Northern Kentucky Area Development District
Board of Directors Meeting | May 28, 2026
22 Spiral Drive, Florence, Kentucky 41042 | 12 – 1pm

NKADD
NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

AGENDA

1. **Call to order** — Judge Gary Moore, Chair
2. **Pledge of Allegiance** — All
3. **Quorum** - The secretary will determine and advise chair as to the presence of quorum.
4. **Approval of the agenda** – Consideration of the agenda (*After approval, deletions are subject to a 2/3 majority vote of those members present.*) **Action requested.**
5. **Approval of the minutes** – Minutes from the April meeting. *Attachment 1*. **Action requested.**

Administrative – *Items related to NKADD finance and administration will be discussed.*

6. **Ethics Report** – Monthly report from NKADD Ethics Officer. Joe Cottingham will report.
7. **Financial Reports** – Monthly financial report will be presented for consideration. Amanda Cooper will report. *Attachment 2.* **Action requested.**
8. **Proposed Personnel Policy Update** – Request to amend the NKADD Personnel Policies to prohibit medicinal cannabis. Tara Johnson-Noem will present. *Attachment 3.* **Action requested.**

Programmatic – *Items related to NKADD programs will be discussed.*

9. **GRANT applications** – Request for approval to support upcoming grant programs and contracts for service. Avery Adams will present. *Attachments 4 - 7.*
    a. Safe Streets 4 All – MOU (retroactive to May 18th due to grant timing) *Attachment 4.*
    b. Safe Streets 4 All – Resolution to apply for GRANT grant. *Attachment 5.*
    c. EDA – Resolution to apply for GRANT grant. *Attachment 6.*
    d. BUILD – Resolution to apply for GRANT grant. *Attachment 7.*
10. **Kentucky Transportation Cabinet – FY27 Regional Transportation Program** contract, Tara Johnson-Noem will present. *Attachment 8.* **Action requested.**
11. **Northern Kentucky Workforce Investment Board (NKWIB)** – Consideration for new subcontractors for Operator, Direct Services Provider for Adults and Dislocated Workers and Direct Services Provider for Young Adults. *Attachment 9.* Tara Johnson-Noem will present. **Action requested.**
12. **E-Clearinghouse** – Consideration of E-Clearinghouse requests, Grace Herrmann will present. *Attachment 10.* **Action requested.**
13. **Aging and Disability Nutrition Service and Site Operations Procurement,** Anne Wildman will present. *Attachment 11*. **Action requested.**
14. **Senior Meals** update – Anne Wildman will present. *Attachment 12.*
15. **Traeger Institute Proposal for ADDs** in Rural Health Transformation grant – Anne Wildman will present. *Attachment 13.* **Action requested.**
16. **DAIL-Required Training** for ADD Board Members – Anne Wildman will present. *Attachment 14*

Committee Reports

17. *NKADD standing and ad hoc committees will present updates, if applicable.*

Agency Overview

18. **Executive Director's Report** – Tara Johnson-Noem will present an overview of the NKADD Strategic Plan and a reminder about the board officer and executive committee elections process.

19. **Announcements**

Adjournment

ATTACHMENT 1

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT
BOARD OF DIRECTORS MEETING MINUTES
22 Spiral Drive, Florence, Kentucky
April 23, 2026

I. **Call to order** – Chair Gary Moore called the meeting to order in the NKADD Conference Rooms located at 22 Spiral Drive, Florence, KY, and Teams at 12:02 pm.

II. **Pledge of Allegiance** – Chair Gary Moore led the Pledge.

III. **Quorum –** Chair Gary Moore declared a quorum verified by Amy Scalf.

Board members present were:

Mayor Robb Adams
Jamie Baker
Brent Caldwell
Matthew Dusing
Matt Elberfeld*
Jamie Greene
Mayor Tom Guidugli, Jr. -v
Mayor Jim Hamberg -v
Mayor Sabrina Hazen -v
Nick Hendrix
Mayor David Henson
Brittaney King
Mayor John Link
Rebecca McClure*
Dean McKay
Mayor Paul Meier
Bill Mitchell
Judge Gary Moore
Chris Moriconi*
Judge Ryan Morris
Bryan Norton*
Mayor Greg Pohlgeers
Pat Raverty
Mayor Andy Schabell
Marie Schenkel
James Toebbe*-v
Judge David Wilhoite
Lisa Wilson-Plajer
Judge Todd Woodyard
George Zubaty

*Indicates Alternate in attendance and voting.

Those members not present or without representation

Mayor Julie Metzger Aubuchon
Mayor Andy Ellison
Judge David Fields
Mayor Leigh Hawkins
Mayor Marty Lenhof
Mayor Andy Schabell
Marie Schenkel

Staff Present

Clay Beyer, Amanda Cooper, Chris Courtney, Correy Eimer, Tara Johnson-Noem, Katie Jo Kirkpatrick, Amy Scalf, Ivy Stites, Anne Wildman

Guests

Meghan Bankemper, Office of Sen. Mitch McConnell

The Northern Kentucky Area Development District (NKADD) will make every reasonable accommodation to assist qualified persons with disabilities accessing available services or in attending agency activities. If there is a need for NKADD to be aware of a specific requirement, you are encouraged to contact this agency prior to the activity so that suitable arrangements can be considered for the delivery of the service.

Billy Matthews, Office of Sen. Rand Paul
Laura Pleiman, Boone County Fiscal Court

IV. Approval of the Agenda - The Board of Directors is asked to approve the agenda (after the agenda is approved, deletions are subject to a 2/3 majority vote of those members present). **Action requested**.

Dean McKay moved to approve the agenda, seconded by Mayor John Link. **Motion carried.**

V. Approval of the Minutes – The Board of Directors is asked to approve the minutes from the April 2026 Board Meeting. Attachment 01. **Action requested**.

Lisa Wilson-Plajer moved to approve the minutes; seconded by Mark Collier. **Motion carried.**

VI. Administrative – Items relating to NKADD Administration were discussed at this time.

A. Ethics Report – No Report. **No action requested.**

B. Financial Reports – Amanda Cooper presented cumulative financial reports. See Attachment 02. **Action requested.**
Mayor David Henson moved to approve the Financial Reports; seconded by Pat Raverty. **Motion carried.**

VII. Programmatic - Items relating to NKADD programs were discussed.

A. E-Clearinghouse – Katie Jo Kirkpatrick presented E-Clearinghouse requests. See Attachment 03. **Action requested.**
Jamie Baker moved to approve the projects, seconded by Lisa Wilson-Plajer. **Motion carried.**

B. Opportunity Zones – Katie Jo Kirkpatrick presented an update on Opportunity Zone location selection. **No action requested**.

C. Comprehensive Economic Development Strategy (CEDS) – Katie Jo Kirkpatrick presented an update on the next CEDS. See Attachment 04. **No action requested.**

D. 5310 Vehicle Purchase – Ivy Stites presented a large purchase using grant funds. See Attachment 05. **Action requested.**
Bill Mitchell moved to approve the purchase, seconded by Mayor Robb Adams. **Motion carried.**

E. Shared Procurement Update – Chris Courtney presented an update. See Attachment 06.. **No action requested.**

F. Kentucky RFP 746 2500000254 Financial Management Services for Participant-Directed Services (Medicaid Waiver) – Tara Johnson-Noem and Anne Wildman

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presented information regarding a state RFP that could impact NKADD programmatic operations. See Attachment 07. **No action requested.**

G. Executive Session – The Board entered into Executive Session per KRS.61.810(f).
At 12:32 Mayor Greg Pohlgeers moved to enter Executive Session, seconded by Chris Moriconi. **Motion carried.**
At 1:01 pm George Zubaty moved to exit Executive Session, seconded by Bryan Norton. **Motion carried.**

H. Subcontracting Agreements – Tara Johnson-Noem discussed a subcontracting agreement with Freestore Foodbank, closing the warehouse, and following legal requirements for surplus property. **Action requested.**
Mayor Greg Pohlgeers moved to approve the agreement, seconded by Judge David Wilhoite. **Motion carried.**

VIII. Executive Director Report

A. Executive Director Tara Johnson-Noem reported on local, regional, state, and federal updates and upcoming events.

IX. Announcements and Reminders

X. Adjournment

At 1:09 pm, Judge David Wilhoite moved to adjourn; seconded by Mayor Paul Meier. **Motion carried.**

_____
Judge Gary Moore, Chair

_____
Mayor Robb Adams, 1st Vice Chair

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NKADD
NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Finance Report
May 2026

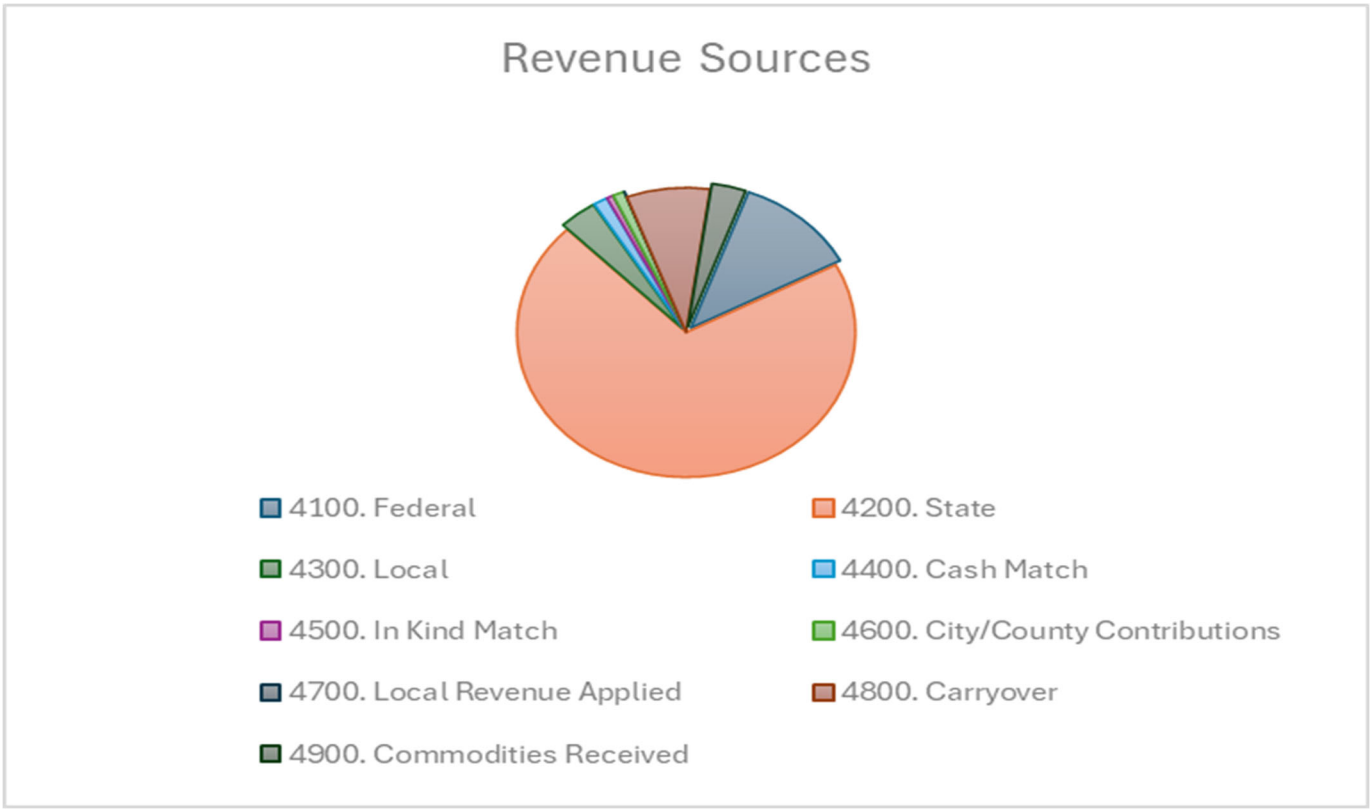
Northern KY Area Development District
Consolidated Statement of Activity
April 30, 2026

	YTD Actual	Annual Budget	% Used	PYTD Actual	% Inc/(Dec)
Revenues					
4100. Federal	4,858,621.19	7,966,014.00	60.99	5,852,856.86	(16.99)
4200. State	29,159,012.01	30,321,603.00	96.17	24,918,219.53	17.02
4300. Local	1,502,323.20	2,113,875.00	71.07	1,372,724.62	9.44
4400. Cash Match	562,011.76	1,842,386.00	30.50	585,333.37	(3.98)
4500. In Kind Match	246,344.74	0.00	0.00	228,292.84	7.91
4600. City/County Contributions	456,459.68	0.00	0.00	193,880.50	135.43
4700. Local Revenue Applied	(9,272.00)	40,275.00	(23.02)	(6,954.00)	33.33
4800. Carryover	3,310,536.97	3,610,107.00	91.70	3,454,443.90	(4.17)
4900. Commodities Received	1,361,893.04	2,800,000.00	48.64	963,698.79	41.32
Total Revenues	41,447,930.59	48,694,260.00	85.12	37,562,496.41	10.34
Expenses					
5100. Personnel	4,998,547.77	6,688,732.00	74.73	4,653,323.93	7.42
5300. Professional Services	577,482.84	398,015.00	145.09	562,762.97	2.62
5400. Travel	99,584.84	146,707.00	67.88	88,829.56	12.11
5500. Facilities	254,421.58	326,493.00	77.93	266,970.57	(4.70)
5700. Operating	907,601.55	843,913.00	107.55	972,436.08	(6.67)
5800. Equipment	30,853.88	143,908.00	21.44	69,915.75	(55.87)
5900. Admin	(25,178.93)	142,786.00	(17.63)	(21,366.21)	17.84
6000. Pass-Through Contractual	29,992,445.86	36,243,784.00	0.00	26,933,912.05	11.36
Total Expenses	36,835,759.39	44,934,338.00	81.98	33,526,784.70	9.87
Excess Revenue Over (Under) Expenditures	**4,612,171.20**	**3,759,922.00**		**4,035,711.71**	**14.28**

* 4700 represents charges to Local Revenue/general Funds
*5900 Represents Write off amounts for disallowable expenses- see attached reports

Northern Kentucky Area Development District
Financial Report – Board of Directors
Meeting May 2026

Through April 30, 2026, NKADD had revenues of $ 41,447,930.59 which is a 10.5% increase from the prior year at the same time.



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Cash Balance

$7,181,619.03

(A 48% increase from last year)

Accounts Receivable Balance

$ 263,843.21

(A 2.34% over the same time period last year)

Chapter 19

Section 4: Medicinal Cannabis. In accordance with KRS 218B.040 the NKADD prohibits the use, consumption, possession, transfer, display, transportation, sale, or distribution of medicinal cannabis by employees on NKADD property, in NKADD vehicles, or at NKADD worksites, or while engaged in on-the-job activities for or with the NKADD, regardless of an employee's status as a registered medical cannabis patient. Any use, consumption, possession, or ingestion of cannabis is prohibited drug use under this policy.

1. Employees are prohibited from reporting to work; performing on-the-job services, tasks, or assignments during scheduled work hours for that employee; or operating machinery, equipment, or power tools; or engaging with the public and/or clients while under the influence of cannabis.

2. An employee is considered impaired if they exhibit behaviors that diminish their ability to perform job duties safely, as determined by a good faith assessment and observation of a supervisor or the HR Manager; or if upon report from any observe, a drug test confirms the presence of cannabis above acceptable levels.

3. Employees who are suspected of being under the influence of cannabis while at work shall immediately submit to drug testing at the direction of a supervisor or HR Manager consistent with the provisions of Chapter 15. Failure to cooperate with drug testing, or any actions which obstruct the validity of the test results, or to create false readings, shall be considered insubordination, and may result in disciplinary action for insubordination up to and including termination.

4. Pursuant to KRS 218B.040 an employee who is discharged from employment for consuming medicinal cannabis in the workplace, working while under the influence of medicinal cannabis, or testing positive for a controlled substance shall not be eligible to receive benefits under KRS Chapter 341 as the prohibitions contained in Chapter 18 are established personnel policies of the NKADD.

Memorandum of Agreement

US Department of Transportation – Safe Streets and Roads for All Implementation and Supplemental Planning Project

AGREEMENT

This Memorandum of Agreement (MOA) for professional services is by and between Carroll County, Gallatin County, Grant County, Owen County, and Pendleton Counties (hereinafter called the "Counties"), acting herein by County Judge Executives David Wilhoite, Jon Ryan Morris, Chuck Dills, Todd Woodyard, and David Fields hereunto duly authorized, and the Northern Kentucky Area Development District, a non-profit corporation organized under the laws of the State of Kentucky (hereinafter called "NKADD"), acting herein by Tara Johnson-Noem, Executive Director, hereunto duly authorized:

WITNESSETH THAT:

WHEREAS, NKADD intends to apply for funding through the **US Department of Transportation (DOT)** for the **Safe Streets and Roads for All (SS4A) 2026 Implementation and Supplemental Planning Grant** as a regional application for the aforementioned Counties; and

WHEREAS, the SS4A Implementation Grant application requires technical expertise in data analysis, stakeholder coordination, and federal grant management; and

WHEREAS, the Counties desire to engage NKADD to prepare and submit the SS4A Implementation Grant and Supplemental Planning application on behalf of the Counties, and, if awarded, to provide professional planning and grant administration services; and

WHEREAS, the NKADD possesses the professional qualifications, experience, and staff capacity necessary to perform these services in compliance with applicable federal, state, and local requirements;

NOW, THEREFORE, the parties agree as follows:

1. Employment of Consultant
   The Counties hereby agree to engage NKADD, and NKADD hereby agrees to perform the following Scope of Services:

2. Scope of Work
   The services under this MOA shall include **two phases**:
   PHASE I – SS4A IMPLEMENTATION AND SUPPLEMENTAL PLANNING GRANT APPLICATION PREPARATION (PRE-AWARD)
   NKADD shall provide professional services to assist the Counties with preparation and submission of the SS4A grant application, including but not limited to:

- Preparation and coordination of the SS4A Implementation and Supplemental Planning Grant application package on behalf of the Counties.
- Compilation and analysis of required data, narratives, maps, schedules, and supporting documentation in alignment with the Safety Action Plan.

- Coordination with County officials, regional partners, and stakeholders to obtain required information, resolutions, and letters of support.
- Assistance with benefit-cost narratives, environmental review and planning justifications, as applicable to a SS4A Implementation and Supplemental Planning Grant.
- Submission of the SS4A Implementation and Supplemental Planning Grant application in accordance with USDOT requirements and deadlines, as authorized by the Counties.

PHASE II – SS4A IMPLEMENTATION AND SUPPLEMENTAL PLANNING PROJECT SERVICES (POST-AWARD, IF FUNDED)

If the SS4A Implementation and Supplemental Planning Grant is awarded, NKADD shall provide professional services including, but not limited to:

- Grant administration and compliance support in accordance with the USDOT grant agreement.
- Technical assistance consistent with the approved SS4A Implementation scope of work.
- Stakeholder and public coordination activities associated with the planning effort.
- Assistance with required reporting, reimbursement requests, and documentation.
- Support development of final planning deliverables and identification of next steps for project Implementation.

Services in each of the above work areas shall be performed by NKADD under and at the direction of the Executive Director, Judge Executive(s), or his/her designated representative.

3. Time of Performance
   This MOA shall become effective upon execution by both parties and shall remain in effect through completion of Phase I services and, if applicable, Phase II services through the full period of performance of the SS4A Implementation Grant, unless terminated earlier in accordance with this MOA.

4. Access to Information
   It is agreed that all information, data, reports, records and maps as are existing, available and necessary for the carrying out of the work outlined above, shall be furnished to NKADD by the Counties and its agencies. No charge will be made to NKADD for such information, and the Counties and its agencies will cooperate with NKADD in every way possible to facilitate the performance of the work described in this MOU.

5. No Guarantee of Funding
   The Counties acknowledge that submission of a SS4A Implementation and Supplemental Planning Grant application does not guarantee the award of funding. NKADD does not warrant or guarantee that the application will be funded by USDOT.

6. Match Requirements, Compensation, and Method of Payment
   If the SS4A Implementation and Supplemental Planning Grant is awarded, each of the Counties shall be responsible for contributing toward the required twenty percent (20%) local match in a equitable percentage proportional to each county's recommendations to be determined post-award notification. Collectively, these contributions will fulfill the full match requirement. All contributions shall be provided in accordance with the approved grant budget and USDOT reimbursement requirements. Each county shall be

responsible for securing and providing its respective share of the match in compliance with all applicable funding guidelines and timelines.

If the SS4A Implementation and Supplemental Planning Grant is awarded, compensation for Phase II services shall be paid to NKADD from SS4A Implementation Grant funds at five percent (5%) of the total approved project budget. In no event shall total compensation exceed the amounts approved by USDOT and be in accordance with the approved project budget and USDOT reimbursement requirements. NKADD time for principals and staff will be provided at their respective rate of compensation.

7. Ownership of Documents
   All application materials, planning documents, reports, and work products produced under this MOA shall be the property of the Counties. NKADD may retain copies for recordkeeping and reporting purposes.

8. Standard of Care
   NKADD shall perform all services under this MOA with professional skills and care ordinarily exercised by professionals providing similar services for federal transportation grants.

9. Indemnification
   NKADD shall comply with the requirements of all applicable laws, rules and regulations in connection with the services of NKADD and shall exonerate, indemnify and hold harmless the Counties, its officers, agents and all employees from and against them and, local taxes or contributions imposed or required under the Social Security, Workers' Compensation, and Income Tax laws. Further, NKADD shall exonerate, indemnify and hold harmless the Counties with respect to any damages, expenses, or claims arising from or in connection with any of the work performed under this MOA by NKADD. This shall not be construed as a limitation of the NKADD's liability under the MOA or as otherwise proved by law.

10. Termination
    This MOA may be terminated by either party with 30-days written notice if funding is not awarded, funding is withdrawn, or for material breach, subject to applicable federal requirements.

11. Governing Law
    This MOA shall be governed by and construed in accordance with the laws of the Commonwealth of Kentucky and applicable federal law.

12. Entire Agreement
    This MOA constitutes the entire agreement between the parties and may be amended only by written agreement executed by both parties.

13. Address of Notices and Communications

Tara Johnson-Noem
Executive Director
NKADD
22 Spiral Dr.
Florence, KY 41041

Honorable Chuck Dills
Grant County Judge/Executive
Grant County Fiscal Court
101 N. Main St.
Williamstown, KY 41097

Honorable David Wilhoite
Carroll County Judge/Executive
Carroll County Fiscal Court
440 Main St.
Carrollton, KY 41008

Honorable Todd Woodyard
Owen County Judge/Executive
Owen County Fiscal Court
100 N. Thomas Street
Owenton, KY 40359

Honorable Jon Ryan Morris
Gallatin County Judge/Executive
Gallatin County Fiscal Court
200 Washington St.
Warsaw, KY 41095

Honorable David Fields
Pendleton County Judge/Executive
Pendleton County Fiscal Court
233 Main Street
Falmouth, KY 41040

14. Authorization
This MOA between NKADD and the Counties is authorized and adopted this 18th day of May, 2026, copies of which are attached hereto and made a part hereof.

NKADD
By:

Tara Johnson-Noem, Executive Director

Attest:

Signature

CLAUD BEYER

Print Name

This MOA between NKADD and the Counties is authorized and adopted this 12th day of May, 2026, copies of which are attached hereto and made a part hereof.

By: James David Wilhoite
David Wilhoite, Carroll Co. Judge/Executive

Attest:

Stacy Perkins, CCFC Clerk
Signature

Stacy J Perkins
Print Name

This MOA between NKADD and the Counties is authorized and adopted this 14th day of MAY, 2026, copies of which are attached hereto and made a part hereof.

By: _____

Jon Ryan Morris, Gallatin Co. Judge/Executive

Attest:

Christina McEntire

Signature

Christina McEntire

Print Name

This MOA between NKADD and the Counties is authorized and adopted this 5th day of May, 2026, copies of which are attached hereto and made a part hereof.

By:

Chuck Dills, Grant Co. Judge/Executive

Attest:

Signature

Jenna Alsip

Print Name

This MOA between NKADD and the Counties is authorized and adopted this 12th day of May, 2026, copies of which are attached hereto and made a part hereof.

