

MCLEAN COUNTY ROSC

Community Needs Assessment

Abstract

The ROSC Council Community Needs Assessment is a collaborative undertaking by Chestnut Health Systems to highlight the needs of services in McLean County as it pertains to mental health, substance use disorders and recovery.

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Recovery Oriented System of Care

ROSC Community Needs Assessment

Chestnut Health Systems

ROSC Definition

A Recovery Oriented System of Care (ROSC) is a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resilience of individuals, families, and communities to achieve abstinence and improved health, wellness, and quality of life for those with or at risk of alcohol and drug problems.

A ROSC seeks new ways to involve the community ("It takes a village..."-type approach) and its various assets and services to help a recoveree achieve a significant reduction in substance use and/or improvement in mental health. It recognizes recoverees (along with family and friends) have a choice in their own recovery path and provides a means to connect them into community resources to support their recovery, such as housing, employment, mental health, primary physicians, safe and sober recreation, as well as more traditional recovery communities like A.A.

Mission Statement

"Collaborating to Build and Empower Communities of Recovery."

Improving health, wellness, and recovery for individuals and families, with or at risk of substance use/mental health problems, to promote healthy and safe communities.

One of the goals of a ROSC is to organize addiction treatment and involve the community. ROSC also seeks to further de-stigmatize addiction. If the community agrees that addiction is a problem and is killing its citizens, then hopefully the community as a whole (not just the recovery community) is willing to be part of the solution. From this standpoint, a ROSC is built on the agreement that "recovery happens within the community". Recoverees stand a greater chance at sobriety, health, and quality of life when a community forges together to provide its abundance of services and supports (e.g. healthcare, psychiatric services, sober living, childcare, recreation, and much more). The more tools that recoverees have in their proverbial toolbox, the grander a recovery structure they can build.

In summary, the development of a collaborative ROSC will work to create a culture that builds and nurtures recovery. This mission entails some of the following objectives: Inform, educate, and empower individuals and communities; reduce stigmas; provide prevention and early intervention, encompass treatment and recovery services; recommend and implement policy and practice changes; mobilize community partnerships; and evaluate services for ongoing

improvement. Identify gaps in the community and maximize the chance our fellow McLean county citizens can achieve a safe, sober, happy, healthy and fulfilled life.

Project Description

The Recovery Oriented Systems of Care (ROSC) Council will assist communities with building local recovery oriented systems of care and that can network with the statewide ROSC Council. Chestnut Health Systems serves as the lead Agency collaborating with community members to form the local ROSC Council. To ensure the sustainability of the ROSC Council, this lead agency must demonstrate a commitment to establish the ROSC Council permanently with a long-term (5-year) strategic plan, either as a stand-alone non-profit organization or with a permanent business relationship with a lead agency. This agreement is set forth by terms and conditions applicable to services funded by the Illinois Department of Human Services (IDHS), Division of Substance Use Prevention and Recovery (SUPR) for the development of Recovery Oriented Systems of Care Council.

Project Expectations

Identify and address the needs of the recovery community and promote infrastructure development of Recovery Community Organizations (RCOs) through training and education on issues such as operations, billing systems, recruitment, sustainability and integration into larger systems.

Involve people with lived experience. Lived Experience means personal knowledge about substance use disorders (SUDs), including co-occurring mental health and substance use disorders (CODs) treatment, and recovery gained through direct involvement, which may include that individual's involvement as a patient, family member or loved one of a person receiving SUD/COD treatment services.

Create an integration of systems within the ROSC, local hospitals, primary care, mental health, law enforcement, local business owners, local government representatives and policy makers, persons with lived experience and SUD intervention, treatment, prevention and recovery support service providers.

Build a menu of services and supports including all the components listed in the definition above: person-centered, building on strengths/resiliencies, coordinated, and community based.

Organize the logistics of ROSC Council meetings, stipends to ensure the participation of persons with lived experience, training cost, or website administration costs. Plans that include the

development of Recovery Community Organizations (RCOs) in the ROSC are strongly encouraged.

Build capacity for communities to provide advocacy, education and recovery support services for people in recovery from SUDs and Co-Occurring (SUD/Mental Health) Disorders (COD).

