COMMUNITY MAPPING
WORKSHOP

MADISON COUNTY

JANUARY 29-30, 2025

Acknowledgments

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Introduction

On January 29-30, 2025, representatives from Madison County took part in a Community Mapping Workshop in Richmond, Kentucky. The event was facilitated by Jennifer VanOrt-Hazzard, Behavioral Health Liaison for the Kentucky Judicial Commission on Mental Health, and Heather Vice, Behavioral Health Liaison for the Department of Specialty Courts. A total of 76 participants from various partnering agencies and organizations engaged in the workshop. This report provides background information and a summary of the workshop's key discussions and outcomes.

Community Mapping integrates the Sequential Intercept Model (SIM) and the National Center for State Courts' (NCSC) Upstream Model, two strategic planning approaches designed to enhance cross-system collaboration and reduce justice system involvement. These frameworks are most effective when applied by a diverse team of stakeholders, including representatives from mental health, substance use services, law enforcement, pretrial services, courts, jails, community corrections, housing, healthcare, social services, individuals with lived experience, and family members.

Recognizing the need for a comprehensive approach, the Kentucky Judicial Commission on Mental Health (Judicial Commission) launched an initiative to implement SIM and Upstream throughout Kentucky. Since 2022, the Commonwealth has engaged in statewide criminal justice, child welfare, and juvenile justice mapping to identify existing resources and opportunities for system improvements. More details on this initiative are available on the Judicial Commission's website.

To streamline the process and ease the burden on local communities, the Judicial Commission partnered with NCSC to conduct SIM and Upstream mapping simultaneously. Through this collaboration, Community Mapping was developed, and in June 2024, NCSC conducted a facilitator training in Frankfort, Kentucky, preparing key staff and leaders to guide and implement Community Mapping efforts effectively.

Overview of Community Mapping

Community Mapping was explicitly developed for Kentucky to help communities identify ways for individuals and families to access essential resources, services, and support without becoming involved in the justice system. By combining the Sequential Intercept Model (SIM) and Upstream, this initiative strengthens local planning and collaboration to improve community-based solutions.

SIM is a framework to help communities develop a comprehensive picture of how adults with mental illness and substance use disorders enter and move through the criminal justice system along six distinct intercept points.[1] SIM depicts the criminal justice system as a series of points of "interception" at which an intervention can be made to divert people from the justice system and prevent them from entering or penetrating deeper into the criminal justice system. [2] Using the model, a community can identify local resources and gaps in services, decide priorities for change, and develop targeted strategies to increase connections to treatment and recovery support services. For more information on SIM, please see Appendix A.

Upstream is similar to SIM, however, its focus is on how children and families enter and move through the dependency and delinquency systems. By leveraging judicial leadership, court resources, and child welfare and juvenile justice partnerships, Upstream enhances community collaboration and coordination through mapping existing resources, identifying opportunities, and creating a strategic action plan informed by the community map. The collaboration aims to strengthen communities, prevent child maltreat and out-of-home placement, reduce court involvement, and support safe and healthy families. Through a family-centered lens, Upstream focuses on four domains: Community, Families with Risk Factors, Families with Allegations, and Families with Court Involvement. For more information on Upstream, please see Appendix B.

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[1] SAMHSA's GAINS Center brochure for The Sequential Intercept Model: https://store.samhsa.gov/sites/default/files/d7/priv/pep19-sim-brochure.pdf

[2] Munetz, M.R. & Griffin, P.A. (2006). Use of the Sequential Intercept Model as an Approach to Decriminalization of People with Serious Mental Illness. *Psychiatric Services,* 57(4), 544-549.

The Community Mapping framework focuses the community around five areas:

1. **What resources are available to the entire community?**

   This area includes all resources, services, and supports available to the entire community. It is grounded in the social determinants of health, which refer to community factors linked to improved health outcomes and overall quality of life.

2. **What resources target protective and preventive risk factors?**

   This area focuses on programs and services aimed at reducing risk factors for adverse outcomes, such as abuse or neglect, criminal behavior, or substance use. Key resources include screening and assessment, mental health and substance use treatment, cognitive behavioral therapy, trauma-informed care, housing assistance, and support for new and young parents.

3. **What resources are available at initial systems contact?**

   This area highlights resources and interventions available when individuals and families first engage with a system, such as arrest, law enforcement encounters, 911 calls, hotline calls, or referrals to juvenile court.

4. **What resources are available to individuals and families with court involvement?**

   This area focuses on resources, services, and supports for individuals and families involved in the court system, jail, or detention. It includes court-led initiatives, such as specialty courts and case coordination, designed to support individuals throughout the judicial process.

5. **What resources are available to support individuals and families returning to or reentering the community?**

   This category explores services designed to support individuals and families as they transition back into the community. Examples include community corrections programs, educational liaisons, and reunification services.

During the Community Mapping Workshop, participants engage in facilitated discussions to identify existing resources, as well as gaps and opportunities for improvement in each focus area. As part of this process, attendees create visual process maps for child welfare, juvenile justice, and criminal justice systems, ensuring a shared understanding of how individuals enter and navigate these systems. Participants then prioritize key opportunities through a voting process, with the highest-ranked items identified as top community priorities. On the final day, attendees self-select a priority area and collaborate to develop an action plan to drive meaningful improvements.

Madison County Community Mapping Workshop

During the first half of the Community Mapping Workshop, facilitators provided an overview of the Sequential Intercept Model (SIM) and Upstream, along with state and local data on relevant topics to set the stage for discussions. Participants were asked to identify and describe existing resources, services, and supports available to individuals and families, highlight opportunities for improvement, and map out the processes by which children, youth, individuals, and families enter and move through the system.

Throughout the second half of the day, participants identified four key priorities for action planning in Madison County:

- Expanding access to affordable and safe housing
- Development of a one-stop community center
- Expanded funding and access to year-round emergency and long-term housing shelter
- Development of a youth-crisis stabilization center

Participants then self-selected a priority area and collaborated in breakout groups to develop actionable strategies for addressing it.

For a detailed overview of workshop activities, please refer to the agenda in Appendix C. A list of workshop attendees is provided in Appendix D.

Defining the Current Landscape of Madison County

During a Community Mapping Workshop, available data is used to ensure all participants develop a shared understanding of the individuals in their community, their needs, and the extent to which they interact with the child welfare or juvenile justice systems. By viewing, discussing, and interpreting data as a group, communities can identify gaps in information, test assumptions, recognize strengths, and highlight challenges. In this workshop, facilitators presented data publicly available sources, including information obtained from the AOC. The entire data package can be found in Appendix E.
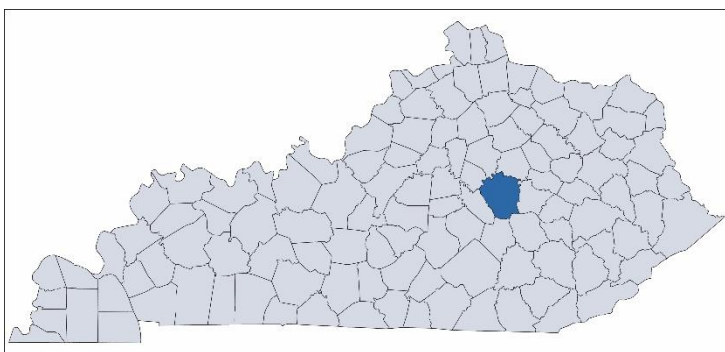
Resources, Opportunities, and Processes Across the Domains

Attendees participated in a facilitated discussion to compile existing resources and supports, identify opportunities for improvement, and outline key processes. Discussions began with all participants focusing on the domains of Protective and Preventative Community Resources and Initial Systems Contact. A complete list of workshop attendees can be found in Appendix D.

Participants then discussed the three focus areas of: adult criminal justice, juvenile justice, or child welfare, to describe system processes. Process maps can be found in Appendix F (Criminal Justice), Appendix G (Child Welfare), and Appendix H (Juvenile Justice).

"The community mapping event was a constructive step toward building a stronger, more cohesive community where every individual has access to the resources and support that is needed to flourish.

The time and energy dedicated by participants—whether they participated as nonprofit representatives, service providers, or community leaders—demonstrate an enduring commitment to improving the lives of those in Madison County. When we come together as a community to share information, resources, and insights, we are not just mapping physical services but also building a network of care, trust, and empowerment.

The insights shared and the time invested by everyone involved will have a lasting impact, not only in improving the immediate access to services but also in fostering a long-term culture of collaboration and mutual support."

- Judge Cole Adams Maier

Participants then came back together to map resources and opportunities in the domains of Individuals and Families with Court Involvement, and Individuals and Families Returning to or Reentering the Community.

Participants identified the following resources and opportunities in the domains of Community, Risk Factors, Initial Systems Contact, Individuals and Families with Court Involvement, and Individuals and Families Returning to or Reentering the Community.

Community Table 1: Resources in the Community

Protective and Preventative Community Resources
Addiction Recovery Centers - Recovery and housing support, second chance employment
Adult Day Center
Baptist Health - mentorship program in hospital
Berea College - Low-income and first-generation programs
Blueprint for Safety
Brightview
Center for Excellence in Learning - Berea College (mentorship and barrier relief)
Certification and licensing programs (Berea and EKU colleges)
Children's Champion
Churches - Faith based support, financial assistance
Community Action Agency
Community Collaboration for Children (CCC)
Dry Dock - Support meetings
Early Start Head Start - therapy, intervention services for youth
Eastern Kentucky University - Post-secondary education, adult learning programs, prior learning credits, resource assistance, student assistance, intervention team
Eastern Scholar House
EKU Psychology Clinic
Enrich - Resource lists, developing resource hub
Ethan Health - Outpatient support services, meals, transportation, employment connections, needle exchange
Federated Transportation
Family Resource and Youth Services Centers (FRYSC)
God's Food Pantry
Goodwill Opportunity Center - employment, case management, document assistance
Health Access Nurturing Development Services (HANDS)
Harm Reduction Program - Needle exchange, Narcan, education and resources
Hope Food Pantry
Hope's Wings - Domestic violence/ sexual assault/ stalking resources and services

Housing Shelter
Isaiah House
Kentucky Career Center
Kentucky Recovery Centers
Kentucky Transitional Assistance Program (KTAP) (Department of Community Based Services) - Cash assistance, transportation, job search assistance, relocation assistance
KY Career Center - Employment, Transition to Transformation, youth programs (in/out of school), supportive services
KY Counseling Center
KY River Foothills - Public transportation, veteran services, tax assistance, case management
Last Mile to Work Program
Liberty Place - Recovery housing
Madison Home - Shelter for families and youth
Maxwell Clinic - Legal aid services (civil)
Mountain Comprehensive Care Center - School-based services, outpatient clinic
Mustard Tree Counseling
NAMI - Education and advocacy for mental health, support groups for families and individuals
National Association for Advancement of Colored People
New Liberty - Shelter for families
New Opportunity School for Women
New Vista - School-based services, outpatient clinic, transportation services, mobile crisis units
Operation Unite
Parsons Counseling
Peace Hospital
Peace of Mind Counseling
Perfect Imperfections
Pregnancy Help Center
Public Library
Redeeming Hope - Sexual violence/trafficking resource center
Richmond Police Department Community Engagement Projects: Boys/girls camps, Touch-a-Truck, backpack program
Richmond Police Department Summer Camp

Richmond/Berea Pride - LGBTQ+ services and support
Room at the Inn (Berea) - Shelter during winter months
Rotary Club - charity financial assistance, volunteers
Salvation Army
School social workers
Scout programs
St. John's
Teen Center
The Ridge
Thrive Center
United Way of the Bluegrass - 211
University of Kentucky EmPath Unit - Mental health crisis services
Up Initiative - Basic needs, animal care
Veteran Affair Liaison
Veterans Center
Vocational Rehabilitation - Funding for services, clothing, other needs
Vocational School - High school aged youth
Volunteers of America
Whitehouse Clinic - Healthcare, pharmacy, psychiatric care, substance use treatment, MOUD services, HIV testing
Young Men's Christian Association (YMCA)
Yonder Behavioral Health
Youth community sports

Table 2: Opportunities for Risk Factors

Protective and Preventative Opportunities for Community
Access to affordable housing - More units, removal of rental barriers
Affordable childcare and childcare - Alternative hours of operation
Care continuum for adults - between acute/crisis and standard outpatient
Casey's Law - Funding source

Casey's Law - More evaluators needed
Foster care options for animals when individuals are going to treatment
Hygiene stations - Showers, laundry, etc.
Mental illness awareness - Interactive resource guide, include employers in education efforts
Non-Faith based services - Mental health/housing/recovery services
One-stop resource hub
Organization of church resources
Prevention services for families
Psychiatric crisis transportation
Residential mental health services
Supportive employment - Removing barriers (criminal records stipulations), resources, clothing closets
Supportive housing - Partnerships with landlords, voucher programs
Supportive housing partnerships - Case management, behavioral health services
Transitional housing (Long-term without day-to-day applications)
Transportation access - Public transit, funding
Year-round emergency shelter and housing
Youth sports/extracurricular financial aid - Equipment assistance
Youth support networks - Expand teen center programs, UNITE initiative support

Initial Systems Contact

Table 3: Resources for Initial Systems Contact

Initial Systems Contact Resources
Adult Protective Services
Baptist Health
Blueprint Community - Law enforcement / 911 / CIT training
Child Protective Services

Community Resource Coordinator 14
Department of Community Based Services
Detention Center Intake Screenings
EmPath Unit- University of Kentucky
Ethan Health
Handle with Care Program - Notifies schools of law enforcement interactions/traumatic situations
Health Access Nurturing Development Services (HANDS) - Parenting/early intervention
KBC – In-home services
Kentucky Correctional Psychiatric Center - Medical/mental health referral services
Law Enforcement - Community engagement activities
PHC - Program help center
Police Social Workers
Pretrial Diversion Services - SB 90
School System/ Family Resource and Youth Services Centers - Placement and intervention ideas
Thrive
Victim Advocates
Voices of Hope – Detention center services

Table 4: Opportunities for Initial Systems Contact

Initial Systems Contact Opportunities
911 and law enforcement training on initial responses (additional opportunities)
Continuation of mental health services, including medication, while incarcerated (youth and adult)
Criminal justice system process education (juvenile, adult, family)
Data gathering/explanation
Deflection programs