By:

Todd Woodyard, Owen Co. Judge/Executive

Attest:

Signature

Rita K. Osborne

Print Name

This MOA between NKADD and the Counties is authorized and adopted this 13th day of May, 2026, copies of which are attached hereto and made a part hereof.

By:

David Fields, Pendleton Co. Judge/Executive

Attest:

Marianne Roseberry
Signature

Marianne Roseberry
Print Name

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Safe Streets and Roads for All (SS4A)
Department of Transportation (DOT)
Application Submission Date: May 26, 2026
Anticipated Award Date: December 22, 2026

Implementing Safer Roads and Planning for the Future in Northern Kentucky is a regional initiative led by NKADD on behalf of Carroll, Gallatin, Grant, Owen, and Pendleton Counties. NKADD will provide grant administration, ensure compliance with federal requirements, and coordinate implementation across participating counties.

These five rural counties share transportation networks, commuting patterns, and roadway safety challenges, particularly along key corridors connecting Northern Kentucky to Cincinnati, Louisville, and Lexington. Because residents regularly travel across county lines for work, healthcare, and commerce, a regional approach allows the counties to address shared safety concerns more effectively through coordinated improvements.

Building on NKADD's adopted Safety Action Plan, the project will implement safety improvements on 25 priority roadways (five per county), covering approximately 89 miles. Planned improvements include guardrail installation and replacement, roadside hazard removal such as trees and utility poles, and enhanced signage and delineation.

If the SS4A Implementation and Supplemental Planning Grant is awarded, each of the Counties shall be responsible for contributing toward the required twenty percent (20%) local match in a equitable percentage proportional to each county's recommendations to be determined post-award notification. Collectively, these contributions will fulfill the full match requirement. The G.R.A.N.T grant will be pursued to assist with this cost burden.

SS4A	Federal	Local	Total Project Cost
Cost Share	80%	20%	
	$1,345,834	$336,459	$1,682.293
G.R.A.N.T (2026)	State	Local	Total Requested G.R.A.N.T. Funds
Estimated Cost Share	93%	7%	
	$292,719	$43,740	$336,459

Government Resources Accelerating Needed Transformation (GRANT) Program

May 2026

County Population Ranking and Required Local Match

KRS 154.14 requires the Cabinet to calculate the County Population Ranking on or before May 1, 2024 and no later than May 1 every two (2) years thereafter. The County Population Ranking is determined by adding the population density ranking to the ten (10) year percentage change in population ranking (both terms defined in statute). The dollar amount of the required local match is calculated as follows: The dollar amount of the required local match is the sum of the following calculation for each participating county:

$$\frac{\text{Requested GRANT Program Funding}}{\text{Number of Participating Counties}} \times \text{Local Required Match \%}$$

The table below details the required local match for each county according to the County Population Ranking:

Ranking >= 193 Local Match of 2% Required	Ranking 192-145 Local Match of 4% Required		Ranking 144-97 Local Match of 6% Required		Ranking 96-49 Local Match of 8% Required	Ranking < 49 Local Match of 10% Required
Ballard	Bell	Robertson	Adair	Morgan	Allen	Anderson
Breathitt	Bracken	Rockcastle	Bourbon	Muhlenberg	Barren	Boone
Butler	Caldwell	Todd	Breckinridge	Nicholas	Bath	Boyle
Carlisle	Carter	Trigg	Carroll	Owen	Boyd	Bullitt
Crittenden	Casey	Trimble	Christian	Pendleton	Calloway	Daviess
Cumberland	Clay	Wayne	Edmonson	Perry	Campbell	Fayette
Elliott	Clinton	Webster	Fleming	Russell	Clark	Franklin
Hickman	Estill	Union	Floyd	Washington	Gallatin	Jefferson
Knott	Fulton		Graves		Garrard	Jessamine
Leslie	Green		Grayson		Grant	Kenton
Lewis	Harlan		Greenup		Hardin	Laurel
Livingston	Jackson		Hancock		Hart	Madison
Magoffin	Knox		Harrison		LaRue	Nelson
Owsley	Lawrence		Henderson		Marshall	Oldham
Wolfe	Lee		Henry		McCracken	Scott
	Letcher		Hopkins		Meade	Shelby
	Martin		Johnson		Mercer	Spencer
	McCreary		Lincoln		Montgomery	Warren
	McLean		Logan		Powell	Woodford
	Menifee		Lyon		Pulaski	
	Monroe		Marion		Rowan	
	Ohio		Mason		Simpson	
	Pike		Metcalfe		Taylor	
					Whitley	

Regional projects require the county's local matching funds to be pooled for each county.

AUTHORIZING RESOLUTION #_____

Northern Kentucky Area Development District (NKADD)

Adoption of a resolution of NKADD authorizing the completion and filing of a Government Resources Accelerating Needed Transformation (GRANT) Program project application for up to $340,000 in GRANT Program funds with the Cabinet for Economic Development ("CED"); authorizing and directing the Executive Director of NKADD to execute any documents which are deemed necessary by CED to carry out this project; and authorizing the Authorized Representative to act as the authorized correspondent for this project; permitting review and execution of all agreements and request of all disbursements related to the GRANT Program.

WHEREAS NKADD desires to promote and carry out community development efforts on behalf of the residents of Carroll, Gallatin, Grant, Owen, and Pendleton Counties by supporting the GRANT Program project; and

WHEREAS NKADD has submitted an application for the following federal grant program Safe Streets and Roads for All (SS4A) through the Department of Transportation (DOT) with the intent to access federal grant resources that are in the public interest and for a public purpose may seek funding assistance in preparing and/or completing applications for federal resources.

WHEREAS it recognizes that the GRANT Program monies available to NKADD for the purposes stated herein, pursuant to KRS 147A.150 to 147A.166, impose certain obligations and responsibilities upon the Entity and will require among other things:

(1) Approval of a satisfactory application submitted to CED for approval;

(2) Proper registration to do business within the Commonwealth; and

(3) Other obligations of the Entity in connection with receiving the GRANT Program monies for the purposes stated herein.

NOW, THEREFORE, be it resolved this 28th day of May 2026, by the NKADD Board of Directors.

That a GRANT Program Application on behalf of NKADD and the Counties for GRANT Program monies up to $340,000 for the SS4A Regional Project shall be submitted to CED.

NKADD shall provide such additional information and furnish such documentation as may be required, and the Authorized Representative shall act as the authorized correspondent for this Project.

Resolved this 28th day of May 2026.

Motion by _____and seconded by _____, with members present voting in favor.

Signed by:_____

Title: _____

Witnessed by:_____

Title:_____

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

FY 2025 EDA Disaster Supplemental
U.S. Economic Development Administration (EDA)
Application Submission Date: April 1, 2026
Anticipated Award Date:

NKADD submitted an application to the U.S. Economic Development Administration to strengthen regional disaster preparedness by expanding the economic resilience component of its Comprehensive Economic Development Strategy (CEDS) through a dedicated disaster resiliency plan.

Through the Disaster Supplemental Readiness Path, NKADD will designate three staff members as Disaster Resiliency Coordinators to support communities in identifying, pursuing, and implementing disaster recovery and mitigation projects. The project will focus initially on Gallatin, Grant, and Owen Counties, which were impacted by severe storms under FEMA-4702-DR.

Working with Kentucky Emergency Management, county officials, and regional partners, NKADD will develop *Strengthening Economic Resilience and Disaster Recovery Capacity in NKY*, a regional strategy to assess hazards, identify preparedness gaps, and guide long-term recovery planning. The project will improve local capacity to prepare for disasters, reduce economic disruption, and support resilient community growth.

EDA	Federal	Local	Total Project Cost
Cost Share	80%	20%	
	$209,737	$52,434	$262,172
G.R.A.N.T (2026)	State	Local	Total Requested G.R.A.N.T. Funds
Estimated Cost Share	90%	10%	
	$47,191	$5,243	$52,434

Government Resources Accelerating Needed Transformation (GRANT) Program

May 2026

County Population Ranking and Required Local Match

KRS 154.14 requires the Cabinet to calculate the County Population Ranking on or before May 1, 2024 and no later than May 1 every two (2) years thereafter. The County Population Ranking is determined by adding the population density ranking to the ten (10) year percentage change in population ranking (both terms defined in statute). The dollar amount of the required local match is calculated as follows: The dollar amount of the required local match is the sum of the following calculation for each participating county:

$$\frac{\text{Requested GRANT Program Funding}}{\text{Number of Participating Counties}} \times \text{Local Required Match \%}$$

The table below details the required local match for each county according to the County Population Ranking:

Ranking >= 193 Local Match of 2% Required	Ranking 192-145 Local Match of 4% Required		Ranking 144-97 Local Match of 6% Required		Ranking 96-49 Local Match of 8% Required	Ranking < 49 Local Match of 10% Required
Ballard	Bell	Robertson	Adair	Morgan	Allen	Anderson
Breathitt	Bracken	Rockcastle	Bourbon	Muhlenberg	Barren	Boone
Butler	Caldwell	Todd	Breckinridge	Nicholas	Bath	Boyle
Carlisle	Carter	Trigg	Carroll	Owen	Boyd	Bullitt
Crittenden	Casey	Trimble	Christian	Pendleton	Calloway	Daviess
Cumberland	Clay	Wayne	Edmonson	Perry	Campbell	Fayette
Elliott	Clinton	Webster	Fleming	Russell	Clark	Franklin
Hickman	Estill	Union	Floyd	Washington	Gallatin	Jefferson
Knott	Fulton		Graves		Garrard	Jessamine
Leslie	Green		Grayson		Grant	Kenton
Lewis	Harlan		Greenup		Hardin	Laurel
Livingston	Jackson		Hancock		Hart	Madison
Magoffin	Knox		Harrison		LaRue	Nelson
Owsley	Lawrence		Henderson		Marshall	Oldham
Wolfe	Lee		Henry		McCracken	Scott
	Letcher		Hopkins		Meade	Shelby
	Martin		Johnson		Mercer	Spencer
	McCreary		Lincoln		Montgomery	Warren
	McLean		Logan		Powell	Woodford
	Menifee		Lyon		Pulaski	
	Monroe		Marion		Rowan	
	Ohio		Mason		Simpson	
	Pike		Metcalfe		Taylor	
					Whitley	

Regional projects require the county's local matching funds to be pooled for each county.

AUTHORIZING RESOLUTION #_____

Northern Kentucky Area Development District (NKADD)

Adoption of a resolution of NKADD authorizing the completion and filing of a Government Resources Accelerating Needed Transformation (GRANT) Program project application for up to $52,500 in GRANT Program funds with the Cabinet for Economic Development ("CED"); authorizing and directing the Executive Director of NKADD to execute any documents which are deemed necessary by CED to carry out this project; and authorizing the Authorized Representative to act as the authorized correspondent for this project; permitting review and execution of all agreements and request of all disbursements related to the GRANT Program.

WHEREAS NKADD desires to promote and carry out community development efforts on behalf of the residents of Gallatin County, Grant County, and Owen County by supporting the GRANT Program project; and

WHEREAS NKADD has submitted an application for the following federal grant program FY 2025 Economic Disaster Administration Disaster Supplemental through the Department of Commerce (DOC) with the intent to access federal grant resources that are in the public interest and for a public purpose may seek funding assistance in preparing and/or completing applications for federal resources.

WHEREAS it recognizes that the GRANT Program monies available to NKADD for the purposes stated herein, pursuant to KRS 147A.150 to 147A.166, impose certain obligations and responsibilities upon the Entity and will require among other things:

(1) Approval of a satisfactory application submitted to CED for approval;

(2) Proper registration to do business within the Commonwealth; and

(3) Other obligations of the Entity in connection with receiving the GRANT Program monies for the purposes stated herein.

NOW, THEREFORE, be it resolved this 28th day of May 2026, by the NKADD Board of Directors that a GRANT Program Application on behalf of NKADD for GRANT Program monies up to $52,500 for the Strengthening Economic Resilience and Disaster Recovery Capacity in NKY project shall be submitted to CED.

NKADD shall provide such additional information and furnish such documentation as may be required, and the Authorized Representative shall act as the authorized correspondent for this Project.

Resolved this 28th day of May 2026.

Motion by _____and seconded by

_____, with members present voting in favor.

Signed by:_____

Title: _____

Witnessed by:_____

Title:_____

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Better Utilizing Investments to Leverage Development (BUILD)
Department of Transportation (DOT)
Application Submission Date: February 24, 2026
Anticipated Award Date: June 28, 2026

The Northern Kentucky Area Development District (NKADD) is applying for a BUILD planning grant to complete planning, preparation, and design activities for a proposed northbound truck climbing lane on Interstate 71 between mile points 44.8 and 46.1 in Carroll County, Kentucky.

This segment of I-71 is a key freight corridor between Cincinnati and Louisville and experiences operational and safety issues due to steep grades that slow heavy trucks and create speed differentials with passenger vehicles. Prior studies identified this location as a priority for a truck climbing lane based on truck speed loss and elevated crash rates.

The project will fund planning only and may include traffic and freight analysis, safety review, conceptual design, cost estimates, environmental considerations, and coordination with transportation partners. This effort will provide the information needed to evaluate future improvements that support safety, freight movement, and regional economic activity.

In the case a local match is required, NKADD, in partnership with regional and local partners, will share the cost to fulfill local cost share. In order to assist with the cost share burden, NKADD will take advantage of the Kentucky Cabinet for Economic Development's program, Government Resources Accelerating Needed Transformation (G.R.A.N.T.), which is a state-funded program intended to assist applicants of federal grants with match funds.

BUILD	Federal	Local	Total Project Cost
Cost Share	80%	20%	
	$1,381,841	$345,460	$1,727,301
G.R.A.N.T (2024)	State	Local	Total Requested Funds
Estimated Cost Share	95-97%	3-5%	
	$323,641- $335,096	$10,364 - $21,819	$345,460
G.R.A.N.T (2026)	State	Local	Total Requested Funds
Estimated Cost Share	90-94%	6-10%	
	$310,914 - $324,732	$20,727 - $34,546	$345,460

The table below details the required local match percentage for each county:

Ranking >= 193 Local Match of 1% Required	Ranking < 193 and >= 145 Local Match of 2% Required		Ranking < 145 and >= 97 Local Match of 3% Required		Ranking < 97 and >= 49 Local Match of 4% Required	Ranking < 49 Local Match of 5% Required
Ballard	Bell	Robertson	Adair	Logan	Allen	Anderson
Butler	Breathitt	Rockcastle	Bourbon	Lyon	Barren	Boone
Carlisle	Breckinridge	Todd	Bracken	Marion	Bath	Boyle
Crittenden	Caldwell	Trigg	Carroll	Mason	Boyd	Bullitt
Cumberland	Casey	Trimble	Carter	Monroe	Calloway	Campbell
Elliott	Clay	Wayne	Christian	Muhlenberg	Clark	Daviess
Fulton	Clinton	Webster	Edmonson	Nicholas	Gallatin	Fayette
Hickman	Estill		Fleming	Pendleton	Grant	Franklin
Knott	Floyd		Garrard	Perry	Larue	Hardin
Lee	Green		Graves	Russell	Marshall	Jefferson
Leslie	Harlan		Grayson	Washington	McCracken	Jessamine
Lewis	Jackson		Greenup		Meade	Kenton
Livingston	Letcher		Hancock		Mercer	Laurel
Magoffin	Martin		Harrison		Powell	Madison
Owsley	McCreary		Hart		Pulaski	Montgomery
Union	McLean		Henderson		Rowan	Nelson
Wolfe	Menifee		Henry		Simpson	Oldham
	Metcalfe		Hopkins		Taylor	Scott
	Morgan		Johnson		Whitley	Shelby
	Ohio		Knox			Spencer
	Owen		Lawrence			Warren
	Pike		Lincoln			Woodford

Regional projects require the county's local matching funds to be pooled for each county.

AUTHORIZING RESOLUTION #_____

Northern Kentucky Area Development District

Adoption of a resolution of NKADD authorizing the completion and filing of a Government Resources Accelerating Needed Transformation (GRANT) Program project application for up to $350,000 in GRANT Program funds with the Cabinet for Economic Development ("CED"); authorizing and directing the Executive Director of NKADD to execute any documents which are deemed necessary by CED to carry out this project; and authorizing the Authorized Representative to act as the authorized correspondent for this project; permitting review and execution of all agreements and request of all disbursements related to the GRANT Program.

WHEREAS NKADD desires to promote and carry out community development efforts on behalf of the residents of Carroll County by supporting the GRANT Program project; and

WHEREAS NKADD has submitted an application for the following federal grant program Better Utilizing Investments to Leverage Development (BUILD) through the Department of Transportation (DOT) with the intent to access federal grant resources that are in the public interest and for a public purpose may seek funding assistance in preparing and/or completing applications for federal resources.

WHEREAS it recognizes that the GRANT Program monies available to NKADD for the purposes stated herein, pursuant to KRS 147A.150 to 147A.166, impose certain obligations and responsibilities upon the Entity and will require among other things:

(1) Approval of a satisfactory application submitted to CED for approval;

(2) Proper registration to do business within the Commonwealth; and

(3) Other obligations of the Entity in connection with receiving the GRANT Program monies for the purposes stated herein.

NOW, THEREFORE, be it resolved this 28th day of May 2026, by the NKADD Board of Directors.

That a GRANT Program Application on behalf of the NKADD for GRANT Program monies up to $350,000 for the I-71 BUILD Project shall be submitted to CED.

NKADD shall provide such additional information and furnish such documentation as may be required, and the Authorized Representative shall act as the authorized correspondent for this Project.

Resolved this 28th day of May 2026.

Motion by _____and seconded by _____, with members present voting in favor.

Signed by:_____

Title: _____

Witnessed by:_____

Title:_____

Regional Transportation Planning Program
Northern Kentucky Area Development District
$83,454.00

AGREEMENT BETWEEN
THE KENTUCKY TRANSPORTATION CABINET
AND
NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

THIS AGREEMENT, made and entered into by and between the Commonwealth of Kentucky, Transportation Cabinet, hereinafter referred to as the CABINET, and the Northern Kentucky Area Development District, hereinafter referred to as the RECIPIENT,

WITNESSETH:

WHEREAS, KRS 147A.080 authorizes the RECIPIENT to accept funds from the Commonwealth of Kentucky for the purpose of carrying out the requirements of KRS 147A.090 (2); and

WHEREAS, these funds shall be made available by the CABINET to the RECIPIENT designated by the Commonwealth of Kentucky, in KRS 147A.050, as being responsible for carrying out the provisions of KRS 147A.090 (2); and

WHEREAS, the CABINET has prepared a FY 2027 Area Development District Regional Transportation Planning Work Program (hereinafter referred to as the WP), and the WP is incorporated within this AGREEMENT by reference; and

WHEREAS, the RECIPIENT is requesting funds in the amount of **$83,454.00** to carry out the PROJECT, defined as activities specified in the WP, for the period **July 1, 2026** through **June 30, 2027**,

NOW THEREFORE, in consideration of services to be performed by the RECIPIENT as part of the Statewide Transportation Planning process and the Highway Plan process, and the compensation to be paid by the CABINET for such services, the CABINET and the RECIPIENT hereby agree as follows:

Section 1. Scope. The RECIPIENT shall undertake and complete the PROJECT in accordance with the terms and conditions of this AGREEMENT, 2 CFR 200 ("Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards"), if applicable, and any other policy, regulation or directive issued by the CABINET during the

contract period. It is understood that the RECIPIENT agrees to carry out the PROJECT in accordance with the WP. It is further understood that all work elements must be completed by the prescribed dates unless an extension is requested by the RECIPIENT in writing and approved in writing by the CABINET. In addition, all documents, or verification thereof, shall be delivered to the CABINET based on time limits established in the WP. Adjustments in the WP may be necessary; however, no change in the work described in the WP will be initiated without prior written approval of the CABINET. All reports shall be approved by the CABINET prior to production and/or distribution.

Section 2. Duration. It is understood by both contracting parties that the effective date of the AGREEMENT is **July 1, 2026**. Work is not to begin until a Notice to Proceed is issued by the CABINET. The RECIPIENT shall carry out and complete the PROJECT by **June 30, 2027**. Nothing in this AGREEMENT shall be construed to prevent the duration of the PROJECT from being changed by mutual agreement of the CABINET and the RECIPIENT. However, this AGREEMENT cannot be extended beyond the biennium in which it became effective.

If delays result by reason of acts of the CABINET or approving agencies that are beyond the control of the RECIPIENT, an extension of time for such delays may be allowed upon request. If delays occur, the RECIPIENT shall within thirty (30) days from the date of delay and prior to the prescribed date of completion, apply in writing to the CABINET for an extension of time for such reasonable period as may be mutually agreed upon between the parties stating the reason for which the delay must be requested, and, if approved, the PROJECT schedule shall be revised to reflect the extension. Such extension of time to the completion date shall in no way be construed to operate as a waiver on the part of the CABINET of any of its rights in the AGREEMENT.

Section 3. Project Funding. The total State share of the PROJECT cost shall not exceed **$83,454.00**. The RECIPIENT will provide local matching funds in the amount of **$9,273.00** for a total PROJECT budget of **$92,727.00**. The RECIPIENT agrees to provide local cash matching funds in the amount sufficient, together with the allocated State funds, to assure funding for completion of the PROJECT. Any additional local funds shall be at the discretion of the RECIPIENT. Should the legislative budget approval require a revision in the project funding

stated in this AGREEMENT, an amendment will be initiated by the CABINET, reviewed and approved by both parties.

This AGREEMENT is contingent upon the continued availability of appropriated State funds. If the funds become unavailable for any reason, including for the following reasons, this AGREEMENT will be cancelled by the CABINET without penalty, either in whole or in part: The Kentucky General Assembly's failure to appropriate funds, operation of law, a reduction of State funds. Cancellation for unavailable state funds is not a default by the CABINET nor does it give rise to a claim against the CABINET.

Section 4. Payments. The State share of costs are payable quarterly by the CABINET for work completed and upon satisfactory presentation of invoices, detailed narrative progress reports which provide sufficient proof of work performed (for one-fourth of the deliverables as requested by the CABINET unless otherwise noted), and the satisfactory completion of work elements and documents as prescribed in the WP and according to the schedules set out by the WP. All invoices shall reflect the State and local matching funds and shall be submitted to the CABINET within thirty (30) days after the end of the reporting period. The RECIPIENT shall be paid, upon the submission of proper invoices to the receiving agency at the prices stipulated for the supplies delivered and accepted, or services rendered. Unless otherwise specified, payment will not be made for partial deliveries accepted. Payments will be made within thirty (30) working days after receipt of goods or a vendor's invoice in accordance with KRS 45.453 and KRS 45.454. Additional documentation may be requested by the CABINET if deemed necessary to ensure satisfactory completion of work elements in the WP.

Should the CABINET not have satisfactory proof of completion of work elements by the prescribed dates in the WP, or other schedules provided by the CABINET, the RECIPIENT shall be given thirty (30) days in which to provide proof of completion of the work element. No additional payment may be made until proof of work completed is submitted to and accepted by the CABINET. Any extension of deadlines shall be requested in writing by the RECIPIENT prior to the deadline prescribed in the WP. A discretionary percentage of the fourth quarter payment may be withheld until all work elements of the prescribed WP have been completed to the

satisfaction of the CABINET. A waiver of specific work elements may be granted at the discretion of the CABINET under extenuating circumstances. Acceptability of planning services performed by the RECIPIENT shall be determined by the CABINET. It is further understood that revisions in the WP may be necessary and may be allowed if they do not exceed the total sum set out above, subject to the prior written approval of the CABINET. In order for the RECIPIENT to be reimbursed for costs that are not listed in the WP, the RECIPIENT must obtain written approval from the CABINET prior to incurring these costs.

Section 5. Allowable Costs. The costs referred to in this AGREEMENT shall be comprised of the allowable direct costs incident to the PROJECT plus allowable shared costs, less applicable credit, to be determined in accordance with the standards set forth by the Department for Local Government and approved by the CABINET and any other appropriate State or Federal standards, as may be required by the CABINET in writing. Any additional requests of the RECIPIENT made by the CABINET in connection with the Regional Transportation Program (i.e., use of facilities, requests for data or administrative support) shall be considered as allowable costs under this AGREEMENT pursuant to the requirements of the WP and included within the prescribed budget.

