



Spotlight on...

Dyanne Simpson, D.O., DSAMH Medical Director

The Division has a new Medical Director for the first time since Gerald Galucci was promoted to Medical Director of the Department of Health and Social Services. Dyanne Simpson, D.O., joined DSAMH in October, bringing with her a wealth of experience on the provider side of Delaware's community-based mental health system. Dr. Simpson was most recently employed by Recovery

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Quick Tips: Promoting Successful Peer Support Services

Maintaining a peer workforce can bring many benefits to your organization, your staff, and to the people you serve. Here are seven steps you can take to build and maintain a strong peer workforce:

- **Train all staff** on the role of peer providers and how to promote an agency culture of strength-based, holistic self-management.

- **Foster financial sustainability** by ensuring peer services meet

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System Overhaul Continues Behind Scenes

DSAMH continues to focus on improvements to the array of services and supports available to Delawareans seeking recovery from mental health and substance use (behavioral health) disorders. Individuals with serious persistent mental illness (SPMI) and co-occurring substance use disorders are among those in the "target population" of individuals identified in the Settlement Agreement between the State and the U.S. Department of Justice (USDOJ). Since the signing of the Settlement Agreement in July, 2011, Delaware's system of

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Greg Valentine, DPC Hospital Director

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Rosanne Faust, Assistant Director,
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Joseph Hughes, Director, Planning & Development

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Dara Schumaier, DSAMH Community Relations Officer
(and *Progress Notes* Editor dara.schumaier@state.de.us)

ASAM Training January 23

Dr. David Mee-Lee will again be offering a training on the new ASAM Criteria. If you missed the last training, this is your opportunity! As you know, **ASAM Criteria is used for all DSAMH programs and is an essential element for all EEU referrals.**

The training is 9 a.m. - noon on Thursday, January 23, on the Herman Holloway Health Campus, 1901 N. DuPont Hwy., New Castle, DE 19270, in in the Springer Building Training Rooms 1-2.

Please RSVP to Lois.Jensen@state.de.us

DSAMH Library Collection: Trauma Informed Care

Mental Health Transformational Grant staff have been busy augmenting the DSAMH Library's collections. The library now has an array of materials available that provide information on trauma, trauma-informed care, and trauma recovery. A list of books, DVD's , and CD's that are available in the library is included below. You can also find out what is available by going to the Delaware Library Catalog, located online at www.lib.de.us. By using the Advanced Search function, a search can be limited to the DSAMH library. However, other libraries, such as the DTCC and Wilmington University libraries, may have useful resources as well.

The DSAMH Medical Library is located in the Springer Building and is open by appointment Monday-Thursday from 8 a.m. - 4:30 p.m. The library also recently added copies of the newest edition of the ASAM criteria.

The American Society of Addiction Medicine (ASAM) criteria, also known as the ASAM patient placement criteria, are the result of a collaboration that began in the 1980s to define one national set of criteria for providing outcome-orientated and results-based care in the treatment of addiction. Today the criteria have become the most widely used and comprehensive set of guidelines for placement, continued stay and transfer/discharge of patients with addiction and co-occurring conditions. The ASAM criteria are required in over 30 states.

The Trauma collection is summarized below.

CDs and DVDs

Beyond Trauma Curriculum: A Healing Journey for Women by Stephanie S. Covington (CD)

Healing Trauma: Strategies for abused Women by Stephanie S. Covington

When Helping Hurts: Preventing and Treating Compassion Fatigue by Joyce Boaz (DVD)

Making Peace with Chronic PTSD by Marla Handy (DVD)

BOOKS

Nobody's Child by Marie Balter

No Secrets No Lies: How Black Families Can Heal From Sexual Abuse by Robin Stone

Trauma Stewardship: An Everyday Guide to Caring for Self While Caring for Others by Laura Van Dernoot & Connie Burk

Restoring Sanctuary: A New Operating System for Trauma-Informed Systems of Care by Sandra L. Bloom & Brian Farragher

Destroying Sanctuary: The Crisis in Human Service Delivery Systems by Sandra L. Bloom & Brian Farragher

Trauma and Recovery: The Aftermath of Violence--from Domestic Abuse to Political Terror by Judith Herman