Family Resource and Youth Services Centers - support/school staff education (mental health education expansion)
Mental health treatment for youth with disabilities
Police social worker partnerships
Pro-social law enforcement community presences
Stigma awareness - Lived experience, safe spaces
Youth crisis residential placement

Individuals and Families with Court Involvement

Table 5: Resources for Individuals and Families with Court Involvement

Individuals and Families with Court Involvement Resources
Alternative School
Alternative Sentencing Worker
AppalRed Legal Aid
Baptist Health Chemical Dependency Program
Baptist Health Court Community Liaison (district court hearings)
Blueprint for Safety Team
Citizens Foster Care Review Board
County Attorney Diversion Programs (Traffick offenses)
Court-Appointed Special Advocate
Day Treatment School
Department of Community Based Services - Funds for employment, basic needs, etc.
Drug Court
Dry Dock - AA/NA services, sponsorship
Faith- Based Community
Family Accountability Intervention Response (FAIR Team)
Family Connection Program (VOA, DCBS)
Family Recovery Court

Hood Program
Kentucky Virtual Schools - Home based services
Madison County Detention Center - GED services/MRT courses
Mountain Comprehensive Care Center (MCCC): Community Support Associates
Medication Assisted Treatment Programs
Mental Health Court
New Vista (Transportation- Drug Court)
Probation and Parole - Supportive assistance
Stonewell Counseling - Anger Management/Batter Intervention Program
Truancy Diversion Program
Virtual IOP for Youth
Volunteers of America Restorative Justice Program - Case management, resources
Youth Diversion Program

Table 6: Opportunities for Individuals and Families with Court Involvement

Individuals and Families with Court Involvement Opportunities
Localized substance use disorder and mental health treatment services (youth: inpatient)
Peer led groups and/or organizations
Pro-social activities for justice involved youth
Resources and awareness of services for victims of sex trafficking
Specialized service providers for youth (resource availability and awareness)
Transportation to inpatient/ crisis services for youth
Youth peer support services

Individuals and Families Returning to/Reentering the Community

Table 7: Resources for Individuals and Families Returning to/Reentering the Community

Individuals and Families Returning to/Reentering the Community Resources

AppalReD – Legal/paralegal services
Dry Dock – AA/NA/lived experience groups
Freedom House for Mothers and Children – Recovery services for families
Goodwill – Expungement services, car assistance, work opportunities
Oxford House Reentry Coordinators – Recovery housing assistance
Public Library Workshop – Variety of educational courses/groups
RISE Program – Job readiness

Table 8: Opportunities for Individuals and Families Returning to/Reentering the Community

Individuals and Families Returning to/Reentering the Community Opportunities
In-custody reentry partnerships
Local Goodwill Opportunity Center location
Pre-release program/classes
Targeted opportunity classes

Missing Partners

In addition to identifying resources and opportunities, participants recognized key partners who were not present at the Community Mapping Workshop but would be valuable for future discussions and advancing this work. The missing partners include:

Elected Officials
School System Representatives / Board of Education
Commonwealth Attorney
Aetna- Managed Care Provider
Kentucky River Foothills
Adult Protective Services
Family Resource and Youth Services Centers (FRYSC)
Food Banks
Shannyn Drummond
Public Library Representative
VA Representative
Department of Juvenile Justice
Sara Stringfield

Salvation Army
Chamber of Commerce
County Commissioners
Law Enforcement
Faith-Based Community

Identifying Priorities and Developing Action Plans

Facilitators provided guidance on selecting priorities and developing action plans. Each participant received three votes to indicate their top choices. Similar opportunities were grouped, and the four highest-ranked priorities were selected for action planning.

The four priorities identified in Madison County were access to affordable housing, one-stop community resource hub, year-round shelter and emergency housing, and youth crisis stabilization services. Participants chose a priority area to focus on and collaborated with others to develop high-level action plans. Each team then presented their plans to the whole group, allowing for questions and feedback. Completed action plans can be found in Appendices I through L.
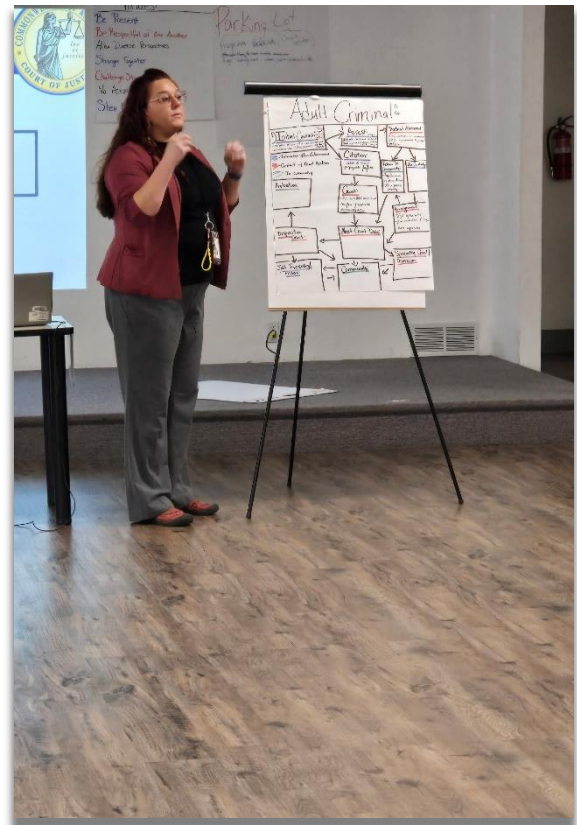
Access to Affordable Housing

The Access to Affordable Housing subgroup is committed to reducing the county's unhoused population by 5% by the end of the 2025 calendar year, focusing on sustainable, collaborative solutions to improve housing access and stability for vulnerable individuals and families.

One-Stop Community Resource Hub

The One-Stop Community Resource Hub subgroup is focused on establishing a centrally located center that brings together representatives from key community resource agencies. This initiative also includes the development of a live, real-time resource directory and a user-friendly mobile app to streamline access to county services. Notably, aspects of this project are already partially underway through the efforts of another organization, presenting a valuable opportunity for collaboration and alignment to enhance community impact.

Year-Round Shelter and Emergency Housing

The Year-Round Emergency and Shelter Housing subgroup is interested in the development of a new shelter facility in Madison County while exploring immediate solutions such as extending the certificate of occupancy for Madison Homes. In parallel, the group is focused on designing a transitional housing program that supports individuals in moving from emergency shelter into stable, long-term housing.

Youth Crisis Stabilization Services

The Youth Crisis Stabilization Services subgroup is dedicated to identifying a suitable location in Madison County for a youth stabilization center that serves as a critical step-down option for youth who do not meet criteria for hospitalization but still require intensive support. The group is actively exploring existing models, potential implementation barriers, and strategies to fill this service gap. Key considerations include transportation solutions requiring credentialed providers, as well as securing ongoing funding to ensure sustainability.

Next Steps and Recommendations

Kentucky has a strong history of embracing change, and the Kentucky Judicial Commission on Mental Health has taken a comprehensive approach to engagement through various initiatives leading up to this report and its recommendations.

1. Reach out to the individuals who were missing to engage them.
Community Mapping participants identified key system partners who were not present but whose expertise could help advance the priority areas (see page 16 of this report). As work progresses, it is crucial to engage these individuals and continually assess, "Who is missing?" When bringing in new partners, provide an overview of Community Mapping, explain the priority areas and action plans, and highlight the value of their participation and potential roles.

Designate Community Mapping participants to reach out to missing partners and incorporate this task into the Action Plan to track progress effectively.

2. Plan for disseminating the work.
Develop a strategy to inform the community about Community Mapping, share priority areas and Action Plans, and provide updates on progress. This plan may involve existing community groups and collaboratives or by engaging the broader community. Communicating this work helps attract new partners, align with ongoing initiatives, leverage available resources, and highlight successes and advancements.

3. Continue working on Action Plans and reporting on progress.
The group's dedication to their work and commitment to collaboration is clear. To ensure continued progress, we recommend establishing a structured plan for oversight of the Action Plans and defining how progress will be monitored. Regular collaborative meetings already taking place present an opportunity to incorporate Action Plan updates as a standing agenda item. These meetings should also serve as a platform for discussing challenges, identifying solutions, and addressing barriers. Implementing a system for ongoing monitoring and evaluation will help track progress, highlight areas for improvement, and allow for necessary adjustments, ultimately supporting the successful implementation of initiatives and driving meaningful outcomes.

APPENDICES
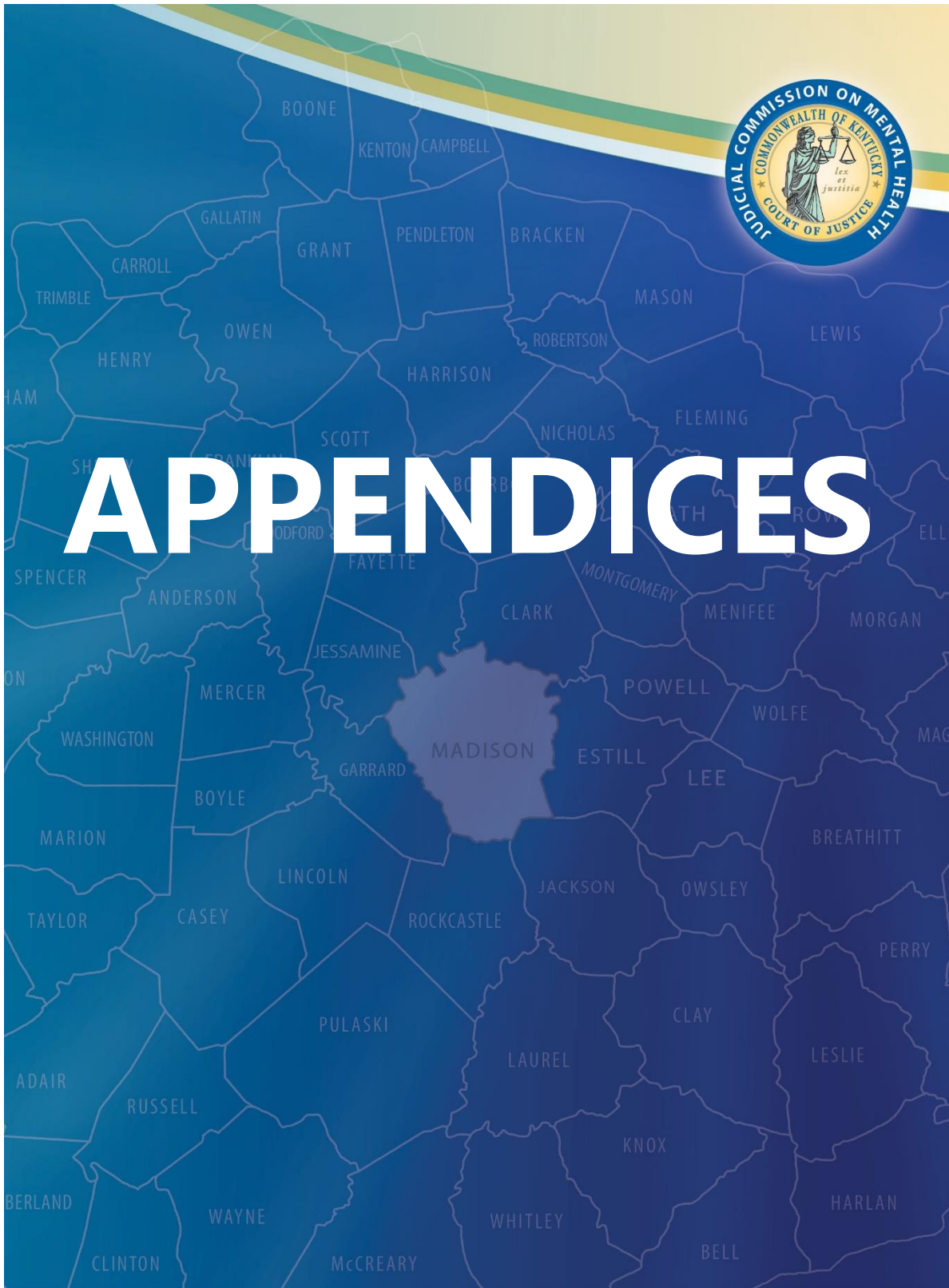
<u>APPENDIX A</u> Sequential Intercept Mapping (SIM)

THE SEQUENTIAL INTERCEPT MODEL
Advancing Community-Based Solutions for Justice-Involved People with Mental and Substance Use Disorders

△ PRA
POLICY RESEARCH ASSOCIATES

The Sequential Intercept Model

Key Issues at Each Intercept

Intercept 0

Mobile crisis outreach teams and co-responders. Behavioral health practitioners who can respond to people experiencing a mental or substance use crisis or co-respond to a police encounter.

Emergency department diversion. Emergency departments (EDs) can provide triage with behavioral health providers, embedded mobile crisis staff, and/or peer specialist staff to provide support to people in crisis.

Police-behavioral health collaborations. Police officers can build partnerships with behavioral health agencies along with the community and learn how to interact with individuals experiencing a crisis.
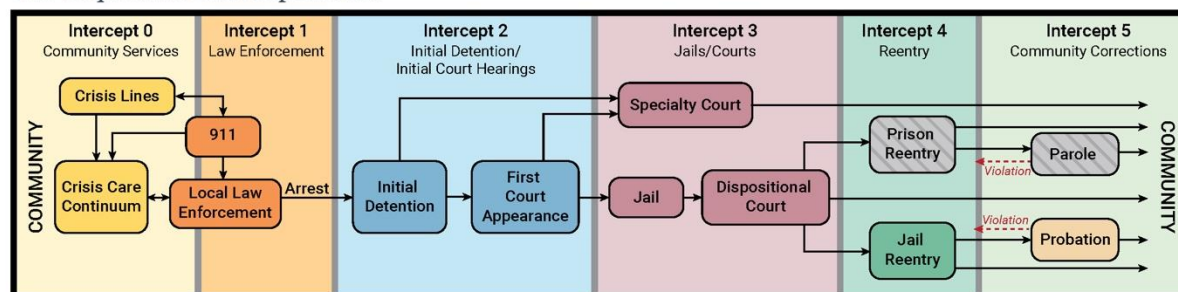
Intercept 1

Dispatcher training. Dispatchers can identify mental or substance use crisis situations and pass that information along so that Crisis Intervention Team officers can respond to the call.