Section 6. Assignability. The RECIPIENT shall not assign any portion of the work to be performed under this AGREEMENT, except as set forth in the WP, or execute any contract or amendment thereto, or obligate itself in any manner with any third party with respect to its rights and responsibilities under this AGREEMENT without the prior written concurrence of the CABINET.

Section 7. Reporting and Records. The RECIPIENT shall comply with all reporting requirements outlined by the CABINET. Upon final approval of reports a full electronic copy shall be furnished to the CABINET, unless otherwise requested. If paper copies of any final reports are required, the CABINET will notify the RECIPIENT prior to the final delivery date and provide ample time for the production of such. The RECIPIENT shall provide the CABINET with electronic formats of reports, documents, memoranda, meeting minutes, or other material and only provide paper copies upon request by the CABINET or if electronic copies are not available.

The RECIPIENT shall establish and maintain separate accounts for the project, either independently or within its existing accounting system.

All charges under this AGREEMENT shall be supported by properly documented invoices, contracts, or vouchers evidencing in proper detail the nature and propriety of the charges to the satisfaction of the Official Single Audit under the terms accepted and approved by the Department for Local Government, and according to the schedule set out by the Department for Local Government for submission of such. The RECIPIENT shall provide to the CABINET any notification of acceptance and approval of the audit as may be provided by the Department for Local Government or the Kentucky State Auditor's Office. However, quarterly invoices approved and paid by the CABINET shall be construed by the CABINET as acceptable for payment for the prescribed work elements of the WP, subject to final audit.

The RECIPIENT shall retain all records for a period of three (3) years from the date of final payment under this AGREEMENT, and all records shall be readily accessible throughout said period.

Section 8. Audits and Inspections. The RECIPIENT shall permit the CABINET, the Finance and Administration Cabinet, the Auditor of Public Accounts, and the Legislative Research Commission, or their authorized representatives, to inspect and approve all phases of the PROJECT and all relevant PROJECT data and records; the RECIPIENT shall also permit representatives of these agencies to review audit(s) performed by the RECIPIENT or other entity and to audit the books and accounts of the RECIPIENT pertaining to the PROJECT.

The RECIPIENT shall have a Single Audit, under the terms of 2 CFR 200 Subpart F, based on a Cost Allocation Plan and in accordance with instructions and requirements by the Department for Local Government and approved by the CABINET. To be assured that the RECIPIENT provides adequate staffing to complete the PROJECT, the CABINET shall receive a copy of the Cost Allocation Plan and the annual RECIPIENT Audit Report as submitted to the Department for Local Government. The results of the Department for Local Government's audit review should be submitted to the CABINET within thirty (30) days after completion of the audit review for each year containing project information.

The RECIPIENT hereby acknowledges it is responsible to inform an entity it intends to hire or use as a contractor, as defined in KRS 45A.030, that the RECIPIENT, the Finance and Administration Cabinet, the Auditor of Public Accounts, and the Legislative Research Commission, or their duly authorized representatives, shall have access to the entity's books, documents, papers, records, or other evidence which are directly pertinent to this AGREEMENT for the purpose of financial audit or program review. Furthermore, all books, documents, papers, records, or other evidence provided to the RECIPIENT, the CABINET, the Finance and Administration Cabinet, the Auditor of Public Accounts, or the Legislative Research Commission which are directly pertinent to the contract shall be subject to public disclosure regardless of the proprietary nature of the information, unless specific information is identified and exempted and agreed to by the Secretary of the Finance and Administration Cabinet as meeting the provisions of KRS 61.878 (1) prior to the execution of the contract. The Secretary of the Finance and Administration Cabinet shall not restrict the public release of any information, which would otherwise be subject to public release if a state government agency were providing the service.

Section 9. Hold Harmless Clause. The RECIPIENT shall indemnify and hold harmless the CABINET and all of its officers, agents, and employees from all suits, actions, or claims of character arising from injuries, payments, or damages received or claimed by any person, persons, or property due to the activities of the RECIPIENT, its subcontractors, agents or employees, in connection with their services under this AGREEMENT.

Section 10. Prohibited Interest. No member, officer, or employee of the CABINET or of the RECIPIENT shall have an interest, direct or indirect, in this AGREEMENT or the proceeds thereof as established in KRS 45A.340.

Section 11. Covenant Against Contingent Fees. The RECIPIENT warrants that no person, elected official, selling agency or other organization has been employed or retained to solicit or secure this AGREEMENT upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee. For breach or violation of this warrant, the CABINET shall have the right to annul this AGREEMENT without liability or, at its discretion, to deduct from the compensation, or otherwise recover, the full amount of such commission, percentage, brokerage, or contingent fee.

Section 12. Applicable Laws. Insofar as this AGREEMENT is not governed by federal law and the regulations required thereby, or incorporated herein by reference, this AGREEMENT shall be construed and interpreted solely in accordance with the laws of the Commonwealth of Kentucky.

Section 13. Disputes. Any dispute concerning a question of fact in connection with the work not disposed of by AGREEMENT between the RECIPIENT and the CABINET shall be referred to the Secretary of the Transportation Cabinet of the Commonwealth of Kentucky, or his duly authorized representative, whose decision shall be final.

Section 14. Campaign Finance. If applicable, the undersigned representative of the RECIPIENT swears under the penalty of perjury, as provided by KRS 523.020, that neither he/she nor the entity which he/she represents has knowingly violated any provisions of the campaign finance laws of the Commonwealth, and that the award of a contract to him/her or the entity which he/she represents will not violate any provisions of the campaign finance laws of the Commonwealth.

Section 15. Violations. If applicable, pursuant to KRS 45A.485, the RECIPIENT and any subcontractors performing work under this AGREEMENT shall reveal to the CABINET any final determination of a violation within the previous five (5) year period pursuant to KRS Chapters 136, 139, 141, 337, 338, 341 and 342. These statutes relate to the state corporate and utility tax, sales and use tax, income tax, wages and hours laws, occupational safety and health law, unemployment compensation law, and workers compensation insurance law, respectively.

The RECIPIENT agrees to be in continuous compliance, and will require any subcontractors performing work under this AGREEMENT to be in compliance, with the provisions of KRS Chapters 136, 139, 141, 337, 338, 341 and 342 for the duration of this AGREEMENT. Failure to reveal a final determination of a violation of the referenced statutes or to comply with these statutes for the duration of the AGREEMENT shall be grounds for the termination of funding for the AGREEMENT and disqualification of the RECIPIENT from eligibility for future state contracts for a period of two (2) years.

Section 16. Personal Service Contracts and Memoranda of Agreement. If this AGREEMENT comes within the purview of KRS 45A.690-45A.725, payments on personal

service contracts and memoranda of agreement shall not be authorized for services rendered after disapproval of the Government Contract Review Committee unless the decision of the Committee is overridden by the Secretary of the Finance and Administration Cabinet or the CABINET, if the CABINET has been granted delegation authority.

Section 17. **Termination.** The CABINET reserves the right to terminate all reimbursements under this AGREEMENT when deemed to be in the best interest of the CABINET by giving thirty (30) days written notice of such termination to the RECIPIENT. If reimbursement under this AGREEMENT is terminated by reason other than violation of this AGREEMENT or applicable law by the RECIPIENT, its agents, employees and/or contractors, the CABINET shall reimburse the RECIPIENT according to the terms of this AGREEMENT for all expenses incurred under this AGREEMENT to the date of the termination of reimbursement. The RECIPIENT may seek to terminate its obligations under this AGREEMENT when deemed to be in its best interest by giving thirty (30) days written notice to the CABINET. If the CABINET agrees to allow the RECIPIENT to terminate its obligations under this AGREEMENT, the RECIPIENT shall reimburse the CABINET for all federal funding reimbursement made under this AGREEMENT.

Section 18. **Agreement Change.** Any proposed change in this AGREEMENT must be by the written, mutual consent of the RECIPIENT and the CABINET.

Section 19. **Severability.** In the event any Section of this AGREEMENT is declared invalid or is unenforceable, the remainder of this AGREEMENT shall remain in full force and effect and all responsibilities and duties of the parties shall be performed as set forth herein.

Regional Transportation Planning Program
Northern Kentucky Area Development District
$83,454.00

IN TESTIMONY WHEREOF, the parties have hereto caused this AGREEMENT to be executed upon signature by proper officers and representatives:

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

_____

EXECUTIVE DIRECTOR

DATE: _____

COMMONWEALTH OF KENTUCKY TRANSPORTATION CABINET

_____

SECRETARY, TRANSPORTATION CABINET

DATE: _____

APPROVED AS TO FORM & LEGALITY

_____

OFFICE OF LEGAL SERVICES TRANSPORTATION CABINET

DATE: _____

Andy Beshear
GOVERNOR

TRANSPORTATION CABINET
200 Mero Street
Frankfort, Kentucky 40601

Rebecca Goodman
SECRETARY

April 30, 2026

Ms. Tara Johnson-Noem
Executive Director
Northern Kentucky Area Development District
22 Spiral Drive
Florence KY 41042

Dear Ms. Johnson-Noem:

Subject: FY 2027 Regional Transportation Planning Program

Enclosed for your review and signature is the Fiscal Year 2027 agreement between the Kentucky Transportation Cabinet and the Northern Kentucky Area Development District for the Regional Transportation Planning Program for the period July 1, 2026 through June 30, 2027.

We have also enclosed the FY 2027 Area Development District Regional Transportation Planning Annual Work Program.

Please note that this agreement includes state road and general funds for the regional transportation planning program, and ten percent local funds as required for the program for this contract year. As noted in the agreement, state funds will be paid on a quarterly reimbursement basis and the local funds will not flow through the Cabinet. Should any changes in funding occur during the fiscal year, then agreement modifications may be processed, as required.

We request that you review these documents, sign the agreement, and return the original agreement to this office as quickly as possible, but no later than June 7, 2026. Upon receipt, we will secure proper signatures within the Cabinet, and a copy of the fully executed agreement will be returned for your files along with a Notice to Proceed. No work may begin prior to the date listed on the Notice to Proceed.

If you have any questions, please contact Nathan Ridgway at (502) 782-4889 or me at (502) 782-5073. We look forward to another great year!

Sincerely,

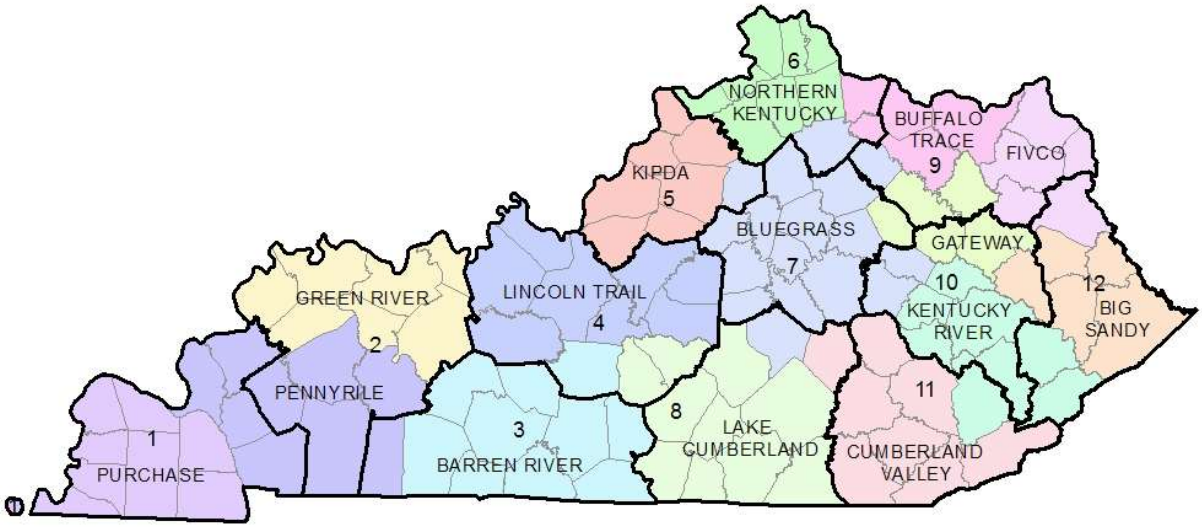
Mikael Pelfrey

Mikael B. Pelfrey, P.E.
Director
Division of Planning

MBP/NR/MO

Enclosures

FY 2027 Area Development District Regional Transportation Planning Annual Work Program



KENTUCKY TRANSPORTATION CABINET
Division Of Planning

FY2027

July 1, 2026 to June 30, 2027

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ACRONYMS

AASHTO	American Association of State Highway and Transportation Officials
ADATP	Americans with Disabilities Act Transition Plan
ADDWP	Area Development District Regional Transportation Planning Work Program, or Area Development District Work Program
ADD	Area Development District
APAP	ADD Planners Assistance Program
CEU	Continuous Education Units
CHAF	Continuous Highway Analysis Framework
DTP	District Transportation Plan
DOP	Division of Planning
FAST Act	Fixing America's Surface Transportation Act
FY	Fiscal Year
HDO	Highway District Office
HIS	Highway Information System
HPMS	Highway Performance Monitoring System
KBT	Kentuckians for Better Transportation
KHFN	Kentucky Highway Freight Network
KYTC	Kentucky Transportation Cabinet
LRSTP	Kentucky Long-Range Statewide Transportation Plan
MFU	Major Freight User
MTG	Major Traffic Generator
MPO	Metropolitan Planning Organization
NADO	National Association of Development Organizations
NHS	National Highway System
PDH	Professional Development Hours
PIP	Public Involvement Plan
RTA	Regional Transportation Assets
RTC	Regional Transportation Committee
SLM	Shared Lane Marking
SHIFT	Strategic Highway Investment Formula for Tomorrow
STP	Statewide Transportation Planning
STIP	Statewide Transportation Improvement Program
TRB	Transportation Research Board
WE	Work Element

DEFINITIONS

Terms used herein shall have the same meaning as those in Title 23 of the Code of Federal Regulations, Parts 420 and 450, unless this Area Development District Work Program (ADDWP) specifically provides otherwise; where terms are not otherwise defined, the meaning associated with such terms shall be as defined by a standard dictionary reference or the generally accepted scientific or industrial meaning of the term. For the purposes of this document "Cabinet" is a reference to the Kentucky Transportation Cabinet (KYTC) and "Division is a reference to the KYTC Division of Planning.

ADD WORK PROGRAM – 5 YEAR SCHEDULE

FY2027	FY2028	FY2029	FY2030	FY2031
Major Update	**Major Update**	**Major Update**	**Major Update**	**Major Update**
List of Contacts/Resources	Regional Goals and Objectives	Bike/Ped Plan updates	Major Freight Users and Major Traffic Generators	NHS Intermodal Connectors
New RTC Member Guide	By-Laws	Bike/Ped Asset Collection	KY Highway Freight Network	Park and Ride

FY 2027 MONTHLY SCHEDULE – ADD WORK PROGRAM DELIVERABLES

PROGRAM DELIVERABLES		DATE	WE	TO:	+CC: Chief District Engineer +CC: District Planner
SHIFT		TBA	4	TBA	
Timeline of Work Program (New ADD Planners Only)		TBA	1A	KYTC ADD Coordinator	
*Assistance to the Cabinet / Special Projects		TBA	1D / 2A	TBA	
July-26	**STP Meeting**	7/15/26	1B	N/A	
	Allocation of Staff Cost/Time	7/31/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
	ADD Work Elements/Components Review	7/31/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
August-26	**Plan Committee Activities/Presentations**	8/31/26	2D	KYTC ADD Coordinator	+CC CDE and district planner
	Proposed Training List	8/31/26	1B	KYTC ADD Coordinator	+CC CDE and district planner
September-26	**1st Quarterly Report**	9/30/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
	Major Traffic Generators Inventory	9/30/26	3C	N/A	+CC CDE and district planner
October-26	**1st Quarterly Invoice**	10/2/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
	STP Meeting	10/21/26	1B	KYTC ADD Coordinator	+CC CDE and district planner
	Transportation Committee By-Laws	10/30/26	2D	KYTC ADD Coordinator	+CC CDE and district planner
	Regional Goals and Objectives	10/30/26	2E	KYTC ADD Coordinator	+CC CDE and district planner
	****New RTC Member Guide**	10/30/26	2D	KYTC ADD Coordinator	+CC CDE and district planner

November-26	Truck Parking Inventory	11/30/26	3B	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	NHS Intermodal Connectors	11/30/26	3D	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	KY Highway Freight Network	11/30/26	3F	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
December-26	2nd Quarterly Report	12/23/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
	1st Part of Annual Assessment (Email)	12/23/26	1A	KYTC ADD Coordinator	+CC CDE and district planner
January-27	2nd Quarterly Invoice	1/8/27	1A	N/A	+CC CDE and district planner
	STP Meeting	1/20/27	1B	KYTC ADD Coordinator	+CC CDE and district planner
	**List of Contacts/Resources	1/29/27	2C	KYTC ADD Coordinator	+CC CDE and district planner
	Regional Transportation Committee Membership	1/29/27	2D	KYTC ADD Coordinator	+CC CDE and district planner
February-27	Rail Freight Loading / Unloading Locations	2/26/27	3A	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	Major Freight Users Inventory	2/26/27	3C	KYTC ADD Coordinator	+CC CDE and district planner
March-27	3rd Quarterly Report	3/31/27	1A	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	Park-and-Ride Inventory	3/31/27	3G	KYTC ADD Coordinator	+CC CDE and district planner
Apr-27	3rd Quarterly Invoice	4/2/27	1A	N/A	+CC CDE and district planner
	STP Meeting	4/21/27	1B	KYTC ADD Coordinator	+CC CDE and district planner
	Bicycle and/or Pedestrian Plan Updates	4/30/27	3E	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	Bicycle/Pedestrian Data Collection	4/30/27	3E	KYTC ADD Coordinator	+CC CDE and district planner

May-27	**Speaking Engagements**	5/31/27	2A	KYTC ADD Coordinator	CC CDE, district planner and jacob.rice@ky.gov
	Title VI Accomplishments	5/31/27	2A	KYTC ADD Coordinator	+CC CDE and district planner
JUNE (end of FY2027)	**4th Quarterly Invoice**	6/4/27	1A	KYTC ADD Coordinator	+CC CDE and district planner
	4th Quarterly Report	6/30/27	1A	KYTC ADD Coordinator	+CC CDE and district planner
	2nd Part of Annual Assessment (Meeting)	6/30/27	1A	KYTC ADD Coordinator	+CC CDE and district planner
	FY Cost Allocation Plan (CAP)	6/30/27	1A	KYTC ADD Coordinator	+CC CDE and district planner
	Socioeconomic Profiles	6/30/27	2B	KYTC ADD Coordinator	+CC CDE and district planner
	PIP Review and UPDATE Posted to Website	6/30/27	2A	KYTC ADD Coordinator	+CC CDE and district planner
	RTA Inventory Review / UPDATE Posted to Website	6/30/27	3	KYTC ADD Coordinator	+CC CDE and district planner
KYTC ADD Coordinator email - nathan.ridgway@ky.gov					
Ongoing effort throughout Fiscal Year.					
*****Major Updates in RED***					
NOTE: The ADDs need to email Audits to KYTC.SingleAudit@ky.gov.					

FY 2027 AREA DEVELOPMENT DISTRICT REGIONAL TRANSPORTATION PLANNING ANNUAL WORK PROGRAM

PURPOSE

The purpose of this FY 2027 Area Development District Regional Transportation Planning Annual Work Program (hereinafter referred to as the ADDWP) is to define the regional transportation activities to be conducted by the Area Development District (ADD), hereinafter referred to as the ADD, in support of the Kentucky Transportation Cabinet (hereinafter referred to as the Cabinet).

The major activity to be conducted by the ADDs will be to support the statewide transportation planning process of the Cabinet. The Infrastructure Investment and Jobs Act of 2022 now governs the statewide transportation process, which is a continuation of previous federal transportation legislation.

The responsibility for conducting the various aspects of the statewide transportation planning process falls mainly on four groups:

1) Area Development Districts (ADDs)
2) Metropolitan Planning Organizations (MPOs)
3) Transportation Cabinet's Division of Planning (Division) and
4) The KYTC Highway District Offices (HDOs).

The ADDs and MPOs are primarily responsible for the analysis of transportation systems, systems data, identification and evaluation of needs in their region, the coordination of public input for the Kentucky Long-Range Statewide Transportation Plan (LRSTP), the Kentucky Statewide Transportation Improvement Plan (STIP), and the subsequent evaluation and prioritization of projects in the Continuous Highway Analysis Framework (CHAF).

The ADD will be concerned with all modes of transportation within their geographic boundaries. Specific activities shall include Public Involvement, holding regular Regional Transportation Committee (RTC) meetings and boosting membership, and developing and maintaining the Continuous Highway Analysis Framework (CHAF). The ADD will coordinate transportation planning activities with adjacent ADDs, MPOs, HDOs and other affected agencies. The ADD will be responsible for data collection activities (set forth in the following pages) within adjacent MPO areas that are not specifically supported by the MPO.

REGULATIONS

The federal regulations for Transportation Planning are codified in Title 23 of the Code of Federal Regulations (CFR), Parts 420 and 450. Part 420 deals with Planning and Research Program Administration. Part 450 deals with Planning Assistance and Standards. Subpart B of Part 450 discusses Statewide Transportation Planning and Programming while Subpart C deals with the Metropolitan Transportation Planning and Programming.

The regulations currently require each state to carry out a continuing, cooperative, and comprehensive statewide transportation planning process that provides for consideration and implementation of projects, strategies, and services that will address ten (10) planning factors. They are contained in 23 CFR 450.206(a) and are summarized here:

1) Supporting economic vitality;
2) Increasing safety of the transportation system for motorized and non-motorized users;
3) Increasing security of the transportation system for motorized and non-motorized users;
4) Increasing accessibility and mobility for people and freight;
5) Protecting the environment and improving quality of life including consideration of planned growth and economic development patterns;
6) Integration and connectivity between various transportation modes;
7) Promoting efficient management of the transportation system;
8) Preservation of the existing transportation system;
9) Improve the resiliency and reliability of the transportation system and reduce or mitigate stormwater impacts of surface transportation; and
10) Enhance travel and tourism.

The regulations also require that the public be given opportunities to comment at key decision points (23 CFR 450.210). The parties specifically identified in the regulations include:

- Individuals;
- Affected Public Agencies;
- Representatives of Public Transportation Employees;
- Public Ports;
- Freight Shippers;
- Private Providers of Transportation (including intercity bus operators);
- Representatives of Users of Public Transportation;
- Representatives of Users of Pedestrian Walkways and Bicycle Transportation Facilities ;
- Representatives of the Disabled;
- Non-Metropolitan Local Officials;
- Traditionally Underserved Including Low-Income and Minority Households;
- Providers of Freight Transportation Services, and
- Other interested parties.

FUNDING AND STAFFING

The program is funded each fiscal year by agreements between the Cabinet and each individual ADD. All funding provided by the Cabinet is subject to approval of the contract agreement, including approval of the ADDWP. The funds provided to the ADD are in accordance with legislation/regulations related to federal reauthorization of transportation programs.

A new contract is written each fiscal year (July 1 – June 30), outlining the agreement, policies, procedures, and ADDWP work elements. The ADDWP lists each work element to be undertaken during the next project year.

The ADD will provide one (or one and one-half for BGADD) full-time Transportation Planner equivalent staff based on the below requirements to support the statewide transportation planning program. Said staffing levels will be specifically delineated in the ADDWP and the Cost Allocation Plan. Indirect support services provided in support of this program are considered to be part of the indirect costs charged to this program and cannot exceed the total budget for the ADD as specifically noted in the Fiscal Year Contract for each ADD.

Effective July 1, 2012, minimum requirements for the ADD Transportation Planner position shall be as follows:

EDUCATION: Graduate of a college or university with a bachelor's degree (preferred degree in Planning or a related field).

AND

EXPERIENCE: Should have two (2) years of professional experience in management or administration in Planning or a related field.

