

## **FY26 Strategic Plan**

### **Shelby County Recovery Oriented Systems of Care (ROSC) Council**

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**Council Mission:** Collaborating with one another to build and empower communities of recovery.

**Council Vision:** Shelby County ROSC Council aims to build a safer, stronger, and healthier community that supports multiple pathways of recovery for all.

## **Needs Assessment**

### **Demographics:**

Shelby County is predominantly White alone at 97.2%. Hispanics and Latinos account for 1.8%, Black alone 1.0%, Asians alone 0.4%, American Indians and Native Alaskans alone is a value greater than 0 but half of the unit shown, and two or more races is 1.1%. (United States Census Bureau QuickFacts, July 2023)

Persons under the age of 5 years old account for 5.0%, ages 5-18 years old is 21.1%, ages 18-65 is 49.4% ages 65 and over is 24.5%. Females account for 49.9% and males 50.1%. (United States Census Bureau QuickFacts, July 2023)

The median household income is \$68,457, with the persons in poverty rate at 10.6%. The number of households for 2019-2023 is 8,795, with the average persons per household being 2.35.

With this data, it can be determined that most of the population in Shelby County is White and below-average income.

Shelby County Coroner, Beth Debolt, reports four fatal deaths in 2025, which occurred due to over-consumption of alcohol.

Lack of awareness and understanding of substance use disorder (SUD) results in increased stigma within Shelby County. While distributing surveys for our community survey, a community member asked the Shelby County ROSC Council Coordinator what they were there for. The ROSC Council Coordinator told her they were surveying the community. She asked the ROSC Council Coordinator what it was for, and they said "gauging the public's opinion on substance use disorder and recovery." She replied with, "Oh, well, we're not interested."

The Community Survey also highlight the community's response to the statement "Everyone in my community can get help for mental health/substance use regardless, of status" over 30% of 159 people

responded with “strongly disagree or disagree,” and another 59 people said they “neither agree or disagree.”

Shelby County faces a significant shortage of mental health, substance use, and youth services. While Shelby County Community Services provides both mental health and substance use care, it remains one of the only available options. Additionally, despite having 10 smaller towns within the county, none have these vital services. People in these towns are forced to travel to neighboring counties, which already have their own populations seeking care, adding to the strain on those services. There are also few options for transportation within the county, let alone out of the county. Based on the community survey data, 44% of people in Shelby County know someone personally or have missed recovery-related appointments, meetings, or services due to transportation issues.

The same barriers that are apparent with services also apply to those needing access to recovery supports. Though recovery meetings are available within the county, transportation does not typically run in the evenings.

31 people out of 159 know where to get Narcan; the other 128 either do not know or do not care to know where to obtain Narcan or other harm reduction services within the community. According to our community survey data, over 70% of Shelby County residents agree that increasing the number of Drug Overdose Prevention Program (DOPP) sites and education for harm reduction would be beneficial. The Shelby County ROSC Council has made progress, but there is still stigma due to a lack of knowledge and education about harm reduction.

Shelby County's most significant challenges are increasing education on SUD and harm reduction, improving transportation to recovery services and mental health/substance use treatment, and raising awareness of available recovery events, meetings, and support groups. Shelby County ROSC Council ROSC is actively working to address these issues by coordinating outreach efforts and bringing together stakeholders to identify gaps and barriers, ultimately creating effective solutions for individuals and families in recovery. When the community was asked what recovery support services they were aware of in Shelby County, they answered that food assistance and domestic violence were the top two resources known about. When asked what the most important recovery resources needed for someone in early recovery, those surveyed showed that substance use treatment, mental health treatment, and recovery meetings were most important.

Some other comments made on the FY26 community survey were, “I’d really love to see more and better services, we all deserve better!”, “Keep doing what you’re doing. A lot of people around here need the help.”, “I believe in mental health but nowadays there is no learning right and wrong.”, “long waitlists for mental health”, “more meetings and housing needed”, “they need more help” and “It’s difficult to get in to mental health services in Central Illinois in a timely fashion.”

<b>Total Number of Residents:</b>	20,990
<b>Number of School-aged Youth:</b>	4,575 (21%)
<b>Total Number of Schools:</b>	5 School districts, 17 Public schools
<b>Total Number of Institutions of Higher Learning:</b>	0
<b>Total Number of Residential Treatment Facilities:</b>	0; 1 SUD outpatient treatment; 1 mental health outpatient treatment

## **Shelby County ROSC Council Outreach & Communication Plan**

### **Purpose:**

Shelby County ROSC Council ROSC will communicate the ROSC concept by educating community stakeholders on our mission, objectives, events, and other related activities. The information below includes the specific populations we intend to target and the tactical plan for various communication channels. This plan also explains in-depth how the Shelby County ROSC Council will provide outreach to its community and implement the ROSC concept.

