

April 2024



Strengthening Children and Families through Prevention and Intervention Strategies

A Court and Community-Based Approach

Acknowledgments

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The points of view expressed in this report are those of the NCSC project team and do not necessarily represent the official position or policies of the <u>Kentucky Judicial Commission on Mental Health</u>.

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INTRODUCTION

Introduction

The Juvenile Justice Workgroup of the Kentucky Judicial Commission on Mental Health (KJCMH) participated in a virtual Juvenile Justice Upstream mapping process in July and August 2023. The effort was led by the Honorable Lisa Jones with the support of the Kentucky Administrative Office of the Courts. Several court, agency, and community partners participated in three virtual mapping meetings, which were informed by a pre-survey. This document describes the context around Kentucky engaging in Upstream, describes the Upstream model, presents the final Upstream map, and documents the priorities action plans.

Kentucky Judicial Commission on Mental Health

The KJCMH was established on August 11, 2022, by the Kentucky Supreme Court to develop, implement, and coordinate initiatives designed to improve the courts' interaction with and the administration of justice for individuals with mental illness, substance use disorders, and intellectual disabilities. It also seeks to educate the general public about accessing available court services and programs. The KJCMH is comprised of members from the executive, judicial, and legislative branches of government. The history and origination of the KJCMH is summarized in this report.

Common impediments, as identified by the Kentucky Supreme Court, include but are not limited to:

- Overcrowded dockets that strip courts of sufficient time to thoughtfully consider the multiple issues that persons with mental illness, substance use disorders, and/or intellectual disabilities present;
- A lack of adequate education and training in identifying and addressing the unique needs of individuals with mental illness, substance use disorders, and/or intellectual disabilities present;
- A lack of communication, coordination, and collaboration between and among the courts, the state, and local mental health providers, law enforcement, attorneys, and mental health advocates;
- A need for specialized, multidisciplinary, legal training, and the means to develop and share best practices;
- A lack of technology to efficiently manage dockets and to track and analyze cases and caseloads involving mental health, substance abuse disorder, and/or intellectual disability challenges; and
- A lack of community resources to provide adequate services to minors, adults, and families.

The goals, purposes, and responsibilities of the commission are to:

- Develop a strategic plan for strengthening courts and the administration of justice in relation to Kentucky's courts;
- Identify and assess current and future needs for the courts to be more effective in achieving positive outcomes for Kentuckians with mental illness, substance use disorders, and intellectual disabilities;
- Promote best practices and programs that are data-driven, evidence-based, and outcome-focused;
- Improve collaboration and communication among courts and the mental health system stakeholders;

KENTUCKY UPSTREAM PLANS

- Endeavor to increase resources and funding and maximize the effective and efficient use of available judicial system resources;
- Promote appropriate judicial training regarding mental health, substance use disorder, and intellectual disabilities, systems, and services;
- Educate the general public about accessing available court services and programs;
- Establish a collaborative model that will continue systemic improvement within the judiciary beyond the tenure of individual commission members; and
- Provide regular progress reports to the Supreme Court of Kentucky.

The KJCMH is comprised of 75 representatives from the judicial and legal communities; the juvenile, criminal, and child protection systems; the legislature; the business community; organizations with a substantial interest in mental health matters; and other state and local leaders who have demonstrated a commitment to behavioral health, including mental health, substance use, and intellectual disabilities issues that affect Kentuckians. A complete list of the KJCMH members and its organizational structure can be found in <u>Appendix B.</u>

The Executive Committee oversees three committees: the Criminal Justice Committee, the Civil and Family Justice Committee, and the Treatment and Access Committee. Each committee has several workgroups to address specific subject matter such as Prearrest/Diversion, Competency Restoration, Juvenile Justice, Guardianship and Commitment, Domestic Violence, Dependency, Neglect and Abuse, Strengthening Communities, System Mapping, and Court Responses to Mental Health and Intellectual and Development Disabilities.

The KJCMH tasked the Juvenile Justice Workgroup of the Criminal Justice Committee with considering the work of the Committee as it relates specifically to juvenile justice. The Juvenile Justice Workgroup, led by Judge Lisa Jones, created a workplan to guide their efforts based on three defined needs:

- 1. There is a need to enhance communication and collaboration among child-serving agencies.
- 2. There is a need to standardize/clarify practice for the involuntary hospitalization of juveniles and its associated statutes in KRS Chapter 645.
- 3. The need to conduct SIM Mapping for the Juvenile Justice System.

With needs defined, the Juvenile Justice Workgroup identified opportunities to begin addressing each of these needs.

- Research best practices in communication efforts; explore barriers preventing open communication or collaboration; ensure all vested partners are included in the conversation
- Research statutes related to the involuntary hospitalization of juveniles; survey judges on their use of KRS 645; collect and share relevant court data associated with KRS 645

KENTUCKY UPSTREAM PLANS

Partner with National Center for State Courts; establish Kentucky pilot site with Upstream

The Juvenile Justice Workgroup developed action plans for each defined need, considering what concrete next steps the identified opportunities could support. The next steps corresponding to each defined need are to:

- Create and publish a Communication and Collaboration Framework to share with local communities and court partners;
- Provide legislative recommendations to the Commission for the 2024 session based on findings from research and data collection and
- Hold SIM Mapping Events.

The third defined need and its corresponding next step was built upon prior SIM Mapping work NCSC conducted with the Commission. On December 13, 2022, NCSC conducted a presentation on the Sequential Intercept Model and Leading Change for the KJCMH to discuss the SIM, review the three phases of implementation, and plan for the statewide SIM Mapping Workshop.

Since the Juvenile Justice Workgroup developed its workplan, NCSC has conducted three virtual juvenile justice mapping workshops with the Workgroup using an adaptation of NCSC's Upstream framework. During the virtual settings, NCSC provided an overview of the Upstream, Workgroup members shared relevant data, and participants identified state behavioral health initiatives, policies and legislations, and resources focused on children and justice-involved youth. Participants also identified gaps, and opportunities for system improvement. In the final mapping session, participants identified priorities from the opportunities identified and developed action plans.

The following sections of this report include summaries of the Upstream framework and juvenile justice-specific components, and the results of the juvenile justice mapping workshops held by the Juvenile Justice Workgroup are described in the following sections.

Upstream Overview

Upstream is a community-based approach that leverages court resources, judicial leadership, and child welfare agency partnerships to enhance community collaboration through state and local coordination, community mapping, and action planning. This collaboration aims to strengthen communities, prevent child maltreatment and out-of-home placement, reduce court involvement, and support safe and healthy families.

Upstream acknowledges that the health and well-being of children and families is the responsibility of all community partners and is not limited to child welfare agencies, juvenile probation, or the court. The court and the child welfare agency are critical partners in this work, but Upstream's vision cannot be actualized without including all community stakeholders.

By their nature, courts and youth serving agencies have a vested interest in achieving positive outcomes for children and families and ensuring that all families have what they need to thrive. When these entities work together with the community at the table, their ability to support all families is magnified. Judicial convening power is well documented, and the Upstream framework recognizes the court as a convener of stakeholders and a leader of system improvement. The Upstream framework leverages this convening power to unite cross-system partners at the state and local levels.

The Upstream framework is inspired by the Sequential Intercept Model (SIM) and informed by the public health model of prevention, social determinants of health, and the risk and protective factors for child maltreatment and justice system involvement. Read about the principles, mission, and goals of Upstream in <u>Upstream: Strengthening Children and Families through Prevention and Intervention Strategies</u>.

The Upstream framework drives the discussion at the Mapping Workshop. It includes four domains: Community, Families with Risk Factors, Families with Allegations, and Families with Court Involvement. Upstream was initially envisioned to focus narrowly on the child welfare system; however, given the overlap in families involved in child welfare and the justice system, NCSC has expanded Upstream to include both child welfare and juvenile justice. The domains of Community and Families with Risk Factors are the same for child welfare and juvenile justice mappings, while the domains of Families with Allegations and Families with Court Involvement differ between the populations.

Kentucky is a pioneer in this area, as not only is it the first Upstream pilot site to take on juvenile justice mapping, but they are also the first Upstream pilot site to take on statewide mapping. Our experience with Kentucky's statewide juvenile justice mapping validated our decision to combine child welfare and juvenile justice mapping. However, when the virtual statewide mapping occurred, we had not yet fully integrated the child welfare and juvenile justice

UPSTREAM OVERVIEW

domains. Instead, Kentucky's juvenile justice mapping was completed using the service types and points of prevention and intervention defined below.

Juvenile Justice Upstream Overview

Recent studies suggest that at least half of the youth who are juvenile justice system involved have also touched the child welfare system at some point in their lives. Further, more than half of youth in foster care, by age 17, have experienced an arrest, conviction, or overnight stay in a correctional facility. Youth involved in both systems tend to possess more risk factors and fewer protective factors than those involved in one system. These youth also have higher rates of recidivism than youth who are not dually involved.