***SUBSTITUTION CLAUSE**:*

EDUCATION: Master's degree will substitute for one (1) year of the suggested experience.

OR

EDUCATION: Graduate of a college or university with an associate's degree (preferred degree in Planning or related field).

AND

EXPERIENCE: Must have two (2) years of experience (four (4) years preferred) in management or administration in Planning or a related field.

Desirable skills and experience, in addition to the minimum ADD Planner qualifications, should include the following:

1) Two (2) years of employment at a regional planning agency.
2) Knowledge of the principles of transportation engineering.
3) Knowledge of research methods as applied to the collection, processing, and presentation of data.
4) Ability to work effectively with committee members, elected officials, and the general public.
5) Familiarity with basic computer hardware and software such as word processing, spreadsheets, and Geographic Information Systems (GIS)/Global Positioning Systems (GPS).

If, during the course of the contract, the ADD Transportation Planner vacates the position, the ADD shall immediately notify the Cabinet's Division of Planning and communicate the interim plan to fulfill the obligations of the contract. The name and qualifications of the interim Transportation Planner shall be provided to the Division within thirty (30) days of the position having been vacated, followed by the qualification information for the new Transportation Planner when determined.

All current ADD Transportation Planners holding this position on July 1, 2012, that do not meet the above education and experience criteria will be waived from having to meet these requirements unless they leave the position and attempt to return at a later date. Any other exceptions may be granted through the discretion of the Cabinet upon demonstration of "good cause" from the ADD.

FY WORK PROGRAM DELIVERABLES

All staff charging time to this program shall be specifically identified in this ADDWP along with the salary, percentage of total time charged to this program, and overhead/administrative charges by percentage in the **Allocation of Resources** for the Regional Transportation Planning Program and returned to the Cabinet no later than the close of business on the last work day in **July.**

Specific information noted at the end of each work element shall be reviewed and compiled as described by the task in Work Element 1 by each ADD and submitted to the Cabinet no later than the close of business on the last workday in **July**,

The information for each work element shall include:

1) Specific products;
2) Staff assigned to specific tasks; and
3) Estimated percentage of total work program required to complete the task.

All deliverables shall be made available to the **Chief District Engineer, HDO Planner, Division,** and any or all pertinent employees of the Cabinet by the prescribed submittal date. All due dates occur during the Fiscal Year referenced in the Contractual Agreement.

WORK ELEMENT 1 - PROGRAM ADMINISTRATION

1A: Staff Time and Review

Purpose

Prepare and maintain the ADDWP/Contract for the Regional Transportation Planning Program and timely reporting for this program as required by the Cabinet.

Tasks

1) Complete the **Estimated Allocation of Staff/Costs/Time** form and return to the Cabinet by the close of business on the last workday in **July**. The estimated total hours from the ADDWP work elements and work element components document along with the employee(s) hourly rate is used on this form. Per this contract, the ADD will provide one (or one and one-half for BGADD) full-time Transportation Planner equivalent staff based on the requirements to support the statewide transportation planning program.

2) Review **ADDWP Work Elements** and **Work Element Components** and provide input/additional information for each work element, as required, no later than the close of business on the last work day in **July**:

   a) Staff time in person-hours required for each work element;
   b) Name of staff person(s) assigned to each work element and person-hours;
   c) Estimate percent (%) of total work program;
   d) Final Products;
   e) Milestone date for tasks;
   f) Projected Final completion date; and
   g) If a continuing work element from previous fiscal year is included, estimate the percentage (%) completed in previous fiscal year.

   The idea for this task is to encourage the planner to carefully review the work elements and "think through" what needs to be done or what effort will be required to complete the work element tasks/products by the required KYTC deadline.

3) New ADD planners will be required to complete a **Timeline of Work Program** deliverable for all ADDWP tasks and submit no later than 30 days from the new planner orientation meeting (see 1B). The Timeline of Work Program shall reflect major tasks, specific milestones, meeting schedules, due dates/anticipated completion dates for tasks, and color-coded to reflect staff person completing such tasks.

4) Prepare a **FY Cost Allocation Plan** for all ADDWP tasks and submit no later than the close of business on the last workday in **June**.

5) Prepare Quarterly Progress Reports and submit electronically to the Cabinet no later than thirty (30) days following the close of each quarter. The quarterly progress report shall include:

   a) Narrative Progress Report by Work Element and Work Element Components reflecting all activities and efforts performed during the period including but not limited to:

      i) Dates of submittals;
      ii) Specific information/dates on meetings, trainings, public involvement activities;
      iii) Progress on ADDWP Work Elements' tasks assigned; and

iv) Percent (%) completed.

b) **Original signed** hard copy of the **Quarterly Invoice** must be sent or hand delivered for processing of payment.

6) Attend all Statewide Transportation Planning meetings on dates provided by the Cabinet. Attendance at these meetings is mandatory. However, if a planner cannot attend due to illness or other unforeseen conflict, the planner shall email the Cabinet, explain the reason for not attending and provide the name of the ADD's representative to attend, prior to the meeting date.

7) Provide any reports/status documents as may be required by the Cabinet.

8) If a work element or task cannot be completed by the prescribed due date, a request shall be emailed to the Cabinet for a time extension, with justification for the time extension, and the estimated date for submittal.

9) Submit all documents electronically (see various work elements), and in separate emails, including.

a) A specific subject heading for all email and file transmittals;

XXADD FY25 XX Name of Deliverable

BGADD FY25 1A 1st Quarter Invoice

10) Participate in an **Annual Assessment** process prescribed by the Cabinet. This process addresses the performance of the ADD Planners for the Fiscal Year and will be conducted per the following procedures:

a) Initial checklist will be provided via email to ADD Planner and Executive Director by close of business on the last workday in **December** of the initial Calendar Year for informational purposes regarding submittal dates. A response is only required if the ADD Planner or Executive Director finds discrepancies or if specific issues have been raised. At such an instance, an additional follow- up and meeting will be handled as needed.

b) Formal Assessment shall take place during the period of April through June of the Fiscal Year at a time and place of convenience for both the Division Staff and ADD Personnel.

c) When possible these will be scheduled to coincide with Regional Transportation Committee (RTC) Meetings.

d) Attendees shall include at a minimum the Division Staff, ADD Planner, and ADD Executive Director (or appropriate proxy as deemed by Executive Director).

e) The Division staff shall solicit and factor in feedback from Highway District Office Personnel as necessary to document ADD planner performance.

f) Should major or frequent low performance arise, the Division shall notify in writing the ADD Executive Director and ADD Planner that an Action Plan shall be developed in an effort to remedy the matters at hand and communicated to the Division within thirty (30) days of receipt. The Division shall review and comment within five (5) business days on appropriateness of said actions.

Extended unresolved issues may result in termination of contract.

1B: Training

Purpose

Staff shall continually be aware of and participate in applicable training sessions as either required by the Cabinet or directly applicable to the purpose of this work program. All training in support of carrying out the activities in this ADDWP and subsequent travel expenses are eligible expenditures of this program within the limits of the approved contracted budget.

Tasks

1) Maintain and participate in the ADD Planners Assistance Program (APAP).
    a) Attend all meetings held in conjunction with the Statewide Transportation Planning Meetings or as required.
    b) Attend any special training sessions scheduled by either the ADD Planners group or the Cabinet.
    c) Contribute and provide input to the APAP Coordinators (all ADD Planners are expected to participate and provide input when requested).
2) Request training as needed to comply with the ADDWP elements and to satisfy the requirements of this program for topics including but not limited to:
    a) Computer training as needed (Excel, Access, etc.);
    b) Rural Consultation Methods;
    c) Public Involvement Techniques;
    d) Title VI Matters;
    e) Freight Movement;
    f) Scenario / Land Use Planning;
    g) Statewide Transportation Planning; and
    h) Facilitating Meetings.
3) Share information from any training received or conferences attended under this program with the other ADD Planners through either the ADD Planners Group Meetings or the Statewide Transportation Planning Meetings as applicable.
4) Any training for this program shall be considered a part of the contract agreement as covered under “overhead” costs included in the contract funds. Specific approval from the Cabinet is not required.
5) Document details of any training received within the quarter in that specific Quarterly Progress Report and attach proof of completion (e.g., copies of Course Agenda, CEU/PDH, or Training Completion Certificate, etc.) upon submission.

Documentation shall include:

a) Times and date/s of training;

b) Brief description of the class, and

c) How the training has contributed to the work of the planner.

6) Submit already "planned" training as well as any anticipated or estimated training that may occur during the Fiscal Year. This **Proposed Training List** shall be provided electronically to the Cabinet by the close of business of the last workday in **August**.

7) New ADD planners shall participate in a new planner orientation in the form of one-on-one meeting with the Cabinet and HDO staff within thirty (30) days of hire. The Division staff shall provide CD of recently completed work elements and a copy of the ADDWP. Email containing various web links and pertinent data shall be provided for use in research of questions or concerns prior to meeting.

8) In addition to the new planner orientation, the New ADD planner will be required to complete a **Timeline of Work Program** deliverable that will be due no later than 30 days from the new planner orientation date.

9) Conferences specifically outlined below are approved for attendance by staff directly involved with the Regional Planning Program:

a) Kentuckians for Better Transportation;

b) Partnering Conference;

c) Kentucky Association of Counties;

d) Kentucky League of Cities;

e) Kentucky Public Transit Association;

f) American Planning Association;

g) Kentucky Chapter of American Planning Association;

h) Southern Association of State Highway and Transportation Officials;

i) American Association of State Highway and Transportation Officials;

j) National Association of Development Organizations;

k) Kentucky Bicycles and Bikeways Commission;

l) National Association of Regional Councils; and

m) Other conferences may be attended given prior approval by the Cabinet.

1C: Coordination with other Planning Agencies and Activities

Purpose

The ADD will coordinate activities in support of the Statewide Transportation Planning process with planning activities of other local agencies, interests, and/or organizations, including MPOs and/or neighboring ADDs. The purpose is to provide local officials and public input by sharing information. Every attempt shall be made to minimize duplication of effort, understand and address the impacts of transportation on other planning activities, as well as the influences of other activities on transportation planning.

Tasks

1) These points of coordination will include:

   a) Plans, programs, and planning activities of the MPOs in the urbanized areas and other ADDs;

   b) Transportation plans and programs of local governments;

   c) Plans and programs of public transportation operators, including school bus systems and human service transportation delivery brokers;

   d) Plans and programs of airports, river-ports, rail lines, and other intermodal facilities;

   e) Plans of large private transportation providers such as railroads, trucking, and logistics companies;

   f) Plans and programs of environmental resource and permit agencies;

   g) Objectives and plans of land use and development agencies;

   h) Plans of local and state economic development agencies and industrial authorities; and

   i) Plans of health services, emergency management, and agencies serving the underserved populations in the region.

2) Each ADD shall coordinate with other staff working in the ADD who also are under contract with the Cabinet, providing information as may be required, so as to not duplicate efforts or tasks paid by Cabinet funds.

3) The ADD will maintain a coordination file that will include correspondence and other documentation concerning contacts, meetings, and presentations with other planning agencies and activities. Notification of such efforts shall be made via email with a short description as it occurs with a summary made part of the **Quarterly Progress Report** for the quarter the activity occurred.

4) Each ADD Planner shall maintain contact with local agencies and officials regarding specific Work Program Deliverables.

   a) ADD Planner in conjunction with Highway District Office Personnel shall meet with each Mayor and Judge Executive once per year, at a minimum, for discussion of highway related issues and concerns in the area.

   b) The ADDs are also responsible for coordination with MPOs and other agencies in the region, as appropriate, in relation to Prioritization/Project Identification related activities. Additional input on needs and priorities is solicited from other KYTC offices, including the twelve (12) HDOs, as well as other state agencies.

1D: Assistance to the Kentucky Transportation Cabinet

Purpose

The ADD shall assist the Cabinet in accordance with advice and/or guidelines to be provided by the Cabinet, as needed.

Tasks

Some of the activities needing ADD assistance are as follows:

1) Review of draft statewide transportation documents produced by the Cabinet and/or its consultants. Among these are the Long-Range Statewide Transportation Plan (LRSTP), the Statewide Transportation Improvement Program (STIP), Public Involvement Plan (PIP), the CHAF project list, and transportation planning studies. The ADD will periodically be asked to make planning documents available to the public for review, assist with the distribution of documents, or publicize the availability of documents for review through the media or other venues.

2) The ADD will coordinate activities in support of the Statewide Transportation Planning process with planning activities of other local agencies, interests, and/or organizations, including MPOs and/or neighboring ADDs for the purpose of providing public officials and public input by sharing information, minimizing duplication of effort, developing coordinated solutions, and understanding and addressing the impact of transportation on other planning activities.

3) Assist the Cabinet with air quality matters in non-attainment rural counties as needed.

4) The KYTC completed the data collection for its Americans with Disabilities Act Transition Plan (ADATP) in the spring of 2021. The data collected identifies point locations on state maintained roadways showing the presence or absence of pedestrian ramps. The ADA plan can be found here: https://transportation.ky.gov/Civil-Rights-and-Small-Business-Development/Documents/KYTC%20ADA%20Act%20Transition%20Plan.pdf.

5) Coordinate and/or assist with transportation planning studies, small urban area studies, etc. - The Cabinet may conduct studies for various transportation projects across the state. For areas with these studies, the ADD may be requested to:

    a) Assist in the gathering and/or review of information pertaining to existing conditions in the project area.
    b) Assist in public involvement activities (for example the *Long Range Plan – Your Turn Survey, Statewide Corridor Plan – Technical Assistance and Outreach etc.*);
    c) Provide names/contact information for local stakeholders;
    d) Review and comment on study reports;
    e) Assist and coordinate, if necessary, arrangements for meetings with officials, stakeholders, and/or the public;
    f) Provide or arrange for meeting space; and/or
    g) Serve as project team members;
    h) Complete socioeconomic profiles and reports as requested by the KYTC, and the KYTC can provide examples if needed for consistency across the ADD regions. Please follow the guidance and checklist found here (Regional Planning | KYTC)

1E: Special Projects

Purpose

During the contract year, the Cabinet may request that other activities be conducted by the ADD in support of special studies or other efforts being conducted by the Cabinet, under the terms of this ADDWP. Likewise, the ADD may forward a request to the HDO for a special study or project to address a local or regional issue, for Cabinet approval of a scope of work and timeline. There may also be special requests to the ADD for the periodic submittal of information to other Cabinet offices, such as the Office for Civil Rights and Small Business Development and the Office of Local Programs. Specific guidelines and due dates will be provided for special projects/assignments.

Tasks

Since these tasks are not anticipated at the beginning of a fiscal year, only an estimate of time can be included here based on tasks undertaken in previous years. If a special project is to be included, the specific tasks, time involved and products shall be submitted to the Cabinet as early as possible for approval. Specific time required shall be identified in this element, if approved.

1F: Review and Response to Rural Consultation Report

Purpose

Federal legislation, enacted by the FAST Act requires all States to consult with and consider the concerns of non-metropolitan officials when making transportation decisions in their Statewide Transportation Planning and Programming processes. The Code of Federal Regulations requires the States to consult with non-metropolitan officials regarding the effectiveness of the consultation process and any suggested modifications and report findings every five (5) years as of February 24, 2006. The Rural Consultation Report was last completed in February 2021. The next Rural Consultation Report shall be completed no later than February 2031.

Task

In accordance with said regulations, the Cabinet shall provide the ADD with the survey results specific to their region (and identifying information). The ADD shall then review and provide comments, rebuttals, and plan of action to remedy deficiencies brought to light with results of said survey. This shall be repeated every five (5) years following the Cabinet's request, receipt, and analysis of survey materials. To be completed by close of last business day in **November 2031**.

WORK ELEMENT 2 - PUBLIC INVOLVEMENT

Purpose

Expand, enhance, and document the public involvement process of the Regional Transportation Planning Program. Comply with federal legislation to inform, solicit input from, and consult with transportation users, publicly elected officials, representatives from all transportation modes, and underserved populations. Perform specific tasks as may be identified by the Cabinet through additional training and/or guidelines throughout the fiscal year.

All transportation planning processes shall be carried out in accordance with the following local, state and federal laws and regulations:

1) Applicable sections of the U. S. Code;
2) Title VI of the Civil Rights Act of 1964;
3) That discrimination on the basis of race, color, creed, national origin, sex, or age did not occur;
4) Involvement of disadvantaged business enterprises;
5) Equal Employment Opportunity on federal aid construction projects;
6) Compliance with the Americans with Disabilities Act (ADA);
7) Compliance with the Clean Air Act;
8) Compliance with the Rehabilitation Act of 1973 in that discrimination against individuals with disabilities did not occur; and
9) Compliance with the Infrastructure Investment and Jobs Act .

2A: Public Involvement Plan

Purpose

The Public Involvement Plan (PIP) shall be developed as a stand-alone document to be made available by the end of the Fiscal Year. The ADD shall follow the PIP for all plans, data procedures covered under the ADDWP. The PIP shall continually be reviewed and updated to reflect new initiatives and tasks undertaken to include and reach the public within the region. A complete update of the PIP will include new and enhanced outreach programs in response to the Cabinet comments, subsequent Title VI training and future workshop training.

The complete Public Involvement Plan shall be reviewed and updated every year and made available on the ADD website in its entirety by the last workday in **June**.

Specific component pieces shall be submitted to all pertinent Cabinet representatives per the schedule outlined herein.

Tasks

1) The ADD shall continually expand and enhance the **Public Involvement Plan** and public outreach program to include a specific component that addresses activities/actions to reach minority and underserved populations within the ADD Region. This plan shall include the demographic data for underserved populations as collected and analyzed in Work Element 2: 2B Socioeconomic Profiles and specify how these significant populations will be included in the Statewide Transportation Planning Public Involvement Process.

2) Continue review and update of the public involvement process to:

   a) Inform the public of the Statewide Transportation Planning Public Involvement Process;

   b) Solicit input from the public for the identification of transportation needs and

   c) Solicit input as to the importance and priority of CHAF database projects.

   This process and any specific programs should include but not be limited to committee membership, county committees, meeting with various civic groups, neighborhood meetings, public events, or other methods of contacting, informing, and obtaining input from various, diverse, and underserved populations.

3) Attend civic and government meetings and request speaking opportunities to review the Statewide Transportation Planning Process, e.g., Long-Range Statewide Transportation Plan, Statewide Transportation Improvement Plan and other transportation documents, and provide opportunities for review and input. The ADD shall address a *minimum of two (2)* groups/meetings outside of regular ADD Board or Committee meetings during the fiscal year and communicate those **Speaking Engagements** to the Cabinet by the close of business on the last workday in **May**.

4) Document and submit a description of those groups that were listed from the above task list and any other unscheduled events in the **Quarterly Progress Report** for which the event/s took place. Documentation shall include:

   a) Type/date of meeting; and

      i) Nature of involvement (organizer, presenter, or attendee).

      A notification email shall be sent as well, immediately following the Speaking Engagement making aware the Cabinet of said efforts.

5) Document the public involvement process and all public outreach efforts utilized to reach, educate, and involve the public in the transportation planning process, including but not limited to letters, web sites, newspapers, flyers, meeting notices, mall/public area displays, social media, etc. The complete documentation of the public involvement process shall be kept by the ADD via hard copy or electronic copy for each fiscal year under contract. A summary of these efforts shall be included in the **Quarterly Progress Report** during the quarter for which the event/s took place.

6) Submit a Title VI Accomplishments list in which the ADD identifies efforts performed during the fiscal year regarding Title VI. The Title VI accomplishment List shall be submitted no later than the close of business on the last workday in **May**.

It is important to remember that thorough documentation is a top priority throughout all phases of your PIP. Not only should you document your efforts through the PIP, but you should also document every function that you attend for the purpose of providing information about the statewide transportation planning program. This serves not only as a checklist for you to use in ensuring you have made an adequate attempt at reaching all your population, it also protects you should your efforts be called into question at a later time. Finally, it allows each and every person in your ADD the same opportunities to participate in, and comment on, every phase of the transportation planning process.

2B: Socioeconomic Profiles

Purpose

As per Title 23 Chapter 1 Subchapter E Part 450 B 450.210 Interested parties, public involvement and consultation; the statewide transportation planning process shall at a minimum include a process for seeking out and considering the needs of those traditionally underserved by existing transportation systems, such as low-income and minority households, who may face challenges accessing employment and other services as part of the public involvement process. The development of socioeconomic profiles for the entire ADD to be included in the public involvement plan, is an exercise in identifying those traditionally underserved communities so that public outreach efforts can be accomplished in those communities.

Socioeconomic data is collected annually by the United States Census Bureau with the American Community Survey. The ADD will coordinate with The State Data Center to develop a comprehensive GIS file containing pertinent Socioeconomic and Title VI information on an annual basis. This collection should include but not be limited to: population, population by race, income, age, disabilities, underserved populations, and other data as needed for consideration of potential transportation impacts on the region.

Tasks

1) The ADD will research American Community Survey 5 Year Data for ADD specific counties for the purpose of regional analysis. Data will also be used in Socioeconomic Studies for the express purpose of determination of specific populations that may potentially be negatively impacted from transportation projects. Inclusion in Public Involvement materials and planning shall occur no later than the close of business on the last workday in **June.**
2) The Socioeconomic Profile Document should include at a minimum
    a) Introduction
    b) Summary of Analysis
        i) Discuss key populations identified during the analysis including but not limited to; state totals, ADD totals, highest population centers/counties and the details of the maps
        ii) Include a table of percentages highlighting populations that exceed the state averages
    c) Summary of Analysis for each targeted underserved population (minority, Hispanic, poverty, age 65+, disabled, limited English)
    d) Maps of entire ADD for each targeted underserved population (identify specific census block groups with highest percentages)
    e) Maps for highest population centers for each targeted underserved population (identify specific census block groups with highest percentages)
    f) Conclusion – discuss correlations between identified census block groups and potential for outreach efforts for these groups

2C: List of Contacts/Resources

Purpose

During the course of business, it may become necessary to contact area stakeholders and/or industry experts in order to garner local input on transportation issues or opportunities affecting the area. The purpose of this task is to maintain a contact list and email list-serve for those who have transportation related interests or concerns in the region.

The **List of Contacts/Resources** to address/reach targeted populations as well as the general public should be reviewed and updated with current contact information and addresses. This updated list will be submitted and be included as part of the PIP. This listing shall be used as an avenue to bolster public involvement, improve committee attendance, and mine for potential issues or opportunities for presentation either by or to said organization. The **List of Contacts/Resources** shall be submitted by the close of business on the last workday in **January**.

Tasks

1) The ADDs are to keep updated contact information for airports, freight and passenger rail lines, ferries, and river ports (public & private commercial) located within their region.
2) The ADDs are to collect and keep up to date a listing of Bicycle Coordinators, Pedestrian Coordinators, and Greenways Plans Contacts for the region as well.
3) The ADDs are to collect and keep up to date a listing of those entities within their region that have formalized Planning and Zoning boards, committees etc.
4) Send updated information intermittently to the Division of Planning staff as it becomes available outside of the normal inventory cycle. An email describing the updates will suffice. It is expected that the ADD's Inventory will be updated and submitted to the Cabinet as one complete listing annually.
5) This compilation of information may be used for reference when soliciting speakers, speaking opportunities, or potential Regional Committee Members.

Please refer to the ADD Work Program – 5 YEAR Schedule located in this document for the Major Update year.

2D: Regional Transportation Committee

Purpose

As a major component of the Public Involvement Process and to comply with the Cabinet and FAST Act requirements for public involvement as well as 23 CFR, Parts 450.210 and 450.316, the ADD will maintain a Regional Transportation Committee (RTC) for the purpose of consulting, soliciting input, developing regional goals and direction, identifying and reviewing regional transportation needs, providing transportation information/updates, and addressing any other transportation issues in the region. The committee shall include a broad-based membership, develop and maintain bylaws consistent with Cabinet direction and convene as necessary to complete the tasks assigned to the committee.

Tasks

1) Establish and maintain Regional Transportation Committee Bylaws.

