (Supplemental Assistance Program) (800) 403-0864 Find out if you qualify for SNAP 211 or (513) 721-7900 (812) 273-3942 WIC (Women/Infants/Children) Hours available: Mon, 11 s m 7 p m; Tues, 9 s m 5 p m; Wed closed; Thurs, 9 a.m. - 5 p.m.; Triday, 9 a.m. - 5 p.m. (Triday walk-Instriis 1 p.m. - 4 p.m.) FURNITURE & HOUSEHOLD Salvation Army (812) 265-2157 331 S. Mair St., Madison. Drop off 10 a m. - 3 c.m., Monday - Friday Goodwill. Madison (812) 273-7121 3200 English Station, Madison Habitat for Humanity Restore (812) 273-9500

Papirat for Humanity Restore (612) 273-9500 931 Lanier Drive, Madison Thursday, 12 noon – 5 p.m.; 1 1, 9 a.m. – 5 p.m.; Sat, 9 a.m. – 2 p.m. Jefferson County Re-Use Store 651 I N. Verdian Road in the Jefferson Proving Grounds (off SR 421, north of Madsor) Ocen Tuesdays & Thursday 12 pm – 5 pm

HEALTH & NUTRITION

(*) House of Health (monthly program at the House of Hope food pantry) (*) Health Insurance Sign Up Clinic offered by KDH / Claim Aid

Soturday 8 am 12 pm

(*) Health Insurance Sign Up Clinic offered by KDH / Claim Aid First Wednesday of every month at the Clearinghouse, 9 a.m. to 11 a.m.: first come, first served.

2

(*) Community Action of Southern India Serves Jefferson, Clark, Floyd, and Ha	
Jennifer Burns	(812) 913-3987
Healthy Indiana Plan (HIP 2.0)	(877) 438-4479
	www.HIP.IN.gov
Life Choicee Clinic	(812) 273-0400
220 Clifty Drive, Macison	
Free Material Assistance, Free Pregna Free STI testing	ncy Testing, Free Ultrasound,
Jefferson County Health Department	(812) 273-1942
/15 Green Road, Madison	
HIVSTD/HEP C. Testing every Wedne	
Immunizations (walk-ins) Tuesdays 8:	
TB Testing Tuesdays 8:00 a.m. to 10:0	0-a.m.
and 1.00 p.m. to 3.00 p.m.	
King's Daughters' Health	(812) 801-0800
Rehabilitation Center (mebility, speech Tobacco Cessation, Kadi Applegate	(812) 801-0598
ίι;	picgatok@kdh nadison.org (800) QUIT-NOW
Relay for Life, Jefferson County	(812) 599-5909
Brandy Craham: brandy.graham@can:	
Suicide Prevention, Jefferson Co (Amer Lennifer Harris: jernifer.afsp@gmail.co	
Suicide Prevention Hotiline: Free, available 24/7	1-500-273-8255
Senior Nutrition Activity Center: 9:30 to	12:30 pm 812 265 5376
Housing	
Affordable Housing	101003305030003000
Dover Apartments	(812) 265-6155
The Greens Apartments	(812) 265-1130
Rainbow Apartments	(812) 866-5355
CBJ Properties	(812) 265-6050
Habitat for Humanity, Jefferson County	(812) 265-9697
Mark Vanmeter: habi	tatmadison@gmail.com
IN Housing and Urban Development	(800) 225-5342
Indianapolis Field Office	(317) 226-6303
Ohio Valley Opportunities, Section & Vo	oucher (812) 265-5858
Presidential/Windridge	(812) 273-3363
Mortgage/Repair Assistance	
State of Indiana (877) GET-HOPE (mortgage)
USDA 504 Loan/Grant Program	(812) 346-3411 x 134
Domestic Violence Shelter (Shelter loca	ated in Batesville, IN)
(*) Safe Passage, Inc.	P: (812) 933-1990
	C: (812) 363-5844
	Crisis #. (877) 773-1990

Senior Housing/Housing for Persons with	th Disabilities
Caregiver Homes	(866) 797-2333
Interim Healthcare	(812) 537-5546
Homeless Shelters	
Heart House	(812) 926-4890
6815 US-50, Aurora	
Haven House	(812) 284-3373
383 Quartermaster Court, Jeffersonville	
Wayside Christian Fellowship	(812) 352-7598
304 Hoosier Street, North Vernon	10000000000000000000000000000000000000

Resources for the Homeless PATH (Projects for Assistance in Transition from Homelessness) Kadle Clark (812) 981-2594 ct. 1934 Lauren Rollings (812) 981-2594 ext. 1928 Transitional Housing Jefferson House (men), Lee Kilgore (812) 701-2275 Ruth Haven (women) (812) 274-2907 ruthhaven@ymail.com LAW ENFORCEMENT Madison Police Department (812) 265-3347 Hanover Police Department (812) 866-2131 Jefferson Co. Sherriff's Department (812) 265-2648 Jefferson Co. 911 Admin. Office (812) 273-3313 LEGAL SERVICES Neighborhood Christian Legal Clinic

Ighborhood Christian Legal Clinic Legal ADVICE only; not able to represent

in a court of law

www.indianafreelegal.com

Available 24 hours a day; avg. response time of 3 days Civil Legal Advice Line: 877-230-7521

For those who do not have internet access Operates Wednesdays, 9 am to 5 pm

Coalition for Court Access https://indianalegahelp.org/ This vobsite holps popule looking for divil logal aid. Civil logal aid helps people with non criminal issues, including family, housing, consumer, heslithcare, benefits, employment, and educational services. Download legal forms or search for pro-bond legal representation in your area.