The overlap between social determinants of health (SDOH) and criminogenic risk factors for justice system involvement highlights the interconnectedness of community resources and outcomes for young people. Social determinants of health encompass a range of environmental, economic, and social factors that influence an individual's well-being and health outcomes. These determinants include access to education, socioeconomic status, family support, and community resources. Children exposed to adverse SDOH, such as poverty, unstable housing, and limited access to quality education, are more likely to experience toxic stress, which can increase the risk of "...developing poor physical, behavioral, socio-emotional, and cognitive health," similar to some criminogenic risk factors. This link between SDOH and poor behavioral and socio-emotional health underscores how systemic inequalities and disadvantages create an environment in which some young people are more likely to experience criminogenic risk factors that can lead to delinquent behavior and justice system involvement.

Principles of Effective Intervention: Risk, Need, and Responsivity^v

According to the Risk Principle, youth with the highest level of criminogenic risk should receive the most intensive services; conversely, youth with lower levels of criminogenic risk should receive fewer and less invasive services. Youth with low criminogenic risk – often experiencing their first encounter with law enforcement or charged with non-violent offenses - are more likely to self-correct. Intensive involvement in the justice system and required services may unintentionally and negatively impact protective factors such as school connectedness, employment, and positive peer connections. Thus, communities should have a continuum of support and services available to address various risk levels.

The Need Principle suggests that each youth in the justice system has certain risk factors that, if addressed, can reduce the likelihood of reoffending. These criminogenic needs are primarily dynamic and are amenable to change through services and intervention. Communities should ensure that youth can access services and support that target these criminogenic needs. The dynamic criminogenic need factors for youth are:

- Attitudes belief systems that generally fall outside of societal norms and acceptance (anti-social)
- Personality skill deficits resulting in poor decision-making, impulsivity, and other cognitive thinking errors

JUVENILE JUSTICE UPSTREAM OVERVIEW

- Peers not only the presence of anti-social peers but also the lack of pro-social peers
- Leisure/Recreation lack of prosocial leisure/recreation activities
- Education
- Substance Use
- Family the presence of an anti-social family and the lack of a pro-social family.

Further, the Responsivity Principle suggests that interventions must address specific characteristics that might affect a young person's response to treatment, such as their learning style, level of motivation, mental health needs, and exposure to trauma.

Notably, many criminogenic risk factors overlap SDOH. For example, children growing up in under-resourced neighborhoods without access to pro-social activities or high-quality education experience both risk factors that may lead to criminal behavior and deficient SDOH that may lead to poor health outcomes. Additionally, trauma resulting from adverse childhood experiences, which poor SDOH can exacerbate, may lead to emotional and behavioral problems that contribute to criminal behavior. vi

Similarly, the criminogenic risk factors for children overlap with many family and environmental risk factors for maltreatment. Criminogenic risk factors, as stated above, often include anti-social attitudes, substance misuse, association with delinquent peers, and poor academic achievement. These same risk factors are associated with an increased risk of child maltreatment within a family. For instance, parents struggling with substance abuse or experiencing trauma may be less equipped to provide a safe and nurturing environment for their children, potentially leading to neglect or abuse. This association happens the other way, as well; children who experience maltreatment, whether it be physical, emotional, or sexual abuse, may develop trauma-related issues, behavioral problems, and a disrupted family environment. These experiences can, in turn, increase their susceptibility to delinquent behavior by "...altering biological processes and interfering with development in areas of the brain related to the stress response system, emotion processing and emotion regulation, learning and memory, and cognitive functioning." The overlap between criminogenic risk factors and risk factors for maltreatment highlights the importance of adopting a comprehensive approach to addressing the needs of children, families, and communities.

Efforts to support children involved in the juvenile justice system must consider not only their individual criminogenic risk factors but also the underlying familial and environmental factors that contribute to their circumstances. A holistic approach is essential to create a community where all children can thrive.

Process for Juvenile Justice Upstream Mapping

The virtual juvenile justice mapping process began with a survey disseminated to Workgroup members. The survey asked respondents to identify existing initiatives and statewide and local programs in nine categories encompassing the range of policies, practices, and services to address criminogenic risk and bolster protective factors.

Family Engagement. Family engagement is the process of building and strengthening relationships with and within families. Family environments that support positive development prevent community and interpersonal violence and have been associated with positive life outcomes for young people. Family engagement initiatives set standards for and promote the engagement of parents and guardians in developing systemwide policies and programs. On the local level, family engagement practices aim to eliminate barriers and challenges to family participation and build effective relationships among family members and system partners.

Family Support. When individuals and families have their basic needs met, family members experience less stress and improved well-being across all life domains. Family support initiatives advocate for assistance to families with basic needs such as housing, food, and medical care, while local family support programs assist families directly.

Mentoring. Mentoring is a consistent, prosocial relationship between a caring adult or older peer and one or more youth. Access to and participation in consistent mentoring are protective factors that reduce a young person's likelihood of community and interpersonal violence and future justice involvement. Statewide mentoring initiatives set standards and promote mentoring programs that provide direct connections to mentoring relationships for youth who may not naturally have access to those relationships.

Screening. A screening tool is a structured checklist or questionnaire to indicate the need for further assessments. Screening tools are commonly used in education and medical settings but may also be used at various points in the justice system to identify the need for further assessment in the areas of mental health, trauma exposure, substance use, food insecurity, and family violence. Courts may also use a screening process to identify related cases. Statewide screening initiatives require consistent screening tools and response protocols, while local screening practices may vary depending on where and when the screening occurs and the tool used.

Diversion. Young people can be diverted from penetrating the justice system at several points, including in response to school-based behaviors, pre-arrest contact with law enforcement, juvenile court intake, and even after adjudication. Statewide diversion initiatives or policies support similar diversion processes across jurisdictions, while local diversion efforts may include specific protocols, programs, or partners.

Behavioral Health. Behavioral health encompasses mental health and substance use prevention, diagnosis, and treatment. Behavioral health initiatives promote accessibility of high-quality, effective, and timely behavioral treatment across the state, while local behavioral health programs provide case management and direct service care to individuals.

Educational and Vocational Services. School connectedness, academic achievement, and employment are protective factors that reduce a young person's future involvement in the justice system. Statewide initiatives focused on enhancing educational and vocational opportunities for young people establish standards or promote specific programs. Local examples of educational and vocational services provide direct training and support to young people.

Prosocial Activities. The availability of safe spaces for recreation and healthy activities has been linked to positive health and life outcomes. Similarly, prosocial pastimes and positive peer groups have also been linked to positive life outcomes and preventing future involvement in the justice system. Statewide initiatives focused on prosocial activities leverage funding, investments, and policies to support and sustain the infrastructure that enables prosocial activities to be accessible to all communities. Local examples of prosocial activities include safe outdoor and indoor spaces and programming that allow community members to engage in activities that benefit them and their community.

Social-Emotional Skills. Activities that support social and emotional learning have been shown to prevent entrance into the justice system and reduce subsequent offending for justice-involved youth. Anti-social thinking and beliefs are highly correlated with delinquent behavior, and cognitive behavioral techniques have been demonstrated to address antisocial thinking and beliefs effectively. Statewide initiatives focused on social and emotional learning establish standards or promote specific curricula or programming, whereas social and emotional learning is facilitated locally in structured learning opportunities or treatment modalities.

During the virtual mapping sessions, participants were asked to consider these service types and several prevention and intervention points representing a young person's experience through the juvenile justice system. These points of prevention and intervention included Community, School, Pre-Court, Court Active, Detention, Out-of-Home, and Reentry.

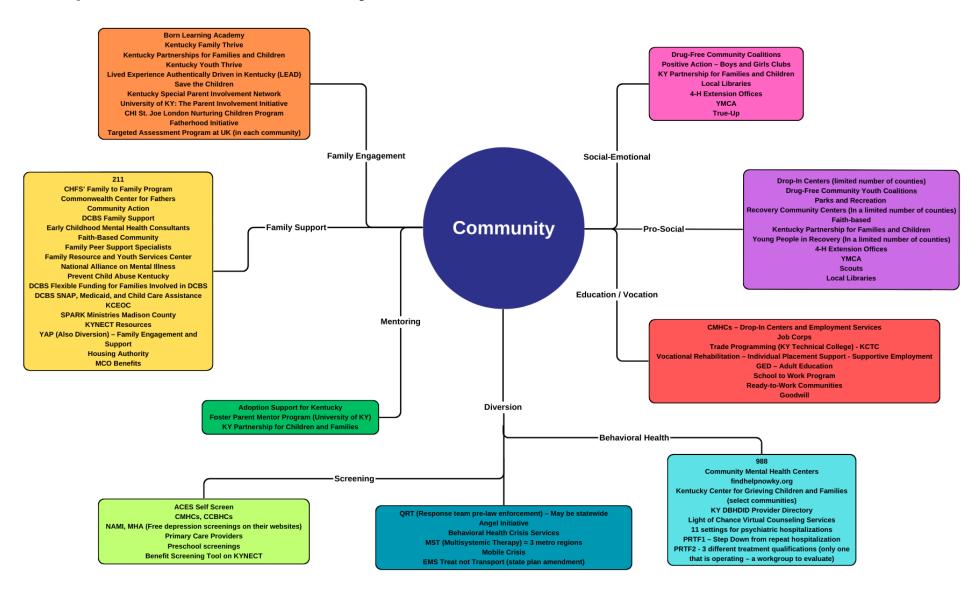
Focusing on one service type at a time, participants discussed the reach and functioning of each identified resource and related opportunities. These resources were categorized into the following Upstream domains:

- Community. Resources and supports every family needs to thrive;
- Families with Risk Factors. Resources and supports targeted at characteristics associated with adverse outcomes;

- Youth and Families with Allegations. Resources and processes to respond to delinquency allegations; and
- Youth and Families with Court Involvement. Resources and processes to support families throughout the court process.

