

EDGAR COUNTY ROSC Council

MEETING MINUTES

July 28th, 2026

5:15 PM

Paris Hospital Conference Room A and on Zoom

Attendees In-person: Doug Cochran, Mike Stepp, Mary Morgan Ryan, Nate Alexander, Jackie Cunningham, Scott Foster, Mariah Whitmore, Jackie Miller, Janice Watson, Susan Tybon, Debbie Cook, and Rick Cook.

Attendees on Zoom: Kristin Davis, Andy Brandenburg, Kandis Mills, Tasha Champion, Lindsay Erie, and Kyra Graham.

The Spotlight Speaker was Mike Stepp from the Paris Rotary Club. Mike shared an overview of Rotary's mission of promoting peace, preventing disease, and strengthening communities through service. He discussed Rotary's worldwide efforts to eradicate polio, highlighted the Edgar County Rotary Club's history dating back to 1922, and explained the club's involvement in local projects, scholarships, youth leadership opportunities, and Rotary district grants available through community partnerships.

The ROSC Council reviewed the FY27 Community Survey. Members discussed the FY26 survey results and agreed that the open-ended question would be removed to improve data collection and simplify analysis. The group also discussed possible additions to the survey to better identify community needs and service gaps.

The Persons with Lived Experience (PLE) Committee provided an update on the “Pack the Backpack for a Better Future” drive. The donation campaign will run from July 20th through August 20th with collection sites throughout Edgar County. Requested items include hygiene products, non-perishable snacks, cooling towels, flashlights, batteries, ponchos, bug spray, sunscreen, and other basic necessities for individuals experiencing homelessness or housing instability.

The ROSC Council reviewed updates on its three FY27 priority projects. The Hospital-Based Warm Hand-Off Committee has officially begun meeting and is focused on developing a local warm hand-off roadmap and clinical pathway, identifying best practices, creating educational materials for healthcare providers and community members, and gathering feedback from individuals with lived experience to guide implementation. The Second Chance Employment Committee reported continued collaboration with local employers, employer feedback collection, planning a Free Haircut Event with the Paris Rotary Club to assist job seekers, and development of a community awareness campaign highlighting the value of second chances. The Harm Reduction Committee reported distributing, in July, 39 boxes of Narcan through Edgar County.

DOPP sites and assembling 20 recovery resource bags for Horizon Health's Emergency Department containing treatment, recovery, and harm reduction information.

Agency updates were provided by community partners. CORS announced an upcoming event on August 7 and 8 from 10-5 each day at Aikman Wildlife Adventure. Family Guidance Center shared updates regarding youth substance use disorder services and naloxone education. Neighborhood Watch reported continued membership growth. HRC introduced new support groups and provided an update on the modified Living Room Program. Doorway to Hope shared updates on community assistance efforts and preparations for an upcoming school event. Doug Cochran announced an upcoming human trafficking awareness training. Celebrate Recovery reported continued attendance growth, Narcotics Anonymous announced upcoming women's recovery events, Lindsay Erie introduced Tasha Champion as the new representative, and Kyra Graham shared updates on the upcoming Back-to-School Bash.

The meeting concluded with reminders about upcoming events, including the Candlelight Vigil for Overdose Awareness Day on August 31, 2026, and the Community Wellness Walk and Recovery Picnic on September 12, 2026.

The next Edgar County ROSC Council meeting will be held on August 25, 2026, at Horizon Health Conference Room A with a Zoom option available.

Edgar County ROSC Second Chance Employment Committee Meeting Minutes

Date: July 8th, 2026

Time: 2:00–3:00 PM

Location: 504 E. Jasper St., Paris, IL

Attendees

- Nicki Hanks
- Natasha Freeman
- Alyssa Libry
- Jessica Parrill

Updates

Chamber of Commerce

Nicki shared an update regarding her initial meeting with the Chamber of Commerce. She reported that the meeting was productive and identified an opportunity to provide additional education about Second Chance Employment. The committee agreed that increasing awareness and understanding will help strengthen the relationship and create future collaboration opportunities with local employers.

Free Haircut Event

Nicki reported that the Rotary Club has expressed interest in supporting individuals seeking employment by providing free haircuts for Second Chance Employment participants. Nicki also invited representatives from the Human Resource Center (HRC) to attend a meeting with the Rotary Club on **July 9 at 1:30 p.m.** Additional details and next steps will be shared with the committee via email following the meeting.