Map resources and assess needs including readiness for a Recovery Community Organization.

Inform, educate and empower individuals and communities, expanding access to a comprehensive array of prevention, treatment and peer recovery support service options.

McLean County Demographics

As of the 2010 United States Census, there were 169,572 people, 65,104 households, and 40,124 families residing in the county. The population density was 143.3 inhabitants per square mile (55.3/km2). There were 69,656 housing units at an average density of 58.9 per square mile (22.7/km2).[4] The racial makeup of the county was 84.3% white, 7.3% black or African American, 4.3% Asian, 0.2% American Indian, 1.5% from other races, and 2.3% from two or more races. Those of Hispanic or Latino origin made up 4.4% of the population.-In terms of ancestry, 31.2% were German, 15.4% were Irish, 11.4% were American, and 11.0% were English.

Of the 65,104 households, 31.4% had children under the age of 18 living with them, 48.5% were married couples living together, 9.6% had a female householder with no husband present, 38.4% were non-families, and 28.1% of all households are made up of individuals. The average household size was 2.44 and the average family size was 3.02. The median age was 32.1 years.

The median income for a household in the county was \$57,642 and the median income for a family is \$77,093. Males had a median income of \$52,271 versus \$39,685 for females. The per capita income for the county was \$28,167. About 6.2% of families and 12.9% of the population were below the poverty line, including 11.4% of those under age 18 and 5.5% of those age 65 or over.

COVID-19 Implications to McLean County

Appendix A: Substance Use Disorder/Co-Occurring Disorder Resources

ABC Counseling and Family Services

705 E. Lincoln St. Suite 303 Normal, IL 61761 309-451-9495

ABC Unlimited Inc.

409 W. Washington St. Bloomington, IL 61701 309-820-6757

Advanced Counseling Evaluation Treatment and DUI Services

705 E. Lincoln St. Suite 204 Normal, IL 61761 309-808-1017

Al-Anon

109 E Market St (309) 827-7426

Alcoholics Anonymous

200 W. Monroe St. Bloomington, IL 61701 309-828-7092

Chestnut Health Systems

1003 Martin Luther King Dr. Bloomington, IL 61701

*Detox, Adult Residential, and Outpatient/Intensive Outpatient Treatment Services 309-827-6026

Bloomington-Normal Treatment Center

303 Landmark Dr. Suite 2-B Normal, IL 61761 309-808-2388

Carle/Bromenn Medical Group Behavioral Health

Includes Partner Abuse Intervention Services 303 N. Hershey Rd. #1 Bloomington, IL 61704 309-268-3529

&

3024 East Empire St., Bloomington, II 61704 309-556-7700

Countermeasures

110 N Center St. Bloomington IL 309-827-0818

Lily Anderson, LCSW

2103 E. Washington St. Suite 3E Bloomington, IL 61704 309-620-5788

Integrity Counseling

Appendix B.: MAT (Medication Assisted Treatment) Services

Carle/Advocate Medical Group – Family Medicine

Dr. Artur Djagarian 1302 Franklin Ave Suite 1100, Normal, IL 61761 309.268.2727

Bloomington Normal Treatment Center

303 Landmark Dr. Suite 2-B Normal, IL 61761 309-808-2388

Chestnut Health Systems

702 Chestnut St. Bloomington, IL 61701 309-827-6026

Appendix C: Licensed SUD Prevention and Treatment Resources

Carle/BroMenn Medical Center Addiction Services

1304 Franklin Ave. Normal, IL 61761

*Detox, Adult Residential, and Intensive Outpatient/Aftercare Treatment Services

Chestnut Health Systems

1003 Martin Luther King Dr. Bloomington, IL 61701

*Detox, Adult Residential, and Outpatient/Intensive Outpatient Treatment Services 309-827-0818

Appendix D: Recovery Support Services

*As of this writing, according to Illinois Alcohol and Professional Certification Association (IODAPCA) metrics, there are Credentialed Recovery Support Specialists, Certified Family Partnership Professional, Certified Prevention Specialist, National Certified Recovery Specialist (CRSS, CFPP, CPS, NCRS) in McLean County. There are **48** with these varying designations and **128** Certified Alcohol and Drug Professionals (CADC) as well in McLean County.