The following section includes resource maps for each point of prevention and intervention and describes resources discussed during the virtual mapping sessions. A complete listing of resources identified throughout the mapping workshops and organized by Upstream domain is in Appendix F. Some of these resources can be categorized under multiple domains and service types.

Upstream Domain: Community



Community. Statewide policies, resources, and supports every family needs to thrive.

Examples of resources identified in the Community Domain include:

Kentucky Partnership for Families and Children (Family Engagement / Prosocial)

The Kentucky Partnership for Families and Children (KPFC) is a statewide, private, not-for-profit organization that provides peer-to-peer support to youth with behavioral health challenges and their families. KPFC manages Peer Support Centers in six DCBS regions that offer individual and group peer support services. These centers are supported in partnership with the state of Kentucky through System of Care grant funds.

<u>Community Mental Health Centers / Certified Community Behavioral Health Clinics</u> (Screening / Behavioral Health / Education/Vocation

Community Mental Health Centers (CMHCs) provide publicly-funded community behavioral health services to Kentuckians through the 14 regional MHID Boards established through Kentucky Revised Statutes Chapter 210. Each region serves a designated group of counties.

Certified Community Behavioral Health Clinics (CCBHCs) were implemented through an expansion of Section 223 of the Protecting Access to Medicare Act of 2014, with four existing CMHCs being selected in 2020 to participate in the federal demonstration program. CCBHCs are required to provide comprehensive services, including: "crisis mental health services; screening, assessment and diagnosis; outpatient mental health and SUD treatment; person-centered treatment planning; primary care screening and monitoring of key health indicators; targeted case management; psychiatric rehabilitation; peer support, including family and youth; and community-based mental health care for members of the armed forces and veterans."

<u>Foster Parent Mentor Program</u> (Mentoring)

The Foster Parent Mentor Program is available through the Training Resource Center at the University of Kentucky College of Social Work in cooperation with the Kentucky Department of Community-Based Services (DCBS). This program connects newly approved DCBS foster and adoptive parents with a trained mentor for their first six months of service to enhance their confidence in their new role. Program mentors provide intensive coaching, emotional support, and guidance on parenting strategies unique to out-of-home placements.

kynect benefits (Family Support)

kynect benefits connect eligible individuals and families to Kentucky state benefits, such as Medicaid and KCHIP, the Kentucky Transitional Assistance Program, the Supplemental Nutrition Assistance Program, and the Child Care Assistance Program. Through these state benefits, families can access free health insurance coverage for children under 19 that covers mental health care, child care assistance, cash assistance, and food assistance.

Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID) Provider Directory (Behavioral Health)

The Kentucky DBHDID maintains a provider directory that lists a wide range of resources, including available mental health, adult and juvenile crisis stabilization, and substance use treatment providers. The directory is easily accessible and searchable by health plan coverage, provider name, provider type, and county.

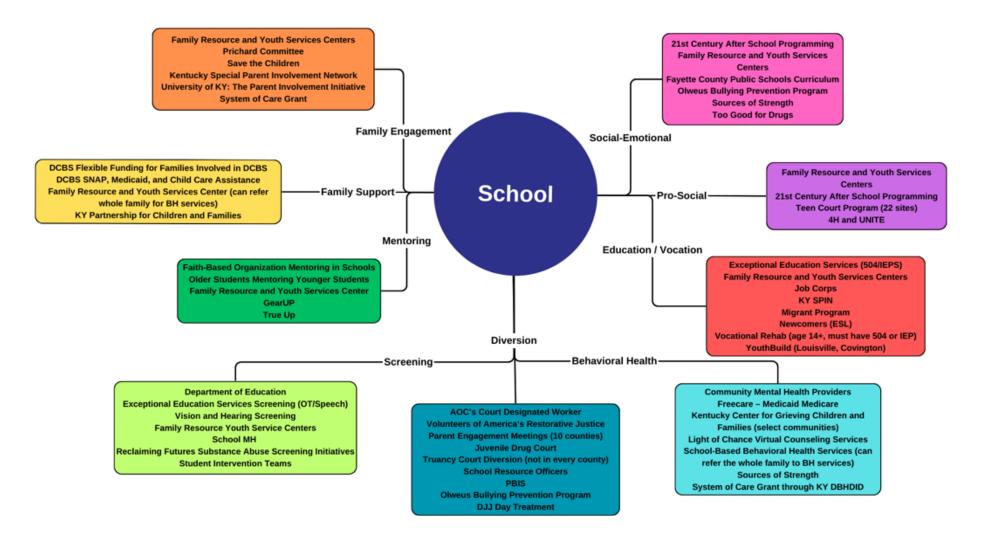
Kentucky Work Ready Communities (Education / Vocation)

Kentucky Work Ready Communities is a certification program managed by the state of Kentucky designed to encourage workforce improvement, investment, and economic development in Kentucky's counties. Using criteria such as high school graduation rates, work-based learning programs, engagement of underserved populations, and community commitment, the program certifies counties that meet program criteria as Work Ready Communities.

<u>FindHelpNowKY.org</u> (Behavioral Health)

FindHelpNowKY.org was created by the Kentucky Injury Prevention and Research Center in partnership with the Kentucky Office of Drug Control Policy, Kentucky DBHDID, and Operation UNITE. The website allows individuals to search near-real-time availability of treatment openings for substance use disorder facilities across the state. Treatment facilities update their information through an administrative dashboard, which is reviewed for accuracy by staff before publication. Treatment facilities can provide over 50 fields of detailed information to their profiles, including accepted payment methods, populations served, facility policies, and available treatment types. The Centers for Disease Control and Prevention fund the website.

Domain: School



School. Statewide policies, resources, and supports available to families in connection with schools.

Examples of resources identified for the School Domain include:

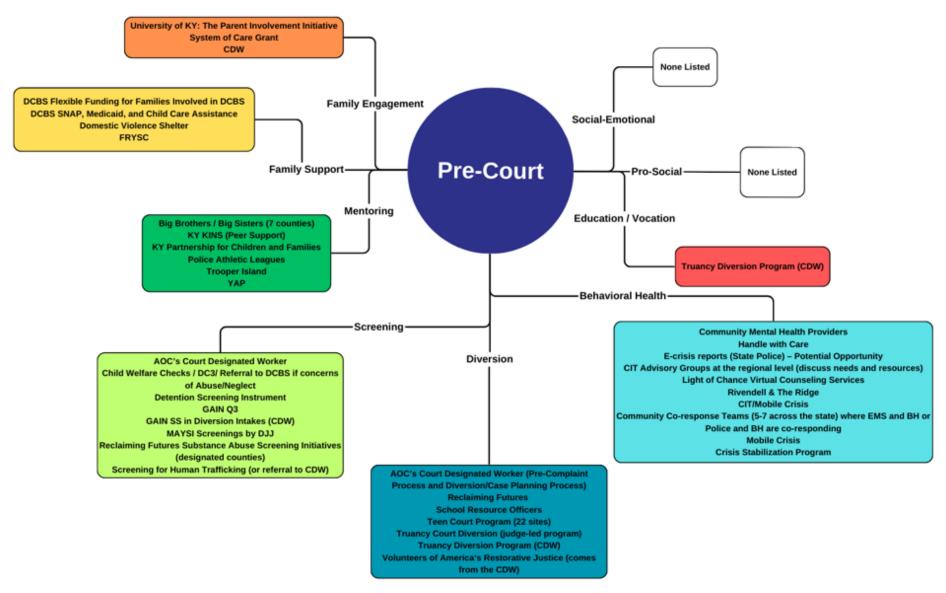
<u>Family Resource and Youth Services Centers</u> (Family Engagement / Family Support / Mentoring / Screening / Education/Vocation / Social-Emotional)

Over 850 Family Resource and Youth Services Centers (FRYSCs), supported by the Kentucky Department for Family Resource Centers and Volunteer Services, provide services to children and families in schools across the state. Individual FRYSCs offer programs and services specific to the needs of their community, including services to address school readiness, transitions to adult life, community physical and mental health, and parent engagement. Teachers and parents have reported FRYSC's involvement in improving student performance, peer relations, parent satisfaction, and involvement with their children's schools.

Reclaiming Futures Substance Abuse Screening Initiatives (Screening)

The Reclaiming Futures is a national behavioral health-focused juvenile justice reform organization with sites in Kentucky. With a school-based System of Care grant through the state, Kentucky Reclaiming Futures has implemented behavioral health and substance abuse screenings for young people in schools, FRYSCs, CMHCs, and the justice system so that they may be linked to appropriate resources.

Domain: Pre-Court



Pre-Court. Statewide policies, resources, and processes to respond to complaints filed on young people before a formal court petition exists.