The ADD Regional Transportation Committee shall review and revise the bylaws as necessary to address any comments/recommendations provided by the Cabinet and/or concerns by the ADD RTC members. Any revisions to the bylaws shall have approval of the RTC and be submitted electronically in the minutes of the committee meeting to the Cabinet no later than the close of business on the last work day in **October** of each year. If no revisions are made in each fiscal year, an email notifying the Cabinet that "No revisions were made" shall be sent to the Cabinet following the same deadline as above mentioned.

The bylaws shall:

a) Address committee composition and number of members;

b) Address attendance requirements;

c) Address voting guidelines for membership (including requirements for a quorum);

d) Address frequency of meetings and/or format of meetings. Meeting formats, times, and locations shall be flexible to the extent practicable to provide opportunities for involvement to all areas of the region; Full meetings shall occur a minimum of three (3) times per year, while the remaining time shall be used for coordinating, scheduling, and completing deliverables.

e) One-on-one city/county meetings for the purpose of discussion, surrounding identification of local highway issues, and development of requisite Project Identification Data shall occur a **minimum of one time per FY.** These meetings shall be documented in the quarterly report.

f) Address committee officers and responsibilities; and

g) Address tenure and rotation of committee membership.

2) Solicit broad-based committee membership and participation.

Membership shall include an array of individuals that represent the many different groups interested in improving transportation. Suggested membership includes the following:

a) Elected official or appointed representative for each county and/or city of five-thousand (5,000) or more in population;

b) Law Enforcement representatives (minimum of one city, one county, and one state enforcement official, where possible);

c) Highway/Public Works representatives from cities and/or counties;

d) Emergency Medical Service/Fire Department Representatives;

e) School Transportation Officials;

f) Human Service Delivery representatives;

g) Representatives of major trucking, logistics, intermodal, rail, airport, river port, or public transportation entities, as appropriate for the region;

h) Freight representation is addressed appropriately for the region per increased focus via the FAST Act;

i) Underserved populations/minority populations as noted through demographic data;

j) Planning and Zoning Commissions/Organizations;

k) Bikeway/Greenway/Pedestrian Coordinators/representatives;

l) Economic and industrial development organizations;

m) Industrial authorities/commissions;

n) Public citizens at large interested in transportation issues; and

o) HDO Planners shall participate as non-voting members in advisory roles only.

Transportation Committee Membership list shall be provided to the Cabinet no later than the close of business on the last workday in **January** of each year. Transportation Committee Members that fulfill specific requirements of the By-Laws of the RTC, shall be identified on this list (Voting, Non-Voting, Representative of Designated group within By-Laws, etc..). Officers of the Transportation Committee should also be identified.

3) Establish a schedule for committee activities and agendas for such activities.

4) Prepare agenda for all committee activities, which may include transportation updates, ADDWP tasks to be addressed, and special speakers or activities to prepare the committee for project identification/prioritization processes, etc.

5) Prepare notifications for all committee activities well in advance (at a minimum two (2) weeks prior) and send appropriate reminders, phone calls, texts etc., just prior to committee activities. Members shall be notified at a minimum of two (2) times of Transportation Committee meetings.

6) All meeting notices, agendas, and other notification(s) shall be submitted electronically and shall be posted on the ADD Webpage (at a minimum two (2) weeks) prior to all meeting dates.

7) Prepare and submit meeting minutes within 30 days following all committee meetings or activities. Minutes shall include:

a) A listing of committee members;

b) Entity represented;

c) Members noted as attending the meeting; and

d) The reporting of all committee activities.

8) ADD shall prepare an Orientation Packet for newly elected officials and at-large members detailing the purpose of the Regional Transportation Planning Committee. Orientation packet shall be developed in conjunction with the Cabinet and other ADDs to ensure consistent information. Packet may be developed as a hard or digital copy. Alternatively, an ADD Planner-led training of new members may be substituted so long as each element is discussed, documented and reported to the Cabinet in a timely manner.

9) Staff shall prepare a "Plan for Transportation Committee Activities," this plan shall include target dates for meetings. The planner should also describe various types of activities to be undertaken during the year for the purpose of educating/informing the committee of transportation activities. Additionally, topics for speakers, possible field trips, SHIFT prioritization, and other activities should be included. This Plan will serve as a "blueprint" for the upcoming fiscal year activities for the committee and shall be submitted no later than the close of business on the last workday in **August**.

10) This plan may include:

    a) Focus areas for the committee;

    b) Initiatives to prepare the committee for completion of deliverables;

    c) Review of all CHAF database related records in preparation for prioritization activities;

    d) Presentation of newly identified issues for the purpose of possibly developing into a CHAF project record; and

    e) Provide any reports/status documents as may be required by the Cabinet.

11) Staff shall develop a New RTC Member guide to be provided to new members of the RTC. The New RTC Member guide shall be submitted no later than the close of business on the last workday in **October** . The New Member RTC guide should discuss:
    a) Purpose of the committee
    b) Meeting times, dates, and location
    c) Members and Officers roles on the committee
    d) Meeting Procedures
    e) Statewide Planning Documents, Procedures, and Terminology (SHIFT, CHAF, LRSTP, STIP, Highway Plan, Sponsorship, Boosting, Project Phases, etc..)
    f) ADD Planner Contact Information

2E: Goals and Objectives

Purpose

The Regional Transportation Planning Program follows suit with the Vision of the Cabinet and Mission Statements and Goals as well as the Mission Statement and Goals of the Division. Therefore, the ADDs shall continue with this thought and direction when creating their Goals and Objectives. The Regional Goals and Objectives are to be broad over-arching goals that will help guide the identification and prioritization of needs using local officials and public input.

Cabinet's Vision Statement

Striving to be national leaders in transportation who provide transportation infrastructure and services for the 21st century that deliver new economic opportunities for all Kentuckians.

Cabinet's Mission Statement

To provide a safe, efficient, environmentally sound, and fiscally responsible transportation system that delivers economic opportunity and enhances the quality of life in Kentucky.

Cabinet's Goals

1) Promote Safety in All Decision Making
2) Strengthen Stakeholder and Customer Relationships
3) Deliver Economic Opportunities and Enhance Quality of Life
4) Optimize Performance through People and Innovation
5) Nurture a Culture of Diversity and Inclusion

Division of Planning Mission Statement

Our mission is to collect, maintain, analyze, and report accurate data for making sound fiscally responsible recommendations regarding the maintenance, operation, and delivery of a reliable transportation system that effectively and efficiently moves people and freight.

1) Provide a reliable transportation system that effectively and efficiently moves people and freight.
2) Provide for reliable local, regional, and global access for people and freight.
3) Consider all modes of transportation in the creation of an integrated system for the dependable movement of people and freight.
4) Provide for the safe and secure movement of people and freight.
5) Provide for the improvement and maintenance of the existing transportation infrastructure.
6) Ensure the process that develops and maintains the transportation system adequately considers improvement of our transportation network.
    a) Dependable access to markets, jobs, and resources;

b) The human and natural resources of the state;

c) The efficient and flexible use of available resources to meet the changing transportation needs of the state; and

d) The use of transparent decision-making that effectively addresses the needs of public transportation.

Tasks

The Regional Goals and Objectives shall be reviewed and/or updated annually and approved by the Regional Transportation Committee. The approved Regional Goals and Objectives that are documented through the Regional Transportation Committee minutes are to be submitted no later than the close of business on the last workday in **October** of each contract year. Major updates are required about every 7 years with RTC discussions of each of the updated goals and objectives from the KYTC long-range statewide transportation plan (LRSTP) updates.

WORK ELEMENT 3 - REGIONAL TRANSPORTATION ASSETS

Regional Transportation Asset Inventory

Purpose

The Regional Transportation Assets shall be developed as a stand-alone resource document from the sum of the deliverables outlined in the following pages. This document shall be utilized by the RTC when developing goals and objectives, identifying issues with the transportation system, evaluating, reviewing and documenting needs, and prioritizing/ranking projects or needs. Together, they form the umbrella/storage center that houses data components relevant to Regional Transportation. Major components will be revised on a rotating cycle. Revised components will be replaced as necessary in the Regional Transportation Assets, per revision schedule. Submittal deadlines will be prescribed in the Regional Transportation Assets Work Element Components.

The submittal will include an overview of the total transportation system for the region, including but not limited to: airports, rail lines, public transportation systems, bikeways, pedestrian networks, greenway projects, river ports, ferries, major highway systems (e.g., National Truck Network and National Highway System), and intermodal facilities.

Tasks

1) The Regional Transportation Assets are a collection of deliverables that shall be continually updated and revised to maintain current data in support of the regional transportation goals and objectives. The ADD shall enhance this resource as required, including the preparation of any missing components and the expansion/revision of any existing component as may be noted and required by the Cabinet. Annual updates are based on local knowledge of what has changed. Major updates are when the RTC is asked to review, input changes, and verify the entire dataset for the planner to submit updated shapefiles to KYTC. This document will include the following components (not necessarily in this order):

    a) Rail Freight Loading/Unloading Facilities;
    b) Truck Parking Inventory;
    c) Major Freight User Inventory;
    d) Major Traffic Generators Inventory;
    e) Intermodal Connector Review ;
    f) Bicycle and Pedestrian Asset Collection;
    g) Kentucky Highway Freight Network;
    h) Active CHAF list

2) The Regional Transportation Assets deliverables shall consist of an introduction for each component detailing the reason for any necessary changes, effort and time exerted during the review process, and any recommended edits to existing data and research. Maps shall be produced on a per county basis, except where population, geography, etc., may necessitate production of inset maps for clarity.

3) The ADD shall revise the deliverables of the Regional Transportation Assets on a rotating cycle. The review shall be maintained and accessible for all pertinent staff of the Cabinet, and Transportation Committees, and local officials, via the ADD's website. The Regional Transportation Asset Review shall be linked to the ADD's website by the end of each Fiscal Year in **June**. Upon request, a hard copy shall be made available within three business days.

4) Previous version shall be kept electronically or as a hard copy as a historical record for that specific ADD. Changes affecting the data or analysis of any of the work elements contained herein and discovered between Major Update Cycles shall be communicated to the Cabinet at the earliest possible opportunity.

3A: Rail Freight Loading/Unloading Location Inventory

Purpose

The purpose of this deliverable is to maintain an inventory of rail freight loading/unloading locations and their status. The information will be used to update the list of intermodal connectors, the statewide rail plan, and to identify rail facility locations. This will help promote the safe and efficient movement of goods and services throughout the state. During the review process it may become necessary to contact area stakeholders and/or industry experts on transportation issues or opportunities affecting the area. In some instances, field surveying of facilities may be needed to help determine their inclusion in the dataset.

There is a lot of great information at these websites:

https://transportation.ky.gov/Planning/Pages/default.aspx

https://transportation.ky.gov/MultimodalFreight/Pages/FreightPlanningHome.aspx

Tasks

1) The ADD planner will review provided GIS shapefile for accuracy. KYTC has created a webpage to host the GIS shapefile at the following website: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx. The dataset includes the following:
    a) Rail yards identified by the railroad companies.
    b) Transload facilities – freight is transferred at these locations between trucks to trains or barge to trains.
    c) If the facility is included on the Major Freight Users (MFU) dataset it can be omitted from this dataset. The rail loading/unloading facilities should identify locations where transloading occurs but may not meet the criteria of the MFU dataset.
    d) Potential Rail/Unloading Facilities
        i. Railyards
        ii. Grain loading facilities
        iii. Coal Mines
        iv. Quarries
        v. Lumber Mills
        vi. Other raw materials
        vii. Warehouse with rail access (not found on MFU dataset)
        viii. Manufacturing with rail access (not found on MFU dataset)

e) During the review process, the ADD planner will review both the rail loading/unloading dataset and MFU dataset concurrently. It is expected for the ADD planner to identify locations not previously identified in the dataset (See Task 1). Changes in operations for previously identified locations should also be included (new, expansions, closures) and comments to provide further explanations. Data for each facility will include all information available such as the name, location, and function (e.g., bulk transfer, container yard, classification yard) of the facility. For yearly updates, the ADD planner will submit an up-to-date GIS shapefile of current rail facility information with all necessary changes. Only records that require updates should be included in the submittal. If no new locations were found during the data review, a statement of "I have reviewed and there have been no changes since my last submission" to the Cabinet by the last workday of **February.** For major update years, the revised GIS shapefile is required to be submitted. Please refer to the ADD Work Program – 5 Year Schedule located in this document for the Major Update year.

3B: Truck Parking Inventory

Purpose

The purpose of this deliverable is to maintain an inventory of precise locations of truck parking facilities. The information will be used to update the statewide freight plan and to keep the current statewide inventory of truck parking facility locations as up-to-date and accurate as possible. This will help promote the safe and efficient movement of goods and services throughout the state.

There is a lot of great information here:

https://transportation.ky.gov/Planning/Pages/default.aspx

https://transportation.ky.gov/MultimodalFreight/Pages/Freight-and-Multimodal-Facility-Maps.aspx

https://transportation.ky.gov/Planning/Pages/Centerlines.aspx

Tasks

1) An inventory of truck park facilities with their precise locations has been developed as needs for this data have evolved. The ADD planner will review provided GIS shapefile for accuracy. The ADD will review precise locations of each truck parking facility and verify all corresponding attributes. KYTC has created a webpage to host the GIS shapefile at the following website link: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx. During the review process, if it is found that new truck parking facilities are not on the list, the ADD planner will populate the shapefile to include all information available such as the name and location of the new facility. If the list includes a truck parking facility that is now known to be closed or not in use, the ADD planner will note the status on the list as "not in use."

The ADD planner will submit an up-to-date GIS shapefile of current truck parking facility information and any necessary changes or a statement of "I have reviewed and there have been no changes since my last submission," shall be submitted to the Cabinet by the last workday of **November**. For major update years, the revised GIS shapefile is required to be submitted.

This inventory includes:

a) Truck parking facilities with 5 or more marked truck parking spaces;
b) Precise location depicted by a point feature of facility – route, mile-point, and/or landmarks;
c) Type of facility – rest area, weigh station, welcome center, rest haven, truck stop, etc.;
d) Utilizing aerial imagery, a point feature shall be placed on the facility's main structure location; e.g. restroom structure at a rest area, restroom/convenience store structure at a truck stop. If the facility is solely a large track parking lot, the point feature shall be placed in the center of the parking lot; and
e) Number of marked truck parking spaces. Large areas designated for truck parking but that do not have individually marked paces should be estimated to determine how many trucks could be accommodated.
f) Identification of parking locations specifically dedicated to Oversized and Overweight Vehicles (OSOW).

Please refer to the ADD Work Program – 5 Year Schedule located in this document for the Major Update year.

3C: Major Freight Users and Major Traffic Generators Inventory

Purpose

The purpose of this deliverable is to update the existing Major Freight Users (MFU) and Major Traffic Generators (MTG) Inventories . The information will be used to update the statewide freight plan and to identify intermodal connectors that need improvement, calibrate traffic models, and identify local partners for studies. This will help promote the safe and efficient movement of goods and services throughout the state.

The MFU and MTG lists are subjective and can be interpreted differently by the committee for each county/region. Work with your transportation committee to determine the appropriate criteria for considering a MFU and MTG in your region. Each county within the region may want to decide what the MFU and MFG facilities are in their area based on number of trips into and out of a location per day or significant truck traffic. A planner should use good judgment and consultation with the committee and local officials in determining the area's MFUs and MTGs.

There is a lot of great information here:

https://transportation.ky.gov/Planning/Pages/default.aspx

Tasks

1) A GIS shapefile will be provided. The ADD planner will review provided GIS shapefile for accuracy. KYTC has created a webpage to host the GIS shapefile at the following website link: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx The MFU includes the following facilities:

   a) Major Freight facilities that may have one hundred (100) or more trucks (generally Class 8-12) per day during peak seasons. These facilities include: manufacturers (greater than one hundred (100) employees), cargo airports, grain elevators, quarries, steel/aluminum mills, etc.

   b) Other locations having one hundred thousand (100,000) square feet or more under roof, such as distribution centers or cross-dock facilities indicating major freight activity.

   c) Freight facilities not captured in 1a or 1b above that are freight generators and have five (5) or more truck bays. Keep in mind we are looking for freight facilities. So even if a home improvement store has more than 100,000 square feet and 5 truck bay doors, this is not a freight generator. Even if a call center or office building has more than 100,000 square feet, it is not generating freight and would not be surveyed.

The MTG includes the following facilities:

d) Major Traffic Generators are locations that create one hundred (100) trips per day: schools, hospitals, shopping malls, baseball fields, arenas, factories, office parks, truck stops, industrial parks, etc.

f) In some instances MFUs are MTGs, some are not.

2) In order to centralize all of the information for Work Item 3C, KYTC has created a webpage to host the information at the following website link: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx



Major Freight Generators

2019 Major Freight Generators Shapefile

ADD_Freight_Gens_2019.zip

Major Freight Generators Guidelines

2020-10-15 Major Freight Users

Attribute Table Metadata

- **NAME**: Name of Freight Generator Facility
- **STREET**: Street address of facility
- **CITY**: City in which facility is located
- **STATE**: State in which facility is located
- **ZIP**: Zip code of corresponding street address
- **COUNTY**: County in which facility is located
- **ADD**: Corresponding Area Development District in which facility is located
- **NAICS_CODE**: North American Industry Classification System code number assigned to facility
- **BLDG_SQ_FT**: Square footage of physical facility
- **EMPLYMT**: Total number of employees at facility
- **TRUCK_BAYS**: Total number of truck bays at facility
- **AVGTRKSDAY**: Average number of freight trucks that visit facility per day
- **RAIL_DOORS**: Total number of rail doors at facility
- **FEET_RAIL**: Total number of feet of railroad centerline on facility's property
- **AVGTRNSWK**: Average number of trains that visit facility per week
- **CHF_ID_PR**: prior CHAF ID
- **CHF_ID_COM**: completed CHAF ID
- **CHF_ID_EX**: existing CHAF ID
- **IC_NEEDS**: Field to input issues regarding intermodal connectors with facility's access to the NHS
- **UPDATED**: Date last updated
- **COMMENTS**: Field to input any comments, concerns, or issues

On this webpage is the downloadable shapefile for the work item, the information PowerPoint presentation, and the Table Metadata on the fields that KYTC is asking each ADD to collect. The shapefile on the webpage is what each ADD must submit to KYTC in order to complete Work Item 3C. In order to combine the submissions from all 15 ADDs efficiently, KYTC does not accept custom shapefiles.

For yearly updates, the ADD planner shall submit revised GIS shapefile of Major Freight Users and any necessary changes or a statement of "I have reviewed and there have been no changes since my last submission," to the Cabinet by the last workday of **March**. For major update years, the revised GIS shapefile is required to be submitted.

The Economic Development Cabinet (ED) provided the original dataset for the shapefile. KYTC staff tried to remove all of the facilities that are not applicable (office buildings, call centers, etc.). If the facility is included in the survey, it means there are indications from aerial photography or street view photos it could meet the criteria. It is possible that the facility does not meet the criteria, so a site visit could help make that determination.

If a facility does not meet the criteria, PLEASE DO NOT DELETE IT. Just note in the COMMENTS field that it does not meet the criteria. If a facility on the dataset has closed, PLEASE DO NOT DELETE IT. Just note in the COMMENTS field that it has closed. If a facility has been demolished, once again PLEASE DO NOT DELETE IT. Just note in the COMMENTS field that it has been demolished. If there are several entries that need to be combined as they are part of one freight complex, note which ones need to be combined in the COMMENTS field and KYTC will combine.

In addition, the ADDs should look for Freight generators that have been left out of the dataset. There were a number of large freight facilities that were left off the original dataset provided by ED (NEW FEATURE in COMMENTS). During the verification process, KYTC tried to capture those facilities. If you find a facility that KYTC has left off, please add that to the dataset and note in the COMMENTS field that it was added.

KYTC tried to verify the location of each facility. Some features were not located on the map, and in many instances there were point features that needed to be moved to the top of the facility and not on the street (the ADD will see LOCATED/MOVED FEATURE in the COMMENTS field). If the ADD finds a facility with an incorrectly located point feature, please relocate to the correct location and note in the COMMENTS that it was moved.

Each ADD should also review the existing information for each facility and fill in the missing information as much as possible. Please note any changes made by the ADD to any of the fields in the COMMENTS field. If a facility will not provide the necessary data, fill in what can be provided and note the situation in the COMMENTS field.

A word about large warehouses with multiple tenants; during the data verification process KYTC encountered a number of freight facilities that, for example, were 100,000 square feet and had 10 truck bay doors. However, upon closer inspection they appeared to be divided up into 5 smaller 20,000 square foot facilities with 2 truck bay doors each. In theory, this would eliminate this facility and all 5 tenants from being surveyed. KYTC is concerned that this could potentially eliminate a large number of trucks moving to and from this facility. In these instances, KYTC asks that the ADD survey the facility and tenants as a single entity:

- Create a NAME for the building (1000-1500 East Main Street Warehouse, etc.)

- Enter the range of addresses at the building in STREET (1000-1500 East Main St or 1000 East Main Street Suites A-F)
- Enter all the NAICS codes applicable to the entire building
- Enter the total BLDG_SQ_FT of the entire building
- Enter the total EMPLYMT of the entire building
- Enter the total number of TRUCK_BAYS of the entire building
- For the AVGTRKSDAY field, sum up of the total trucks per day of the entire building
- Follow this combined format for all of the other fields
- In COMMENTS enter how many businesses make up this single entity.

One final note, one of the most critical fields for KYTC to compile all of your submissions is the KBIF_ID field. Please do not make any changes to this field because it is assigned by ED.

3) The Regional Transportation Committee shall annually review maps of the MFUs and MTGs for accuracy. Encourage committee members to inform ADD staff of changes that have taken place within their community such as the closing of a factory, the construction of a new regional mall, or new or closed schools. .

4) The ADD planner will provide updated information about changes to MFUs and MTGs to appropriate agencies, including but not limited to local government units and the Cabinet. This will allow them to update their databases to include new, modified, or closed MFUs and MTGs. Information should include notes of new or closed businesses, and newly created or discontinued large events, etc.

5) For yearly updates, the ADD will review provided GIS shapefile for accuracy and changes. During the review process, if it is found that information is no longer accurate, the ADD planner will add language in the comment field describing the changes (e.g., new, expanded, closed). The planner will then edit/update the GIS shapefile to include all information available for each facility. The ADD planner will verify that the GIS shapefile is properly placing the business. The ADD will submit an updated GIS shapefile of current MFUs and any necessary changes or a statement of "I have reviewed and there have been no changes since my last submission," to the Cabinet by the last workday of **March**. For major update years, the revised GIS shapefile is required to be submitted. The ADD will submit an updated GIS shapefile of current MTGs and any necessary changes or a statement of "I have reviewed and there have been no changes since my last submission," to the Cabinet by the last workday of **September**. For major update years, the revised GIS shapefile is required to be submitted.

Please refer to the ADD Work Program – 5 Year Schedule located in this document for the Major Update year.

3D: NHS Intermodal Connector Review

Purpose

The purpose of this deliverable is for the review and suggestion of changes to NHS Intermodal Connector Listings in conjunction with the Highway Performance Monitoring System (HPMS) submittal update. Status as an Intermodal Connector makes federal NHS funding eligible for designated roadway segments.

An Intermodal Connector is defined as a highway facility providing direct access for a freight generator, shipper or port terminal (rail or river) with a major transportation throughfare such as an interstate highway.

There are two basic criteria for adding intermodal connectors, primary and secondary. The NHS Primary criteria are a nationwide set of criteria. There may be a few facilities in Kentucky that could be included based on the primary criteria, but most of Kentucky's facilities are going to be eligible under the secondary criteria. The secondary criteria include factors which underscore the importance of an intermodal facility within a specific state.

Primary Criteria

Commercial Aviation Airports

1. Passengers—Scheduled commercial service with more than 250,000 annual enplanements.
2. Cargo—100 trucks per day in each direction on the principal connecting route, or 100,000 tons per year arriving or departing by highway mode.