LIBRARIES	
Madison Public Library	(812) 265-2744
420 W. Main S., Madison	
Hanover Public Library	(812) 865-1470
273 E. LaGrange Road, Hanover	
Hanover College Duggan Library	(812) 865-7161
121 Scenic Drive, Hanover	

MENTAL HEALTH SERVICES

(*) Centerstone	(812) 265-1918
2008 North Bevoher Drive, Madison	loiz) zod-toro
(*) LifeSpring Health Systems	(812) 274-0978
1406 Boar St., Madison	(812) 265-4513
National Alliance on Mental Illness (NAMI)	(812) 292-1047
Suicide Hotline	(800) 221-0446
Suicide Prevention Hotline	(800) SUICIDE
	(800) 273-8255

MiscelLANEOUS A Dog On Prison Turf (A.D.O.P.T) (812) 265-06154 ext. 279 Michelle Monroe (mmonroe@doc.in.gov) I ow cost spay and neutering services Jefferson County Recycle Center (812) 574 4080 6056 N. Shun Pike Road Mon-I rit. /arr = 3pm, 1º and 3º Tues, open until 7cm, 2º And 4º Saturday open 8 am = 12 pm.

3

RENT & UTILITY ASSISTANCE

Township Trustees:	
Graham Township, Shahnon Hamilton	(812) 599-2788
Handver Township, Ludy Anderson	(812) 866-2677
200 Spruce Lane, Hanover	willsims8@aoi.com
Lancester Township, Doug Harrel	(812) 701-3347
Mediaon Township, Kevin Lity	(812) 265-321/
504 West Second St., Madison	
Office hours: 8:00 aun 11:30 aun.	inadlownship@voiizon.net
Milton Township, Shannon Tiley	(812) 265-6707
Morme Tewnship, Kyle Harsin	(812) 801 7139
Republican Township, Fred Stillwell	(812) 866-3122
Saluda Township, Yancy York	(812) 406-6280
Shelby Township, Terry Rowlett	(812) 839-3371
Smyrna Township, Tara Cash	(812) 866 5174
23	

Utility Assistance;

 Ohio Valley Opportunities: Energy Assistance (812) 265-5882

 421 Walnut Street, Madison

 Monday through I riday, B a.m. – 4 p.m.

 Vectren "Keep Service On" Program

 Available Hobustry – June or until funds depleated.

Veterans Rent. Utility & other assistance: Military Family Relief Fund

(800) 400-4520

SENIOR SERVICES	
Jefferson Co. Senior Center	(812) 265-4758
Adult Protective Services	(800) 992-6978
LifeTime Resources	(812) 432-5200
	(800) 742-5001
Social Security Administration	(812) 265-6424
Southeastern IN Independent Living Center	(812) 689-3753
Senior Nutrition Activity Center	(812) 265-5376
9:30 a.m. to 12:30 p.m.	1999 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -

SUPPORT GROUPS

	onouru	
(*) Al-Anon, Wednesdays, 6 p.m.		(812) 866-2596
Al-Anon Meeting Information		(888) 425-2666
AA, Mondays, 6 p.m.	Connie:	(812) 701-5860
Addiction Support Group	222.022	Wednesdays, 7 p.m.
New Life Fellowship, 142 Cliffy I	Drive, Mad	Ison
Caregiver Support Group	CE 18 18 19 19	
Waters At Clifty Falls, 950 (Cross Ave N	/adison, IN 47250
Next Meeting: October 2 st .		
Directline: (812) 273-4640		
Helpline: (800) 272-3900		
Celebrate Recovery, Hanover Baptis	Church, 1	51 W Main St. Hanover.
IN 47243		
Carol: (812) 801-6008		
Orville: (812) 498-8982		
(*) National Alliance on Mental Illne	ss Family	Support Group
2 rd Thursday of each month (@ C	and the second se	
No More Cutting		: (502) 468-6316
Resurrection Lutheran Church,	1429 Clifty	Dr., Madison
Wednesdays, 6 p.m 7:30 p.m.		and the second second second second
(*) PFLAG Adults, 2rd Mondays at 1		(812) 624 5244
At the Clearinghouse		A CONSTRUCTION OF CONSTRUCTION
PFLAG Youth, 2nd and 4th Thursday	s at 7 pm	
At the Christ Episcopal C		

TRANSPORTATION Catch-A-Ride (800) 330-7603 Requires 24 hour notice for pickup and delivery. Assic Medi-Cab (812) 863-9990 Requires 24 hour notice for pickup and delivery Medicaid Accepted. **Classic Medi-Cab** (812) 265-3337 Hilltop Taxi Madison Medi-Cab (812) 265-5546 VETERAN SERVICES Local County Veterans Service Office 315 Jefferson Street, Madison IN (812) 265-3600 Louisville VA Center (502) 287-4000 (800) 400-4520 (800) 273-8255 Military Family Relief Fund Veterans Crisis Line (502) 287-5995 Home Based Primary Care for Veterans

Angie Halten: angela.hatton@va.gov Robley Rex VA Medical Canter 800 Zom Ava. Louisville: KY 40206

Do you know of a resource in Jefferson County that should be added to this list? Please email suggestions or corrections to: Erin Lawrence, Clearinghouse Resource and Referral Specialist elawrence@rivervalleyresources.com

Revised 11/26/19