Al-Anon Family Group

110 East Monroe St. Bloomington, IL 61701 309-827-7426

Alcoholics Anonymous (A.A) Hotline

309-828-7092 or 309-454-5941

Allied Counseling Resources

200 West Monroe St. Bloomington, IL 61701 309-828-7092

BRIDGES

Chestnut Health Systems (Problem Solving Courts - Drug Court / Recovery Court)

1003 Martin Luther King Dr. Bloomington, IL 61701 *In collaboration with McLean County Court Services 309-827-0818

Collaborative Solutions Institute

200 West Front St. Ste. 400-A, Bloomington, IL 61701 309-828-2860

Community Work Incentives Coordinators (CWIC)

800-807-6962

Consumer Operated Services and Programs

866-359-7953

Crisis and Referral Entry Services (CARES) Line

800-345-9049 (24 Hours)

The Warm Line (Peer and Family Support by phone)

866-359-7953 (Monday- Friday 8-5pm)

Department of Human Services/Department of Mental Health (DHS/DMH) Recovery Support Specialists

Nanette Larson-Director, Recovery Support Services 309-346-2094 ext.407 Or Tom Troe 309-346-2094 ext.409

DUI Solutions & Treatment Alternatives, Inc.

207 West Jefferson St. Bloomington, IL 61701 309-828-1988

Illinois Mental Health Collaborative

W.R.A.P. 866-359-7953

LGBTQ+

National Alliance on Mental Illness (NAMI) Family Support and Connection Recovery Group

Held at Chestnut Health Systems-1st and 3rd Saturdays of the month 1003 Martin Luther King Dr. Bloomington, IL 61701 309-827-6026

NAMI Family Support and Connection Recovery Group

Held at West Olive Faith United Methodist Church- last Saturday of the month 1306 W. Olive St. Bloomington, IL 61701 309-828-7052

Bloomington-Normal Depression and Bi-Polar Support group

Held at First United Methodist Church-1st and 3rd Tuesday's of the month 211 School St. Normal, IL 61761 309-452-2096

Suicide Survivor's Support Group

Held at ABC Counseling-3rd Wednesday of the month 705 Lincoln Ave. #303 Normal, IL 61761 309-451-9495

Self-Management and Recovery Training (SMART) Recovery-Online

CRAFT – Community Reinforcement and Family Training

Support Group for Moms with Postpartum Depression and other Perinatal Mood and Anxiety Disorders Held at OSF St. Joseph Medical Center Business Conference Room 3-1st Saturday of every month s2tmoms@gmail.com 815-310-0637 Nicki Peterson

Appendix E. Peer Recovery Support Professionals

Chestnut presently provides a small team of credentialed Recovery Coaches (3-4) for its Problem Solving Court clients (i.e. Recovery Court and Drug Court); however, the number of credentialed and available coaches in the community beyond the above services is still being determined. At this time, there is no evidence to support the assertion that Peer Recovery Support Specialists are abundant and sufficiently accessible in the community.

Appendix F: Mental Health & Substance Abuse

Treatment programs and mental health services specializing in long-term Dual Diagnoses and treatment has- been identified as a gap in the community. The facilities below do treat clients with co-occurring disorders (i.e. clients who have mental health diagnoses are treated for substance use disorder), but typically not for residential treatment stays longer than 21-28 days.