Ports

1. Terminals that handle more than 50,000 TEUs (a volumetric measure of containerized cargo which stands for twenty-foot equivalent units) per year, or other units measured that would convert to more than 100 trucks per day in each direction. (Trucks are defined as large single 0unit trucks or combination vehicles handling freight.)
2. Bulk commodity terminals that handle more than 500,000 tons per year by highway or 100 trucks per day in each direction on the principal connecting route. (If no individual terminal handles this amount of freight, but a cluster of terminals in close proximity to each other does, then the cluster of terminals could be considered in meeting the criteria. In such cases, the connecting route might terminate at a point where the traffic to several terminals begins to separate.)
3. Passengers—Terminals that handle more than 250,000 passengers per year or 1,000 passengers per day for at least 90 days during the year.

Truck/Rail

1. 50,000 TEUs per year, or 100 trucks per day, in each direction on the principal connecting route, or other units measured that would convert to more than 100 trucks per day in each direction. (Trucks are defined as large single-unit trucks or combination vehicles carrying freight.)

Pipelines

1. 100 trucks per day in each direction on the principal connecting route.

Amtrak

1. 100,000 passengers per year (entrainments and detrainments). Joint Amtrak, intercity bus and public transit terminals should be considered based on the combined passenger volumes. Likewise, two or more separate facilities in close proximity should be considered based on combined passenger volumes.

Intercity Bus

1. 100,000 passengers per year (boarding and deboarding).

Public Transit

1. Stations with park and ride lots with more than 500 vehicle parking spaces, or 5,000 daily bus or rail passengers, with significant highway access (i.e., a high percentage of the passengers arrive by cars and buses using a route that connects to another NHS route), or a major hub terminal that provides for the transfer of passengers among several bus routes. (These hubs should have a significant number of buses using a principal route connecting with the NHS.)

Ferries

1. Interstate/international – 1000 passengers per day for at least 90 days during the year. (A ferry which connects two terminals within the same metropolitan area should be considered as local, not interstate.)
2. Local – see public transit criteria above.

Secondary Criteria

Any of the following criteria could be used to justify an NHS connection to an intermodal terminal where there is a significant highway interface:

1. Intermodal terminals that handle more than 20 percent of passenger or freight volumes by mode within a state;
2. Intermodal terminals identified either in the Intermodal Management System or the State and metropolitan transportation plans as a major facility;
3. Significant investment in, or expansion of, an intermodal terminal; or
4. Connecting routes targeted by the State, MPO, or other for investment to address an existing, or anticipated, deficiency as a result of increased traffic.

Tasks

1) The ADD will review the provided Intermodal connectors GIS shapefile for changes to the FHWA listing, including additions and deletions from the Intermodal Connector list. Facilities that have ceased operations or no longer meet Federal Highway Administration (FHWA) criteria can be submitted for deletion. The ADD will also identify facilities that are not listed on the Intermodal Connector Listing that meet FHWA criteria and recommend those be added to the base list. The GIS shapefile with revisions only containing new updates to the NHS Intermodal Connector Listing, or a statement of "I have reviewed and there are no revisions recommended at this time," shall be submitted by the last workday of **November**. If no updates are required, then submission of a shapefile is not necessary.
2) The following datasets may be used in conjunction as supplemental resources to identify gaps or missing routes in the Intermodal Connector dataset: Major Freight Users, Kentucky Highway Freight Network, and Rail Loading/Unloading Facilities. KYTC has created a webpage to host the GIS shapefile at the following website link: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx

Please refer to the ADD Work Program – 5 Year Schedule located in this document for the Major Update year.

Useful links:

https://transportation.ky.gov/Planning/Pages/default.aspx

https://www.fhwa.dot.gov/planning/national_highway_system/intermodal_connectors/kentucky.cfm

Additional Guidance Criteria:

eCFR :: Appendix D to Subpart A of Part 470, Title 23 -- Guidance Criteria for Evaluating Requests for Modifications to the National Highway System

3E: Bicycle and Pedestrian Assets

Purpose

The Cabinet, in an effort to develop a complete transportation system inventory that is inclusive of all modes and users, has tasked the ADDs to continue the collection and updates (into a GIS format) for bicycling facility information for all roadways within the city area; bicycle lanes, bicycle boulevards (indicated by Shared Lane Markings (SLMs) or sharrows), multiuse paths and other bicycling facilities. The Cabinet, in an effort to develop a complete transportation system inventory that is inclusive of all modes and users, has tasked the ADDs to continue the collection and updates (into a GIS format) for all pedestrian facilities within the right of way adjacent to or parallel to all roadways within the city. This includes sidewalks, crosswalks, and shared use paths. The compilation of local greenways, public health, cycling, running, and/or school organizations is needed to identify the users. This information may be used to develop a local bicycle and/or pedestrian plan, identify facilities to be considered during project planning, design, maintenance and operation of the roadway, as well as a city/county Transition Plan as required for the Americans with Disabilities Act.

There is a lot of great information here:

https://transportation.ky.gov/Planning/Pages/default.aspx

https://bikewalk.ky/

Tasks

1) Work with identified communities to locate any existing bicycle or pedestrian assets or accommodations within the jurisdiction and to develop spatial information as described in the guidance from the Multimodal Programs Branch. Accommodations or assets may include: sidewalks, crosswalks, bike lanes, multiuse paths, etc. within or immediately adjacent to the highway right of way. The ADD shall verify accuracy of information by mapping data before sending to the Cabinet. The Cabinet may provide a listing of communities to be inventoried and a fillable GIS database. Initial data collection effort shall be completed by the last workday in **April**.

2) Provide annual updates to previously collected bicycle and pedestrian asset inventory as necessary.

3) The ADD will review and update database information concerning bicycle and/or pedestrian plans that have been developed by a city, county, school, university, YMCA, Greenways Organization, or other regionally acceptable group by the last workday in **April.**

3F: Kentucky Highway Freight Network

Purpose

The purpose of this deliverable is to review and suggest changes to the Kentucky Highway Freight Network (KHFN) with input from stakeholders from ADDs, MPOs, Highway Districts and the freight industry. The KHFN was designated in 2015 as suggested by the FAST Act. The information will be used to update the KHFN network, as in input in the Strategic Highway Investment Formula for Tomorrow scoring system (SHIFT), as a resource for the National Highway Freight network, and the statewide freight analysis. Improvement of this network may increase mobility for freight, thereby supporting economic vitality.

There is a lot of great information here:

https://transportation.ky.gov/Planning/Pages/default.aspx

Tasks:

1) Review, inputs, and updates are requested from transportation planners in consultation with the ADDs, MPOs, Highway Districts and the freight industry for updates to the current KHFN. The ADDs will review provided GIS shapefile for changes to the network. KYTC has created a webpage to host the GIS shapefile at the following website link: https://transportation.ky.gov/MultimodalFreight/Pages/ADD-Shapefile.aspx. It is also available in the Kentucky Highway Information System (HIS).

2) The KHFN includes routes designated in one of four tiers. Consult criteria for any added or changed route:

   a. Tier 1

      i. Route segments designated in 2014 by USDOT as the Primary Freight Network; or
      ii. Average Daily Truck Traffic (AADTT) over 7,000.

   b. Tier 2

      i. Route segments of remaining interstates and parkways; or
      ii. AADTT between 4,000 and 7,000.

   c. Tier 3

      i. Route segments with functional classification of Principal or Minor Arterial and most Collectors,; or
      ii. AADTT between 500 and 4,000; or
      iii. Regional connectivity.

   d. Tier 4

      i. Route segments with AADTT less than 500; or
      ii. Local access or regional connectivity.

3) The ADD will review the KHFN route segment locations and classifications in their area for accuracy of location, conformity to current criteria, and five-year planned freight activity. During the review process, it may be discovered that freight activities have changed in the area (new manufacturing facilities, closed manufacturing facilities, distribution center

changes, and highway changes) requiring addition of new routes, revision of the tier designation of current routes or deletion of current route segments. The ADD planner will populate the database with new route segments or revise the database tier designation for segments that have increased or decreased traffic or mark for deletion any routes to be removed from the database. The ADD planner will submit an updated GIS shapefile or a statement of "I have reviewed and there are no revisions recommended at this time," by the last workday of **November**.

4) All mileage of additions and subtractions of route segments should balance within 10% of miles by Tier. If the ADD has a significant event and cannot meet the balance standards, a detailed description is required **and** any added routes must be prioritized by Tier for importance to the region - first, second, third etc.

3G: Park-and-Ride Inventory

A park-and-ride facility is generally perceived as a location where people can park their personal vehicle and rideshare with one or numerous others through private transport. Typically, this change is from a single-occupant vehicle, whether as a rider or a driver, to a transit vehicle, carpool, or vanpool. A park-and-ride facility is generally perceived as a location where people can park their personal vehicle and rideshare with one or numerous others through private transport. Typically, this change is from a single-occupant vehicle, whether as a rider or a driver, to a transit vehicle, carpool, or vanpool. Existing park and ride facilities that have been identified in previous years should be reviewed to determine operationality. New facilities can be identified and included based on publicly identifiable information such as but not limited to, signs, advertisement, or transit map. RTC members and Highway District Offices are another resource to solicit for new or non-operational park and ride facilities. The Cabinet realizes that not all park-and-ride facilities available are under its jurisdiction and control. If private owners of Park and ride facilities want to be included or not, KYTC will leave that to private owners discretion.
The Division of Multimodal Programs is the coordinator of the park-and-ride facilities. The division is responsible for:
. The Cabinet realizes that not all park-and-ride facilities available are under its jurisdiction and control. If private owners of Park and ride facilities want to be included or not, KYTC will leave that to private owners discretion.
The Division of Multimodal Programs is the coordinator of the park-and-ride facilities. The division is responsible for:

- Maintaining a current inventory of park-and-ride facilities
- Adding or deleting facilities to the official list (this can be done every four years by March 30th to keep KYTC maps current)
    - However, KYTC or those appointed to assist in collecting data can at any point during the course of four years let KYTC Central Office staff know of any facility changes as they arise.
- Identification of new (FY2015- FY2023) locations for park-and-ride facilities
- Reviewing the need to incorporate bicycle racks into any new, reconstructed, or improved park-and-ride facility
- Assisting the districts and other divisions in identifying funding sources

The collected fields will be:

District	Route Unique	Lighted	Pool contact
ADD	Milepoint	Official	Remarks
County	Total Parking Spaces available	Owner	Contact
City	Surface Type	Owner Permission	Latitude
Route	Striped	Responsible for Maintenance	Longitude

The inventory will be maintained as part of a Geographic Information System (GIS) and can be displayed on maps. This inventory will be updated every four years to ensure accuracy and the ADDs are encouraged to inform KYTC staff of changes that have occurred in their communities such as the closing or opening of a new facility.
KYTC will require this information by the last workday of **March.**

WORK ELEMENT 4 – STRATEGIC HIGHWAY INVESTMENT FORMULA for TOMORROW (SHIFT)

4A: SHIFT Project Identification Data Review and CHAF Development

Purpose

The statewide transportation planning process is accomplished through a cooperative program with the twelve (12) Highway District Offices (HDOs) of the Cabinet, fifteen (15) Area Development Districts (ADDs), and nine (9) Metropolitan Planning Organizations (MPOs). The ADDs and MPOs Transportation Committees consist of local officials, transportation stakeholders and public citizens at-large. This process identifies transportation needs, based on local official and public input, and documents available data for each need. The process also provides regional and local priorities for use and consideration in the development of the Recommended Highway Plan. This process complies with federal legislation requirements to inform, solicit input from and consult with transportation users, local publicly elected officials, and representatives from all transportation modes and the underserved populations.

The ADD will use the most recent version of project data to inform the Continuous Highway Analysis Framework (CHAF) database of any new needs identified, per guidelines provided by and updated by the Cabinet. This project identification and evaluation process is an on-going task to be coordinated with the HDO Planner. The Cabinet will update the guidelines as needed, and there is an example schedule of the SHIFT process at the end of this section.

There is a lot of great information here:

https://transportation.ky.gov/Planning/Pages/default.aspx

https://transportation.ky.gov/SHIFT/Pages/default.aspx

Development, Evaluation & Maintenance

1) Needs may be proposed by an ADD, MPO, or HDO. ADD, MPO, HDO shall review initial proposal or Division through field visits, analysis of data sources as provided or approved by the Cabinet for analytical purposes. After this review, if deemed appropriate, project identification data shall be developed in partnership by the ADD and HDO planning members.

2) All project identification data records shall be housed in the online CHAF database application. Usernames and passwords may be acquired by contacting the Cabinet. The ADD and HDO are responsible for maintaining all information in the application. Additionally, the ADD and HDO shall be responsible for the quality, clarity, and completeness of needs specific to their boundaries. The Cabinet shall coordinate and oversee the CHAF database web application.

3) Transportation needs identified from all sources are recorded in the CHAF database until all project phases are advanced into the Highway Plan with full funding, are completed through other means, or are voted inactive for lack of Regional Transportation Committee or HDO support.

4) The ADD, in cooperation with the HDO, shall review all project identification records in relation to others and current Highway Plan projects and revise any project descriptions, termini, or other information as may be required. Special attention shall be given to adequately describe the problem and project description, cite the available data and document the need. Projects which are not data driven, do not appear to have a definite purpose or need, and which have a history of low priorities should be considered as candidates for removal from the active

database. If a fully documented need cannot be determined, the ADD staff, in conjunction with the HDO and with the concurrence of the Regional Transportation Committee, should recommend that the project be moved to inactive status.

5) Each identified project record shall include, at minimum, a photo and a map. The ADD Planner shall review all projects in the CHAF database to ensure that current photos and maps are included. Unless specifically exempted by the Cabinet, if needed, the bundled project identification data record with photo and map will be submitted to the HDO copied to the Division. A map shall show the vicinity and specific location of the project while identifying applicable routes and/or other landmarks.

6) Any new or revised project record or low-cost, short-term solutions because of this effort shall be submitted to the appropriate HDO and copied to the Division. Each project record shall be complete with photographs and map. Access to multimodal and/or modal facilities such as airports, river-ports, rail facilities, major trucking terminals, or to a major traffic generator shall be noted in the Project Description and Needs Statement as part of the explanation and justification to address the identified access challenges.

Prioritization

1) The ADD Transportation Planner will review and educate their RTC about the SHIFT process during the fall of the even fiscal year. Discussion of sponsorship and prioritization of projects during the SHIFT cycle should also occur during this meeting.

2) The Project Sponsorship phase of the prioritization process is typically performed during January to early May. As the first step in selection of regional projects, ADDs and HDOs will work together to meet with their local transportation leaders to identify projects to prioritize for the highway plan funding in their areas. ADDs are to submit their Sponsorship Lists as directed by the Cabinet.

3) HDOs will complete data verification for the sponsored project identification data records in the spring.

4) Review of the priority point(s) allocation and coordination with other ADDs, MPOs and HDOs in their Regional Areas to determine which identified projects will be selected to receive boost points over the summer.

5) Maintain and document an ongoing public involvement process utilized to prioritize and rank the projects selected throughout the prioritization process. This includes all efforts to educate/inform the committee and the public and any methods used to build consensus for priorities/rankings. This documentation shall be submitted in the summer of the prioritization calendar year.

6) Evaluation of the prioritization/ranking process at the conclusion of this process. Providing this input to the Cabinet will improve the future process for prioritization. This information shall be provided/submitted in the fall of the prioritization calendar year.

Example SHIFT Schedule

TEAM KENTUCKY TRANSPORTATION CABINET

SHIFT Kentucky Ahead

Strategic Highway Investment Formula for Tomorrow

2025 Timeline

	2025	Action	Acting Party	Description
Sponsorship	now - 5/9	CHAF's	ADD, MPO, HDO	ADDs and MPOs prepare new and/or update existing CHAFs as needed in their respective areas in order to prepare for project Sponsorship.
	now - 5/9	Projects Sponsored	ADD, MPO, HDO	Sponsor projects in the CHAF program.
Data Verification	5/12 - 6/13	Review Sponsored Project List	Central Office, HDO, ADD, MPO	Review project list, discuss projects with districts, ADDS and MPOS, review projects for duplications and families
		Update project data	HDO, Central Office	Review and Update data needed for Project Scoring
		Data Verification	Central Office	Confirm entered data on sponsored CHAFs
Statewide Prioritization	6/16 - 7/4	Statewide Scoring	Central Office	CO will start Scoring Process and produce a Statewide list of scored projects along Interstates and Parkways.
	7/7 - 7/18	Statewide Project Identification		Projects of statewide significance identified based on facility type and improvement impact. Statewide projects will be generated from this list to be included in Recommended Highway Plan.
Regional Prioritization	7/21 - 7/25	Regional Scoring	Central Office	Planning will produce regional lists, including projects along Interstates and Parkways not selected through the Statewide Prioritization selection process, score regional projects, and distribute project list.
	7/28 - 9/5	Boost Point Allocation & Submittal	ADD, MPO, HDO	ADD's, MPO's, and HDO's determine which projects within their area's Regional List will be selected to receive boost points.
	9/5	Area Report	ADD, MPO, HDO	ADD's, MPO's, and HDO's will write up the methodology that was used for the 2026 process. This should include Sponsorship and Boosting and discuss what factors or reasons each area used to make decision's.
	9/8 - 9/12	Finalize Regional Scores	Central Office	Scoring is completed and disseminated to ADD's, HDO's, MPO's.
KYTC report to Legislature	10/1	Deliver SHIFT 2026 scores to KY Legislature	Central Office	KYTC issues an official copy of SHIFT 2026 scores to Legislature as required by KRS.
Draft Plan	10/13 - 12/19	KYTC Develops Draft Plan and Delivers to the Governor	Central Office	The Draft Recommended Highway Plan is a combination of statewide list and regional lists. It will also include system preservation and preventative maintenance projects. Submit Draft Plan to Governor. Revise Per Governor request.

ADD, MPO and KYTC Highway District Contacts

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Ethan Bates
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BUFFALO TRACE
Melissa Hardy
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GATEWAY
Jocelyn Gross
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KENTUCKY RIVER
Scott Melton
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NORTHERN KENTUCKY
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GREEN RIVER
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LAKE CUMBERLAND
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Angela Herndon
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BLUEGRASS
Matthew Grace
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FIVCO
Tim Wright
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KIPDA
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LINCOLN TRAIL
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PURCHASE
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Owensboro MPO (GRADD)
Tom Lovett
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(Daviss)

Evansville-Henderson MPO (EMPO)
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(Henderson)

Paducah - McCracken County MPO
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Clarksville MPO (CMCRPC)
Mike Ziarnek
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(Christian)

Louisville MPO (KIPDA)
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(Bullitt, Jefferson & Oldham)

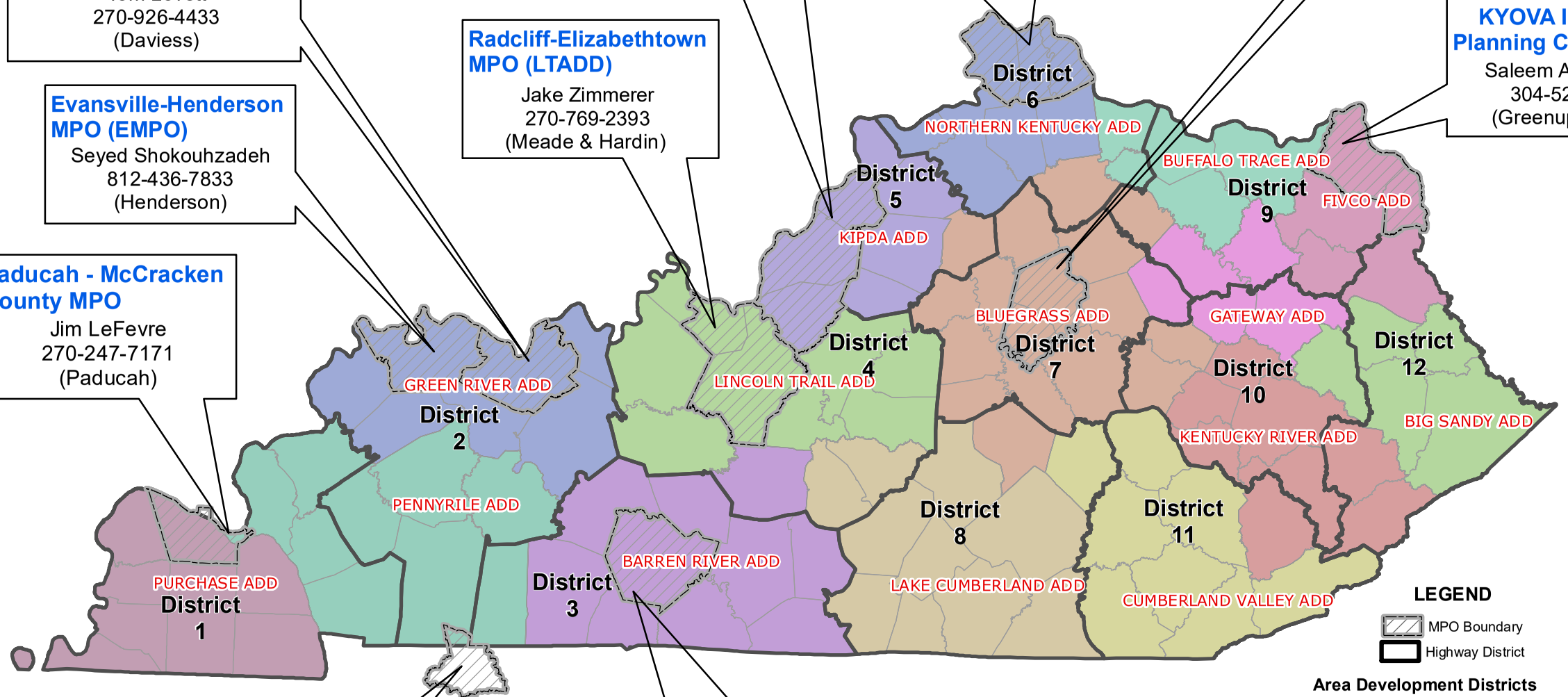
Radcliff-Elizabethtown MPO (LTADD)
Jake Zimmerer
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(Meade & Hardin)

Cincinnati/N. Kentucky MPO (OKI)
Robert Koehler
513-621-6300
(Boone, Kenton & Campbell)

Lexington MPO (LAMPO)
Chris Evilia
859-258-3160
(Fayette & Jessamine)

KYOVA Interstate Planning Commission
Saleem A Salameh
304-523-7434
(Greenup & Boyd)

Bowling Green MPO (BRADD)
Carroll Duckworth
270-393-3339
(Warren)



LEGEND

- MPO Boundary
- Highway District

Area Development Districts

- BARREN RIVER
- BIG SANDY
- BLUEGRASS
- BUFFALO TRACE
- CUMBERLAND VALLEY
- FIVCO
- GATEWAY
- GREEN RIVER
- KENTUCKY RIVER
- KIPDA
- LAKE CUMBERLAND
- LINCOLN TRAIL
- NORTHERN KENTUCKY
- PENNYRILE
- PURCHASE

District 1
Paducah
270-898-2431
Austin Hart

- Ballard
- Calloway
- Carlisle
- Crittenden
- Fulton
- Graves
- Hickman
- Livingston
- Lyon
- McCracken
- Marshall
- Trigg

District 2
Madisonville
270-824-7080
Nick Hall

- Caldwell
- Christian
- Daviess
- Hancock
- Henderson
- Hopkins
- McLean
- Muhlenberg
- Ohio
- Union
- Webster

District 3
Bowling Green
270-746-7898
Ben Hunt

- Allen
- Barren
- Butler
- Edmonson
- Logan
- Metcalfe
- Monroe
- Simpson
- Todd
- Warren

District 4
Elizabethtown
270-766-5069
Kevin Young

- Breckinridge
- Grayson
- Green
- Hardin
- Hart
- Larue
- Marion
- Meade
- Nelson
- Taylor
- Washington

District 5
Louisville
502-210-5400
Tom Hall

- Bullitt
- Franklin
- Henry
- Jefferson
- Oldham
- Shelby
- Spencer
- Trimble

District 6
Covington
859-341-2700
Dane Blackburn

- Boone
- Bracken
- Campbell
- Carroll
- Gallatin
- Grant
- Harrison
- Kenton
- Owen
- Pendleton
- Robertson

District 7
Lexington
859-246-2355
Casey Smith

- Anderson
- Bourbon
- Boyle
- Clark
- Fayette
- Garrard
- Jessamine
- Madison
- Mercer
- Montgomery
- Scott
- Woodford

District 8
Somerset
606-677-4017
Jeff Dick

- Adair
- Casey
- Clinton
- Cumberland
- Lincoln
- McCreary
- Pulaski
- Rockcastle
- Russell
- Wayne

District 9
Flemingsburg
606-845-2551
Blake Jones

- Bath
- Boyd
- Carter
- Elliott
- Fleming
- Greenup
- Lewis
- Mason
- Nicholas
- Rowan

District 10
Jackson
606-666-8841
Darren Back

- Breathitt
- Estill
- Lee
- Magoffin
- Menifee
- Morgan
- Owsley
- Perry
- Powell
- Wolfe

District 11
Manchester
606-598-2145
Keenen Jones

- Bell
- Clay
- Harlan
- Jackson
- Knox
- Laurel
- Leslie
- Whitley

District 12
Pikeville
606-433-7791
Charles Dale

- Floyd
- Johnson
- Knott
- Lawrence
- Letcher
- Martin
- Pike

Map Revision: Dec 2024

Northern Kentucky Workforce Investment Board

22 Spiral Drive | Florence, KY | 41042 | Phone: 859.283.1885 | nkcareercenter.org

Correy Eimer, Director
Brian Bozeman, Board Chair

To: NKADD Board of Directors

From: Correy Eimer, Associate Director of Workforce Development

Date: May 28, 2026

Subject: Request for Approval of WIOA Workforce Service Provider Contracts for Fiscal Year 2027

The Northern Kentucky Workforce Investment Board (NKWIB), for which the Northern Kentucky Area Development District (NKADD) serves as fiscal agent, is required under the federal Workforce Innovation and Opportunity Act (WIOA) to conduct a competitive Request for Proposal (RFP) process at least every three years to procure organizations to deliver workforce services throughout the eight-county Northern Kentucky region.