Life after Trauma Second Edition: A Workbook for Healing by Dena Rosenbloom

Getting Past Your Past: Take Control of Your Life with Self-Help Techniques from EMDR Therapy by Francine Shapiro

Reclaiming Your Life from a Traumatic Experience: A Prolonged Exposure Treatment Program Workbook (Treatments That Work) by Barbara Rothbaum, Edna Foa, Elizabeth Hembree

Sources and Expressions of Resiliency in Trauma Survivors: Ecological Theory, Multicultural Practice Mary R Harvey (Editor), Pratyusha Tummala-Narra (Editor)

Compassion Fatigue: Coping With Secondary Traumatic Stress Disorder In Those Who Treat The Traumatized by Charles R. Figley (1995)

The Body Remembers: The Psychophysiology of Trauma and Trauma Treatment by Babette Rothschild

Creating Sanctuary: Toward the Evolution of Sane Societies, Revised

Edition by Sandra L. Bloom

The Courage to Heal 4e: A Guide for Women Survivors of Child Sexual Abuse 20th Anniversary Edition by Ellen Bass and Laura Davis

The Courage to Heal Workbook: A Guide for Women and Men Survivors of Child Sexual Abuse by Laura Davis

Waking the Tiger: Healing Trauma: The Innate Capacity to Transform Overwhelming Experiences by Peter A. Levine (Author), Ann Frederick(Contributor)

Violence in the Lives of Black Women: Battered, Black, and Blue by Carolyn M. West, Ph.D. (Ed.)

Madness: A Bipolar Life by Marya Hornbacher

Transition of Youth and Young Adults with Emotional or Behavioral Difficulties: An Evidence-Based Handbook Hewitt Clark ,Ph.D. BCBA, Deanne Unruh, Ph.D., Maryann Davis, Ph.D.

Sisters of the Shadow by Maxine Harris

The Twenty-Four Carat Buddha and Other Fables: Stories of Self-Discovery by Maxine Harris

Using Trauma Theory to Design Service Systems: New Directions for Mental Health Services, Number 89 (2001) Maxine Harris (Ed.) and Roger D. Fallot (Ed.)

Healing the Trauma of Abuse: A Women's Workbook by Mary Ellen Copeland, MS, MA and Maxine Harris, Ph.D.

Sexual Abuse in the Lives of Women Diagnosed with Serious Mental Illness by Maxine Harris & Christine L. Landis

Women of the Asylum: Voices from Behind the Walls, 1840-1945 by Jeffrey L. Geller and Maxine Harris

Down from the Pedestal: Moving Beyond the Idealized Images of Womanhood by Maxine Harris

MONOGRAPH

Creating Cultures of Trauma-Informed Care (CCTIC): A Self-Assessment and Planning Protocol Roger D. Fallot, Ph.D. and Maxine Harris, Ph.D. July, 2009

System Overhaul *continued from page 1*

care has been under ongoing revision and enhancement to meet the DSAMH's goals to provide trauma-informed, person-centered, recovery-oriented care that meets the requirements of the USDOJ Settlement Agreement.

Of especial interest is assuring that individuals with SPMI and co-occurring substance use disorders can access appropriate treatment in the least restrictive environment. Increased attention is being paid to the struggles faced by individuals seeking recovery from addictions and the need to provide an array of services that are "best practices," focused on harm reduction, geographic accessibility and inclusive of community and peer supports that offer individuals the greatest chance for successful recovery. Important changes will

come with new contracts for the substance use disorder treatment system. This includes expansion to all three counties of withdrawal support services, including ambulatory, social and clinically supervised detoxification services. Under the existing system, medically-supervised detoxification services have been available only in New Castle County (with 24/7 transport from Kent and Sussex). Variety and types of housing and case management supports also will change.

The Division has concentrated significant time on efforts to amend Delaware's State Medicaid Plan to allow the State to pull down more Federal funds. The amended Plan will better align funding with services in a way that allows Delaware to maximize Federal participation and decrease reliance on State

General Revenue to support behavioral health services. This shift in funding will make room for some expansion of services, which is especially needed on the substance use treatment system side.