Specialized police responses. Police officers can learn how to interact with individuals experiencing a crisis in ways that promote engagement in treatment and build partnerships between law enforcement and the community.

Intervening with frequent utilizers and providing follow-up after the crisis. Police officers, crisis services, and hospitals can reduce frequent utilizers of 911 and ED services through specialized responses.

Intercept 2

Screening for mental and substance use disorders. Brief screens can be administered universally by non-clinical staff at jail booking, police holding cells, court lock ups, and prior to the first court appearance.

Data-matching initiatives between the jail and community-based behavioral health providers.

Pretrial supervision and diversion services to reduce episodes of incarceration. Risk-based pre-trial services can reduce incarceration of defendants with low risk of criminal behavior or failure to appear in court.

Intercept 3

Treatment courts for high-risk/high-need individuals. Treatment courts or specialized dockets can be developed, examples of which include adult drug courts, mental health courts, and Veterans treatment courts.

Jail-based programming and health care services. Jail health care providers are constitutionally required to provide behavioral health and medical services to detainees needing treatment, including providing access to medication-assisted treatment (MAT) for individuals with substance use disorders.

Collaboration with the Veterans Justice Outreach specialist from the Veterans Health Administration.

Intercept 4

Transition planning by the jail or in-reach providers. Transition planning improves reentry outcomes by organizing services around an individual's needs in advance of release.

Medication and prescription access upon release from jail or prison. Inmates should be provided with a minimum of 30 days' medication at release and have prescriptions in hand upon release, including MAT medications prescribed for substance use disorders.

Warm hand-offs from corrections to providers increase engagement in services. Case managers that pick an individual up and transport them directly to services will increase positive outcomes.

Intercept 5

Specialized community supervision caseloads of people with mental disorders.

MAT for substance use disorders. MAT approaches can reduce relapse episodes and overdoses among individuals returning from detention.

Access to recovery supports, benefits, housing, and competitive employment. Housing and employment are as important to justice-involved individuals as access to mental and substance use treatment services. Removing criminal justice-specific barriers to access is critical.

Implementing Intercept 0

Crisis Response

Crisis response models provide short-term help to individuals who are experiencing mental or substance use crisis and can divert individuals from the criminal justice system. Crisis response models include:

- Certified Community Behavioral Health Clinics
- Crisis Care Teams
- Crisis Response Centers
- Mobile Crisis Teams

Police Strategies

Proactive police responses with disadvantaged and vulnerable populations are a unique method of diverting individuals from the criminal justice system. Proactive police response models include:

- Crisis Intervention Teams
- Homeless Outreach Teams
- Serial Inebriate Programs
- Systemwide Mental Assessment Response Teams

Sequential Intercept Model as a Strategic Planning Tool

The **Sequential Intercept Model** is most effective when used as a community strategic planning tool to assess available resources, determine gaps in services, and plan for community change. These activities are best accomplished by a team of stakeholders that cross over multiple systems, including mental health, substance use, law enforcement, pretrial services, courts, jails, community corrections, housing, health, social services, people with lived experiences, family members, and many others. Employed as a strategic planning tool, communities can use the **Sequential Intercept Model** to:

1. Develop a comprehensive picture of how people with mental and substance use disorders flow through the criminal justice system along six distinct intercept points: (0) Community Services, (1) Law Enforcement, (2) Initial Detention and Initial Court Hearings, (3) Jails and Courts, (4) Reentry, and (5) Community Corrections

2. Identify gaps, resources, and opportunities at each intercept for adults with mental and substance use disorders

3. Develop priorities for action designed to improve system and service-level responses for adults with mental and substance use disorders

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History and Impact of the Sequential Intercept Model

The Sequential Intercept Model (SIM) was developed over several years in the early 2000s by Mark Munetz, MD, and Patricia A. Griffin, PhD, along with Henry J. Steadman, PhD, of Policy Research Associates, Inc. (PRA). The SIM was developed as a conceptual model to inform community-based responses to the involvement of people with mental and substance use disorders in the criminal justice system.

After years of refinement and testing, several versions of the model emerged. The "linear" depiction of the model found in this publication was first conceptualized by Dr. Steadman of PRA in 2004[1] through his leadership of a National Institute of Mental Health-funded Small Business Innovative Research grant awarded to PRA. The linear SIM model was first published by PRA in 2005[2] through its contract to operate the GAINS Center on behalf of the Substance Abuse and Mental Health Services Administration (SAMHSA). The "filter" and "revolving door" versions of the model were formally introduced in a 2006 article in the peer-reviewed journal *Psychiatric Services* authored by Drs. Munetz and Griffin.[3] A full history of the development of the SIM can be found in the book *The Sequential Intercept Model and Criminal Justice: Promoting Community Alternatives for Individuals with Serious Mental Illness.*[4]

With funding from the National Institute of Mental Health, PRA developed the linear version of the SIM as an applied strategic planning tool to improve cross-system collaborations to reduce involvement in the justice system by people with mental and substance use disorders. Through this grant, PRA, working with Dr. Griffin and others, produced an interactive, facilitated workshop based on the linear version of the SIM to assist cities and counties in determining how people with mental and substance use disorders flow from the community into the criminal justice system and eventually return to the community.

During the mapping process, the community stakeholders are introduced to evidence-based practices and emerging best practices from around the country. The culmination of the mapping process is the creation of a local strategic plan based on the gaps, resources, and priorities identified by community stakeholders.

Since its development, the use of the SIM as a strategic planning tool has grown tremendously. In the 21st Century Cures Act,[5] the 114th Congress of the United States of America identified the SIM, specifically the mapping workshop, as a means for promoting community-based strategies to reduce the justice system involvement of people with mental and substance use disorders. SAMHSA has supported community-based strategies to improve public health and public safety outcomes for justice-involved people with mental and substance use disorders through SIM mapping workshop national solicitations and by providing SIM mapping workshops as technical assistance to its criminal justice and behavioral health grant programs. In addition, the Bureau of Justice Assistance has supported the SIM mapping workshop by including it as a priority for the Justice and Mental Health Collaboration Program grants.

With the advent of Intercept 0, the SIM continues to increase its utility as a strategic planning tool for communities who want to address the justice involvement of people with mental and substance use disorders.[6]

1. Steadman, H.J. (2007). *NIMH SBIR Adult Cross-Training Curriculum (AXT) Project – Phase II final report.* Delmar, NY: Policy Research Associates. (Technical report submitted to NIMH on 3/27/07)
2. National GAINS Center. (2005). *Developing a comprehensive state plan for mental health and criminal justice collaboration.* Delmar, NY: Author.
3. Munetz, M.R., & Griffin, P.A. (2006). Use of the sequential intercept model as an approach to decriminalization of people with serious mental illness. *Psychiatric Services, 57,* 544-549. DOI: 10.1176/ps.2006.57.4.544
4. Griffin, P.A., Heilbrun, K., Mulvey, E.P., DeMatteo, D., & Schubert, C.A. (Eds.). (2015). *The sequential intercept model and criminal justice: Promoting community alternatives for individuals with serious mental illness.* New York: Oxford University Press. DOI: 10.1093/med:psych/9780199826759.001.0001
5. 21st Century Cures Act, Pub. L. 114-255, Title X V, Subtitle B, Section 14021, codified as amended at 41 U.S.C. 3797aa, Title, Section 2991
6. Abreu, D., Parker, T.W., Noether, C.D., Steadman, H.J., & Case, B. (2017). Revising the paradigm for jail diversion for people with mental and substance use disorders: Intercept 0. *Behavioral Sciences & the Law, 35,* 380-395. DOI: 10.1002/bsl.2300

APPENDIX B **Upstream**

Strengthening Children and Families through Prevention and Intervention Strategies

A COURT AND COMMUNITY-BASED APPROACH

Upstream is a community-based approach that leverages court resources, judicial leadership, and child welfare and juvenile justice 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 provides a framework to:

Map specific community resources, opportunities, and collaborations.

Develop a comprehensive landscape of how children, youth, and families enter and move through the child welfare system and the courts.

Identify opportunities to divert families to appropriate resources before and after formal court involvement and at each point of prevention and intervention.

Create a strategic action plan informed by the community map.

UPSTREAM DOMAINS OF PREVENTION & INTERVENTION

PROCESS MAP

COMMUNITY
RESOURCES AND SUPPORTS EVERY FAMILY NEEDS TO THRIVE

| Economic Stability | Neighborhood and Built Environment | Equitable Treatment Under the Law | Healthcare Access and Quality | Social and Community Context | Education Access and Quality |

FAMILIES WITH RISK FACTORS
RESOURCES AND SUPPORTS TARGETED AT FAMILIES WITH ONE OR MORE CHARACTERISTICS ASSOCIATED WITH NEGATIVE OUTCOMES

Families with Risk Factors Identified → Referral to Services

REPORTING ALLEGATIONS

CHILD WELFARE

FAMILIES WITH ALLEGATIONS
RESOURCES AND PROCESSES TO RESPOND TO ALLEGATIONS OF ABUSE AND/OR NEGLECT

Screening In/Out → Investigation → Service Assessments → Intervention Services

JUVENILE JUSTICE

YOUTH WITH ALLEGATIONS
RESOURCES AND PROCESSES TO RESPOND TO ALLEGATIONS OF DELINQUENCY

Diversion → Prosecution → Juvenile Court Intake

REFERRAL TO COURT

FAMILIES WITH COURT INVOLVEMENT
RESOURCES AND PROCESSES TO SUPPORT SAFETY, PERMANENCY, AND WELLBEING AND PROMOTE POSITIVE OUTCOMES FOR CHILDREN AND FAMILIES

Petition/Shelter Care → Adjudication/Disposition → Review Hearings → Establishing Permanency

YOUTH WITH COURT INVOLVEMENT
RESOURCES AND PROCESSES TO SUPPORT REHABILITATION AND PUBLIC SAFETY

Diversion → Adjudication → Disposition → Reentry

COMMUNITY

APPENDIX C **Agenda**

Community Mapping Workshop: Madison County
Agenda: January 29, 2025
8:00 AM – 4:30 PM

Registration and Orientation
Welcome and Opening Remarks *Honorable Cole Maier, Circuit Judge, 25th Judicial Circuit* • Housekeeping • Introductions • Setting the Stage: Overview of Sequential Intercept Model, Upstream, and Community Mapping • Defining the Community Landscape through Data
Break
Mapping the Community: Resources for Community at Large and Risk Factors
Lunch and Networking *Lunch on-site provided by* **Mountain Comprehensive Care Center**.
Mapping the Community: Opportunities for Community at Large and Risk Factors
Introduction to Prioritizing
Introduction to Action Planning
Break (VOTE)
Group Action Plan Demonstration
Process Mapping (Break into Groups)
Review Process Maps
Wrap Up Day 1
Adjourn

Community Mapping Workshop: Madison County
Agenda: January 30, 2025
8:00 AM – 4:30 PM

Registration
Welcome and Review
Mapping the Community: Initial System Contact
Mapping the Community: Court Involvement
Break
Mapping the Community: Reentry and Reunification
Voting on Priorities and Next Steps Preview
Lunch Break (VOTE)   *Lunch on-site provided by* **Brightview**.
Announcement of Priorities   Action Planning 101
Action Planning in Small Groups
Break
Report Out   Next Steps
Commitment and Closing Remarks   *Honorable Kristin Clouse, Circuit Judge, 25th Judicial Circuit*
Adjourn

APPENDIX D **List of Participants**

Last Name	First Name	Agency	Attended 01/29/25	Attended 01/30/25
Barnes	Monica	Madison Home	X	X
Benge	Victoria	CASA of the Wilderness Trail	X	
Bennett	Deb	Department of Family and Juvenile Services	X	X
Bergman	Jennifer	Goodwill Industries of Kentucky, Lexington Region Career Services		X
Bishop	Amber	Department of Specialty Courts	X	
Bothman	Christina	Department of Family and Juvenile Services	X	X
Brock	Larry	Madison County Detention Center	X	
Burns-Vaughn	LaToya	New Vista	X	
Burton	Brittany	Department for Community Based Services -Family Support	X	X
Campbell	Maurice	Department of Family and Juvenile Services	X	X
Centers	Felisha	Enrich	X	
Chadwell	Brad	White House Clinics	X	X
Clouse	Kristin	25th Judicial Circuit	X	X
Cole	Karen	Ethan Health	X	X
Creekmore	Stephanie	Oxford House		X
Cunnigan	Janetta	Department of Public Advocacy	X	X
Curtsinger	Ryan	Isaiah House		X
Deaton	Caitlyn	Department of Pretrial Services	X	X
Diaj	Stephanie	CASA of the Wilderness Trail (CASA of Madison and Clark Counties)		X
Disel	Jade	Family and Juvenile Services	X	X

Drake	Jennifer	Department for Community Based Services	X	X
Ferrell	Julie	Department for Community Based Services	X	
Guffy	Naomi	Mountain Comprehensive Care Center	X	X
Hall	Debbie	Department of Statewide Programs	X	X
Hall	Dwight	Madison County Detention Center	X	X
Hamilton	Emily	Pretrial Services	X	X
Harrington	Brenda	NAMI	X	X
Henry	Frankie	Operation UNITE		X
Hensley	Zinnia	Berea Police Department		X
Herald	Adam	Baptist Health- Richmond	X	X
Hisel	Rebecca	Kentucky Judicial Commission on Mental Health		X
Holland	Shannon	Department of Public Advocacy	X	X
Hollon	Skylar	Madison County Attorney Office		X
Howell	Suzanne	Richmond Police Dept.	X	X
Jacobs	LaRee	Goodwill Industries of Kentucky	X	
Jasinski	Lindsey	Eastern State Hospital	X	X
Jimenez	Michelle	SPC	X	X
Jones	LeAnn	Dept of Public Advocacy	X	X
Jordan	Jamie	Enrich	X	X
Kelley	Candice	Madison County Attorney's Office	X	X
Kerns	Shaine	SVRC of the Bluegrass	X	X
Kirstein	Daniel	Enrich	X	
Lainhart	Jennifer	Hope's Wings Domestic Violence Program	X	X