### **Objectives:**

- Increase public awareness of SUD as a treatable condition.
- Reduce stigma across key stakeholder sectors.
- Promote available treatment, recovery, and harm-reduction resources
- Build the ROSC Council credibility and visibility.
- Strengthen internal communication across the ROSC Council partnerships.
- Mobilize community members to support systemic change.
- Measure and report community progress.

### **Target Audiences**

Communication and outreach to the whole community are important for increasing the visibility of the ROSC Council & progress on systemic change. During the next three years, the Shelby County ROSC Council has identified its main target audiences as **persons with lived experience (PLE), faith-based groups, service providers, law enforcement, healthcare, businesses, and education** to increase the likelihood of local community change.

- **Persons with Live Experience:** To empower PLEs to use their voices to guide local change in the community.
- **Faith-based:** To increase the stewardship of like-minded organizations to enhance access to recovery resources and services.
- **Service Providers:** To increase the support for people affected by SUD.
- **Law Enforcement:** To create a Safe Passages program for those in need of treatment for SUD.
- **Healthcare:** To reduce gaps and barriers in services when assisting a person with SUD/MH disorders; to shift the perspective of healthcare providers in reference to SUD being a complex brain disorder.
- **Businesses:** To gain the support of local businesses to increase recovery capital & reduce stigma.
- **Education:** To gain the support of local school administration to facilitate discussion in reference to SUD prevention and early intervention efforts.

### **Key Message**

The Shelby County ROSC Council is committed to transparent, inclusive, and collaborative communication, sharing strategic initiatives, progress, resources, and opportunities with stakeholders and the community through regular updates, multi-channel outreach, stakeholder presentations, feedback loops, and accessible meetings to promote engagement, accountability, and community impact.

## Communication Channels, Audience, Frequency, Responsible Person(s)

Channel	Audience	Frequency	Responsible person(s)
Email, phone, text with Council members	Primarily service providers, youth-serving agencies, SUD treatment, PLEs, law enforcement, local government, faith-based, judicial, recovery supports	Weekly	ROSC Council Coordinator
ROSC Council meeting	Primarily service providers, youth-serving agencies, SUD treatment, PLEs, law enforcement, local government, faith-based, judicial, recovery supports, faith-based	1x/month	ROSC Council Coordinator will email out to ROSC Council
1:1 meetings with key stakeholders	All sectors but focus on target audience	2 days/week	ROSC Council Coordinator & ROSC Council members
Shelby County ROSC Facebook page	Community members; PLEs, PLE families, service providers	5 posts/week	ROSC Council Coordinator & ROSC Council Recovery Navigator
Community free laundry days	PLEs, families of PLEs, unhoused, subsidized housing recipients	1x/month	ROSC Council Coordinator & ROSC Council Recovery Navigator, volunteers from ROSC Council & other stakeholders, PLEs
Local community events	Community members; service providers	1x/month	ROSC Council Coordinator & ROSC Council Recovery Navigator
Local coalition meetings	Healthcare	1x/month (depending on frequency of meeting dates)	ROSC Council Coordinator & ROSC Council Recovery Navigator
Government board meetings	Local government, judicial, law enforcement	2x/month (depending on frequency of meeting dates)	ROSC Council Coordinator & ROSC Council Recovery Navigator
Peer-led Recovery Wellness groups	PLEs, community members	1x/week	ROSC Council Recovery Navigator, PLEs
Anti-Stigma Campaign (newspaper & social media)	Community members, media	1x/month	Hour House ROSC Council Coordinators
ROSC Concept presentations with key stakeholders	PLEs, faith-based, law enforcement, healthcare, businesses, education	2x per FY	ROSC Council Coordinator & ROSC Council Recovery Navigator, ROSC Council members
ROSC Resource folders	PLEs, service providers, law enforcement, faith-based, businesses	Each stakeholder meeting, each peer meeting	ROSC Council Coordinator and/or ROSC Council Recovery Navigator, ROSC Council members
ROSC Council Newsletter (email & social media)	Council members & Community members	1x/month	ROSC Council Coordinator & ROSC Council Recovery Navigator
Recovery-oriented events	Community members; PLEs, PLE families	1x/quarter	ROSC Council Coordinator & ROSC Council Recovery Navigator, ROSC Council members
Volunteer at other organization or agency events	Civic organizations, youth-serving organization, faith-based, service providers	1x/month	ROSC Council Coordinator & ROSC Council Recovery Navigator
Drug Overdose Prevention (DOPP) sites	Community members; families of PLEs, parents	Bi-weekly check-ins	ROSC Council Coordinator, ROSC Council Recovery Navigator, ROSC Council members, PLEs
Recovery Month Celebration/Awareness	All sectors	Annually in September	ROSC Council Coordinator, ROSC Council Recovery Navigator, ROSC Council members, PLEs
Candlelight Vigil	All Sectors	Annually in August	ROSC Council Coordinator, ROSC