Carle/BroMenn Medical Center Addiction Services

1304 Franklin Ave. Normal, IL 61761

*Detox, Adult Residential, Inpatient Psychological Unit, and Intensive Outpatient/Aftercare Treatment Services

Chestnut Health Systems

1003 Martin Luther King Dr. Bloomington, IL 61701

*Detox, Adult Residential, and Outpatient/Intensive Outpatient Treatment Services 309-827-6026

Appendix G. Recovery Residences

House of Hope

Labyrinth House-Women's

616 W. Monroe St. Bloomington, IL 61701 309-319-2426 *Hilary Pacha is the Senior Director 309-662-0461 ext. 271

Oxford House Bloomington- Men's

501 McLean St. Bloomington, IL 61701 309-829-5014

Oxford House West Bloomington-Women's

704 W. Scott St. Bloomington, IL 61701 309-808-1632

Rooming House

702 W. Mulberry St. Bloomington, IL 61701 Run through Center for Human Services-PSR 309-827-5351

Appendix H: Housing Support

Mid-Central Community Action

1301 W Washington St. Bloomington, IL 61701 309-829-0691

Bloomington Housing Authority

104 E. Wood St. Bloomington, IL 61701 309-829-3360

Chestnut Health Systems (Rent individual apartments in the clients name to individual diagnosed with a severe mental illness or Co-Occurring disorder).

1003 Martin Luther King Dr. Bloomington, IL 61701 Adult Severe Mental Illness or Co-Occurring Treatment Services 309-827-6026

City of Bloomington Township

607 S. Gridley St, Ste B, Bloomington, IL 61701 309-828-2356

Rapid Rehousing (Aaron Stine)

Run through Home Sweet Home Ministries 303 E. Oakland Ave. Bloomington, IL 61701

309-828-7356

Bridge of Hope

Run through Home Sweet Home Ministries 303 E. Oakland Ave. Bloomington, IL 61701 309-828-7356

Mayor's Manor

Run through MCAA 504 W. Washington St. Bloomington, IL 61701 309-827-2967

Recycling Furniture for Families

515 N. Center St. Bloomington, IL 61701 309-829-6500

Appendix I. Education Support

GED/Adult Literacy Program

Heartland Community College Student Commons Building, 1000 1500 W. Raab Rd. Normal, IL 61761 309-268-8180 adult.education@heartland.edu

Bloomington Public Library

205 E. Olive Bloomington, IL 61702 309-828-6091

Normal Public Library

206 W. College Ave. Normal, IL 61761 309-452-1757

Children's Home and Aid (parenting classes and support groups)

403 S. State St. Bloomington, IL 61701 309-827-0374

Scott Early Learning Center

1119 E. Taylor Bloomington, IL 61701 309-834-5210

Appendix J. Providers for Justice Support

Adult Probation

104 W. Front St. Bloomington, IL 61701 309-888-5360

McLean County Recovery Court

104 W. Front St. Room 700 Bloomington, IL 61701 309-888-5360 Dennis McGuire or Lori McCormick

Bloomington Police Department (Safe Passages Initiative)

305 S. East St. Bloomington, IL 61701 309-820-8888 Dispatch Non-Emergency Line 309-434-2700 Business Line

Normal Police Department (Safe Passages Initiative)

100 E. Phoenix Ave. Normal, IL 61761 309-888-5030 Dispatch Non-Emergency Line 309-454-9535 Business Line

McLean County Sheriff's Department

104 E. Front St. Bloomington, IL 61701 309-888-5034 Jon Sandage- Sheriff, Greg Allen-Chief Deputy

Bloomington Fire Department

310 N. Lee St. Bloomington, IL 61701 309-434-2500

Normal Fire Department

606 S. Main St. Normal, IL 61761 309-454-9689

Juvenile Court Services

104 W. Front St. Room 701 Bloomington, IL 61701 309-888-5370

Mclean County Jail

104 W. Front St. Bloomington, IL 61701 309-888-5065

State's Attorney Office

Where the Victim Witness Program is located 104 W. Front St. Room 605 Bloomington, IL 61701 309-888-5400

Law and Justice Center

104 E. Front St. Bloomington, IL 61701 309-663-9445

Prairie State Legal Services

201 W. Olive St. Suite 203 Bloomington, IL 61701 309-827-5021

Countering Domestic Violence Court Advocates

Run through MCCA but held in the Law and Justice Center 104 W. Front St. Bloomington, IL 61701 309-888-5424

Gather, Assess, Integrate, Network, and Stimulate (GAINS) Center for Behavioral Health

Focuses on expanding access to services for people with MH/SUD who come in contact with the justice system.