Maggard	Brandy	Madison County Adult Education	X	
Maier	Cole	25th Judicial Circuit	X	
Masters	Bethany	Department of Pretrial Services	X	X
Maxey	Della	Liberty Place	X	X
Mink	Angela	Volunteers of America	X	X
Mitchell	Shawna	Kentucky Judicial Commission on Mental Health	X	
Moore	Leigh Ann	AppalReD Legal Aid	X	X
Moreland	Robyn	Eastern KY University/Center for Student Parents	X	
Nichols	Elizabeth	Department of Specialty Courts	X	
Patton-Pelt	Rosalyn	Citizens Foster Care Review Board	X	
Petry	Jerian	UofL Health - Peace Hospital	X	
Powell	Chase	Department of Specialty Courts	X	X
Ramsay	Amber	Roaring Brook Recovery	X	
Saulnier	Stephanie	Eastern Kentucky University Dept. of Social Work / Citizens Foster Care Review Board	X	X
Sears	Shan	Department of Family and Juvenile Services	X	X
Stilwell	Tanya	Liberty Place	X	X
Sweat	Avery	Probation and Parole	X	X
Terry	Drema	Department of Specialty Courts	X	X
Terry	Tony	Madison County Sheriff's Office	X	X
Thacker	Rolando	Kentucky Career Center/Bluegrass Area Development District	X	
Thomas	Kendra	The Ridge		X
Townsend	Christine	Department of Pretrial Services	X	X
Turner	Andrea	New Vista		X

Vundi	Nikita	Madison County Health Department	X	
Walden	Jennifer	New Opportunity School for Women	X	X
Walker	Tamara	Madison County Health Department		X
Wallace	Siena	Department of Juvenile Justice - Alternatives to Detention	X	X
Ward	David	25th Judicial Circuit	X	X
Ware	Christina	Specialty Court	X	X
Wilson	Rebecca	KYAE/Reentry and Employment Services	X	X
Wood	Rustin	Isaiah House	X	
Wynn	Samantha	Volunteers of America	X	X
Young	Katie	AppalReD Legal Aid	X	X

APPENDIX E **Data**

Figure 1. Demographics: Race by Percentage of Population (2023)
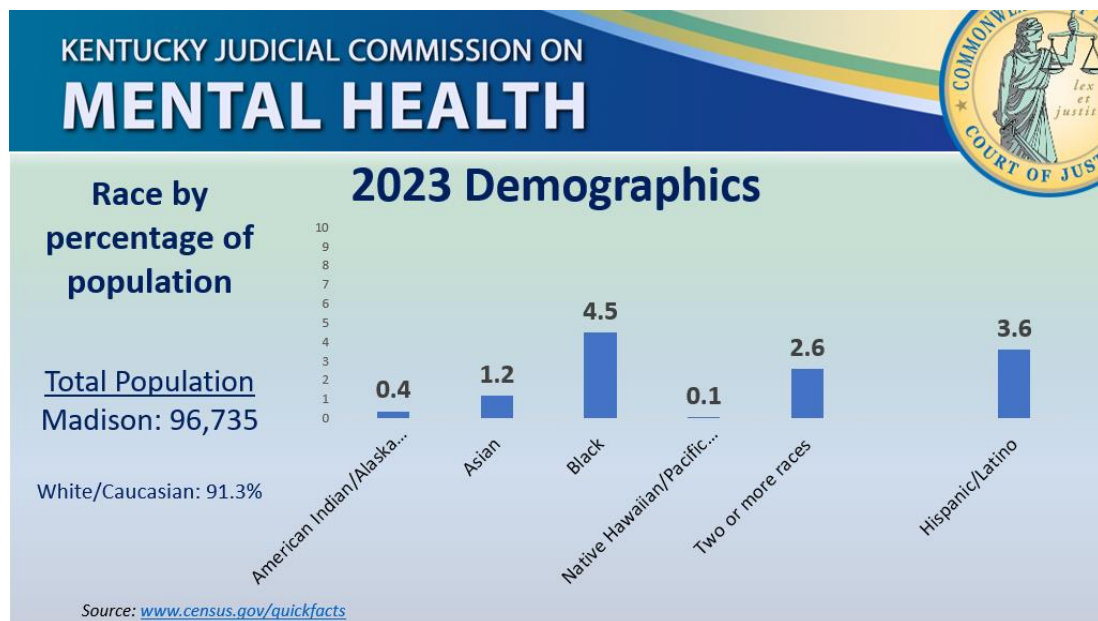
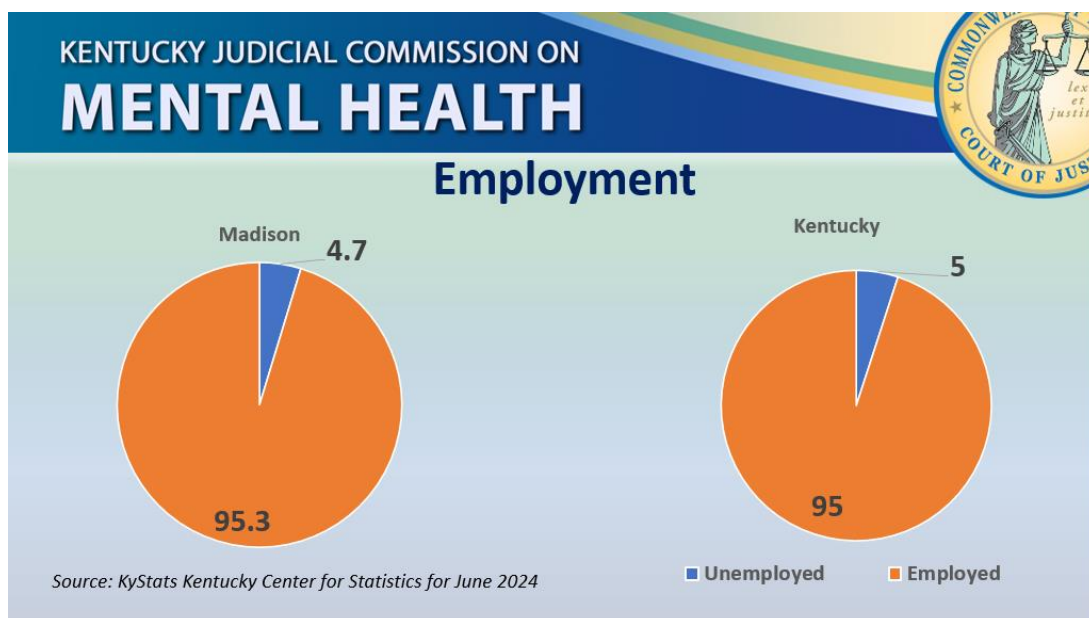**Figure 2. Demographics: Age by Percentage of Population (2023)**

KENTUCKY JUDICIAL COMMISSION ON
MENTAL HEALTH

2023 Demographics

Age by percentage of population

Total Population
Madison: 96,735

Bar chart values: under 18: 21.2, 18-64: 63.8, 65+: 15

■ Warren

Source: www.census.gov/quickfacts
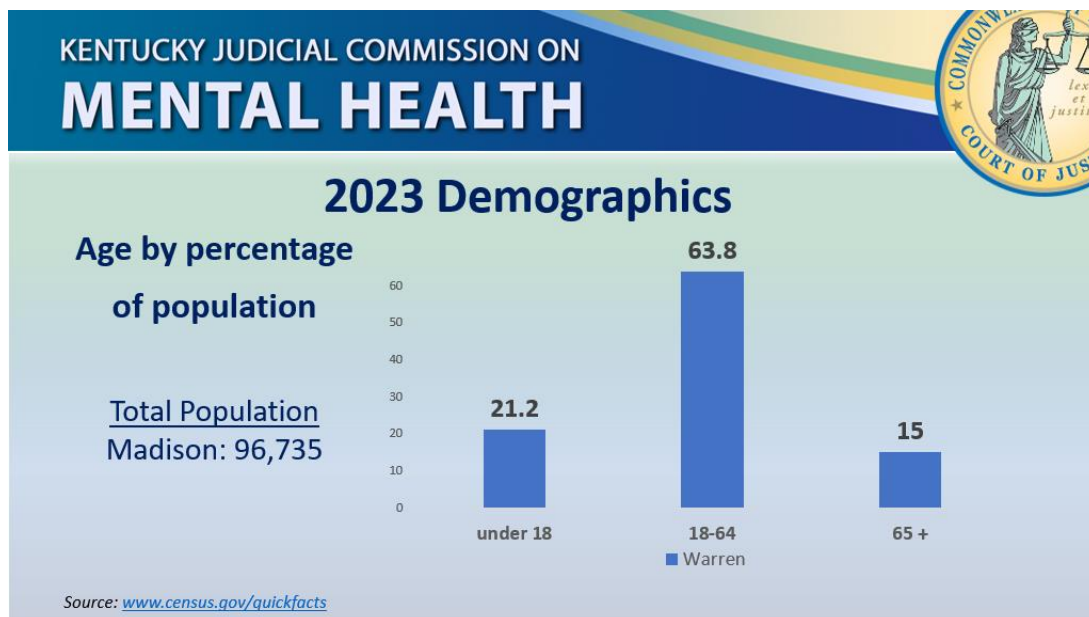
Figure 3. Employment Rates (2024)