			Council Recovery Navigator, ROSC Council members, PLEs
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### **Evaluation & Feedback**

The communication and outreach of the ROSC Council will be evaluated based on social media analytics, the number of community event attended and hosted, number of harm reduction trainings hosted, number of 1:1 stakeholder meetings, number of ROSC Council concept presentations given, number of harm reduction supplies distributed, number of DOPP sites established, number of resource folders distributed, number of families attending free laundry days, ROSC Council Community Survey data, number of sectors represented on the ROSC Council, retention rate of ROSC Council, timeliness of completing goals, survey of ROSC Council progress.

## **Shelby County ROSC Council Goals, Objectives, and Outcome Measures**

**Goal 1-Year 1:** Increase the accessibility and availability of recovery supports within Shelby County, ensuring that individuals in need are aware of, and able to access recovery resources and services, including transportation needs, by June 30<sup>th</sup>, 2026.

### Objectives (by June 30, 2026)

- Create three user-friendly guides that lists recovery events, support groups, and other recovery resources and services by November 30, 2025. (Completed)
- Distribute the resource guides through social media, news releases, and community placement of the printed guides by June 30, 2026.
- Partner with local law enforcement, court services, Department of Children and Family Services (DCFS), mental health and SUD treatment providers, social service providers, and businesses to support guide distribution by June 30, 2026.
- Engage recovery champions both within and outside established recovery support groups to assist individuals in early recovery or seeking recovery with transportation needs. by June 30, 2026.

### Progress Achieved:

- Resource guides have been developed.
- Resource guides have been disbursed to the ROSC Council/stakeholders.
- ROSC Council is participating in distributing resource guides to the Shelby County community.

### Next Steps:

- Resource guides to be distributed to smaller towns and villages through town board meetings.
- Provide resource guides to recovery meeting facilitators and faith-based organizations.
- Contact local food pantries for distributing resource guides.
- Link to the resource guides on the Shelby County ROSC Council Facebook page as a digital resource.
- Provide copies of the resource guides to the Shelby County Health Department.
- Identify and connect local volunteers or recovery champions to assist with transportation for individuals in early recovery or seeking recovery.

### Outputs/Outcome Measures:

- Number of resource guides created.
- Number of resource guides distributed to the county seat of Shelby County.
- Number of resource guides distributed to the outlying towns of Shelby County.
- Number of resource guides accessed on social media.
- Number of transportation connections documented.

**Year Three (FY27-FY28):** Create a twenty-person or more volunteer transportation list for recovery needs in Shelby County and continuously update and distribute resource guides by the end of June 30, 2028.

### Objectives/Strategies (by June 30, 2028):

- Recruit 20 transportation volunteers to be shared among all stakeholders including persons with lived experience, churches, MAR providers, social service agencies, and medical providers by June 30, 2028.
- Survey volunteers to determine preferred ride types: treatment, medical appointments or meetings by June 30, 2028
- Check transportation volunteers have legal drivers licenses and adequate car insurance by end of June 30, 2028.
- Train volunteer drivers in Narcan administration and equip each with two boxes by end of June 30, 2028.
- Develop and implement a volunteer driver handbook and training checklist by June 30, 2028.
- Finalize and distribute volunteer transportation list handed off to stakeholders by end of June 30, 2028.

Outputs/Outcome Measures:

- Number of verified volunteer transportation drivers shared with stakeholders.
- Number of volunteer transportation drivers trained in Narcan administration and equipped with Narcan.
- Implementation and usage of the volunteer driver handbook and training checklist.
- Total number of rides provided by volunteers.
- Number of updated resource guides distributed and accessed.
- Volunteer transportation drivers list handed off to stakeholders.
- Data showing increased access to recovery services and reduction in transportation barriers.

**Goal 2- Year One (FY26):** Establish twelve DOPP sites in the most rural communities of Shelby County for distribution of harm reduction materials by June 30<sup>th</sup>, 2026.

Objectives/Strategies (by June 30, 2026):

- Identify opportunities to collaborate with existing community events to further our distribution of harm reduction information by November 30, 2025. (Completed)
- Distribute educational flyers and resource guides to ten smaller towns in Shelby County by end of January 31, 2026.
- Establish six new DOPP sites for Narcan distribution in the ten small towns in Shelby County by March 30, 2026.
- Host at least two community educational opportunities discussing the utilization of harm reduction in the towns outside of the county seat by June 30, 2026.
- Implement pre and post training surveys for all community education sessions, Narcan trainings, and harm reduction workshops to measure changes in participant knowledge and confidence by June 30, 2026.