Following completion of the RFP process, the NKWIB voted during its May 12, 2026 board meeting to approve the execution of contracts with the following organizations to provide WIOA workforce services during Fiscal Year 2027:

- **Brighton Center** – One Stop Operator services for Kentucky Career Centers
- **Brighton Center** – WIOA workforce services for Adults, Dislocated Workers, and Businesses
- **Easterseals Redwood** – WIOA workforce services for Youth ages 16–24

In addition, the Northern Kentucky Local Elected Officials (County Judge/Executives) approved these contracts during their May 20, 2026 meeting.

At this time, staff respectfully requests that the **NKADD Board of Directors approve NKADD entering into contracts with the organizations listed above for the period of July 1, 2026 through June 30, 2027.**

These contracts may be renewed annually for up to two additional one-year periods, contingent upon satisfactory contract performance and availability of funding, without requiring an additional RFP process.

Thank you for your consideration and continued support of the NKADD's workforce development efforts in Northern Kentucky.

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Kentucky Intergovernmental Review Process (KIRP)/ eClearinghouse
Project Review
May 28, 2026

Project Title	SAI Number	Applicant	Location	Page
06-428.3 Dudley Road	KY202605040428	BRANDSTETTER CARROLL INC.	Kenton County	2
KY - Boating/Fishing Access and Maintenance 2026-27	KY202605120463	Kentucky Department of Fish & Wildlife Resources	State-Wide	9

NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Kentucky Intergovernmental Review Process (KIRP)/ eClearinghouse

Project Title: 06-428.3 Dudley Road

SAI No: KY202605040428

RE: Board Review and Action Requested

Background: The Intergovernmental Review Process started in 1982 with Presidential Executive Order 12372, which requires federal agencies to provide for consultation with state and local governments that supply non-federal funds for - or that would be directly affected by - proposed federal financial assistance or direct federal development. All Federal program applications in Kentucky are subject to Executive Order 12372 - Intergovernmental Review of Federal Programs (unless the application specifically states not subject to EO 12372), Pres_ExOrder12372 and KRS45.031. statute.aspx (ky.gov)

The eClearinghouse or also known as the state's Single Point of Contact (SPOC) coordinates the State-level review of Federal Grant projects that will take place in Kentucky and assists in identifying potential conflicts or duplication in services for proposed projects impacting the state and region. The eClearinghouse provides an efficient way for Federal Grant applicants to comply with funding agency requirements. It identifies the state agencies that should be involved in the development of federal projects and provides them with the opportunity to review and comment on applications as well as read other agencies' comments. The comments are then compiled into one clearinghouse letter for applicants to submit to the funding agency.

Contractual Obligation: The KIRP or Kentucky State Clearinghouse has been designated to provide state and local input to the appropriate federal agency. The Northern Kentucky Area Development District (NKADD) is the designated Regional Review Agency (RRA) for the Kentucky Intergovernmental Review Process (KIRP) through the annual Kentucky Joint Funding Administration (JFA) contract.

Responsibilities: As the RRA, the NKADD's responsibilities include:

- coordination of federally assisted projects and programs with local and area plans;
- soliciting input from area-wide and local agencies that are authorized to develop and enforce environmental standards;
- providing agencies charged with enforcing or furthering civil rights laws with the opportunity to participate in the review process and
- to encourage an expeditious process of intergovernmental coordination and review of proposed projects.

NKADD Internal Review Process: Following the JFA MOU Scope of Work, the new Community Development Planning team has recently revised the NKADD internal review process to ensure compliance and provide a streamlined comment period. The revised review process will include:

- Providing chief elected officials with the opportunity to review, request additional information or ask questions about the project and its impacts on their communities.

- If applicable, providing special purpose units of local governments with the opportunity to review, request additional information or ask questions about the project and its impacts on their communities.
- Evaluate the responses to determine the significance of the proposed federally assisted programs to area-wide and local plans and programs to develop comments
- If applicable, inform interstate metropolitan planning districts that share common territory with the NKADD of the project. If the interstate body desires to provide input on these proposals, it must utilize the officially designed state Single Point of Contact to forward comments to the Kentucky State Single Point of Contact.
- Present to the NKADD Board of Directors for review and action on the project
- Select the correct endorsement response (Endorse with Comment or Non-Endorse) and submit comments to eClearinghouse. Types of comments include no concerns, information about permit requirements, best management practices, etc.

SUMMARY SHEET
INTERGOVERNMENTAL REVIEW PROCESS

5/6/2026	KY202605040428
DATE RECEIVED	**PROJECT NUMBER**

06-428.3 Dudley Road

PROJECT NAME

BRANDSTETTER CARROLL INC.		**LOCAL** ☒
APPLICANT'S NAME		**AREAWIDE** ☐
		REGIONAL ☐
DOT - Department of Transportation	20.205	**STATEWIDE** ☐
AGENCY TO RECEIVE REQUEST	**FED. CAT. #**	**INTERAGENCY** ☐

SUMMARY: Phase A, Mill and Pave from Dixie Hwy to Turkey Foot, Edgewood Kentucky, 1st 700' has some strom improvements, boarder curb will be installed to help support the edge of pavement, and some full depth repair. temporary construction easements will be needed. Phase B Mill and Pave from Turkey Foot to Catherine Dr, Edgewood Kentucky, boarder curb will be installed to help support the edge of pavement, and some full depth repair.

PROPOSED FUNDING	**FEDERAL**	$1,636,800
	APPLICANT	$
	STATE	$
	LOCAL	$1,091,200
	PROGRAM INCOME	$
	OTHER (Specify)	$
	PRINCIPLE FORGIVENESS	$
	TOTAL	$2,728,000

STAFF ASSIGNED:

STAFF COMMENTS: ☐ **POSITIVE** ☐ **NEGATIVE** ☐ **OTHER**

Return to Review Projects (/echreviews)

Review Project
06-428.3 Dudley Road

Submit Review

Review Open | Awaiting Comment

Select Details

Summary

General

SAI Number
KY202605040428

Submitting Organization
BRANDSTETTER CARROLL INC.

Submitter Name
Greg Bryant

Submitter Phone
5132769922

Submitter Email
gbryant@bciaep.com

Applicant

Applicant Type
Federal

Applicant Organization
BRANDSTETTER CARROLL INC.

Applicant Name
Mr. GREG BRYANT

Applicant Mailing Address
308 EAST 8TH STREET
CINCINNATI, OH 45011

Applicant Phone
15132769922

Applicant Email
gbryant@bciaep.com

Project Details

Project Type
TE - Transportation Enhancement

Project Title
06-428.3 Dudley Road

Does This Project Involve Construction/Renovation?
Yes

Does project involve construction of housing, running of water, wastewater lines, or purchase of real estate?
No

Counties
Kenton County

Congressional Districts
4

ALN Number	ALN Title
20.205	Highway Planning and Construction

Applying for Federal Grants?
Yes

Federal Agency
DOT - Department of Transportation

Applying for State Grants?
Yes

State Agency
KYTC

Start Date
10/05/2026

Delinquent on any Federal Debt?
No

Site Physical Address
Dudley Road Improvements
Edgewood, KY 41017

Site Latitude

-

Site Longitude
-

Project Description
Phase A, Mill and Pave from Dixie Hwy to Turkey Foot, Edgewood Kentucky, 1st 700' has some strom improvements, boarder curb will be installed to help support the edge of pavement, and some full depth repair. temporary construction easements will be needed. Phase B Mill and Pave from Turkey Foot to Catherine Dr, Edgewood Kentucky, boarder curb will be installed to help support the edge of pavement, and some full depth repair.

Need for project
-

Waste Water Details

Water Supplier Name
Northern Kentucky Water District

Wastewater Disposal Description
Existing publicly owned wastewater treatment plant

Plant Name
Sanitation District no. 1

Solid Waste Details

Landfill Name
Rumpke Landfill

Landfill Permit Number
096-00001

Transport Mode
Haul by Refuse / Transfer Trucks

Transport Company
Rumpke Solid Waste transport

Funding Details

Federal
$1,636,800.00

Applicant
$0.00

State
$0.00

Local
$1,091,200.00

Program Income
$0.00

Other Funding Sources
-

Other Income
$0.00

Total Funding
$2,728,000.00

Kentucky Department for Local Government

(https://www.x.com/DLG_KY/) (https://www.facebook.com/DLGKY/)

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TDD: 800-648-6056 (tel:8006486056)
Fax: 502-227-8691 (tel:5022278691)

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NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Kentucky Intergovernmental Review Process (KIRP)/ eClearinghouse

Project Title: KY - Boating/Fishing Access and Maintenance 2026-27

SAI No: KY202605120463

RE: Board Review and Action Requested

Background: The Intergovernmental Review Process started in 1982 with Presidential Executive Order 12372, which requires federal agencies to provide for consultation with state and local governments that supply non-federal funds for - or that would be directly affected by - proposed federal financial assistance or direct federal development. All Federal program applications in Kentucky are subject to Executive Order 12372 - Intergovernmental Review of Federal Programs (unless the application specifically states not subject to EO 12372), Pres_ExOrder12372 and KRS45.031. statute.aspx (ky.gov)

The eClearinghouse or also known as the state's Single Point of Contact (SPOC) coordinates the State-level review of Federal Grant projects that will take place in Kentucky and assists in identifying potential conflicts or duplication in services for proposed projects impacting the state and region. The eClearinghouse provides an efficient way for Federal Grant applicants to comply with funding agency requirements. It identifies the state agencies that should be involved in the development of federal projects and provides them with the opportunity to review and comment on applications as well as read other agencies' comments. The comments are then compiled into one clearinghouse letter for applicants to submit to the funding agency.

Contractual Obligation: The KIRP or Kentucky State Clearinghouse has been designated to provide state and local input to the appropriate federal agency. The Northern Kentucky Area Development District (NKADD) is the designated Regional Review Agency (RRA) for the Kentucky Intergovernmental Review Process (KIRP) through the annual Kentucky Joint Funding Administration (JFA) contract.

Responsibilities: As the RRA, the NKADD's responsibilities include:

- coordination of federally assisted projects and programs with local and area plans;
- soliciting input from area-wide and local agencies that are authorized to develop and enforce environmental standards;
- providing agencies charged with enforcing or furthering civil rights laws with the opportunity to participate in the review process and
- to encourage an expeditious process of intergovernmental coordination and review of proposed projects.

NKADD Internal Review Process: Following the JFA MOU Scope of Work, the new Community Development Planning team has recently revised the NKADD internal review process to ensure compliance and provide a streamlined comment period. The revised review process will include:

- Providing chief elected officials with the opportunity to review, request additional information or ask questions about the project and its impacts on their communities.

- If applicable, providing special purpose units of local governments with the opportunity to review, request additional information or ask questions about the project and its impacts on their communities.
- Evaluate the responses to determine the significance of the proposed federally assisted programs to area-wide and local plans and programs to develop comments
- If applicable, inform interstate metropolitan planning districts that share common territory with the NKADD of the project. If the interstate body desires to provide input on these proposals, it must utilize the officially designed state Single Point of Contact to forward comments to the Kentucky State Single Point of Contact.
- Present to the NKADD Board of Directors for review and action on the project
- Select the correct endorsement response (Endorse with Comment or Non-Endorse) and submit comments to eClearinghouse. Types of comments include no concerns, information about permit requirements, best management practices, etc.

SUMMARY SHEET
INTERGOVERNMENTAL REVIEW PROCESS

5/14/2026	KY202605120463
DATE RECEIVED	**PROJECT NUMBER**

KY - Boating/Fishing Access and Maintenance 2026-27

PROJECT NAME

Kentucky Department of Fish & Wildlife Resources	**LOCAL** ☐
APPLICANT'S NAME	**AREAWIDE** ☐
	REGIONAL ☐

F&W - Fish and Wildlife	15.605	**STATEWIDE** ☒
AGENCY TO RECEIVE REQUEST	**FED. CAT. #**	**INTERAGENCY** ☐

SUMMARY: The work on this grant will be performed by Kentucky Department of Fish and Wildlife Staff based out of the Headquarters office at #1 Sportsman's Lane, Frankfort Ky. The Engineering Division, in addition to each district fisheries office, will monitor the condition of Department owned boating and fishing access sites throughout the state for their maintenance needs. Engineering Division staff will inspect Department-owned and constructed facilities a minimum of once each year to determine the need for repairs, as well as maintain the area so that it meets its intended purpose. Access sites are maintained in a safe and clean environment for the public to enjoy. Necessary maintenance will be performed to make certain these facilities are kept in a working condition including mowing, paving, grading, maintenance of dams, and other minor repairs to access facilities. Recreational boating opportunities are managed through the development, construction, and annual maintenance of over 170 boating access facilities across the Commonwealth. These facilities range from large multi-lane boat ramps on major reservoirs to small boat/canoe/kayak access facilities on smaller streams. Consistently, anglers and boaters rank annual maintenance (as well as the continued development of new access) as the third most important need for improvement by the Department. Annual maintenance of existing boating access facilities is one way that the Department continues to meet the existing demands for such facilities across the state. High use of these facilities provides adequate justification to maintain boat ramps in a well-kept and excellent working condition so that they continue to meet the various needs of Kentucky's anglers and boaters. Annual maintenance assures that these facilities will be kept in a working and useable fashion throughout the useful life of each facility.

PROPOSED FUNDING		
	FEDERAL	$690,000
	APPLICANT	$
	STATE	$230,000
	LOCAL	$
	PROGRAM INCOME	$
	OTHER (Specify)	$
	PRINCIPLE FORGIVENESS	$
	TOTAL	$920,000

STAFF ASSIGNED:

STAFF COMMENTS: ☐ **POSITIVE** ☐ **NEGATIVE** ☐ **OTHER**

Return to Review Projects (/echreviews)

Review Project

KY - Boating/Fishing Access and Maintenance 2026-27

Submit Review

Review Open | Awaiting Comment

Select Details

Summary

General

SAI Number
KY202605120463

Submitting Organization
Kentucky Department of Fish & Wildlife Resources

Submitter Name
Joseph Zimmerman

Submitter Phone
502-892-4473

Submitter Email
joseph.zimmerman@ky.gov

Applicant

Applicant Type
State

Applicant Organization
Kentucky Department of Fish & Wildlife Resources

Applicant Name
Mr. Joseph Zimmerman

Applicant Mailing Address
#1 Sportsman's Lane
Frankfort, KY 40601

Applicant Phone
15028924473

Applicant Email
joseph.zimmerman@ky.gov

Project Details

Project Type
Fish and Wildlife

Project Title
KY - Boating/Fishing Access and Maintenance 2026-27

Does This Project Involve Construction/Renovation?
No

Does project involve construction of housing, running of water, wastewater lines, or purchase of real estate?
No

Counties
State-Wide

Congressional Districts
1, 2, 3, 4, 5, 6

ALN Number	ALN Title
15.605	Dingell-Johnson Sport Fish Restoration Program

Applying for Federal Grants?
Yes

Federal Agency
F&W - Fish and Wildlife

Applying for State Grants?
No

Start Date
07/01/2026

Delinquent on any Federal Debt?
No

Site Physical Address
Statewide
N/A, KY N/A

Site Latitude
38.17435

Site Longitude

-84.92227

Project Description
The work on this grant will be performed by Kentucky Department of Fish and Wildlife Staff based out of the Headquarters office at #1 Sportsman's Lane, Frankfort Ky. The Engineering Division, in addition to each district fisheries office, will monitor the condition of Department owned boating and fishing access sites throughout the state for their maintenance needs. Engineering Division staff will inspect Department-owned and constructed facilities a minimum of once each year to determine the need for repairs, as well as maintain the area so that it meets its intended purpose. Access sites are maintained in a safe and clean environment for the public to enjoy. Necessary maintenance will be performed to make certain these facilities are kept in a working condition including mowing, paving, grading, maintenance of dams, and other minor repairs to access facilities.

Need for project
Recreational boating opportunities are managed through the development, construction, and annual maintenance of over 170 boating access facilities across the Commonwealth. These facilities range from large multi-lane boat ramps on major reservoirs to small boat/canoe/kayak access facilities on smaller streams. Consistently, anglers and boaters rank annual maintenance (as well as the continued development of new access) as the third most important need for improvement by the Department. Annual maintenance of existing boating access facilities is one way that the Department continues to meet the existing demands for such facilities across the state. High use of these facilities provides adequate justification to maintain boat ramps in a well-kept and excellent working condition so that they continue to meet the various needs of Kentucky's anglers and boaters. Annual maintenance assures that these facilities will be kept in a working and useable fashion throughout the useful life of each facility.

Waste Water Details

Water Supplier Name
N/A

Wastewater Disposal Description
On-site septic tank and lateral field

Health Department Name
N/A

Health Department Permit Number
N/A

Health Department Phone Number
N/A

Health Department Address
N/A

Solid Waste Details

Landfill Name
-

Landfill Permit Number
-

Transport Mode
-

Transport Company
-

Funding Details

Federal
$690,000.00

Applicant
$0.00

State
$230,000.00

Local
$0.00

Program Income
$0.00

Other Funding Sources
-

Other Income
$0.00

Total Funding
$920,000.00

Kentucky Department for Local Government

(https://www.x.com/DLG_KY/) (https://www.facebook.com/DLGKY/)

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NKADD
NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Aging and Disability Nutrition Service and Site Operations Procurement

Meals on Wheels of Southwest Ohio and Northern Kentucky:
Home Delivered Meal, Congregate Meal Nutrition Service and Site Operations
(service provided in all 8 counties and approved senior centers and nutrition sites)

MOM's Meals Purfood:
Home Delivered Meal Nutrition Service (service provided in all 8 counties)

Meals on Wheels of Southwest Ohio and Northern Kentucky

TYPE	County	*FY26 Unit Cost	Dollar Difference	FY27 Rate	% change
Frozen/Shelf HDM	All 8 counties	$10.51	$0.01	$10.52	0%

* FY26 rates for Carroll/Owen was $12.09 that is a -15% decrease for those two counties.

Hot HDM	All Counties	$22.70-$25.35		$15.83	

Congregate	4 Nutrition Sites	$10.39	$0.01	$10.40	0%
Congregate	All contracted senior centers	$10.51	$0.01	$10.52	0%

*therapetic meals add an additional $1.16 per meal

Nutrition Site Operations (17.5 hrs weekly)	FY26 Allocation	Dollar Difference	FY27 Request	% Change
Golden Towers	$19,031.00	$2,089.00	$21,120.00	10%
Grand Tower	$19,691.00	$1,695.00	$21,386.00	8%
Highland Village	$21,011.00	$1,302.00	$22,313.00	6%
Panorama	$19,031.00	$1,630.00	$20,661.00	8%

Rate increase is due to increase in salary across all sites.

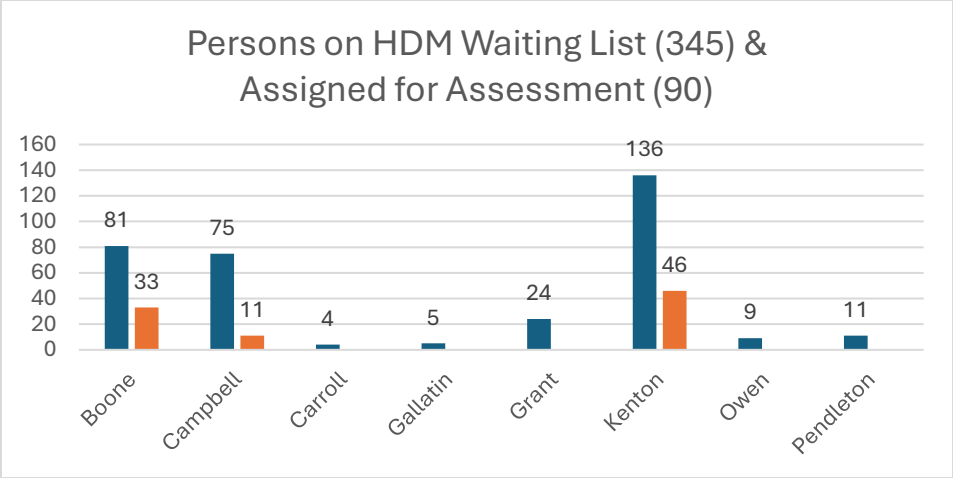
MOM's Meals

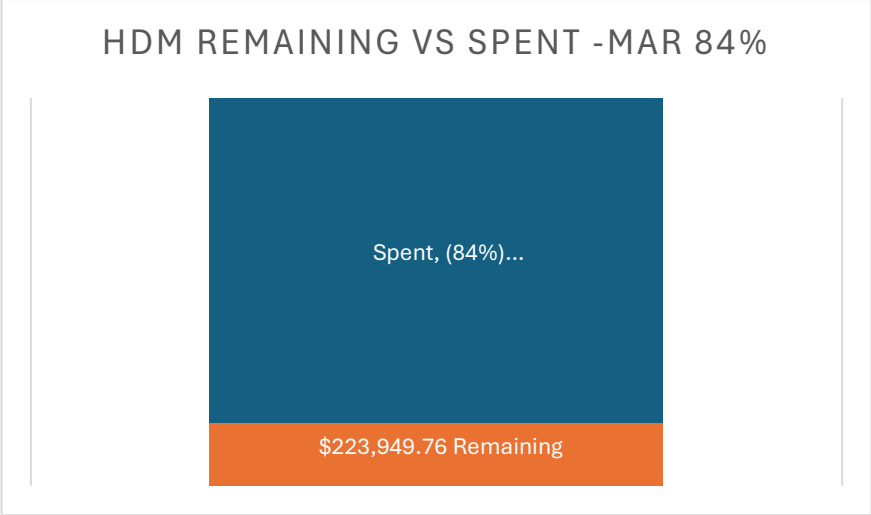
TYPE	County	Unit Cost	Dollar Diff	FY27 Rate	% Change
Fresh HDM	All 8	$8.50	$0.00	$8.50	0%
Fresh HDM	All 8	$8.50	$0.80	$9.30	9%

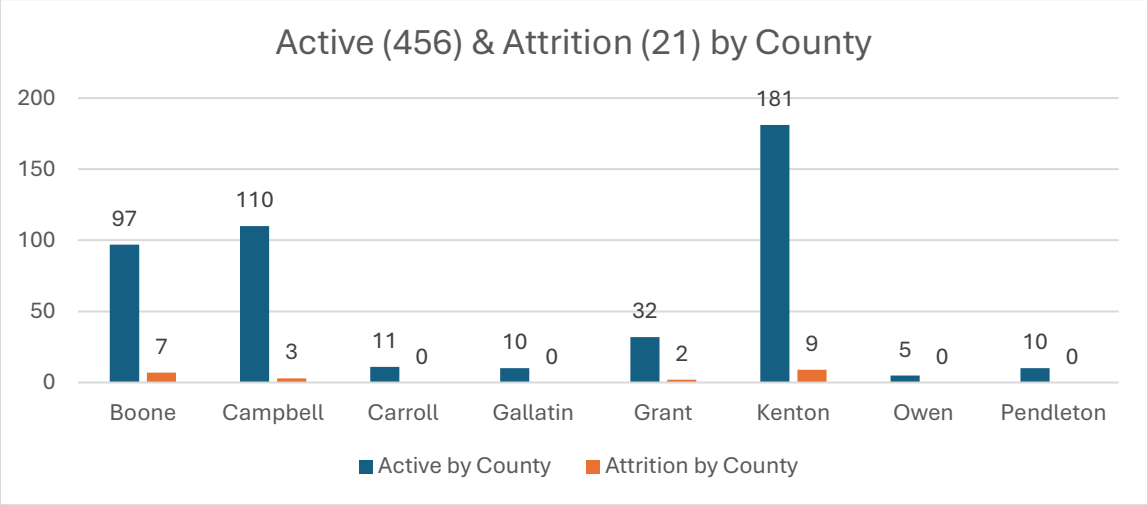
Meal cost is $10.00. Amounts shown reflect federal reimburesment minus the 15% match requirement and state reimbursement minus the 7% match requirement.