KENTUCKY JUDICIAL COMMISSION ON
MENTAL HEALTH
Employment

Madison — 4.7 / 95.3

Kentucky — 5 / 95

Source: KyStats Kentucky Center for Statistics for June 2024

■ Unemployed   ■ Employed

Figure 4. Residents Residing at or Below Poverty Level (2023)
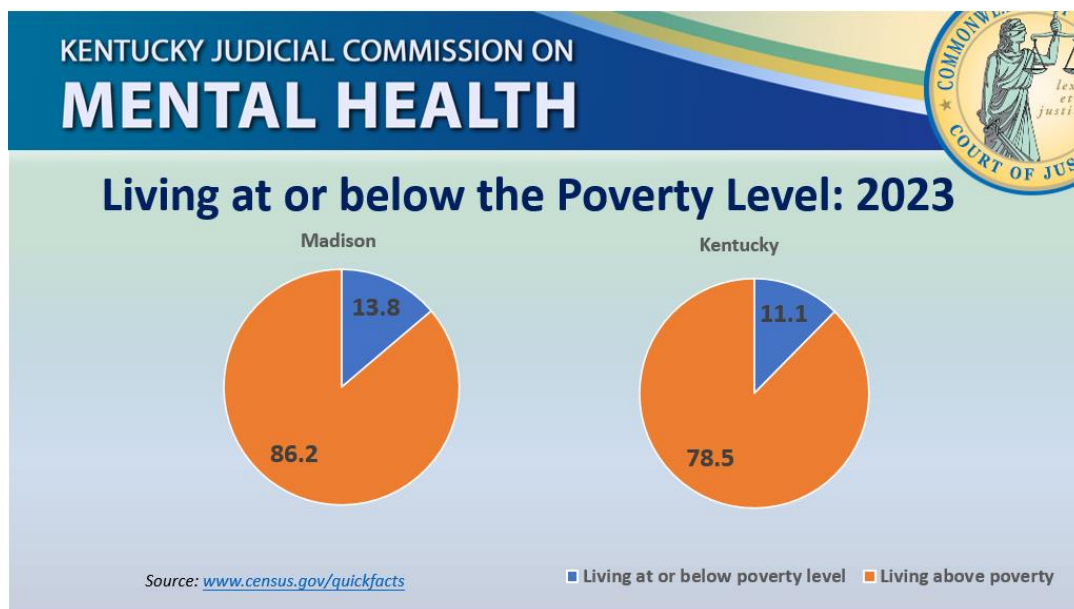
Figure 5. Access (2023)
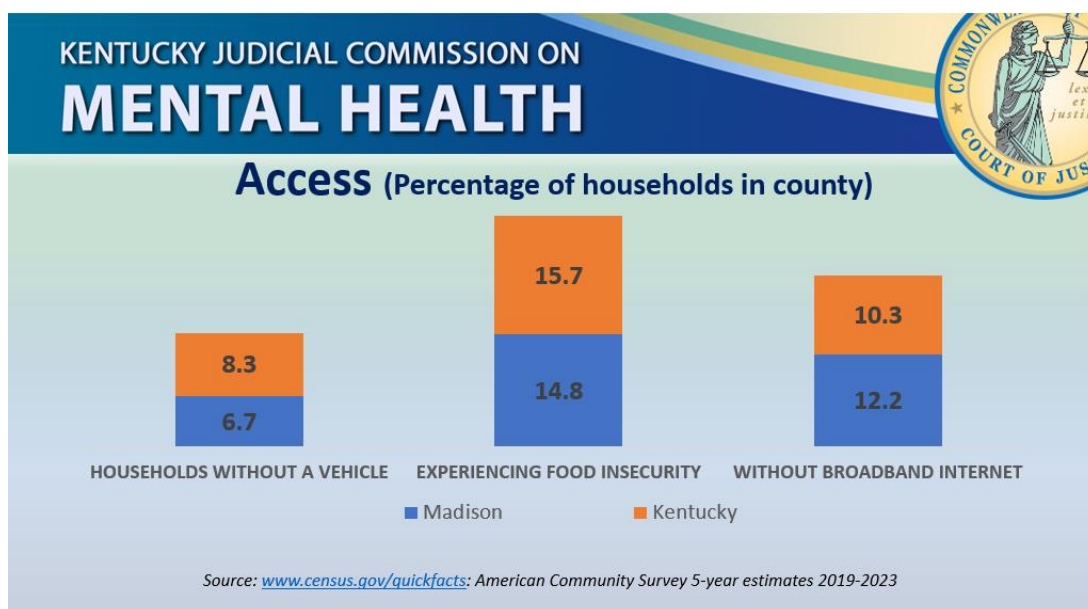
Figure 6. Percentage of Students Experiencing Homelessness (2023)
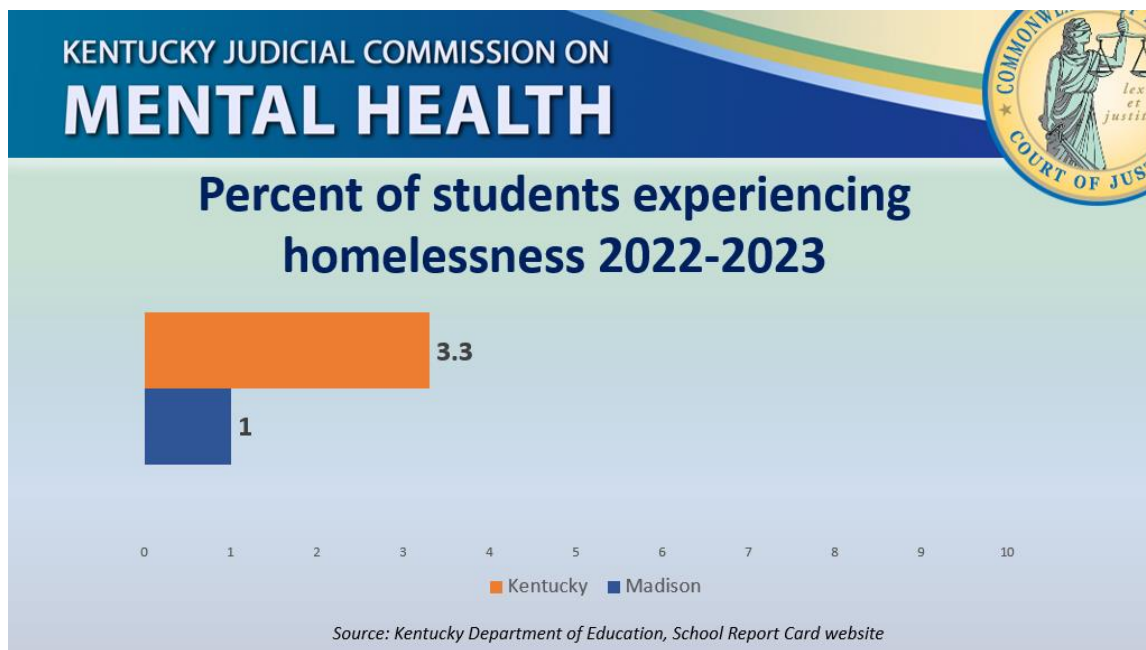
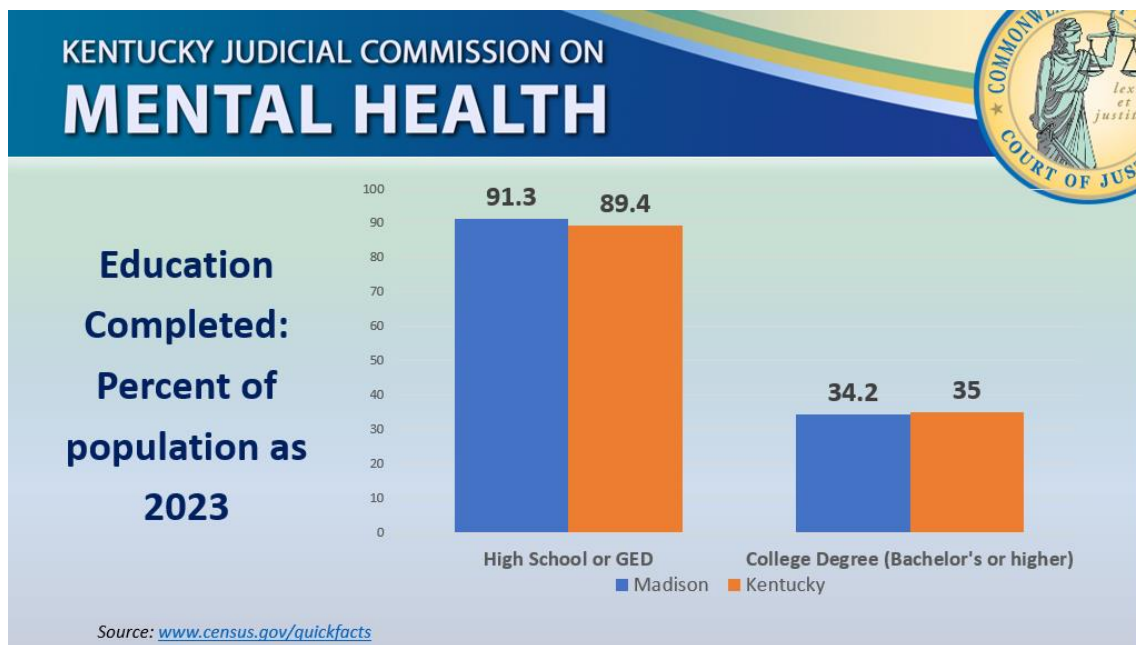**Figure 7. Education Levels by Percentage of Population (2023)**
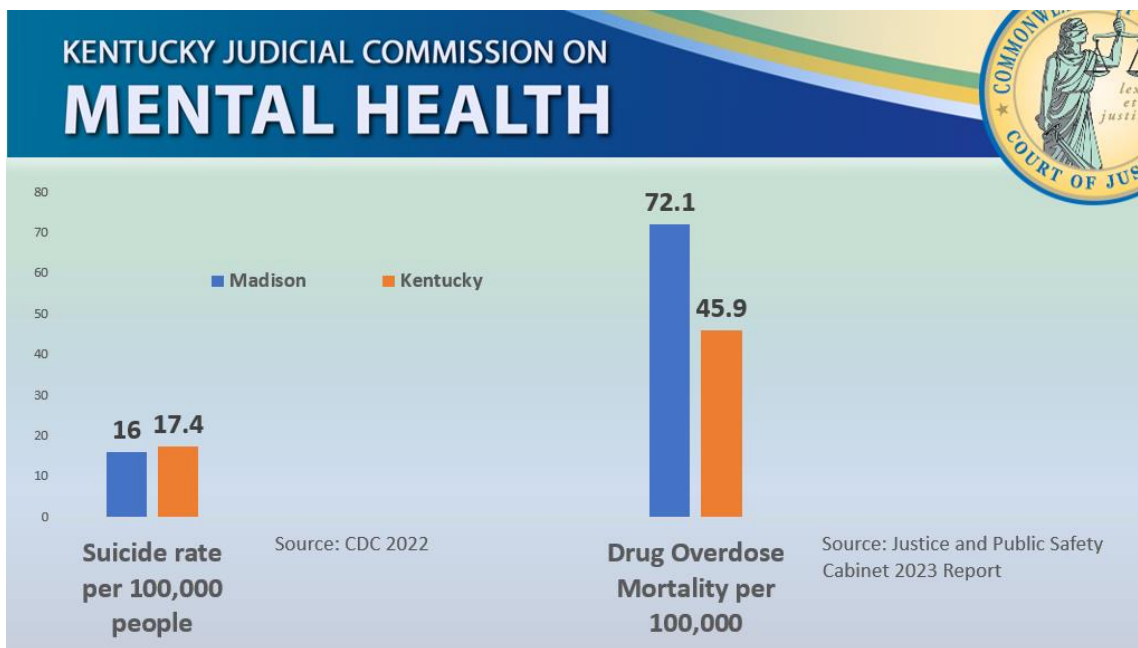
Figure 8. Suicide and Drug Overdose Rates (2022)

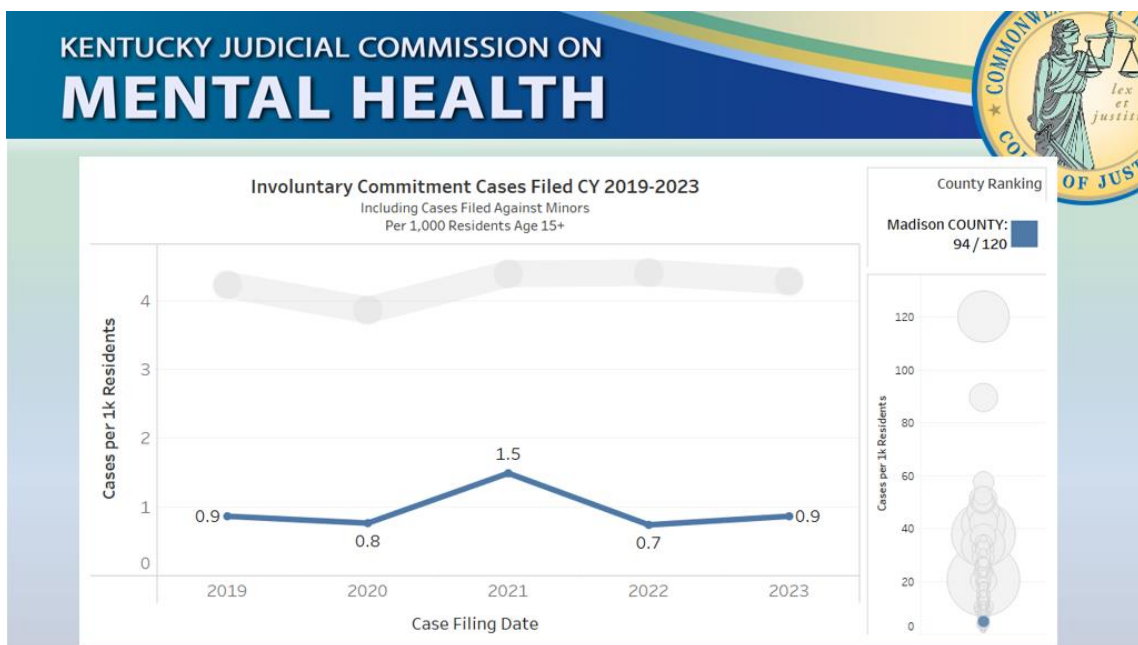**Figure 9. Involuntary Commitment Cases Filed CY (2019-2023)**
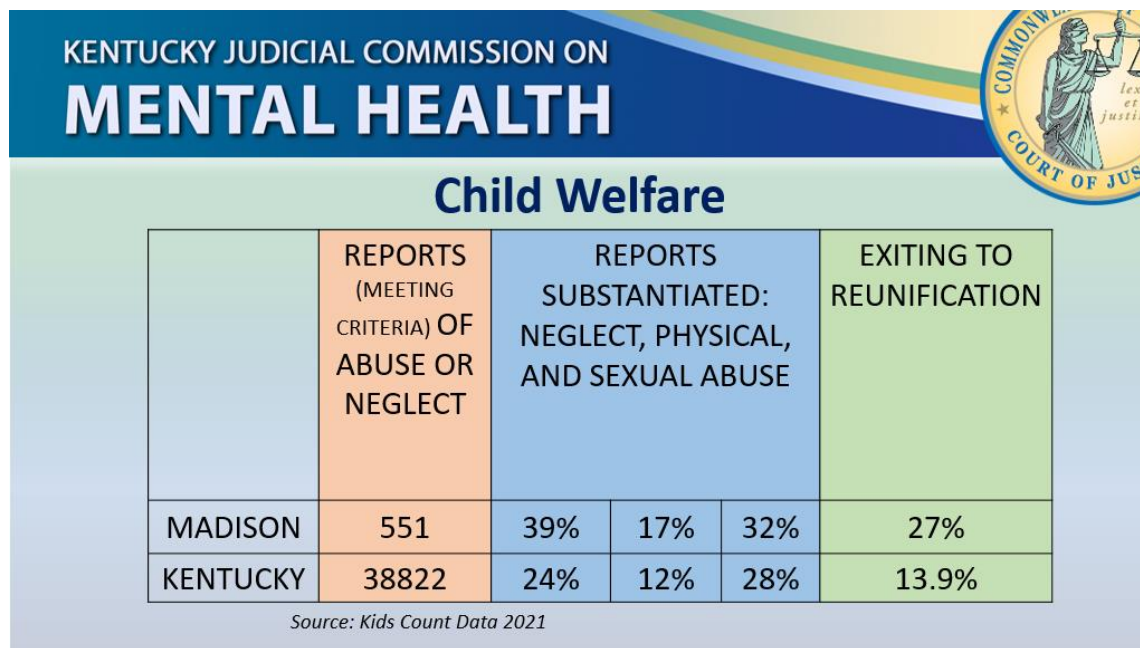
Figure 10. Child Welfare (2021)

KENTUCKY JUDICIAL COMMISSION ON
MENTAL HEALTH

Child Welfare

	REPORTS (MEETING CRITERIA) OF ABUSE OR NEGLECT	REPORTS SUBSTANTIATED: NEGLECT, PHYSICAL, AND SEXUAL ABUSE			EXITING TO REUNIFICATION
MADISON	551	39%	17%	32%	27%
KENTUCKY	38822	24%	12%	28%	13.9%

Source: Kids Count Data 2021

Figure 11. Child Welfare: Percent of Children that Reentered Out of Home Care (2021-2024)

KENTUCKY JUDICIAL COMMISSION ON
MENTAL HEALTH

Child Welfare

Percent of Children that Reentered Out of Home Care Between 01/01/2024 and 12/31/2024

Statewide
25.4

Madison County
21.9

Source: Cabinet for Health and Family Services, Dept. for Community Based Services (DCBS). TWS-Q176.
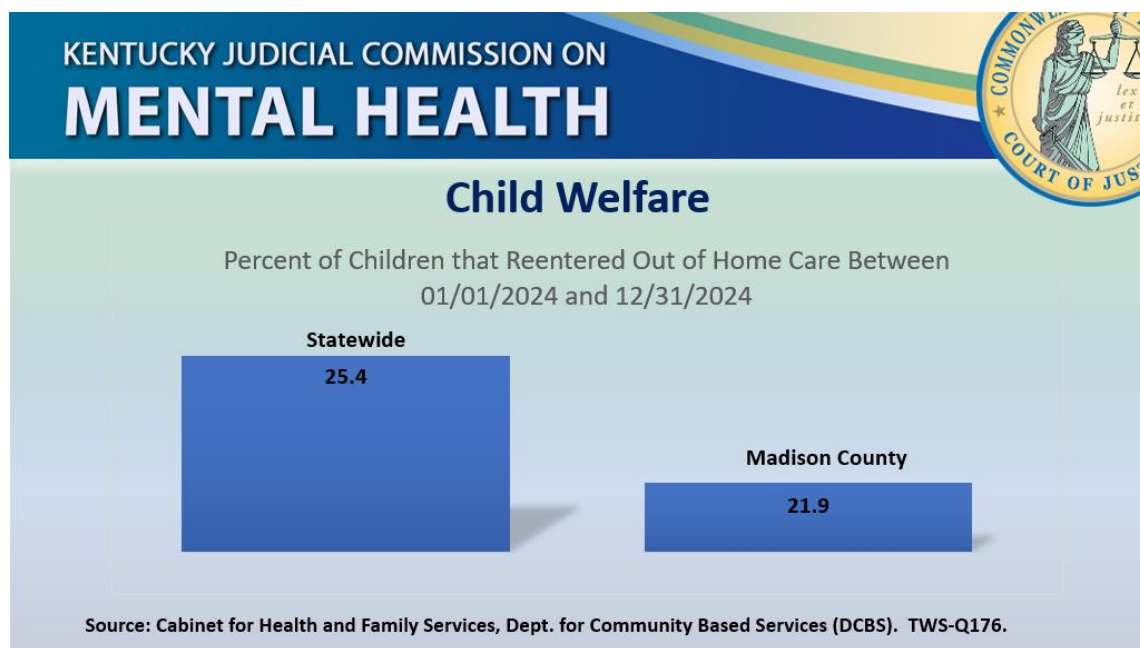
Figure 12. Child Welfare: Average Months in Care for Children Exiting Out of Home of Care (2021-2024)