Progress Achieved:

- Nine DOPP sites established in the smaller rural communities in Shelby County.
- Partnerships made with board members in the smaller town communities of Shelby County.

- Educational flyers discussing harm reduction distributed to smaller rural communities in Shelby County.
- Collaboration with other community events and organizations made.
- 408 boxes of Narcan distributed to Shelby County.

Next Steps:

- Continue to establish more relationships with agencies and organizations in the Shelby County communities as possible DOPP sites.
- Participate at community events and organizations to provide education on harm reduction to the community.
- Continue distribution of educational flyers and resource guides to smaller towns and the county seat of Shelby County.

Outputs/Outcome Measures

- Number of community educational sessions held.
- Number of new DOPP sites established.
- Number of boxes of Narcan distributed.
- Number of community events tabled by the ROSC Council.
- Number of smaller rural communities reached with educational resources.
- Number of participants with increased knowledge and confidence after attending a Narcan training.

**Year Three (FY27-FY28):** Continue to increase access to harm reduction materials (Narcan, fentanyl test strips, other safety supplies, etc.) in Shelby County through established partnerships with local pharmacies, community centers, and public health department, to distribute these materials by June 30<sup>th</sup>, 2028.

Objectives/Strategies (by June 30, 2028):

- Engaged three pharmacies to serve as a DOPP sites within Shelby County by June 30, 2028.
- Engage three community centers to stock Narcan on site and staff trained on its use by June 30, 2028.
- Partner with public health department in handing out free Narcan and provide staff with training by June 30, 2028.
- Strengthen relationships with community members in both the county seat and smaller towns to ensure continued access and outreach by June 30, 2028.
- Continue to implement pre and post training surveys for all community education sessions, Narcan trainings, and harm reduction workshops to measure changes in participant knowledge and confidence by June 30, 2028.

Outputs/Outcome Measures

- Number of pharmacies engaged as new DOPP sites.
- Number of community centers engaged as new DOPP sites.
- Public Health Department engaged as a new DOPP site.
- Number of boxes of Narcan and educational harm reduction materials distributed throughout all of Shelby County.
- Number of participants with increased knowledge and confidence after attending a Narcan training.

**Goal 3- Year One (Fy26):** Gather information on establishing a Safe Passages Program by learning from successful programs in other areas; create a subcommittee to guide development of Safe Passages program by June 30, 2026.

Objectives/Strategies (by June 30, 2026):

- Explore information from other area Safe Passage programs in Illinois by March 31st, 2026.
- Host stakeholder learning session about Safe Passages program model, including law enforcement, treatment providers, hospitals, recovery organizations and local government by June 30th, 2026.
- Recruit three or more community stakeholders to be in the ROSC Council that will assist local police, support groups, and treatment programs in establishing a Safe Passages program by June 30th, 2026.
- Create subcommittee with five to ten stakeholders and community members for developing a plan for Safe Passages program by June 30th, 2026.

Progress Achieved:

- Research and gathering information from other Safe Passages programs in Illinois has started.

Next Steps:

- Develop a detailed plan for establishing the Safe Passages program with local police, support groups, and treatment programs.
- Develop a list of volunteers to provide support and transportation to those accessing Safe Passage.
- Provide training and community education on Good Samaritan Law as it relates to Safe Passages program.
- Provide education to stakeholders on transitions in dangerous times for people with SUD to reduce these risks by bridging gaps between systems.

Outputs/Outcome Measures

- Number of other Safe Passage programs researched.
- Number of stakeholders attending learning sessions.
- Number of stakeholders recruited to participate in program development.
- Number of subcommittee members actively engaged in drafting Safe Passages plan.

**Goal 3- Year Three:** Assist the establishment of a Safe Passages in Shelby County with stakeholders to support the recovery community in seeking support and transportation to treatment; hand off established transportation drivers list to stakeholders by June 30, 2028.

Objectives/Strategies (by June 30, 2028):

- Conduct a least nine Safe Passages planning subcommittee (SPPS)meetings by June 30, 2027.
- Assist partners in drafting policies and protocols for Safe Passages program by June 30, 2028.
- Assist in establishing a core group of ten or more volunteers to provide support and transportation to those seeking Safe Passage by June 30, 2027.

- Recruit an additional five volunteer drivers by June 30, 2028.
- Finalize and distribute volunteer transportation list handed off to stakeholders by end of June 30, 2028.
- Safe Passages program created by SPPS handed off to two or more community members by June 30, 2028.

#### Outputs/Outcome Measures

- Number of Safe Passages planning subcommittee (SPPS) meetings held.
- Policies, protocols, and program documents completed.
- Number of volunteer drivers recruited to be volunteer transportation drivers.
- Volunteer transportation drivers list handed off to stakeholders.
- Number of community members assuming responsibility for ongoing Safe Passage program operations.
- Number of people assisted through Safe Passages.