Examples of resources identified for the Pre-Court Domain include:

<u>Kentucky Administrative Office of the Courts Court Designated Worker Program (Family Engagement / Screening / Diversion / Education/Vocation)</u>

The Court Designated Worker (CDW) Program has operated in every Kentucky County since it was established by the Kentucky General Assembly in 1986. CDWs are available 24/7 and are responsible for processing public and status complaints made on youth, meeting youth who have a complaint filed against them, assisting law enforcement in finding appropriate, least-restrictive custody placements, conducting investigations and interviews, and developing and supervising diversion agreements. For youth in diversion programs, CDWs provide case management and monitoring, working closely with Kentucky's Family Accountability, Intervention, and Response (FAIR) Teams to improve outcomes by offering alternatives to formal court. CDWs have been instrumental in enacting the juvenile justice reforms made under Senate Bill 200 in 2014.

Teen Court (Diversion)

Overseen by the Department of Family and Juvenile Services, the Teen Court diversion program allows youth in the justice system to participate in a less formal court process. As part of the program, youth agree to participate in Teen Court and have their sentences set by classmates. The program is designed to build accountability, foster an understanding of how one's actions affect others, and reduce repeat offenses.

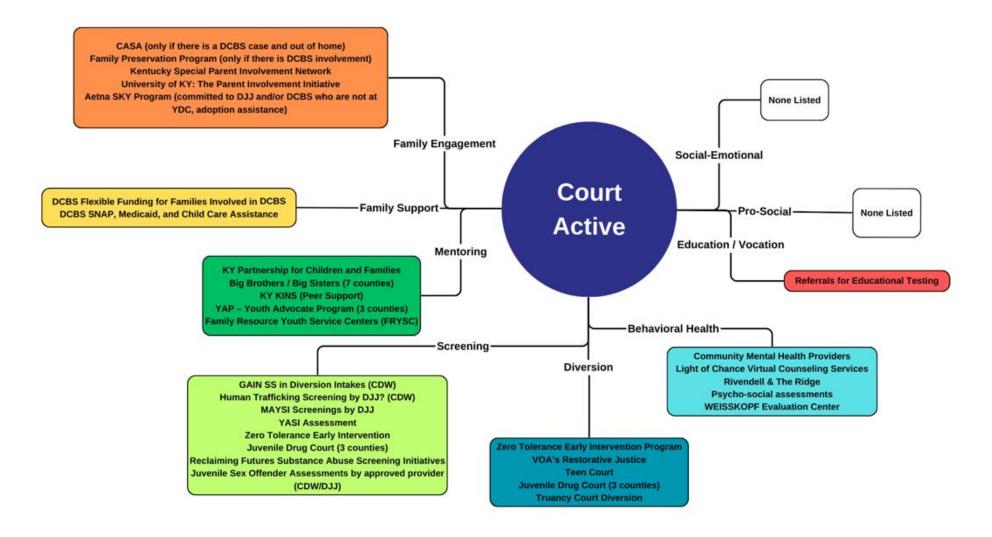
Handle With Care (Behavioral Health)

Through the Handle With Care program of the Kentucky State Police, law enforcement officers identify children exposed to trauma at crime scenes or accident sites and report this to their school. No information is given other than the child's name, age, and school. The purpose of this program is to mitigate the adverse effects of trauma on children by prompting school staff to act with care and understanding and provide more effective interventions when dealing with trauma-exposed youth. Over 1,300 schools across Kentucky are registered with the program.

<u>Global Appraisal of Individual Needs – Short Screener</u> (Screening)

The Global Appraisal of Individual Needs – Short Screener (GAIN-SS) is used in Kentucky to screen youth involved in the justice system for mental or behavioral health needs. The information gathered through GAIN-SS screening allows examiners to quickly identify youth who would benefit from mental and behavioral health treatment and further screening.

Domain: Court Active



Court Active. Statewide policies, resources, and processes to respond to young people as they move through the juvenile court process.

Examples of resources identified for the Court Active Domain include:

Family Preservation Program (Family Engagement)

The Family Preservation Program is a crisis intervention resource designed to prevent unnecessary out-of-home placements that separate children and families by providing intensive services that meet each family's individual needs. To be eligible for treatment services through FPP, it must be determined that a child would need out-of-home placement without intervention and that the safety threat can be mitigated using child-specific, evidence-based treatment services. FPP benefits youth at risk of juvenile justice system involvement by connecting them to needed treatment resources.

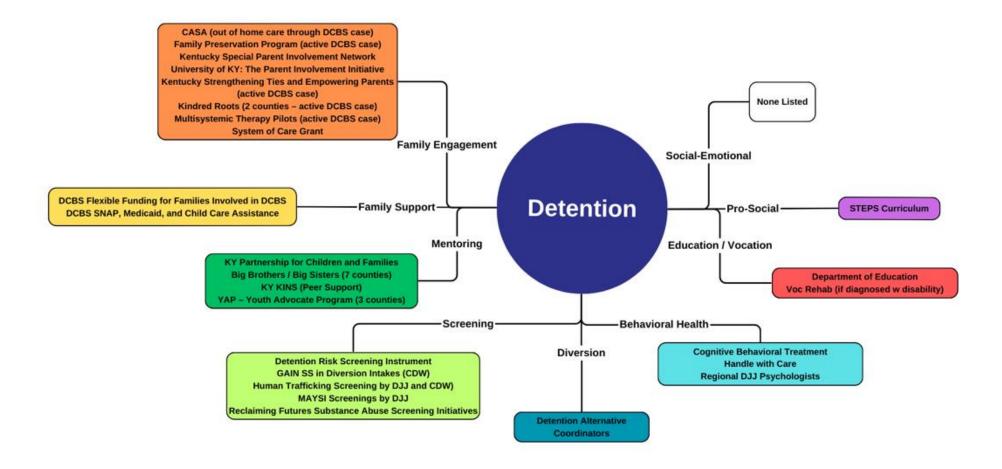
Aetna Supporting Kentucky Youth (SKY) Program (Family Engagement / Family Support)

The Aetna Supporting Kentucky Youth (SKY) Program provides all Medicaid benefits for enrolled youth. Youth eligible for enrollment include those in foster care, those who are dually committed to DCBS and DJJ, and youth who are involved in the juvenile justice system and are Medicaid eligible, among others.

KY-KINS (Mentoring)

KY-KINS is a peer support program run by the Kentucky Kinship Resource Center at the University of Kentucky College of Social Work. KY-KINS provides individualized support services to caregivers of relatives or fictive kin. Caregivers are matched with Peer Supporters, who are experienced kinship providers with extensive training and lived experience. Peer Supporters meet with caregivers 1-on-1 weekly to provide emotional and logistical support, helping connect caregivers to local and state resources. This service is free and lasts as long as the caregiver requests.

Domain: Detention



Detention. Statewide policies, resources, and supports available to families when a young person is in a secure detention facility.

Examples of resources identified for the Detention Domain include:

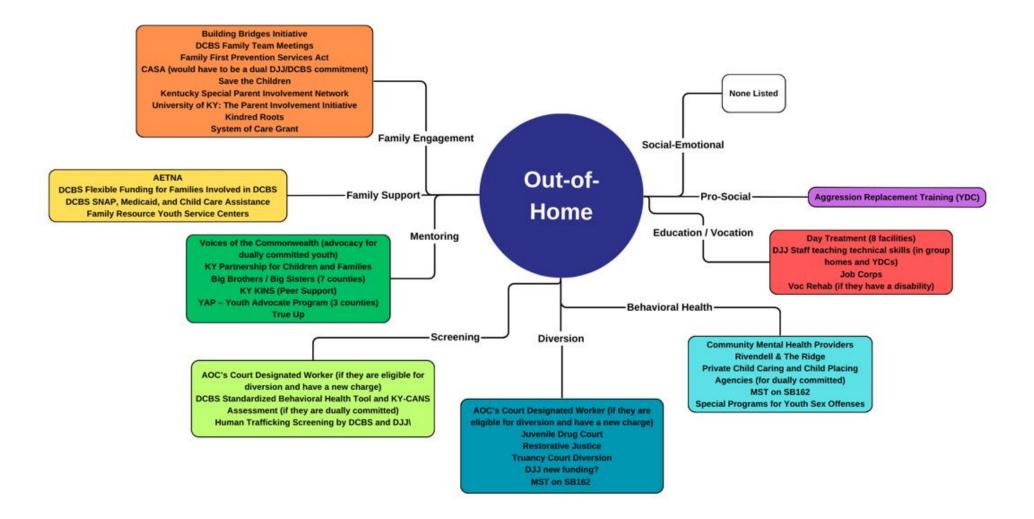
Detention Alternatives Coordinator (Diversion)

Detention Alternatives Coordinators (DACs) are Kentucky Department of Juvenile Justice (DJJ) employees responsible for developing the Alternative to Secure Detention Program and screening youth to determine eligibility for non-secure detention. DACs also supervise youth in the Alternative to Secure Detention Program, monitoring their compliance and making community referrals to support successful participation. DACs monitor the juvenile population in detention centers and ensure compliance with OJJDP regulations. DACs can expedite cases by tracking the length of detainment and notifying courts and attorneys of youth who have been in detention for a prolonged period.