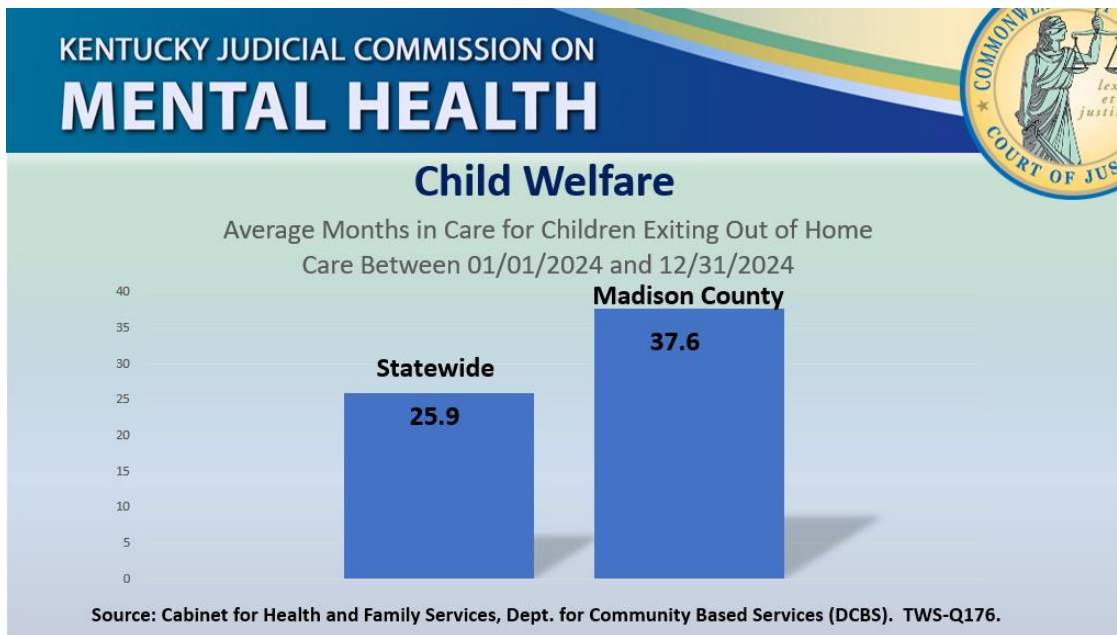Source: Cabinet for Health and Family Services, Dept. for Community Based Services (DCBS). TWS-Q176.

Figure 13. Child Welfare: Average Months in Care for Children Exiting Out of Home of Care to Relative Custody or Kinship Care (2021-2024)
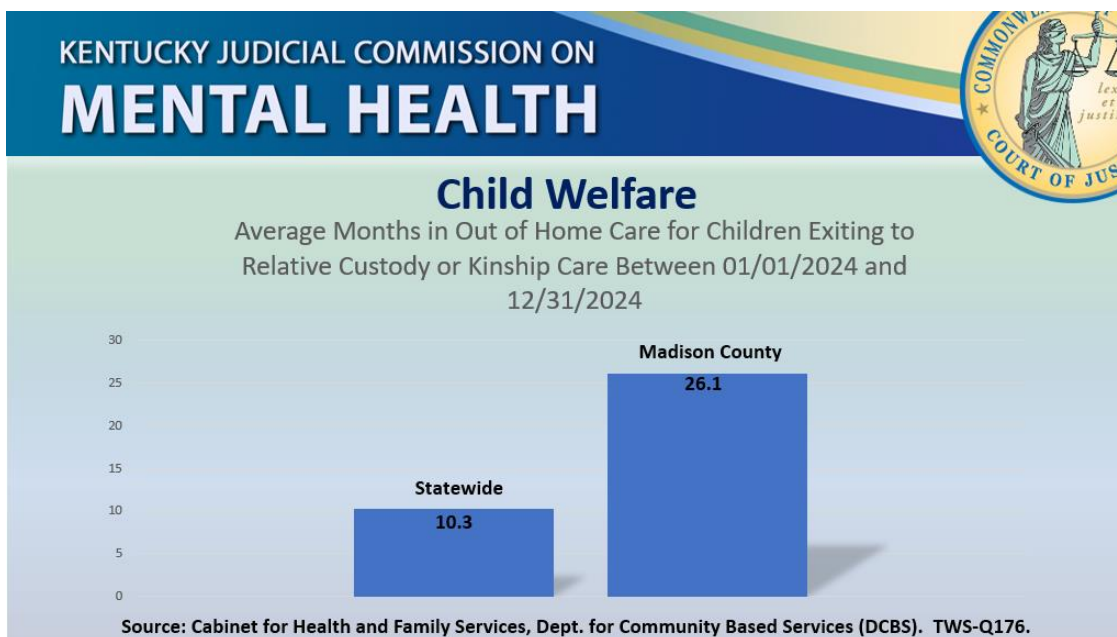

Source: Cabinet for Health and Family Services, Dept. for Community Based Services (DCBS). TWS-Q176.

Figure 14. Child Welfare: Percent of Children with Recurrence of Child Abuse or Neglect (2023-2024)
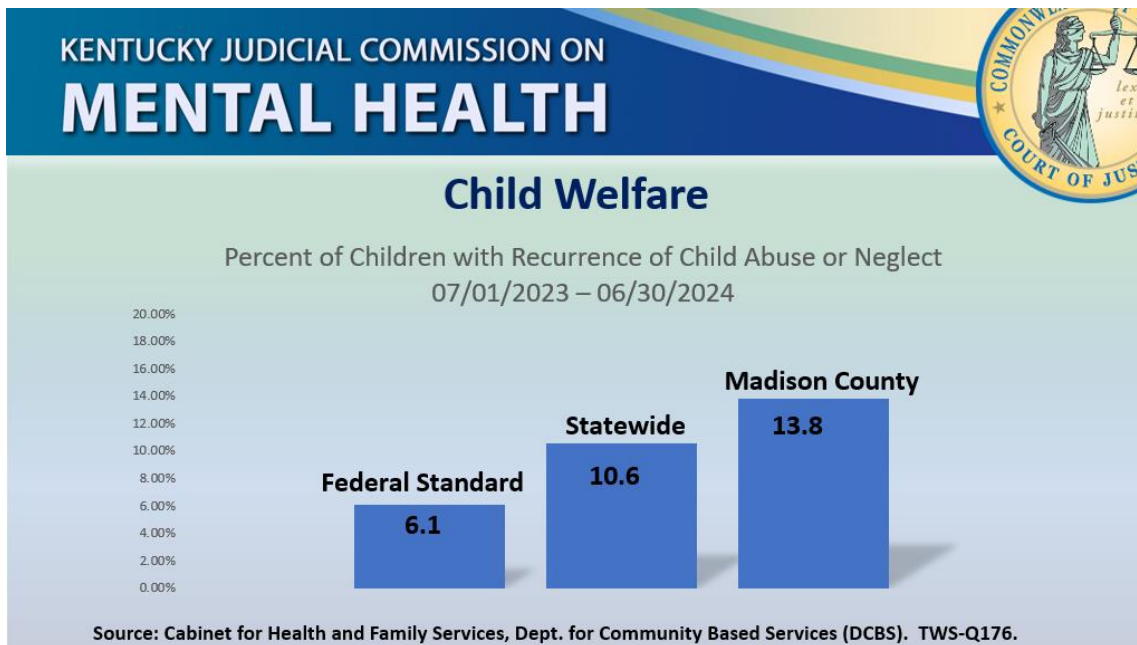

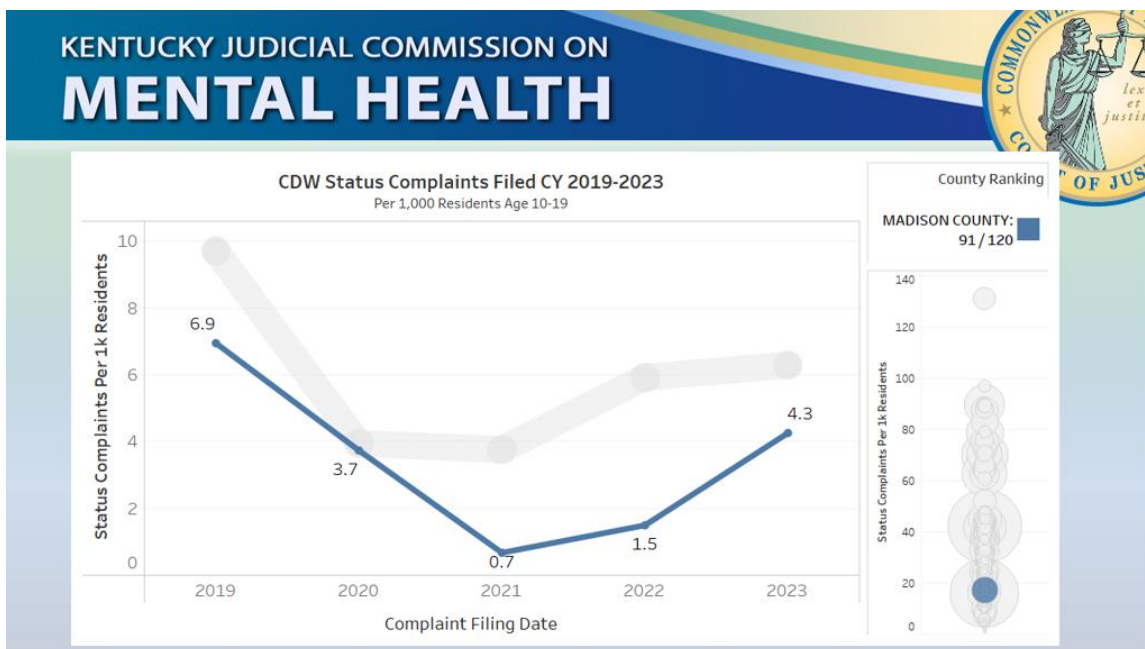**Figure 15. CDW Status Complaints Filed CY (2019-2023)**

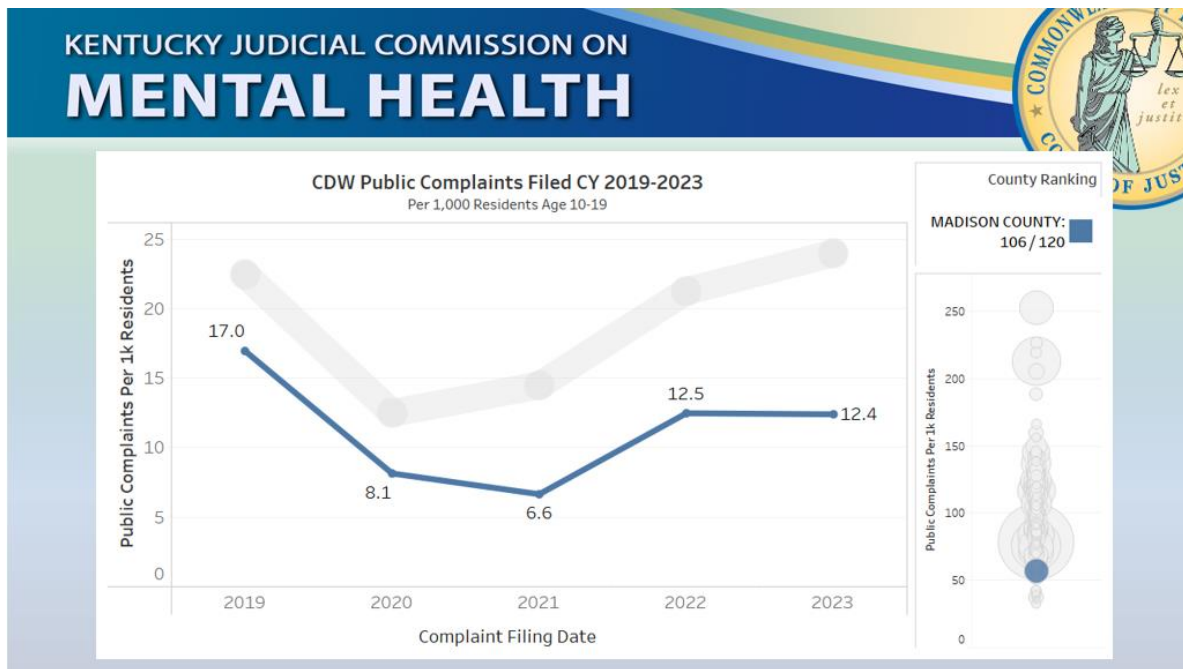**Figure 16. CDW Public Complaints Filed CY (2019-2023)**