800-311-4246

Appendix K. Community Resources

Bromenn Medical Group

Al-Anon

Alcoholics Anonymous

Alcohol Assessment and Modification

Bloomington-Normal Depression and Bi-Polar Support Group

Bloomington Parks and Recreation

Bridgeway, Inc.

Career Link

Carle Bromenn Medical Center

The Center for Youth and Family Services

Chestnut Health Systems

City of Bloomington Township

Collaborative Solutions Institute

Community Work Incentives Coordinators

Consumer Operated Services and Programs

Craft – Community Reinforcement and Family Training

Crisis and Referral Entry Services (CARES) Line

DHS/DMH Recovery Support Specialists

DUI Solutions & Treatment Alternatives Inc.

Illinois Mental Health collaborative

The Labyrinth House

McLean County YMCA/YWCA

McLean County Health Department

McLean County Drug Court

NAMI Family Support and Connection Recovery Group

Narcotics Anonymous

Normal Parks and Recreation

OSF Medical Center

Oxford House West Bloomington

Oxford House Bloomington

Project OZ

Safe Harbor Family Crisis Center

Salvation Army

Smart Recovery - Online

Suicide Survivor's Support Group

United Way of McLean County

The Warm Line (Peer and Family Support by Phone)

Community Services and Supports Assessment

The ROSC Council in McLean County, headed by the Chestnut Health Systems project team, collaborated to create a preliminary list of findings based on knowledge of current supports and services compared to perceived gaps for those seeking long-term recovery. The data was based on research in the field, feedback from health care professionals and those with lived experience (both short-term and long-term sobriety represented).

The following is a summary of actions completed to determine these findings:

- Developed a council of ROSC stakeholders comprised of representatives from numerous agencies and organizations in the county (residential treatment, MAT, 12-step, housing, adolescent services, local business owners, etc.).
- Project team leveraged industry resources to develop two separate stakeholder surveys—1) Aimed at residential and outpatient treatment clients; 2) Tailored to professionals in the field and members of the ROSC council.
- Project team held focus groups and 1x1 sessions with clients (who reside in McLean County) to gather information about their treatment experience, past relapses, services they have relied upon in the past, services they find lacking in the community, etc.
- ROSC Council representatives completed a customized survey that rated their opinion (1 Strongly Disagree to 5 Strongly Agree) across 24 key areas within the community that directly relate to recovery (e.g. sober living, dual diagnoses psychiatric care, awareness and education, childcare, sober recreation, transportation, adolescent care, healthcare and dental, etc.).
- ROSC Members were asked to bring their completed surveys to the December 2018
 Council Meeting for discussion. Within that meeting, the project team held a facilitated
 session, whereby attendees broke off into small groups for a 20-minute roundtable
 discussion of their survey results. Each group was asked to come to a consensus of the
 top 3-4 topics covered on the survey, which are perceived as most problematic or
 lacking in McLean County. These outcomes were discussed with the larger group table by-table and results were white-boarded and voted upon.
- The completed surveys were collected for a tabulation of results to provide quantitative data to support the qualitative analysis above.
- The outputs from the client focus groups were also considered when assessing the
 community needs. These focus groups will be done on an ongoing basis to continuously
 monitor the community strengths and gaps from the perspective of those new in
 recovery or struggling to obtain sustained sobriety.

The most critical areas identified were as follow:

- 1. **Lack of sober living** (and means to pay for first month's rent; also mentioned was apartment complexes for people strictly in recovery)
- 2. Lack of access to psychiatric services and medications for those with co-occurring disorders. Many groups identified this shortage as causing a significant strain on their agency, as well as a tremendous burden for recoverees because there is a dearth of psychiatrists in general in McLean County, not to mention those who specialize in addiction. Attendees pointed to examples of people not being able to even see a doctor to have their medications prescribed, or having to rely on tele-psych services that lack the 1x1 'in person' touch.
- **3.** Lack of awareness/education about addiction to families and community members (including behavioral health symposiums; education about the disease concept to reduce stigmas, increase family awareness about co-dependence, enabling, etc.)