Successes

The committee discussed continued community interest in expanding Second Chance Employment efforts and identified growing support from community organizations and employers interested in reducing employment barriers.

What's Next?

The committee agreed to launch a **monthly Second Chance Employment Awareness Campaign**, featuring a "Second Chance Spotlight" to highlight recovery success stories, supportive employers, and positive community partnerships.

Committee members will gather employer feedback over the next month to help guide future messaging and educational efforts.

Employer Outreach Assignments:

- **Jessica Parrill:** Contact Savoia's to gather employer feedback.
- **Nicki Hanks:** Contact McDonald's to gather employer feedback.
- **Natasha Freeman:** Contact Trilogy Security to gather employer feedback.
- **Alyssa Libry:** Contact the Human Resource Center (HRC) to gather employer feedback.

The committee will reconvene next month to review the feedback collected and begin developing a coordinated communication and awareness campaign.

Discussion

The committee discussed additional employers to engage in future outreach efforts, including Addis Healthcare and Carla on the Tracks. Members also discussed identifying an employer willing to share the story of an employee who was employed both before and after entering recovery. This perspective would demonstrate the positive changes recovery can have on an individual's work performance, reliability, and overall quality of life while helping reduce stigma surrounding Second Chance Employment.

Action Items

- Continue employer outreach and collect feedback.
- Attend Rotary Club meeting regarding the Free Haircut Event.
- Share Rotary meeting updates with the committee via email.
- Begin planning the monthly Second Chance Spotlight campaign.
- Compile employer feedback for review at the next committee meeting.

Next Meeting: August 12th, 2026, 2:00–3:00 PM.

Edgar County ROSC Hospital-Based Warm Hand-Off Committee Meeting Minutes

Date: July 15, 2026

Time: 2:00–3:00 PM

Location: Zoom

The Edgar County ROSC Hospital-Based Warm Hand-Off Committee met on July 15, 2026, at 2:00 PM via Zoom. Attendees included Nicki Hanks, Edgar County ROSC Coordinator; Jessica Parrill, Clark/Edgar Recovery Navigator; Michelle Creech, HRC Recovery Services Supervisor and Substance Use Therapist; Kyra Graham, Horizon Health Community Relations; Jenna Hayes, ROSC Council Program Supervisor at Hour House; Mariah with HOPE of East Central Illinois; Allie with Horizon Health; April; and additional community partners. Nicki welcomed attendees, apologized for issues with the original Zoom link, and facilitated introductions.

The committee reviewed its primary responsibilities, including helping develop a presentation to educate hospital staff and community partners about warm hand-off models, researching best practices and successful hospital-based programs, supporting local planning and implementation, and providing feedback to guide the initiative. A hospital-based warm hand-off was described as a person-centered process in which a patient with a substance use concern is directly connected to treatment, recovery support, peer services, or harm reduction resources before leaving the hospital. Important components include identifying patients with substance use concerns, discussing their needs and readiness for change, connecting them with a peer or treatment provider while they are still in the hospital, providing a live introduction, and offering follow-up support after discharge.

The committee reviewed information gathered from Gateway Foundation regarding its partnership with Sarah Bush Lincoln Hospital. Gateway developed its program after identifying gaps in care for patients who presented to the emergency department with substance use concerns. The program was designed to improve continuity of care by connecting patients to services before discharge instead of relying only on written instructions. Successful implementation required collaboration among hospital leadership, emergency department staff, behavioral health staff, social workers, case managers, and Gateway Foundation. Formal memorandums of understanding and workflow protocols were used to define partner responsibilities. Patients may be identified through positive alcohol or drug screenings, self-disclosure, overdose, withdrawal symptoms, or other substance use-related medical concerns. After the patient provides consent and signs a release of information, Gateway staff attempt to meet with the patient before discharge and connect them to treatment and recovery services. Gateway's program is supported through SOAR grant funding.

The committee discussed how a similar model could be developed in Edgar County. Horizon Health has requested a clear roadmap outlining when a patient is medically cleared, when crisis services should be involved, when peer recovery support should be contacted, how referrals should be completed, and who is responsible for follow-up after discharge. Samantha from Horizon Health has expressed interest in developing a process specifically focused on substance use disorder. Committee members agreed that the local model should build on existing services whenever possible rather than creating an entirely separate system.