<u>Detention Risk Assessment Instrument</u> (Screening)

The Detention Risk Assessment Instrument is a tool designed by the DJJ to enhance decision-making regarding the appropriate placement of a young person. Youth are assessed by DACs, with scores determining whether a youth will be placed in secure detention or considered for the Alternative to Secure Detention Program and screened further.

Domain: Out-of-Home



Out-of-Home. Statewide policies, resources, and supports available to youth who are in out-of-home placement due to juvenile court involvement.

Examples of resources identified for the Out-of-Home Domain include:

<u>Kentucky General Assembly - Senate Bill 162</u> (Diversion / Behavioral Health)

Signed into law in March 2023, Kentucky General Assembly - Senate Bill 162 appropriates more than \$25 million to the Department of Juvenile Justice (DJJ) for various improvements, including enhanced behavioral health programming and services. The bill established a diversionary program to identify young people, including those currently in detention, with severe mental illnesses and divert them as soon as practicable to secure facilities where they may receive more appropriate care. The bill also allows the DJJ to contract with third-party organizations to provide this care.

Voices of the Commonwealth (Mentoring)

Voices of the Commonwealth (VOC) is a non-profit comprised of foster care youth and alumni in Kentucky between the ages of 16 and 22 who advocate for positive change for youth in the Kentucky foster care system. VOC partners with actors in the juvenile justice system, such as judges and the Department for Community-Based Services (DCBS), to develop policies and practices in the best interest of youth. The organization also educates youth in the foster care system about their rights and connects them to local resources, as well as recruiting and educating foster parents for older foster youth.

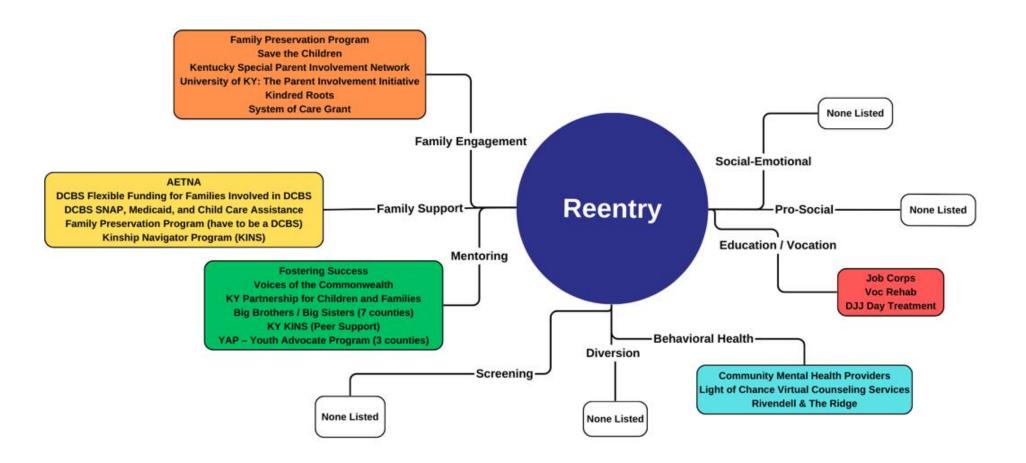
<u>Family First Prevention Services Act</u> (Family Engagement)

Passed in 2018, the Family First Prevention Services Act is a piece of federal legislation that seeks to reduce the number of children in the foster care system by supporting preventative care programs for children and their families, including behavioral health and substance abuse services, to reduce out-of-home placements and improve access to family reunification services. Under the FFPSA, any child eligible for foster care who meets certain other criteria may receive these services. The FFPSA also benefits youth at risk of juvenile justice system involvement by connecting them to needed treatment services that might otherwise be unavailable.

Domain: Reentry

Reentry. Statewide policies, resources, and supports available to youth to reenter their community after justice system involvement.

All the resources in this domain were also identified in earlier domains.





Juvenile Justice Workgroup Priorities

Workgroup members collaboratively identified opportunities to improve services and fill resource gaps throughout the juvenile justice virtual mapping. At the August 4, 2023 session, the Workgroup voted to prioritize three of these opportunities for future work. Members then self-selected one of the three priorities they wanted to action plan. For each priority, a small group met in a breakout room to develop an action plan and discuss the next steps to address the opportunities. Each group then reported on their discussions to the full Workgroup. A summary of each discussion is described below.

The first opportunity prioritized by the Workgroup was: **Identify opportunities for statewide prosocial efforts for youth in detention and through the deep end of the system. Consider whether existing programs and services could be expanded to also serve children in detention, out-of-home placement, or reentry.** The group decided to defer further action planning to the State Interagency Council Standing Committee on Social-Emotional Health and Wellbeing. The Committee chair and staff person were in this group and explained that the Committee had recently reviewed its current action plan and had space to take on this priority. They noted that the Committee was prepared to lead this effort with the support and assistance of other organizations and Workgroup members.

The group also discussed the disproportionate school discipline, particularly concerning the possession and use of vapes. Members reported inconsistencies in how schools were addressing possession of vapes. There is concern that this negatively impacts juvenile justice system improvements from Senate Bill 200. Possession of vapes is generally treated as possession of marijuana or drug paraphernalia, but new policies could send youth to day reporting, treatment centers, or detention facilities that do not have the resources needed to address these behaviors appropriately.

The second opportunity prioritized by the Workgroup was: **Provide training for community- based providers on serving kids who are court-involved.** The group agreed that the main task for this priority will be conducting effective outreach to make communities aware of what services and resources are available to them and how they can be used. To accomplish this task, the Workgroup must decide what organization or agency will lead the effort. As such, they plan to gauge initial interest and buy-in from agencies before

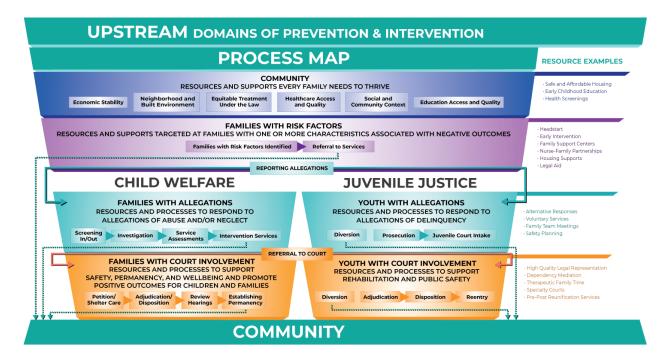
JUVENILE JUSTICE WORKGROUP PRIORITIES

scheduling a meeting with agency representatives to discuss the effort and iron out logistics. The group mentioned that many agencies represented in the Workgroup have the networks required for successfully leading a statewide education effort; however, they noted that all other agencies will need to collaborate with the lead agency in this effort to ensure that all communities are reached and provided with accurate, complete information. One primary concern was the possibility of offering an overload of information that may be redundant or difficult for providers to use effectively. Workgroup members intend to consider this concern further in their subsequent action planning.

The third opportunity prioritized by the Workgroup was: **Explore the feasibility of crisis stabilization units for youth.** The group plans first to identify agencies and individuals who should be present to discuss this priority. Once these stakeholders are gathered, the group intends to collaboratively identify individuals in Kentucky with the ability, opportunity, resources, and influence necessary to support the creation of these units. Following this, the group will determine a plan to educate these individuals on the urgent need for and importance of crisis stabilization units for youth in Kentucky. The Workgroup noted that this will be a long-term project.

Next Steps and Recommendations

First, NCSC recognizes Kentucky and the Juvenile Justice Workgroup for being the first of our Upstream pilot states to take on statewide mapping, to pilot juvenile justice mapping, and to do so virtually. We learned a great deal from this experience that has resulted in a more comprehensive Upstream process that will benefit local jurisdictions across Kentucky as well as other states. We could not have developed this process without Kentucky's vision, encouragement, and feedback.



We offer the following recommendations as encouragement to further the priorities identified during the virtual juvenile justice mapping workshop.

1. Continue with the plan to conduct in-person, local Upstream Mapping Workshops across Kentucky, using the statewide mapping results to inform the local mappings. There are plans to conduct local mappings across Kentucky and support the implementation of Upstream through train-the-facilitator training. The trainers will deliver the comprehensive Upstream Mapping Workshop that integrates juvenile justice and child welfare in one mapping process rather than the two separate processes for the statewide mappings. This comprehensive mapping process helps to eliminate silos between youth-serving systems and elevates the goal of improving outcomes for all families, regardless of which system they encounter. We recommend that the Workgroup continue to support local Upstream Mapping Workshops and hold space on future Workgroup agendas to discuss local jurisdictions' priorities and action

NEXT STEPS AND RECOMMENDATIONS

plans. While the local mapping workshops are being conducted, the priorities should be aggregated to inform the picture of the greatest needs across regions and statewide as identified by local mapping workshop participants. The Workgroup may consider showing this information, along with the dates and locations of future Upstream Mapping Workshops, on a website to generate interest among statewide and community partners.

2. Continue developing and implementing the action plans developed during the virtual juvenile justice mapping. Due to the nature of virtual meetings, the groups had limited time to develop action plans in the breakout room. An existing statewide group adopted priority #1; however, priorities #2 and #3 are new to the Workgroup. Identify subcommittees of the Workgroup to clarify the purpose and anticipated outcomes of priorities #2 and #3 so that they can clearly articulate the need and the steps required to address it. Both action planning groups noted that the next step would include identifying the right partners to include in discussions. Having the right partners around the table is critical to effectively implementing an action plan. There are likely individuals who are not currently associated with the Workgroup that will need to be involved in implementing the action plan. One of the subcommittees' next steps should be to ensure that the correct individuals are at the table to inform the efforts and to make decisions that enable the action plans to progress.