Additionally, the State has been working on a Medicaid 1915i-like 1115 Demonstration Waiver Amendment to support a new home and community-based services initiative called PROMISE (Promoting Optional Mental Health for Individuals through Supports and Empowerment). The goal of PROMISE is to improve State Plan behavioral health services care coordination for eligible clients with SPMI and co-occurring substance use disorders through the MCOs. It aims to improve clinical and recovery outcomes and increase the State's capacity to contract for and deliver community-based services and supports. PROMISE adds services with coordinated oversight provided through case managers based in the State's Community Mental Health Centers. These care managers assure that clients receive thorough independent assessments and that the person-centered recovery plans they create in partnership with their providers are monitored, needed services are provided, supports are identified and the plan of care is constantly adjusted in response to ongoing assessment, changing client goals and levels of functioning. This new initiative is an important part of the Division's overall move away from direct care and towards an emphasis on resource management, regulatory and provider oversight, quality assurance and a truly responsive system of care that is, as much as possible, rooted in home and community-based care provision.

Top Three Reasons Adults Did Not Get Mental Health Treatment in 2012

- They worried about *affording the cost*.
- They thought they could *handle the problem* without treatment.
- They *did not know where* to receive services.

SAMHSA's 2012 National Survey on Drug Use and Health (NSDUH) http://www.samhsa.gov/data/NSDUH/2k12MH_Finding-sandDetTables/Index.aspx

Peers *cont'd from page 1*

criteria for reimbursement like Medicaid billing (when approved for direct billing by the specific state) and have clear guidelines on how to bill for these services.

• **Address boundary issues** such as if peer providers need to receive mental health or substance use services outside of the agency they work for. If peer providers choose to continue receiving these services where they work, ensure their files are kept confidential to only approved staff.

• Require peer providers to complete **formal training** that

teaches them implementation of holistic self-management skills.

• **Write job descriptions** for peer providers to ensure they have meaningful, defined roles within the care team.

• **Train supervisors** on the role of peer providers and how to support them.

• **Implement personal self-management tools** like a Wellness Recovery Action Plan (WRAP) for peer providers to promote their ongoing recovery and whole health.

<http://www.integration.samhsa.gov/about-us/esolutions-newsletter/esolutions-december-2013#quick>

All About Us—DSAMH Staff News, Comings and Goings

DSAMH welcomes new staff:

Patricia Brooks
Joycelyn Bennett-Ojatonwase
Joseph Corletta
Marilyn Hughey
Jennifer Garcias
Natalie Watson
Douglas Hamilton
Lawrence Kauderer
Tanya Tucker
Glendolyn Newmuis
Ebonese McManus
Orlanda Johnson
Christina Jones
Amanda Pizzi
Jerome Powell
Ada Cunningham
Yvonne Owens
Roberta Harden
Crystal Williams
Terry Foster
Melissa Warren
Gerard McHale
Barbara Jordan-McGill
Raymond Bash, Sr.

and said farewell to...

Joseph Grant
Ruthea Britt-Gales
LaVern Edwards
Sarah Jones
Anthony Kelson
Tasha Brown
Charles Nyangwara
Anna Chenjo
Clara Hollis
Randy Jackson
Dana Lynn George
Kirsten Schneider
Helen Hanlon
Marcia Lis
Dalieta Mears
Kennedy Muriuki
Richard Lombino

Community Notes

News and Updates Received from DSAMH Partners

DSAMH Progress Notes is happy to spread your news to our partnercommunity. Just email the editor with anything you'd like to propose we include in our next issue.

Received from Dave Parcher:

For introductions, I am the Executive Director of the organization known as **Kent Sussex Counseling Services**. Our organization contracts with DSAMH to provide substance use treatment and prevention services. First and foremost, I would like to take this opportunity to express my appreciation for your new letter. You do a great job on it. I enjoy reading it and find it very informative.

... I would like to ask that you include an announcement of our organization's name change. **Effective Friday September 6th 2013 our name has changed** from the Central Delaware Committee on Alcohol and Drug Abuse trading as Kent Sussex Counseling Services to **Kent Sussex Community Services**. Our organization has traditionally been a treatment center for substance use (SU) employing both non medication and medication assisted outpatient treatment to include counseling since 1970. Although outpatient SU treatment continues to be a major component of our organization, our constellation of services has evolved over the years to a community services focus that includes long term care case management, prevention, transportation, and home based services. We believe our new name allows us to discontinue using a trade name that is different from our corporate name and have a name that is more reflective of our current mission.