Figure 17. CDW Complaint Detention Rate CY (2019-2023)
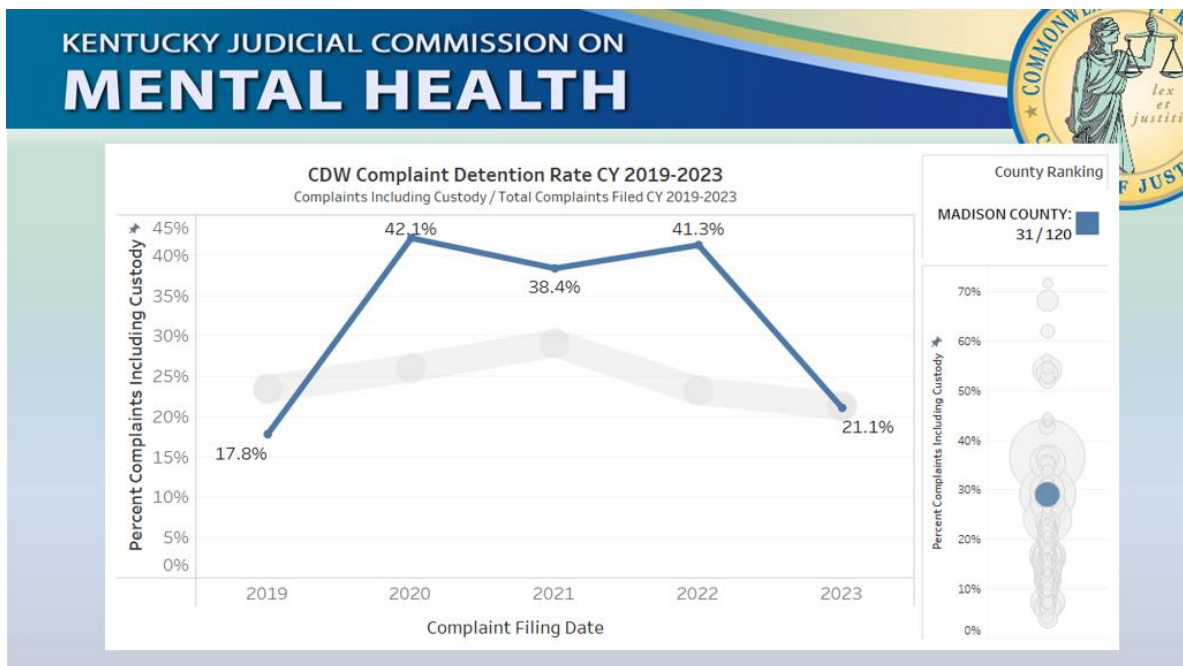
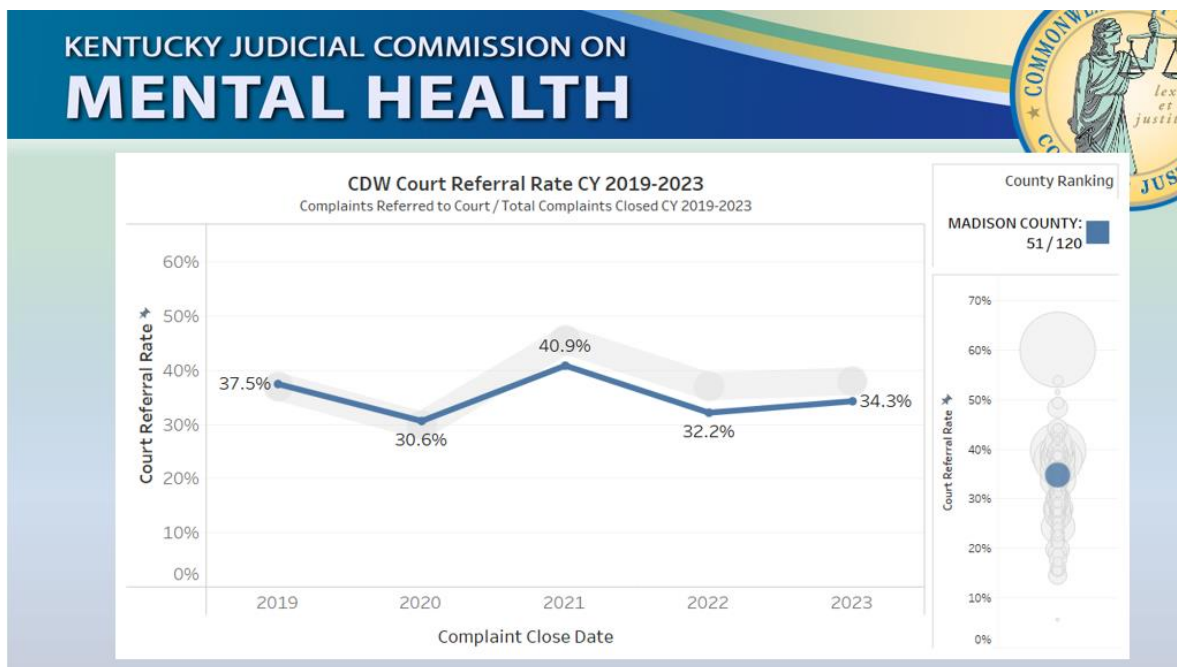**Figure 18. CDW Court Referral Rate CY (2019-2023)**

Figure 19. District and Circuit Criminal Cases Filed CY (2019-2023)
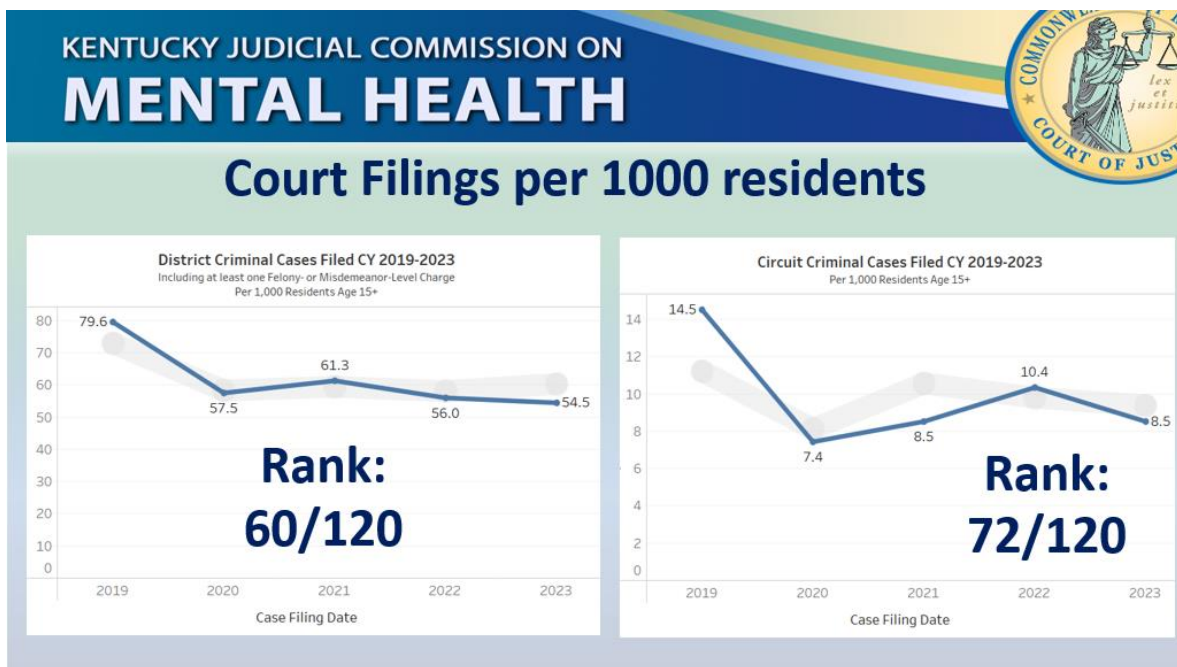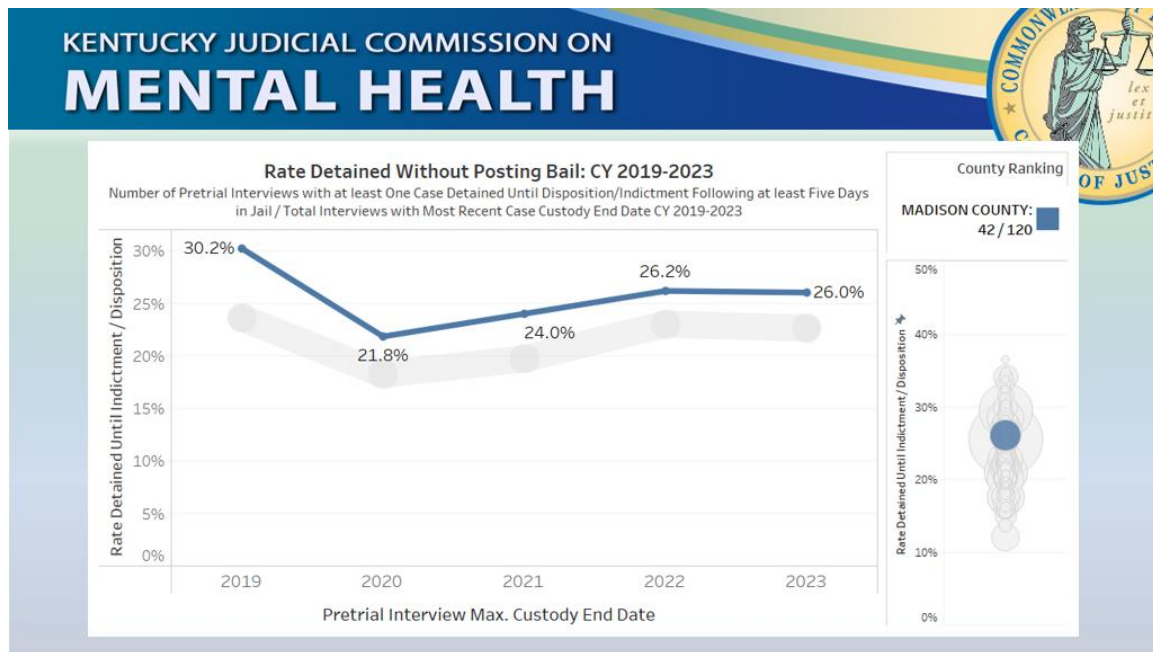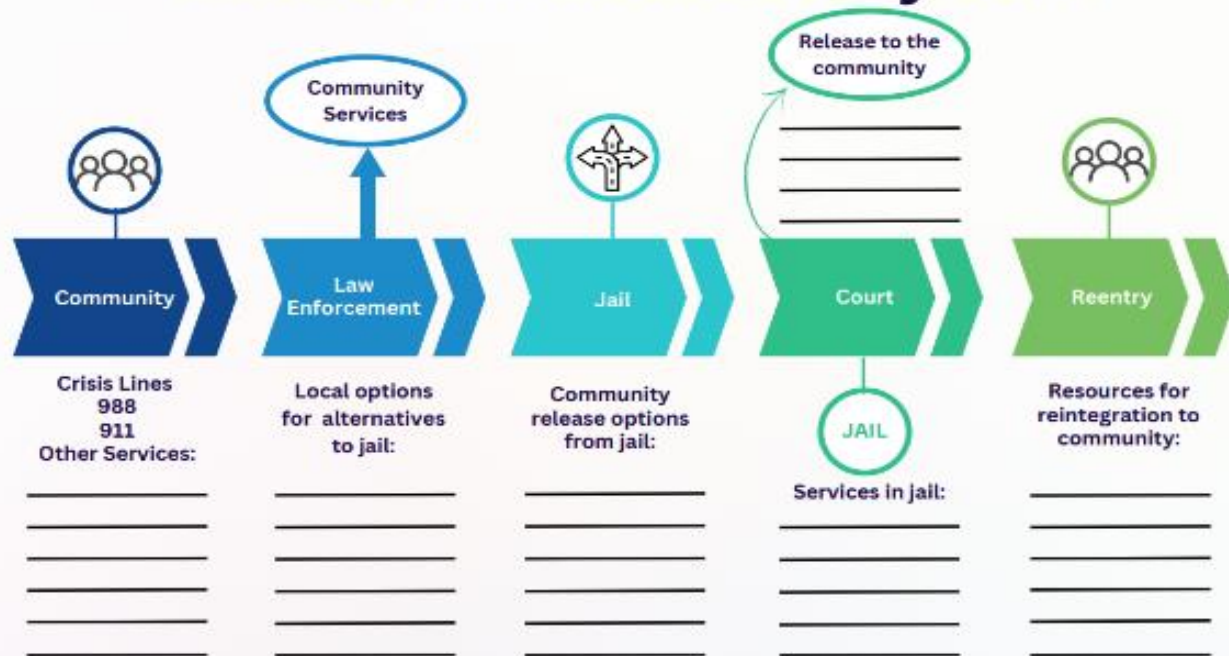
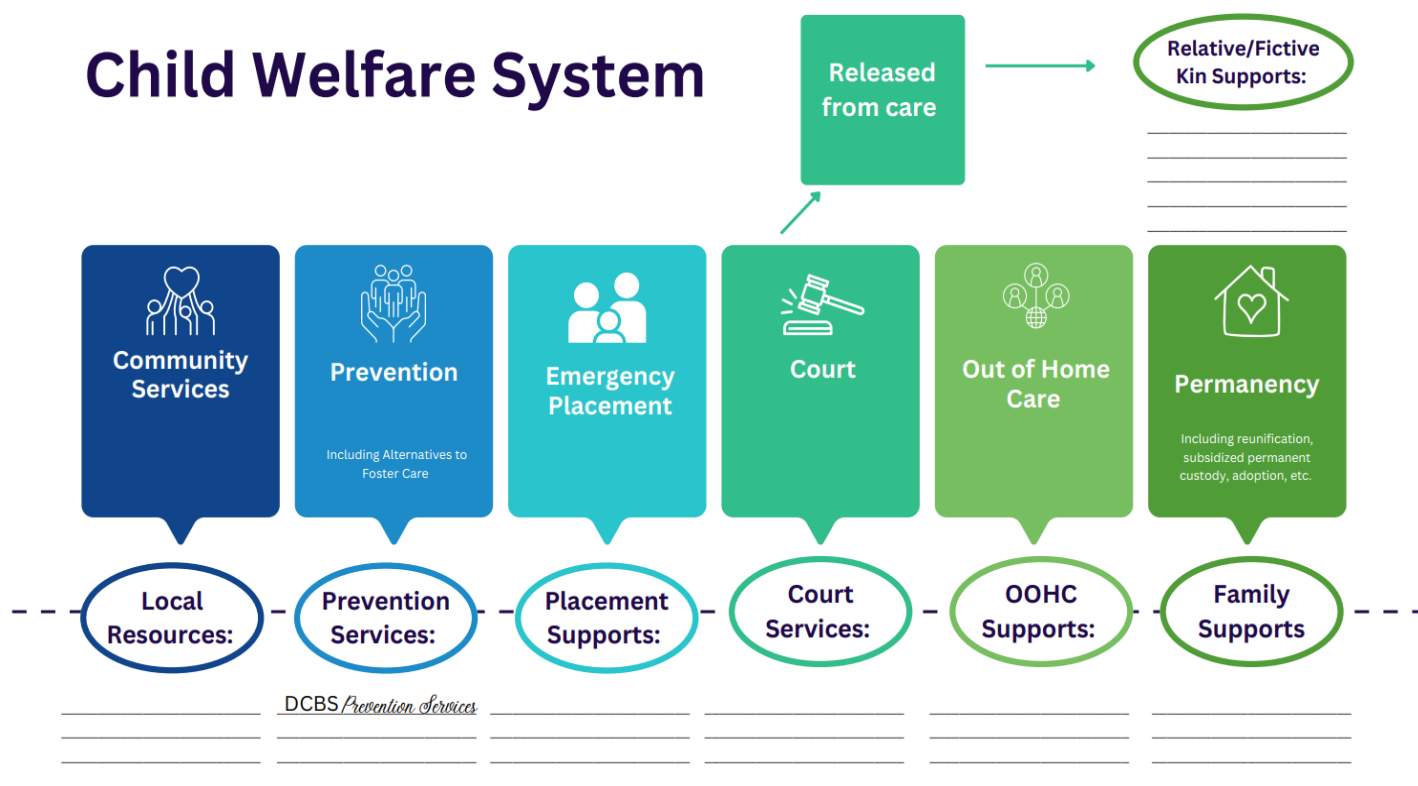**Figure 20. District and Circuit Criminal Cases Filed CY (2019-2023)**