Conclusion

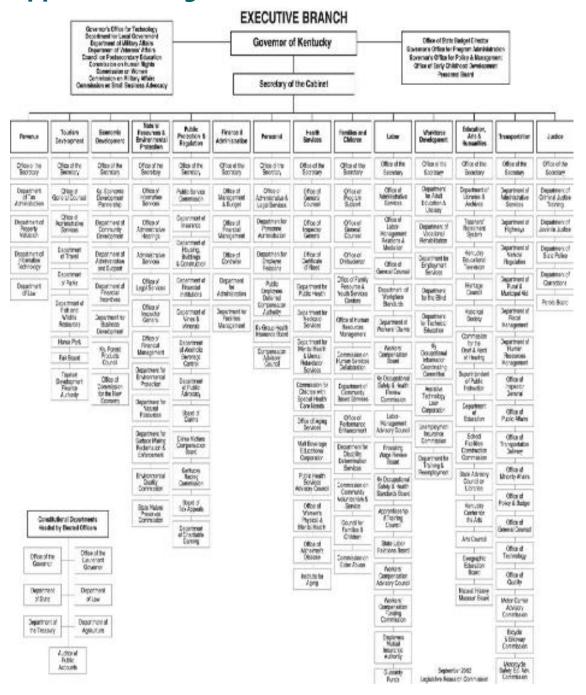
The Juvenile Justice Workgroup of the Kentucky Judicial Commission on Mental Health (KJCMH) is comprised of dedicated individuals who aim to improve outcomes for youth and their families. Further, the court leaders are visionaries willing to try innovative means to reach improved outcomes. Kentucky was the first state in the nation to participate in a statewide Upstream mapping and the first to do pilot juvenile justice mapping. Their openness to be a pilot site paved the way for an improved process that will benefit youth and families in Kentucky as well as other states.

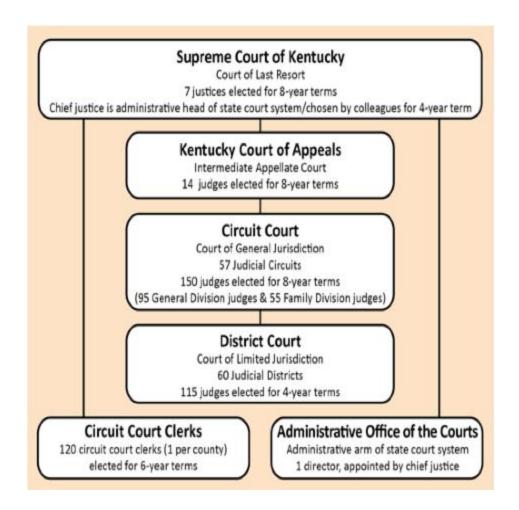
During the three virtual Juvenile Justice Upstream mapping workshops in July and August 2023, Workgroup members identified and developed action plans for the following priorities:

- 1. Identify opportunities for statewide prosocial efforts for youth in detention and through the deep end of the system. Consider whether existing programs and services could be expanded to also serve children in detention, out-of-home placement, or reentry.
- 2. Provide training for community-based providers on serving kids who are court-involved.
- 3. Explore the feasibility of crisis stabilization units for youth.

The Workgroup will continue to monitor the action plans in these three areas. Through the KJCMH, local jurisdictions will have the opportunity to participate in local Upstream Mapping Workshops that integrate child welfare and juvenile justice to prioritize local opportunities and develop and implement action plans to address gaps identified in the mapping process. KJCMH will coordinate and support SIM in the criminal justice system and Upstream for child welfare and juvenile justice across the Commonwealth of Kentucky.

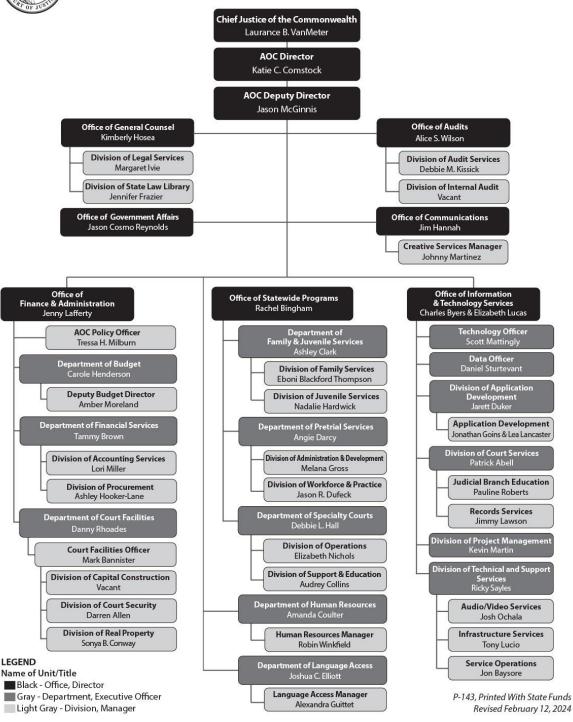
Appendix A: Organizational Charts

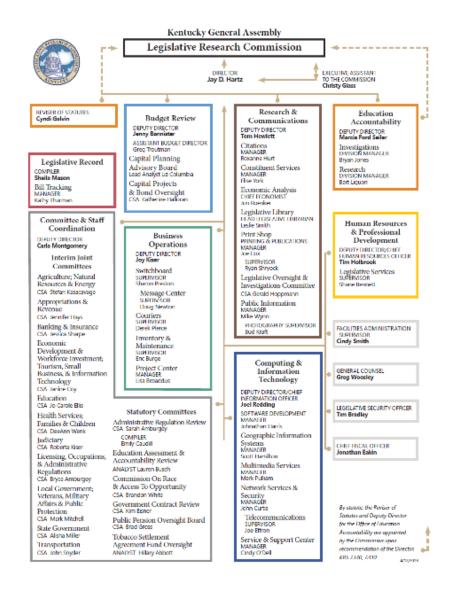






Administrative Office of the Courts Kentucky Court of Justice





Appendix B: Kentucky Judicial Commission on Mental Health

Members

Kentucky Judicial	Commission on Mental Health
Hon. Debra Hembree Lambert	Deputy Chief Justice, Kentucky Supreme Court, and Chair of the Kentucky Judicial Commission on Mental Health
Hon. Denise Clayton	Chief Judge, Kentucky Court of Appeals
Hon. Larry Thompson	Chief Judge, Kentucky Court of Appeals, and Vice Chair of the Kentucky Judicial Commission on Mental Health
Hon. Denise DeBerry Brown	Family Judge, 30 th Judicial Circuit
Hon. Lisa Payne Jones	Chief Circuit Judge, 6 th Judicial Circuit
Hon. Cole Adams Maier	Circuit Judge, 25 th Judicial Circuit
Hon. Rebecca K. Phillips	Chief Circuit Judge, 37 th Judicial Circuit
Hon. Marcus Vanover	Family Judge, Chief Circuit Judge, 28 th Judicial Circuit
Hon. Cameron J. Blau	District Judge, 17 th Judicial District
Hon. Stephanie Burke	District Judge, 30 th Judicial District
Hon. J. Foster Cotthoff	District Judge, 3 rd Judicial District
Hon. Tanisha A. Hickerson	District Judge, 30 th Judicial District
Hon. William "Bo" Leach	District Judge, 23 rd Judicial District
Hon. Jennifer Leibson	District Judge, 30 th Judicial District
Hon. Kevin R. Mullins	District Judge, 47 th Judicial District
Hon. Melissa Moore Murphy	District Judge, 22 nd Judicial District
Hon. John Lindsay Tackett	District Judge, 22 nd Judicial District
First Vice-President Stacy Bruner	Trimble County Circuit Court Clerk
	First Vice-President, Kentucky Association of Circuit Court Clerks
Julie Raque Adams	Majority Caucus Chair, Kentucky Senate
Whitney Westerfield	Senator, Kentucky Senate
David Meade	Speaker Pro Tempore, Kentucky House of Representatives
Kimberly Moser	Representative, Kentucky House of Representatives
Carrie Ovey Wiggins	Commonwealth's Attorney, 56 th Judicial Circuit
	President, Kentucky Commonwealth's Attorneys Association