From the Delaware Consumer Recovery Coalition:

Keith Miller joined the staff of the Delaware Consumer Recovery Coalition as the Communications and Logistics Specialist. He brings a wealth of skill that will enhance our ability to communicate the DCRC's advocacy and wellness initiatives around the state. You can reach him at keith@delawarerecovery.org or call our main phone line at (302) 689-DCRC. Help welcome him aboard!

Please look for our electronic Weekly Updates which come to you by email at the beginning of each week. If you do not presently receive the Weekly Update and would like to sign up, send an email to info@delawarerecovery.org and we will add you to our list. The Weekly Update will also be posted to our website (www.delawarerecovery.org) along with our events and civic engagement opportunities.

Our Grassroots Exchange meetings are a high priority of ours, and they are now happening on the fourth Thursday of every month. Check the website for details: www.delawarerecovery.org

Recovery Month 2013

Thank you to Sussex County TASC's Matt Moore, Blair Rodgers and Kay Baker, along with Mobile Crisis Intervention Services-So. Del. Director Jean Burgess, Training Office staff Chris Knox, and a number of Central Office staff and other volunteers for participating on DSAMH's softball team at the 2013 Annual Recovery Month Softball Tournament, organized each year by The Lighthouse, Brandywine Counseling and Community Services, and supported by a DSAMH minigrant.

Service providers fielded five teams composed of staff and clients. DSAMH had 13 staff members participate in the tournament. DSAMH won one game and lost two, scored 14 runs with five home runs in total and placed fourth in the tournament but vowed to do better next year. The event provides a great day playing softball and meeting many, many DSAMH clients. More importantly, DSAMH was grateful for the opportunity it provided DSAMH staff to show support and appreciation for the efforts of dozens of staff of our Southern Delaware substance abuse providers.

Senior DSAMH staff also took part in the Recovery Rally in downtown Wilmington that was sponsored by the Rick vanStory Recovery Center on the same day, September 27.



How big a serenity prayer circle can you make with a half-dozen softball teams?



Jean Burgess watches the first game



Thresholds at bat; Georgetown TASC's Kay Baker catches



DSAMH's Marc Richman hits one.

DSAMH Training Opportunities

WORKSHOP OPPORTUNITIES THROUGH March 2014

Remember: Check DTOOL regularly as new opportunities are added weekly!

DSAMH Training Office On Line at <http://dtool.dhss.delaware.gov> is accessible for everyone to manage your learning personally. Use this tool to change your contact information, obtain a copy of your transcript, sign up and cancel workshop attendance, and see what is being offered in the months ahead.

CPR Heartsaver

January 6 or 21 or 28 or February 3	9 a.m.	Lower Sussex Training Rm., H. Holloway Campus (NCC)
or February 17 or March 17	1 p.m.	Lower Sussex Training Rm., H. Holloway Campus (NCC)

CPR: BLS for Healthcare Providers

January 13 or 27	9 a.m.	Lower Sussex Training Rm. H. Holloway Campus (NCC)
or February 10		

Overview of DSM – 5 Sub Abuse & Gambling

January 24	9 a.m.	Hampton Inn, Rehoboth Beach (SC)
January 30	9 a.m.	Mt. Salem United Methodist Church, Wilmington (NCC)

Intro to Word for Windows

January 8	10 a.m.	Computer Training Center (NCC)
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Advanced Word for Windows

Feb 11	10 a.m.	Computer Training Center (NCC)
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Intro to Excel

Mar 13	10 a.m.	Computer Training Center (NCC)
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HIV/STD/Hepatitis

HIV/STD/Hepatitis C 201		
Feb 11	9 a.m.	Hudson State Service Center, Newark (NCC)
HIV/STD/Hepatitis C Presentation		
February 13-14	9 a.m.	Hudson State Service Center, Newark (NCC)
HIV/STD/Hepatitis C 101		
Mar 11	9 a.m.	Hudson State Service Center, Newark (NCC)

The Lessons of Racism of the Well-Intended

Feb 20	9 a.m.	Hampton Inn, Rehoboth Beach (SC)
Feb 21	9 a.m.	Mt. Salem United Methodist Church, Wilmington (NCC)

Get Hip to HIPAA

If a client at DPC has a reportable contagious illness, DPC must report the occurrence to the CDC as required by health laws. HOWEVER, it is not permissible for the information to be given to anyone else. If a staff member is exposed to

the illness, only that information may be given to others, including the medical staff treating that staff member. It is a violation of HIPAA to disclose the name of the client who may have infected the staff person to third parties, including Human Resources.