The group discussed the differences between HRC Crisis Services and the Living Room Program. The Living Room is a voluntary drop-in service and is currently funded through the end of September 2026, with hours Monday through Friday from 8:00 AM to 7:00 PM. HRC Crisis Services operate separately

and remain available on call 24 hours a day. Horizon Health may contact the crisis team when a person is experiencing a behavioral health emergency. The crisis program also provides Continuing Crisis Response, in which another team follows up after the initial crisis contact to determine whether the individual made needed phone calls, scheduled appointments, attended appointments, and connected with recommended services. Questions remain about whether current crisis funding and service requirements allow the team to provide substance use-specific warm hand-offs. The committee recommended speaking with Tara and Horizon Health to clarify what qualifies as a crisis referral, whether people with substance use concerns are already referred to crisis services, whether staff are trained to address both mental health and substance use disorders, and whether peer recovery support could be added to the current process.

Michelle shared information about Rosecrance's recently opened Behavioral Health Urgent Care Center. The center provides behavioral health triage, crisis stabilization, coordination with law enforcement, collaboration with mobile crisis teams, and referrals to ongoing services. Michelle offered to connect Rosecrance staff with Horizon Health and local partners to discuss staffing, referral procedures, and lessons learned during implementation.

The committee emphasized the importance of connecting patients with services while they are still in the hospital. Members noted that an individual may be ready to accept help during an emergency department visit, but that willingness may decrease after discharge. A warm hand-off could include calling a provider with the patient, scheduling an appointment, helping complete an intake, or directly introducing the patient to a peer or treatment professional. The group agreed that this type of follow-through may be especially important for people who have visited the emergency department more than once or experienced repeated crises.

Treatment admission barriers were also discussed. Patients are often expected to complete lengthy telephone assessments and provide detailed information while they are ill, in withdrawal, emotionally distressed, or recovering from an overdose. Hour House currently partners with Safe Passage programs and prioritizes those referrals along with other priority populations. When Hour House cannot admit a Safe Passage participant, staff help contact other treatment providers so law enforcement officers are not responsible for making multiple referral calls. The committee discussed whether a similar agreement could be developed between Horizon Health and Hour House. A hospital-based agreement could give emergency department referrals priority consideration, allow Hour House staff to assist with referrals, reduce the burden on patients and hospital staff, improve the likelihood of treatment admission, and establish a clear plan when an immediate treatment bed is not available.

Nicki presented a draft patient experience survey for individuals with lived experience who have received emergency department care related to substance use. The survey asks why the individual visited the emergency department, what went well, what did not go well, whether the person felt respected and supported, what services were needed but not received, whether the person was connected to treatment or recovery services before leaving, what the emergency department could have done differently, and whether there is anything else the individual would like the committee to know. The committee recommended adding questions about the day and time of the visit, whether the original reason for the visit was substance use-related or another medical concern, whether substance use was identified through screening or self-disclosure, whether the person was offered help scheduling an appointment, whether there was follow-up after discharge, whether the person had visited the emergency department more than once for a similar concern, and what type of assistance the individual would have accepted during the visit. Nicki will revise the survey and distribute it to committee members. The survey will remain anonymous and will not request names or identifying information.

The committee also discussed collecting local data to better understand the need for a hospital-based warm hand-off program. Requested information may include the number of opioid-related, overdose-related, and substance use-related emergency department visits during the past six months or year, the number of repeat visits, EMS overdose responses, the time of day and day of the week when visits occur, and discharge outcomes or referrals provided when available. Allie stated that she may be able to pull an emergency department report but may need assistance identifying the correct diagnosis and discharge categories. Nicki will also ask Samantha about obtaining EMS call data. No identifying patient information will be requested.

Nicki shared Project POINT as an example of a successful hospital-based intervention. Project POINT stands for Planned Outreach, Intervention, Naloxone, and Treatment. The Indianapolis-based program connects people who experience an opioid-related emergency with peer recovery support, naloxone, harm reduction education, treatment referrals, and follow-up services. Nicki will include information about Project POINT with the meeting materials for members to review.