APPENDIX F Adult Criminal Justice Process Map

APPENDIX G Child Welfare Process Map
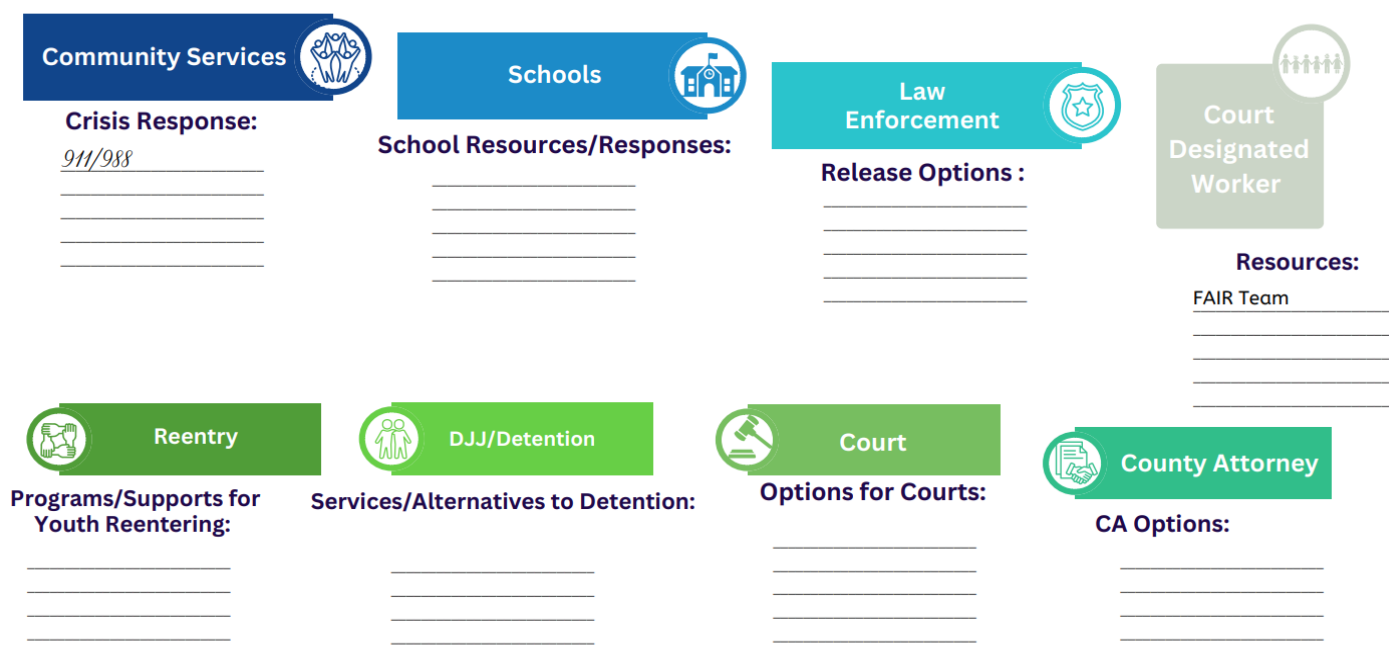
Child Welfare System

Released from care → **Relative/Fictive Kin Supports:**
_____
_____
_____
_____

Community Services	Prevention	Emergency Placement	Court	Out of Home Care	Permanency
	Including Alternatives to Foster Care				Including reunification, subsidized permanent custody, adoption, etc.

Local Resources: — **Prevention Services:** — **Placement Supports:** — **Court Services:** — **OOHC Supports:** — **Family Supports**

_____ DCBS *Prevention Services* _____ _____ _____ _____
_____ _____ _____ _____ _____ _____
_____ _____ _____ _____ _____ _____
_____ _____ _____ _____ _____ _____

APPENDIX H Juvenile Justice Process Map

Juvenile Justice System

Community Services
Crisis Response:
911/988
_____
_____
_____

Schools
School Resources/Responses:
_____
_____
_____
_____

Law Enforcement
Release Options :
_____
_____
_____
_____

Court Designated Worker
Resources:
FAIR Team _____
_____
_____
_____
_____

Reentry
Programs/Supports for Youth Reentering:
_____
_____
_____
_____

DJJ/Detention
Services/Alternatives to Detention:
_____
_____
_____
_____

Court
Options for Courts:
_____
_____
_____
_____

County Attorney
CA Options:
_____
_____
_____
_____

<u>APPENDIX I</u> Action Plan: Access to Affordable Housing

PRIORITY TOPIC	Access to Affordable Housing
LEAD	Jennifer Lainhart
LEAD CONTACT INFORMATION	jennifer@hopeswings.org

ACTION PLAN

OBJECTIVE: DECREASE UNHOUSED POPULATION IN MADISON COUNTY BY 5% BY THE END OF THE 2025 CALENDAR YEAR

ACTIVITY 1:

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Create a list of affordable housing providers and landlords
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Section 8 Office • Housing Authority • Winterwood • Department of Community Based Housing • Madison Home Inc. • EnRich • Website to host the list • Venues to take and give handouts/flyers • Kentucky River Foothills
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• 2-3 months
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER?	• Keeping information up to date, finding a host for list and paper copies, landlord rapport and relationships

(LEGISLATION, FUNDING, STIGMA, RESOURCES)

IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?

OBJECTIVE: DECREASE UNHOUSED POPULATION IN MADISON COUNTY BY 5% BY THE END OF THE 2025 CALENDAR YEAR

ACTIVITY 2:

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Create opportunities for individuals to meet affordable housing eligibility criteria
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• AppalRed • Goodwill • Salvation Army • Local churches • Probation and Parole Reentry
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• 3-6 months
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Eligibility criteria itself, sustaining housing once eligible, stigma, application fees, funding

OBJECTIVE: DECREASE UNHOUSED POPULATION IN MADISON COUNTY BY 5% BY THE END OF THE 2025 CALENDAR YEAR

ACTIVITY 3:

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Analyze and explore data and statistics for Madison County unhoused population
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• K-Count • Department of Community Based Services • Madison Home Inc.
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• 1 month
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Data accuracy, definitions of terms/categories used, analysis methods and efficiency, quality of information gathered

OBJECTIVE: DECREASE UNHOUSED POPULATION IN MADISON COUNTY BY 5% BY THE END OF THE 2025 CALENDAR YEAR

ACTIVITY 4:

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Determine and define terms key to our goal (unhoused, affordable, etc.)
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Affordable Housing authorities and providers, • Affordable Housing Act • K-Count • Kentucky Housing Coalition • Tenant's Rights
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• 1 month
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Conflicting definitions, information available as foundation

OBJECTIVE: DECREASE UNHOUSED POPULATION IN MADISON COUNTY BY 5% BY THE END OF THE 2025 CALENDAR YEAR

ACTIVITY 5:

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Create and provide cost analysis for our objective to prove efficiency and financial feasibility
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Similar projects, studies, research centers
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• 6 months (permit for data to begin populating)
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Sustaining housing independently, information accuracy and scope,

APPENDIX J Action Plan: One Stop Resource Hub

PRIORITY TOPIC	One Stop Resource Hub
LEAD	Adam Herald
LEAD CONTACT INFORMATION	Adam.herald@bhsi.com

ACTION PLAN

OBJECTIVE 1: OPTIMAL LOCATED CENTER THAT CONTAINS REPRESENTATIVES FOR COMMUNITY RESOURCE AGENCIES

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Existing hub framework initiated. Community partner meeting throughout the month of Feb. Members are attending meetings to gather additional information and timeframes. Members will reconvene approximately the 3rd week of March to discuss identified support avenues.
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• County, state, federal grants
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Members to meet for additional information on where project is, ideal support areas, methods to maximize efforts on an existing entity. 3rd week of March
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER?	• Education on project

(LEGISLATION, FUNDING, STIGMA, RESOURCES)

IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?

OBJECTIVE 2: LIVE DOCUMENT CONTAINING REAL TIME RESOURCES AND CONTACTS

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Some members are board members of framework initiative. Board members will attend board meetings to gather data and research on targeted needs.
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Volunteers/agency providers
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Not specified
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Funding limitations

OBJECTIVE 3: COUNTY SERVICES CONTAINED WITHIN AN APP.

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Present disparities/needs to general public figures and community individuals that have a reduced exposure to community disparities.
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• DCBS • Hospital • Mental health providers • SUD providers
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Not specified
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Rural Community / Multi-City

OBJECTIVE 4: REMOVE BARRIERS FOR COMMUNITY MEMBERS IN ACCESSING SERVICES

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE?	• Heat map location of county • Budget research • Facility needs and location efficiency

(RESEARCH, PARTNERSHIPS, DATA)	50
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	Heat map location of county • Housing Programs Budget research • Hub modeling- The Neighborhood
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Not specified
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	Heat map location of county • Stigma Budget research • No history of attempts in the area

APPENDIX K Action Plan: Year-Round Shelter and Emergency Housing

PRIORITY TOPIC	**Year-Round Shelter and Emergency Housing** **(Not recovery/situation based)**
LEAD	TBD
LEAD CONTACT INFORMATION	
TEAM MEMBERS	Angela Mink, Jamie Jordan, Brad Chadwell, Jennifer Lainhart, Dan Kirstein, Monica Barnes, Christina Bothman, Emily Hamilton, Shannon Holland

ACTION PLAN

OBJECTIVE 1: DEVELOP A NEW SHELTER

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Identify location for physical unit • Determine name of unit (ex: Madison County Transitions Program/ Madison County Homeless Coalition) • Discuss rules, mission, and budgetary needs • Identify capacity needs (budget, supplies, staffing, etc.) • Determine staffing needs (include individuals with lived experience, wrap services, training, etc.)
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Madison Homes (capacity: one floor no beds- 40 beds)- currently a 501c-3 • Hopes Wings • SUD recovery housing / treatment facilities • Unite Church • New Liberty Shelter for Families • Enrich, Madison Homes, and Hope's Wings have had prior conversations that could drive action plan
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Not specified
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES)	• Madison Homes building optional for short-term- not ADA compliant

IS THERE ANY HISTORY OF
ATTEMPTING THIS; WHY DID IT NOT
WORK?

OBJECTIVE 2: CONSIDER- EXTENDING CERTIFICATE OCCUPANCY OF MADISON HOMES

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Research funding for necessary repairs, additional beds, staffing, training, etc.
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Not specified
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Current certificate expires in March 2025
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	• Resources and staffing are volunteer basis; by donation at Madison Homes • Volunteer work is not sustainable for long-term sustainability

OBJECTIVE 3: DEVELOP TRANSITION PROGRAM FOR LONG-TERM HOUSING

BUILD OUT FOR OBJECTIVE 3 UNDETERMINED AT TIME OF MAPPING

APPENDIX L **Action Plan: Youth Crisis Stabilization**

PRIORITY TOPIC	**Youth Crisis Stabilization**
LEAD	Leann Jones
LEAD CONTACT INFORMATION	leann.jones@ky.gov

ACTION PLAN

OBJECTIVE 1: IDENTIFY SIMILAR LOCATIONS FOR MODEL IDEAS AND IMPLEMENTATION BARRIERS

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Identify locations and contact leadership of each of those locations, make list of questions to ask each leader. • Word of mouth and each member come to next meeting with a list of least restrictive - alternatives to detention.
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• Group member contacts
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• Next meeting is March 14th at 12pm in the library
BARRIERS	• None identified

ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER? (LEGISLATION, FUNDING, STIGMA, RESOURCES) IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?	

OBJECTIVE 2: YOUTH STABILIZATION LOCATION

ACTIVITIES / TASKS WHAT DO WE HAVE TO DO TO MEET THE OBJECTIVE? WHAT ARE THE SPECIFIC TASKS TO MEET THE OBJECTIVE? (RESEARCH, PARTNERSHIPS, DATA)	• Scout out potential hotels going out of business, assisted living homes no longer being utilized. (Not next to I75) nursing homes not being utilized or large homes (preferable not in town)
RESOURCES WHAT RESOURCES ARE NECESSARY TO COMPLETE THE ACTIVITY? WHO NEEDS TO KNOW ABOUT THE RESOURCES AND/OR HAVE ACCESS TO THEM FOR THEIR TASK? (PEOPLE, TIME, SPACE, EQUIPMENT, FUNDING, ACCESS TO SERVICES)	• MADD or SADD • Rotary Club • EKU • Chamber • American Legion • Other civic organizations • Realtors • Find an investor to buy property or to rent property/physical building.
TIMEFRAME WHEN CAN ACTION BEGIN ON EACH ACTIVITY/TASK? HOW MUCH TIME IS REQUIRED FOR THE ACTIVITY/TASK?	• TBD
BARRIERS ARE THERE ANY POTENTIAL BARRIERS TO CONSIDER?	• If grant funding certifications are needed. Upfront cost of property is barrier.

(LEGISLATION, FUNDING, STIGMA, RESOURCES)

IS THERE ANY HISTORY OF ATTEMPTING THIS; WHY DID IT NOT WORK?

ADDITIONAL OBJECTIVES

OBJECTIVE	Fill gap for youth who does not qualify for hospitalization and can be a step down.	Transportation with credentials	Ongoing funding and sustainability
TASK/ACTIVITY			
RESOURCES	CMHC		Funds can be from county if ATD if court ordered.
TIMEFRAMES			
BARRIERS			No specific funding

Kentucky Judicial Commission on Mental Health

http://kcoj.info/KJCMH