Brian Wright	Commonwealth's Attorney, 29 th Judicial Circuit
	Immediate Past President, Kentucky Commonwealth's Attorneys Association
Chris Cohron	Commonwealth's Attorney, 8 th Judicial Circuit
Stacy Tapke	Kenton County Attorney
	President, Kentucky County Attorneys Association
Joe Ross	Logan County Attorney
	Vice-President, Kentucky County Attorneys Association
Damon Preston	Public Advocate, Department of Public Advocacy
Jim Daley	Campbell County Jailer
	President, Kentucky Jailers Association
Shawn Butler	Executive Director, Kentucky Association of Chiefs of Police
Yvette Hourigan	Director, Kentucky Lawyer Assistance Program
	Kentucky Bar Association
Phillip Burnett, Jr.	Commissioner, Kentucky State Police
Sarah Johnson	Director, Kentucky Department of Corrections
Erica Hargis	Director, Division of Probation and Parole
Van Ingram	Executive Director, Kentucky Office of Drug Control Policy
Eric Friedlander	Secretary, Cabinet for Health and Family Services
Lisa Lee	Commissioner, Department of Medicaid Services
Koleen Slusher, LCSW	Director, Kentucky Correctional Psychiatric Center
Steve Shannon	Executive Director, Kentucky Association of Regional Programs
Brenda Rosen, CSW	President, National Association of Social Workers- Kentucky Chapter
Dr. Lindsey Jasinski	Chief Administrative Officer, Eastern State Hospital- University of Kentucky
Dr. Andrew Cooley	Chief Medical Officer, Eastern State Hospital- University of Kentucky
Dr. Marc Woods	Chief Nursing Officer, Eastern State Hospital- University of Kentucky
Dr. Rebecca Frost	Facility Director, Western State Hospital
Wes Butler	Attorney, Kentucky Hospital Association
Patrick Padgett	President, Kentucky Medical Association
Dr. John J. Wernert	Norton Healthcare
Dr. Rebecca Pender Baum	President, Kentucky Counseling Association
Whitney P. Allen, Jr.	Commissioner, Kentucky Department of Veteran's Affairs
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Jim Henderson	Executive Director/CEO, Kentucky Association of Counties
Amy Hale Milliken	President, Kentucky Association of Counties
J.D. Chaney	Executive Director, Kentucky League of Cities
Ashli Watts	President and CEO, Kentucky Chamber of Commerce
Jim Flynn	Director, Kentucky Superintendent Association
Glenda Harrison	Executive Director, Kentucky Access to Justice Commission
Nan Hanley	Associate Director, Kentucky Access to Justice Commission
Terry Brooks	Executive Director, Kentucky Youth Advocates
Lisa DeJaco Crutcher	Executive Director/CEO, Catholic Charities of Louisville
Chris Griffith	Christian Appalachian Project
Rabbi Shlomo Litvin	Director, Chabad of the Bluegrass
Dr. Todd Gray	Executive Director-Treasurer, Kentucky Baptist Convention
Raoul Cunningham	President, NAACP Louisville
Amy Luttrell	CEO, Goodwill
Hon. John D. Minton Jr.	Chief Justice (Ret.), Kentucky Supreme Court
Diane Thompson	Nelson County Circuit Court Clerk
Katie Comstock	Director, Administrative Offices of the Courts
Russell Coleman	Kentucky Attorney General
Shain Stephens	Harrison County Sheriff, Kentucky Sheriffs' Association
Tom Vicini	Executive Director, Kentucky Office of Drug Control Policy
Katie Marks	Commissioner, Department of Behavioral Health, Developmental and Intellectual Disabilities
Lesa Dennis	Acting Commissioner Department of Community Based Services
Casey Ellis	Executive Officer, Kentucky Council of Area Development Districts
Cora McNabb	Executive Director, Office for Vocational Rehabilitation, Kentucky Education and Labor Cabinet
David Livingston	President, Kentucky Association of Counties
Crystal Adams	Director, Cabinet for Health and Family Services

Structure

MENTAL HEALTH



COMMISSION STRUCTURE

Chair – Deputy Chief Justice Debra Hembree Lambert, Kentucky Supreme Court Vice Chair – Honorable Larry Thompson, Chief Judge, Kentucky Court of Appeals

Established August 11, 2022, the Judicial Commission on Mental Health is comprised of 74 representatives from the judicial and legal communities; the juvenile, criminal and child protection systems; the legislature; the business community; organizations with a substantial interest in these matters; and other state and local leaders who have demonstrated a commitment to mental health, substance use, and/or intellectual and developmental disabilities affecting Kentuckians.



Criminal Justice Committee

Chair – Hon. Cole Maier Vice Chair – Hon. John Tackett

Prearrest/Diversion Workgroup

Lead – Joe Ross & Jim Daley

Competency Workgroup

Lead - Koleen Slusher

Juvenile Justice Workgroup

Lead – Hon. Lisa Jones

Reentry Workgroup

Lead – Erica Hargis

Civil & Family Justice Committee

Chair – Hon. J. Foster Cotthoff Vice Chair – Dr. Katy Hopkins

Guardianship & Commitment Workgroup

Lead – Stacy Tapke

Domestic Violence Workgroup

Lead – Hon. Denise Brown

Dependency, Neglect & Abuse Workgroup

Lead – Hon. Marcus Vanover

Treatment & Access Committee

Chair – Hon. Kevin Mullins Vice Chairs – Sec. Eric Friedlander

Strengthening Communities Workgroup

Lead – Wes Butler

Court Responses

Lead – Hon. Stephanie Burke

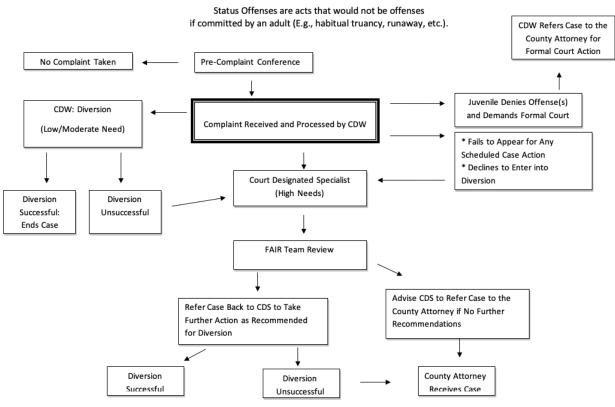
Intellectual and Development Disabilities Workgroup

Lead - Crystal Adams

January 22, 2024

Appendix C: CDW Referral Process to FAIR Team for Status Offenses

CDW REFERRAL PROCESS TO FAIR TEAM FOR STATUS OFFENSES

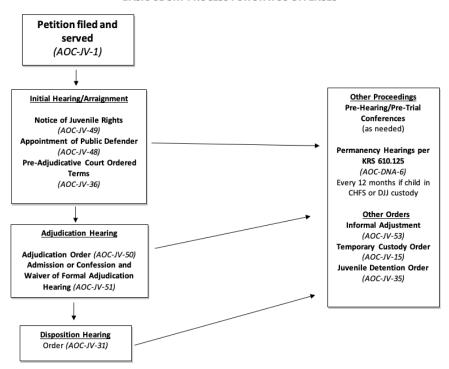


FAIR: Family Accountability Intervention and Response

CDW: Court Designated Worker CDS: Court Designated Specialist

Appendix D: Basic Court Process for Status Offenses

BASIC COURT PROCESS FOR STATUS OFFENSES

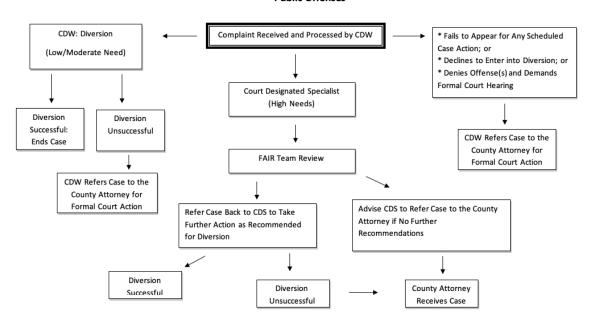


FAIR: Family Accountability Intervention and Response CDW: Court Designated Worker CDS: Court Designated Specialist

Appendix E: CDW Referral Process to FAIR Team for Public Offenses

CDW REFERRAL PROCESS TO FAIR TEAM

Public Offenses



FAIR: Family Accountability Intervention and Response CDW: Court Designated Worker CDS: Court Designated Specialist

Appendix F: Juvenile Justice Statewide Resources by Upstream Domain

	COMMUNITY
	Born Learning Academy
	CHI St. Joe London Nurturing Children Program
	Fatherhood Initiative
	Kentucky Family Thrive
	Kentucky Partnerships for Families and Children
Family Engagement	Kentucky Youth Thrive
Liigagement	Kentucky Special Parent Involvement Network
	Lived Experience Authentically Driven in Kentucky (LEAD)
	Save the Children
	Targeted Assessment Program at the UK (in each community)
	University of KY: The Parent Involvement Initiative
	211
	CHFS' Family to Family Program
	Commonwealth Center for Fathers
	Community Action
	DCBS Family Support
	DCBS Flexible Funding for Families Involved in DCBS
Family Support	DCBS SNAP, Medicaid, and Child Care Assistance
	Early Childhood Mental Health Consultants
	Faith-Based Community
	Family Peer Support Specialists
	Family Resource and Youth Services Center
	Housing Authority
	KCEOC