Mandt System®

The Mandt System, Inc., developed The Mandt System®--an international staff development and training process-- has certified trainers in from most American states, Canadian provinces of Prince Edward Island, Alberta and Ontario, Hong Kong, and Australia's Victoria, as well as most other states. Certified trainers have used The Mandt System® in ways that brought dignity, respect, integrity, safety, and most of all hope, to the people they served. These people work in schools, mental health centers, police academies, psychiatric hospitals, after school programs, homeless shelters, group homes and juvenile correction centers, just to name a few places this system is used. The ultimate goal of this system is ensuring safety for all while promoting an organizational commitment toward restraint reduction and elimination.

In all these various locales, trainers have taken the same materials, the same principles, the same content,

and done three things: Amplify, Adapt, Apply. Let's take a few minutes to talk about each one of these ideas and how they have been effective in these settings. Adapt and Apply will be in subsequent DSAMH newsletters.

Amplify – One of the master trainers' son is a musician, and plays a variety of instruments, but his favorite is the guitar. He usually plays acoustic guitar, but every so often he plugs into an amplifier. An amplifier does much more than make a sound louder – it adds depth, richness, warmth, and volume. When trainers amplify The Mandt System®, they take the "music" we have written, and use their own lives, their own experiences to teach the program. Instead of saying "Mandt believes," they say "we believe." In our program, we consciously focus on teaching principles, not techniques. These principles are then amplified by the wealth of experience, knowledge, and passion of each trainer.

When The Mandt System® is amplified in this way, the words in the manual, the ideas in the PowerPoint™ become real. Without this amplification, the material we teach would not be nearly as effective as it has been. The outcomes people share – lowered restraint rates, lowered injury rates, increased feelings of safety and morale – all start with Amplification.

Dr. Simpson *continued from page 1*

Innovations, Inc., working at their Wilmington Recovery City location and serving Arizona-based RI as RI's Medical Director for all its Delaware operations. Prior to that, she was affiliated with Connections and with Johns Hopkins.

A lifelong Delawarean, Dr. Simpson enjoys traveling and shares her abode with a three-legged cat named Finnigan.

DSAMH welcomes Dr. Simpson and looks forward to her many contributions to further Delaware's excellence in care provision!



JANUARY DHSS MOBILE BLOOD DRIVE: WE NEED YOUR HELP!



In memory of the spirit of Dr. King, DHSS and DPH will host mobile blood drives at Holloway and in Dover as part of the MLK Day commemoration Jan. 13-20, organized by the State Office of Volunteerism. To make these blood drives go, we need your support.

For State employees, donating blood is counted as part of your DHSS workday. Please check with your supervisor before registering to make sure you can be spared during the time you are away. And then it's simple as making an appointment – either by calling 888-8BLOOD8 or signing up online at www.delmarvablood.org and using sponsor code: HHS

Tuesday, January 14, 9 a.m.-1 p.m.

Division of Public Health parking lot
417 Federal St., Dover
(40 sign-ups needed)

Friday, January 17, 9 a.m.-3 p.m.

Springer Building Gym, Herman Holloway Campus
1901 N. DuPont Hwy (US 13), New Castle
(75 sign-ups needed)

For more information, please email jill.fredel@state.de.us or call **255-9047**.

Thank you for your service to others!

NEW: Centralized Intake for Homelessness

Delaware's Homeless Prevention and Response System now has coordinated statewide referral and assessment process called Centralized Intake. This program, designed specifically to improve the ability of persons in housing crisis to access services that best meet their needs (and for which they are eligible) launched on January 6 and operates weekdays from 8 a.m. until 5 p.m. Here's how it works:

If you/someone you know is homeless:

- Call 2-1-1. Tell the Delaware 2-1-1 operator about the housing crisis. Answer a few questions to determine who can help (a prevention specialist in the community or a housing specialist).
- If referred to a housing specialist, an intake and assessment will be set up. Be sure to leave clear contact information if you have to leave a message: your call will be returned that same day.
- Based on the assessment, the person receives a referral to the most appropriate services for which s/he is eligible (e.g., shelter, temporary housing, permanent supportive housing, other supportive services, etc.).

