

**210.509 Meeting and duties of regional planning councils.**

- (1) The regional planning councils shall meet as often as necessary to accomplish their purpose.
- (2) The regional planning councils shall:
  - (a) Assess in the region the needs of individuals with mental illness, substance use disorders, and dual diagnoses;
  - (b)
    1. Study the regional mental health and substance use disorder treatment delivery system and identify specific barriers in each region to accessing services;
    2. Assess the capacity of and gaps in the existing system, including the adequacy of a safety net system and the adequacy and availability of the mental health and substance use disorder professional workforce in each region; and
    3. Assess the coordination and collaboration of efforts between public and private facilities and entities;
  - (c) Develop a regional strategy to increase access to community-based services and supports for individuals with mental illness, substance use disorders, and dual diagnoses. The strategies may include:
    1. Exploration of the use of community-based treatment programs, including but not limited to community-based hospitalization;
    2. Access to and funding for the most effective medications;
    3. Promotion of family and consumer support groups statewide;
    4. Reduction of instances of criminalization of individuals with mental illness, substance use disorders, and dual diagnoses; and
    5. Efforts to increase housing options for persons at risk of institutionalization;
  - (d) Identify funding;
  - (e) Evaluate the access of children and youth to mental health and substance use disorder services and preventive programs within the region, including but not limited to those provided by schools, family resource and youth services centers, public and private mental health and substance use disorder providers and facilities, physical health care providers and facilities, the faith community, and community agencies;
  - (f) Collect and evaluate data regarding individuals with mental illness, substance use disorders, and dual diagnoses who experience repeated hospital admissions, involvement with law enforcement, courts, and the judicial system, and repeated referrals from hospitals to community-based services; and
  - (g) Make recommendations on each subsection of this section in the regional annual plans required by KRS 210.400.

**Effective:** June 27, 2019

**History:** Amended 2019 Ky. Acts ch. 128, sec. 7, effective June 27, 2019. -- Amended

2003 Ky. Acts ch. 5, sec. 4, effective June 24, 2003. -- Created 2000 Ky. Acts ch. 507, sec. 5, effective April 21, 2000.