	KYNECT Resources
	MCO Benefits
	National Alliance on Mental Illness
	Prevent Child Abuse Kentucky
	YAP – Family Engagement and Support
	Adoption Support for Kentucky
Mentoring	Foster Parent Mentor Program (University of KY)
	KY Partnership for Children and Families
	ACES Self Screen
	Benefit Screening Tool on KYNECT
	CMHCs, CCBHCs
Screening	NAMI, MHA (Free depression screenings on their websites)
	Primary Care Providers
	Preschool screenings
	Angel Initiative
	Behavioral Health Crisis Services
5. .	EMS Treat not Transport
Diversion	Mobile Crisis
	MST (Multisystemic Therapy) = 3 metro regions
	QRT (Response team pre-law enforcement) – May be statewide
	988
	Community Mental Health Centers
	findhelpnowky.org
Behavioral	Kentucky Center for Grieving Children and Families (select
Health	communities)
	KY DBHDID Provider Directory
	Light of Chance Virtual Counseling Services
	11 settings for psychiatric hospitalizations

	PRTF1 – Step Down from repeat hospitalization
	PRTF2 - 3 different treatment qualifications (only one that is operating – a workgroup to evaluate)
	CMHCs – Drop-In Centers and Employment Services
	GED – Adult Education
	Goodwill
Education /	Job Corps
Education/ Vocation	Ready-to-Work Communities
	School to Work Program
	Trade Programming (KY Technical College) - KCTC
	Vocational Rehabilitation (Individual Placement Support and Supportive Employment)
	4-H Extension Offices
	Drop-In Centers (limited number of counties)
	Drug-Free Community Youth Coalitions
	Faith-based
	Kentucky Partnership for Families and Children
Prosocial	Local Libraries
	Parks and Recreation
	Recovery Community Centers (In a limited number of counties)
	Scouts
	Young People in Recovery) In a limited number of counties)
	YMCA
	4-H Extension Offices
	Drug-Free Community Coalitions
Social-Emotional	KY Partnership for Families and Children
	Local Libraries
	Positive Action – Boys and Girls Clubs
	True-Up

	YMCA
	FAMILIES WITH RISK FACTORS
	Family Resource and Youth Services Centers
	Kentucky Special Parent Involvement Network
Family	Prichard Committee
Engagement	Save the Children
	System of Care Grant
	University of KY: The Parent Involvement Initiative
	DCBS Flexible Funding for Families Involved in DCBS
	DCBS SNAP, Medicaid, and Child Care Assistance
Family Support	Family Resource and Youth Services Center (can refer the whole family for BH services)
	KY Partnership for Children and Families
	Faith-Based Organization Mentoring in Schools
	Family Resource and Youth Services Center
Mentoring	GearUP
	Older Students Mentoring Younger Students
	True Up
	Department of Education
	Exceptional Education Services Screening (OT/Speech)
	Family Resource Youth Service Centers
Screening	Reclaiming Futures Substance Abuse Screening Initiatives
	School MH
	Student Intervention Teams
	Vision and Hearing Screening
	AOC's Court Designated Worker
Diversion	DJJ Day Treatment
	Juvenile Drug Court

	Parent Engagement Meetings (10 counties)
	PBIS
	School Resource Officers
	Truancy Court Diversion (not in every county)
	Volunteers of America's Restorative Justice
	Community Mental Health Providers
	Freecare – Medicaid Medicare
	Kentucky Center for Grieving Children and Families (select communities)
Behavioral Health	Light of Chance Virtual Counseling Services
	School-Based Behavioral Health Services (can refer the whole family to BH services)
	Sources of Strength
	System of Care Grant through KY DBHDID
	Exceptional Education Services (504/IEPS)
	Exceptional Education Services (504/IEPS) Family Resource and Youth Services Centers
	'
Education/	Family Resource and Youth Services Centers
Education/ Vocation	Family Resource and Youth Services Centers Job Corps
	Family Resource and Youth Services Centers Job Corps KY SPIN
	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program
_	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL)
	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL) Vocational Rehab (age 14+, must have 504 or IEP)
Vocation	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL) Vocational Rehab (age 14+, must have 504 or IEP) YouthBuild (Louisville, Covington)
_	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL) Vocational Rehab (age 14+, must have 504 or IEP) YouthBuild (Louisville, Covington) 21st Century After School Programming
Vocation	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL) Vocational Rehab (age 14+, must have 504 or IEP) YouthBuild (Louisville, Covington) 21st Century After School Programming 4H and UNITE
Vocation	Family Resource and Youth Services Centers Job Corps KY SPIN Migrant Program Newcomers (ESL) Vocational Rehab (age 14+, must have 504 or IEP) YouthBuild (Louisville, Covington) 21st Century After School Programming 4H and UNITE Family Resource and Youth Services Centers

	Fayette County Public Schools Curriculum
	Olweus Bullying Prevention Program
	Sources of Strength
	Too Good for Drugs
	FAMILIES WITH ALLEGATIONS
	AOC's Court Designated Workers
Family	System of Care Grant
Engagement	University of KY: The Parent Involvement Initiative
	DCBS Flexible Funding for Families Involved in DCBS
	DCBS SNAP, Medicaid, and Child Care Assistance
Family Support	Domestic Violence Shelter
	Family Resource and Youth Services Centers
	Big Brothers / Big Sisters (7 counties)
	KY KINS (Peer Support)
	KY Partnership for Children and Families
Mentoring	Police Athletic Leagues
	Trooper Island
	YAP
	AOC's Court Designated Worker
	Child Welfare Checks / DC3/ Referral to DCBS if concerns of Abuse/Neglect
	Detention Screening Instrument
	GAIN Q3
Screening	GAIN SS in Diversion Intakes (CDW)
	MAYSI Screenings by DJJ
	Reclaiming Futures Substance Abuse Screening Initiatives (designated counties)
	Screening for Human Trafficking (or referral to CDW)

	AOC's Court Designated Worker (Pre-Complaint Process and Diversion/Case Planning Process)
	Reclaiming Futures
	School Resource Officers
Diversion	Teen Court Program (22 sites)
	Truancy Court Diversion (judge-led program)
	Truancy Diversion Program (CDW)
	Volunteers of America's Restorative Justice (comes from the CDW)
	CIT/Mobile Crisis
	CIT Advisory Groups at the regional level (discuss needs and resources)
	Community Co-response Teams (5-7 across the state) where EMS and BH or Police and BH are co-responding
	Community Mental Health Providers
Behavioral Health	Crisis Stabilization Program
	E-crisis reports (State Police)
	Handle with Care
	Light of Chance Virtual Counseling Services
	Mobile Crisis
	Rivendell & The Ridge
Education/ Vocation	Truancy Diversion Program (CDW)
Prosocial	None listed
Social-Emotional	None listed
FAN	IILIES WITH COURT INVOLVEMENT
	CASA (only for out-of-home care through DCBS case)
Family Engagement	Building Bridges Initiative
Lingagement	DCBS Family Team Meetings

	Family First Prevention Services Act
	Family Preservation Program (active DCBS case)
	Kentucky Special Parent Involvement Network
	Kentucky Strengthening Ties and Empowering Parents (active DCBS case)
	Kindred Roots (2 counties – active DCBS case)
	Multisystemic Therapy Pilots (active DCBS case)
	Save the Children
	System of Care Grant
	University of KY: The Parent Involvement Initiative
	AETNA
	Family Resource Youth Service Centers
- " - '	Family Preservation Program (have to be a DCBS)
Family Support	Kinship Navigator Program (KINS)
	DCBS Flexible Funding for Families Involved in DCBS
	DCBS SNAP, Medicaid, and Child Care Assistance
	Big Brothers / Big Sisters (7 counties)
	Fostering Success
	Family Resource Youth Service Centers (FRYSC)
	KY KINS (Peer Support)
Mentoring	True Up
	Voices of the Commonwealth (advocacy for dually committed youth)
	KY Partnership for Children and Families
	YAP – Youth Advocate Program (3 counties)
	Detention Risk Screening Instrument
Screening	AOC's Court Designated Worker (if they have a new charge and are eligible for diversion)
	GAIN SS in Diversion Intakes (CDW)

	DCBS Standardized Behavioral Health Tool and KY-CANS Assessment (if they are dually committed)
	Human Trafficking Screening by DJJ and CDW
	Juvenile Drug Court (3 counties)
	Juvenile Sex Offender Assessments by approved providers (CDW/DJJ)
	MAYSI Screenings by DJJ
	Zero Tolerance Early Intervention
	YASI Assessment
	Reclaiming Futures Substance Abuse Screening Initiatives
	Detention Alternative Coordinators
	AOC's Court Designated Worker (if they have a new charge and are eligible for diversion)
	Juvenile Drug Court (3 counties)
Diversion	Teen Court
	MST in SB162
	Truancy Court Diversion
	VOA's Restorative Justice
	Zero Tolerance Early Intervention Program
	Cognitive Behavioral Treatment
	MST in SB162
	Handle with Care
	Private Child Caring and Child Placing Agencies (for dually committed)
Behavioral Health	Community Mental Health Providers
	Special Programs for Youth Sex Offenses
	Light of Chance Virtual Counseling Services
	Psycho-social assessments
	Rivendell & The Ridge

	WEISSKOPF Evaluation Center
	Regional DJJ Psychologists
Education/ Vocation	Department of Education
	DJJ Day Treatment (8 facilities)
	DJJ Staff teaching technical skills (in group homes and YDCs)
	Job Corps
	Referrals for Educational Testing
	Vocational Rehab (if diagnosed with disability)
Prosocial	STEPS Curriculum
	Aggression Replacement Training (YDC)
Social-Emotional	None listed



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