The committee discussed overdose resource bags currently provided to local EMS. These bags contain harm reduction supplies and information about treatment and recovery resources. Horizon Health requested that the bags also be made available in the emergency department after staff recently needed one for a patient. Nicki agreed to deliver overdose resource bags to the Horizon Health emergency department.

Before the next meeting, committee members will research successful hospital-based warm hand-off programs, rural models, peer recovery support in emergency departments, sustainable funding opportunities, hospital and treatment provider agreements, referral and follow-up protocols, models that use existing crisis teams, and barriers to treatment admission after an emergency department visit. Members were asked to identify practices that may be realistic and sustainable for Edgar County.

Nicki will revise and distribute the patient experience survey, connect Rosecrance representatives with Samantha at Horizon Health, connect Tara and HRC leadership with Horizon Health, ask Samantha about EMS overdose response data, deliver resource bags to the emergency department, share Project POINT information, continue collecting anonymous lived experience feedback, and explore a possible priority referral agreement with Hour House. Allie will determine whether Horizon Health can provide emergency department data related to opioid, overdose, and substance use visits. Michelle will identify the appropriate Rosecrance staff member to discuss the Behavioral Health Urgent Care model. Committee members will continue researching successful models, identifying possible funding sources, gathering feedback, and submitting agenda suggestions.

Potential topics for the next meeting include reviewing local emergency department and EMS data, discussing findings from program research, clarifying HRC crisis service eligibility and response procedures, reviewing the Rosecrance model, discussing a possible priority referral agreement between Horizon Health and Hour House, reviewing the revised patient survey, beginning the Edgar County clinical pathway and referral roadmap, identifying roles for each partner, discussing after-hours and weekend coverage, and exploring funding opportunities.

The committee closed by expressing appreciation for the participation and collaboration of all partners. Members acknowledged that developing a warm hand-off program will require shared learning, strong partnerships, and a unified approach. The next committee meeting is scheduled for August 19, 2026, at 2:00 PM.

PLE Subcommittee Meeting Minutes

Date: July 23, 2026

Attendees: Jackie Pope, Mikey Shanks, Melissa Witherspoon, Jacqui Miller, and Jessica Parrill were present.

Icebreaker:

The icebreaker question was, *“What’s one local resource that you have found especially helpful?”* Members shared several helpful community resources, including First Baptist Church, the Soup Kitchen, ROSC, NA, Blessing Boxes, and Fight by Faith.

Pack the Backpacks for a Better Future:

The committee finalized the dates for the Pack the Backpacks for a Better Future donation drive, which will run from July 20, 2026, through August 20, 2026. Responsibilities for checking donation locations were discussed. Melissa Witherspoon agreed to check First Baptist Church once a week. Jessica Parrill will check the Health Department and Lake Ridge. Jackie Pope will check Dollar General. The remaining locations will be divided among committee members at a later date.

Narcan Update:

The committee discussed potential locations for an additional Narcan site. It was brought up that The Rec would be a good location for a Narcan.

Upcoming Events:

The committee discussed upcoming events, including the **Candlelight Vigil** and **Recovery Picnic**. For the **Candlelight Vigil**, the committee will reach out to Ashley Board to request pictures of Blaine Grimes to include in the event. Jessica Parrill will print the pictures she currently has at Walmart next week.

For the Recovery Picnic, Jackie Miller agreed to provide the tie-dye kits for the activity. Jackie Pope will be responsible for handling forms and surveys during the event.

Backpack Outreach Event:

The committee discussed planning an outreach night to distribute the backpacks. September or October were discussed as possible timeframes, but a final date has not yet been determined.

Survey Outreach and Alcohol Awareness Campaign:

All members agreed to assist with survey outreach efforts. Both Jackie Pope and Jackie Miller agreed to share their recovery testimonies as part of the upcoming Alcohol Awareness Campaign.

Action Items:

Melissa Witherspoon will check First Baptist Church weekly. Jessica Parrill will check the Health Department and Lake Ridge and print photos for the Candlelight Vigil. Jackie Pope will

check Dollar General and assist with forms and surveys. Committee members will continue working on donation locations, outreach planning, and upcoming events.

Meeting Adjourned.

Next meeting August 27,2026, 504 Jasper St. Paris IL, 61944