Other supports or services that were suggested:

- Lack of childcare for recoverees to attend work, 12-step meetings, outpatient, etc. Lack of financial assistance for childcare as well.
- Shortage of jobs for people in recovery that have felonies on their record
- A need for a safe/sober recreation center as well as more recreational opportunities in general.
- Insufficient addiction treatment, support, and education for adolescents.
- Not enough Recovery Coaches for people leaving treatment; coaches exclusive to court programs (e.g. Drug Court or Recovery Court).
- Quicker intake process (get the person into treatment during short window they're willing to go).
- Lack of long-term treatment (this was also mentioned as a State-wide shortage in the opinion of several attendees; few viable programs over 28-days for more severe cases).

Community Readiness

As of this writing, the professional and lived experience recovery communities have demonstrated enthusiasm and willingness to participate with the McLean County ROSC efforts, presently being headed up by the Chestnut Health Systems project team. The team is continuously seeking to bring new stakeholders to the table, in order to ensure that a wide array of roles and perspectives is represented. This includes those organizations and agencies listed in the Community Resources Appendix.

Community readiness is also deemed positive due to the following:

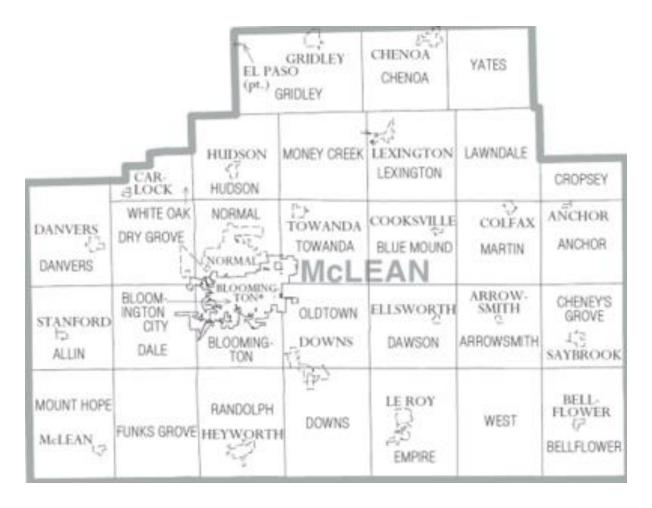
- Strong turnout at ROSC Kickoff and subsequent ROSC Council meetings.
- Good representation from lived experience communities, particularly Alcoholics Anonymous and Celebrate Recovery.
- High level of willingness by SUD treatment clinicians, recovery coaches, and clients to participate
 in focus groups regarding feedback on both residential/outpatient treatment services, as well as
 community resources.
- Sufficient number of Council members expressing interest in sub-committee activities.

• Impassioned facilitated sessions among Council members to talk about the gaps in services and excitement expressed to be part of the solution.

The following opportunities are available to support the ROSC:

- Identify "wraparound" solution that inventories all the various organizations' services and support, to better increase awareness among professionals and recoverees about multitude of resources available in the community.
- Look at community providers to see if they can expand their supports to individuals in recovery with or without a dual diagnosis.
- Continued facilitated sessions among Council members to further clarify requirements for implementing identified gaps in services.
- Research community providers to fill the service gaps for individuals in recovery. Possible service expansion into rural areas within McLean County.

McLean County Community Map



Technical Assistance: Priorities for ROSC Expansion

The McLean County ROSC will require continuous commitment and involvement from its stakeholders in order to overcome many of the risks and challenges associated with invoking change in a community-wide fashion. Risks to the project effort could include member complacency, key stakeholders missed or not involved, lack of funding, loss of buy-in or interest, *too many* perspectives to the point the council becomes unwieldly, groupthink about certain priorities (if Council membership not kept fresh), and other potential issues that may be identified further into this effort. With this in mind, some of the measures required to continue expanding the ROSC are as follows:

- Continual Council Membership Recruitment
- Provide training and education within the ROSC Framework
- Educational Sessions such as Disease Concept, Stigma Reduction, MAT Services, 12 Steps, Different Recovery Paths, etc.
- Sustained research of Services and Supports offered to individuals covering areas of the recovery spectrum
- Periodic check-ins with ROSC Council to confirm accordance with strategic plan