Kitara Bingham is the Centralized Intake Program Director, responsible for implementing the program. Four mobile housing specialists--two in New Castle County and one each in Kent and Sussex Counties-- will perform intakes and assessments. Data collected via this new intake process will allow Delaware to identify both strengths and gaps in the service system, while also ensuring each person receives services best suited to individual needs. To learn more about the Homeless Planning Council and Centralized intake, please call Susan Starrett at 302.654.0126 ext. 101.



Prevention! It's SAMHSA's top priority! The calendar below is part of an exceptional publication, *Month-by-Month Prevention and Promotion Call to Action and Planning Guide: A Comprehensive Guide to Help Plan Your Monthly Substance Abuse Prevention and Mental Health Promotion Awareness Events*. This booklet was produced by the 2011-13 Cohort of the CSAP Prevention Fellowship Program. DSAMH's 2011-13 Prevention Fellow, Usoamaka Aneke contributed to this important work which is chock-full of ideas. You can access the entire 174-page document online at: <http://dhss.delaware.gov/dhss/dsamh/preventresources.html>.

YEARLY AWARENESS CALENDAR AT-A-GLANCE

<p>JANUARY</p> <p><i>Focus On:</i> Fetal Impact Awareness</p> <ul style="list-style-type: none"> • National Birth Defects Month • National Drug Facts week (Last Week) 	<p>FEBRUARY</p> <p><i>Focus On:</i> COA Awareness</p> <ul style="list-style-type: none"> • National Heart Month • National Wear Red Day (1st Friday) • Children of Alcoholics Week (3rd Week) 	<p>MARCH</p> <p><i>Focus On:</i> Drugs and the Brain Awareness</p> <ul style="list-style-type: none"> • Brain Injury Awareness Month • Inhalant & Poison Awareness Week (3rd Week) • Kick Butts Day (3rd Wednesday) 	<p>APRIL</p> <p><i>Focus On:</i> Alcohol Abuse Awareness</p> <ul style="list-style-type: none"> • Alcohol Awareness Month • National Alcohol Screening Day (1st Thursday) • Alcohol Free Weekend (1st Weekend) • World Health Day (1st Saturday)
<p>MAY</p> <p><i>Focus On:</i> Mental Health Promotion Awareness</p> <ul style="list-style-type: none"> • Mental Health Month • National Children's Mental Health Awareness Week (2nd Week) • ATOD Related Birth Defects Week (2nd Week) • National Prevention Week (3rd Week) • World No Tobacco Day (May 31) 	<p>JUNE</p> <p><i>Focus On:</i> Marijuana Use and Abuse Awareness</p> <ul style="list-style-type: none"> • International Day Against Drug Abuse (June 26) • National HIV Testing Day (4th Wednesday) 	<p>JULY</p> <p><i>Focus On:</i> Rx. Drug Abuse</p> <ul style="list-style-type: none"> • World Hepatitis Day 	<p>AUGUST</p> <p><i>Focus On:</i> Your Community Needs</p> <ul style="list-style-type: none"> • International Overdose Awareness Day (August 31) • National Night Out (August 6)
<p>SEPTEMBER</p> <p><i>Focus On:</i> Recovery Awareness</p> <ul style="list-style-type: none"> • National Recovery Month • FASD Awareness Day (2nd Sunday) • National Suicide Prevention Week (2nd Week) • World Heart Day (September 30) 	<p>OCTOBER</p> <p><i>Focus On:</i> Prevention Awareness</p> <ul style="list-style-type: none"> • National Substance Abuse Prevention Month • Mental Health Awareness Week (2nd Week) • World Mental Health Day (October 10) • College Alcohol Awareness Week (3rd Week) • National Red Ribbon Week (4th Week) 	<p>NOVEMBER</p> <p><i>Focus On:</i> Tobacco Awareness</p> <ul style="list-style-type: none"> • Lung Cancer Awareness Month • COPD Awareness Month • Great American Smoke-out (3rd Thursday) • International Survivors of Suicide Day (November 17) 	<p>DECEMBER</p> <p><i>Focus On:</i> Drinking, Drugs & Driving Awareness</p> <ul style="list-style-type: none"> • National 3-D Month (Drugged, Drinking & Driving) • World AIDS Awareness Day