NKADD
NORTHERN KENTUCKY AREA DEVELOPMENT DISTRICT

Home Delivered Meal Data through May 8, 2026 Dollars spent through April 30, 2026







KENTUCKY RURAL HEALTH TRANSFORMATION PROGRAM

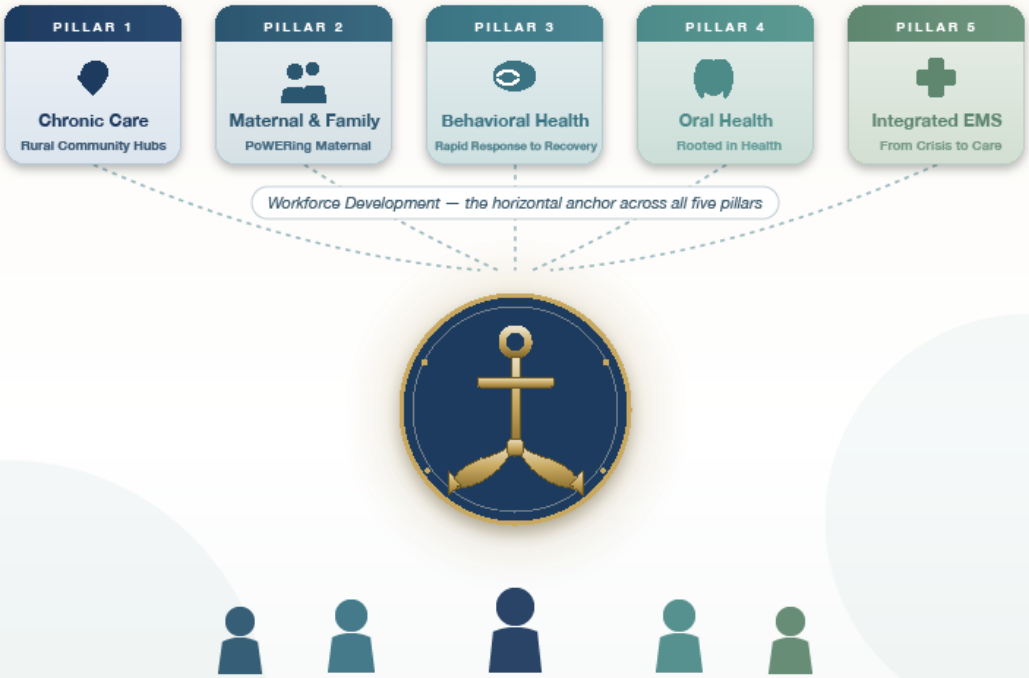
Statewide Initiative Proposal

FlourishCare ANCHOR-AAA

AGING NETWORK CONNECTING HEALTH, OUTREACH & RESOURCES

A statewide anchor model for rural older Kentuckians

FIVE PILLARS · ONE ANCHOR



Rural older Kentuckians at the center of every pillar

FOUNDATION — **15 Area Agencies on Aging & Independent Living**

Serving all 109 rural counties across the Commonwealth

SUBMITTED BY

The University of Louisville Trager Institute

in partnership with the UofL School of Nursing, the UofL School of Dentistry, AKHCAN, and Kentucky's 15 Area Agencies on Aging & Independent Living

FlourishCare ANCHOR-AAA Executive Summary

Budget Period Year 1 Request July 1, 2026- October 2027: $14,071,327

Total Potential Five-Year Request: $56,285,308

The single greatest barrier to BH, chronic disease, oral health, maternal/kinship, and emergency care for rural older Kentuckians is not technology, geography, or stigma. It is the absence of a trained workforce prepared to serve them. Kentucky's (KYs) rural counties have only a fraction of the behavioral health (BH) professionals, community health workers (CHWs), nurses, navigators, and dental and emergency providers the older-adult population needs, and the few who do practice rurally are rarely trained in the specific clinical competencies required for late-life care: brief tele-mental-health interventions, dementia-friendly engagement, geriatric medication interactions, fall prevention, late-life depression and suicide risk, oral disease screening, postpartum BH for kinship families, social-determinants-of-health screening, and the chronic-disease self-management facilitation skills that move diabetes and obesity outcomes upstream.

The unifying force is the older adult. Older Kentuckians do not experience the RHTP's five pillars as separate problems — the same rural older adult is simultaneously at risk of diabetes, late-life depression, isolation, oral disease, kinship caregiving stress, and an avoidable EMS call. An older-adult workforce strategy is therefore the most efficient horizontal lever the Commonwealth can pull against all five RHTP vertical pillars at once.

The University of Louisville Trager Institute, in partnership with the UofL School of Nursing (SON), the UofL School of Dentistry (SOD), the Appalachian KY Health Care Access Network (AKHCAN), and KY's 15 Area Agencies on Aging and Independent Living (AAAILs), proposes a five-year, statewide initiative whose central purpose is to train, credential, place, and continuously support a geriatric-specialized rural workforce of BH professionals, health navigators, and Community Health Workers. The 15 AAAILs and their senior centers, AAAIL-affiliated provider clinics, and aging-network partners serve as the practice setting, the patient panel, and the long-term professional home. The architecture is shown in Figure 1.

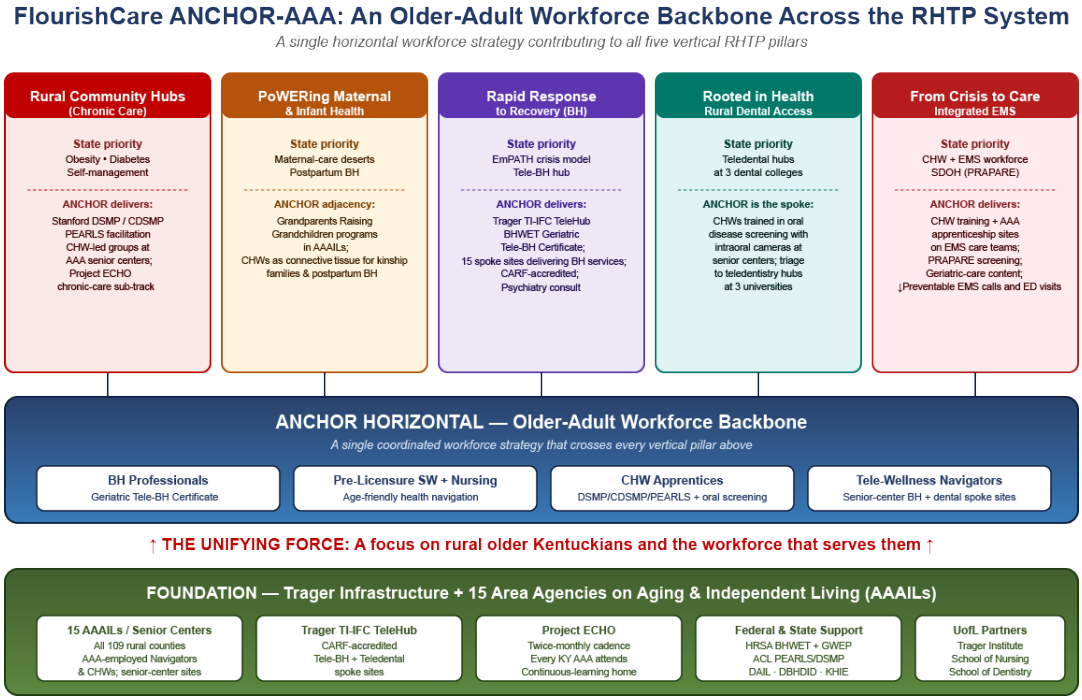


Figure 1. ANCHOR's older-adult workforce backbone (center band) crosses all five RHTP vertical pillars (top). The 15 AAAILs, Trager TeleHub, Project ECHO, federal/state partners, and UofL schools form the supporting foundation (bottom).

The workforce strategy has three coordinated pipelines and one embedded role. The BH pipeline is an expansion of Trager's existing HRSA-funded BHWET (BH Workforce Education and Training) program, which trains master's-level Social Workers (SWers), Marriage and Family Therapists (MFTs), and Psychiatric Mental Health Nurse Practitioners (PMHNPs) across the lifespan with a focus on younger adults. For this initiative we leverage that program to develop a Geriatric Tele-BH Certificate built for rural older-adult care: brief problem-solving therapy, behavioral activation, late-life CBT for anxiety and insomnia, evidence-based protocols for late-life depression and complicated grief, caregiver stress and respite-supportive counseling, suicide risk assessment, dementia-informed engagement, and remote-delivery competencies developed at the Trager Trauma-Informed Integrated FlourishCare (TI-IFC) TeleHub. Trainees are trained in the TeleHub and are placed after graduation directly into rural-serving practice through the TI-IFC TeleHub and the 15 AAAILs, closing the placement gap that has historically prevented our BH graduates from staying in rural KY after licensure.

The pre-licensure pipeline expands Trager's existing HRSA-funded GWEP (Geriatric Workforce Enhancement Program) model. For this initiative, we train bachelor-level and foundation-master-level Social Work students (BSW, foundational MSW) and bachelor-level nursing students (BSN) in health navigation, care coordination, and whole-health age-friendly care for older adults. Each student is additionally certified as a Program to Engage Active Rewarding Lives for Senior (PEARLS), Chronic Disease Self-Management Program (CDSMP), and Diabetes Self-Management Program (DSMP) facilitator — equipping them with the same evidence-based community delivery credentials as the AAAIL-employed CHW pipeline. What is unique with this pipeline is the focus on placement within AAAILs and the broader provider network in rural KY.

The Community Health Worker (CHW) pipeline is an expansion of Trager's existing HRSA-funded BHWET paraprofessional program, where CHWs are trained through apprenticeship programs to work within primary care settings, mainly with younger age groups. This initiative re-anchors that pipeline on older adults and on AAAIL apprenticeship placement with a specialized focus on geriatric care; in partnership with AKHCAN and its unique focus on high school student recruitment into the profession of CHWers. They will provide the 40-hour Tier 1 CHW approved training and Trager will provide the specialized geriatric care training through a CHW apprenticeship, already approved by the KY DPH Office of CHWs and the KY Department of Labor. CHWs additionally earn DSMP, CDSMP, and PEARLS facilitator certifications through Trager's Administration for Community Living (ACL) master-trainer authority. Under ANCHOR, CHW apprenticeships are placed not only at AAAILs but on EMS care teams of partner agencies and the CHW curriculum adds PRAPARE SDOH screening, intraoral-camera oral-disease screening (feeding the planned teledentistry hubs at KY's three dental colleges – separate proposal), multigenerational kinship-caregiver and postpartum-BH navigation, and geriatric-care content for emergency response (dementia, polypharmacy, falls, end-of-life).

The fourth role embedded at every AAAIL partner site is the Tele-Wellness Navigator, an AAAIL-employed senior-center staffer trained by Trager in tele-behavioral-health workflow, teledental image capture, HIPAA privacy, scheduling, technology setup, and warm hand-offs. The Navigator is the single human point that makes the AAAIL-equipped rooms work as multi-pillar TeleHub spoke sites. The navigators will be recruited from the pre-licensure pipeline.

Each of KY's 15 AAAILs receives a five-year subaward calibrated to its rural-county count and older-adult population to embed the trained geriatric workforce in the community spaces older Kentuckians already trust: senior centers, AAAIL-affiliated provider clinics, faith-based community organizations, and other partner sites across each AAAIL's district. Embedding happens through two complementary modes. Virtual presence provides a low-footprint access point at any partner site (a private nook, a tablet or laptop, reliable

broadband, and a Tele-Wellness Navigator connecting rural older adults to master-level trained therapists from SW, MFT, and Psychiatric Nursing practicing remotely through the Trager TI-IFC TeleHub and to teledentistry hubs at KY's three dental colleges. In-person presence sustained by AAAIL-employed pre-licensure SW/Nursing health navigators and certified CHWs deliver DSMP, CDSMP, PEARLS, kinship-caregiver support, oral-disease screening, and EMS-team SDOH coordination directly in those same spaces, with an in-home/in-center pathway for older adults who cannot travel. The funding underwrites the workforce, the broadband and tele-equipment that make embedding possible, and modest privacy upgrades, not a new building. Trager's existing monthly Project ECHO for Older Adults, which is already attended by direct-care staff from every KY AAAIL, will expands to a twice-monthly cadence and becomes the continuous-learning collaborative that holds the entire workforce together.

The work is purposefully aligned with the Workforce Development priority of KY's Rural Health Transformation Plan (RHTP) as its primary horizontal anchor and explicitly contributes to four of the five named RHTP initiatives: Rural Community Hubs for Chronic Care Innovation (core), Rapid Response to Recovery (BH) (core), Rooted in Health: Rural Dental Access (core, as the rural spoke feeding the three-university teledental hubs), and From Crisis to Care: Integrated EMS Response. It provides adjacent support to PoWERing Maternal & Infant Health through Grandparents Raising Grandchildren programs in the AAAILs and partnerships with KY's Family Caregiver Support programs and Family Resource and Youth Services Centers (FRYSCs). It builds on and operationalizes statewide infrastructure that KY has built through HRSA workforce grants, Administration for Community Living (ACL) chronic-disease and caregiver support programs, and University of Louisville support through the Trager TeleHub, the ACL PEARLS/DSMP licensing, and the existing monthly Project ECHO that already convenes every KY AAAIL.

Over five years, the initiative's primary workforce outcomes will be: (1) ≥75 BH professionals (master's-level SWers, MFTs, and PMHNPs) who graduate with the Geriatric Tele-BH Certificate and are placed in rural-serving practice through the TeleHub, with the ability to directly bill for their BH services; (2) ≥150 pre-licensed bachelor/foundational SW and Nursing students trained in health navigation, chronic-disease management, and whole-health age-friendly care, also certified as PEARLS/CDSMP/DSMP facilitators, employable at AAAILs and the broader rural provider network; (3) ≥75 CHWs certified by the state with specialized certifications in BH, DSMP/CDSMP and PEARLS facilitation, PRAPARE SDOH-screening competency, intraoral-camera oral-disease screening, kinship and postpartum-BH navigation, and structured apprenticeship placement on EMS care teams (Crisis to Care Components 1 and 2 — Medicaid-billable for the chronic-disease and BH portions of their scope); (4) 15 Tele-Wellness Navigators trained and embedded as the cross-pillar tele-care anchor at each AAAIL partner site; and (5) a permanent statewide community of practice through the expanded twice-monthly Project ECHO. The workforce produced will, in turn, deliver ≥3,000 tele-behavioral-health visits, graduate ≥956 older adults from DSMP/CDSMP/PEARLS, complete > 3,000 CHW-led intraoral-camera screenings (triaging suspected disease into the 3 university teledentistry hubs), provide ≥ 250 kinship caregiving and post-partum support to grandparents and intergenerational families in every AAAIL service area, and contribute to a measurable and significant reduction in avoidable EMS calls and ED visits among older adults. First budget period request (15 months): $14,071,327. Total Potential Five-Year Request: $56,285,308.

KENTUCKY RURAL HEALTH TRANSFORMATION PROGRAM

Statewide Initiative Proposal

FlourishCare ANCHOR-AAA

AGING NETWORK CONNECTING HEALTH, OUTREACH & RESOURCES

A statewide anchor model for rural older Kentuckians

FIVE PILLARS · ONE ANCHOR

PILLAR 1 — Chronic Care — Rural Community Hubs

PILLAR 2 — Maternal & Family — PoWERing Maternal

PILLAR 3 — Behavioral Health — Rapid Response to Recovery

PILLAR 4 — Oral Health — Rooted in Health

PILLAR 5 — Integrated EMS — From Crisis to Care

Workforce Development — the horizontal anchor across all five pillars





Rural older Kentuckians at the center of every pillar

FOUNDATION — **15 Area Agencies on Aging & Independent Living**

Serving all 109 rural counties across the Commonwealth

SUBMITTED BY

The University of Louisville Trager Institute

in partnership with the UofL School of Nursing, the UofL School of Dentistry, AKHCAN, and Kentucky's 15 Area Agencies on Aging & Independent Living

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FlourishCare ANCHOR-AAA Executive Summary

Budget Period Year 1 Request July 1, 2026- October 2027: $14,071,327

Total Potential Five-Year Request: $56,285,308

The single greatest barrier to BH, chronic disease, oral health, maternal/kinship, and emergency care for rural older Kentuckians is not technology, geography, or stigma. It is the absence of a trained workforce prepared to serve them. Kentucky's (KYs) rural counties have only a fraction of the behavioral health (BH) professionals, community health workers (CHWs), nurses, navigators, and dental and emergency providers the older-adult population needs, and the few who do practice rurally are rarely trained in the specific clinical competencies required for late-life care: brief tele-mental-health interventions, dementia-friendly engagement, geriatric medication interactions, fall prevention, late-life depression and suicide risk, oral disease screening, postpartum BH for kinship families, social-determinants-of-health screening, and the chronic-disease self-management facilitation skills that move diabetes and obesity outcomes upstream.

The unifying force is the older adult. Older Kentuckians do not experience the RHTP's five pillars as separate problems — the same rural older adult is simultaneously at risk of diabetes, late-life depression, isolation, oral disease, kinship caregiving stress, and an avoidable EMS call. An older-adult workforce strategy is therefore the most efficient horizontal lever the Commonwealth can pull against all five RHTP vertical pillars at once.

The University of Louisville Trager Institute, in partnership with the UofL School of Nursing (SON), the UofL School of Dentistry (SOD), the Appalachian KY Health Care Access Network (AKHCAN), and KY's 15 Area Agencies on Aging and Independent Living (AAAILs), proposes a five-year, statewide initiative whose central purpose is to train, credential, place, and continuously support a geriatric-specialized rural workforce of BH professionals, health navigators, and Community Health Workers. The 15 AAAILs and their senior centers, AAAIL-affiliated provider clinics, and aging-network partners serve as the practice setting, the patient panel, and the long-term professional home. The architecture is shown in Figure 1.

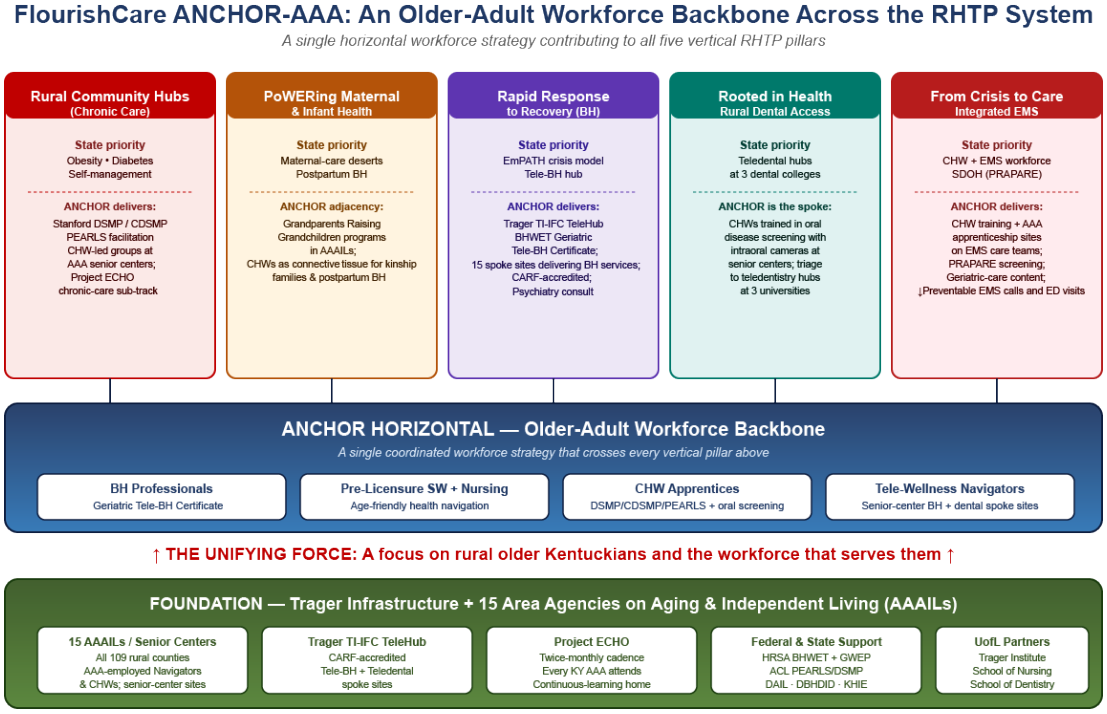


Figure 1. *ANCHOR's older-adult workforce backbone (center band) crosses all five RHTP vertical pillars (top). The 15 AAAILs, Trager TeleHub, Project ECHO, federal/state partners, and UofL schools form the supporting foundation (bottom).*

The workforce strategy has three coordinated pipelines and one embedded role. The ***BH pipeline*** is an expansion of Trager's existing HRSA-funded BHWET (BH Workforce Education and Training) program, which trains master's-level Social Workers (SWers), Marriage and Family Therapists (MFTs), and Psychiatric Mental Health Nurse Practitioners (PMHNPs) across the lifespan with a focus on younger adults. For this initiative we leverage that program to develop a Geriatric Tele-BH Certificate built for rural older-adult care: brief problem-solving therapy, behavioral activation, late-life CBT for anxiety and insomnia, evidence-based protocols for late-life depression and complicated grief, caregiver stress and respite-supportive counseling, suicide risk assessment, dementia-informed engagement, and remote-delivery competencies developed at the Trager Trauma-Informed Integrated FlourishCare (TI-IFC) TeleHub. Trainees are trained in the TeleHub and are placed after graduation directly into rural-serving practice through the TI-IFC TeleHub and the 15 AAAILs, closing the placement gap that has historically prevented our BH graduates from staying in rural KY after licensure.

The ***pre-licensure pipeline*** expands Trager's existing HRSA-funded GWEP (Geriatric Workforce Enhancement Program) model. For this initiative, we train bachelor-level and foundation-master-level Social Work students (BSW, foundational MSW) and bachelor-level nursing students (BSN) in health navigation, care coordination, and whole-health age-friendly care for older adults. Each student is additionally certified as a Program to Engage Active Rewarding Lives for Senior (PEARLS), Chronic Disease Self-Management Program (CDSMP), and Diabetes Self-Management Program (DSMP) facilitator — equipping them with the same evidence-based community delivery credentials as the AAAIL-employed CHW pipeline. What is unique with this pipeline is the focus on placement within AAAILs and the broader provider network in rural KY.

The ***Community Health Worker (CHW) pipeline*** is an expansion of Trager's existing HRSA-funded BHWET paraprofessional program, where CHWs are trained through apprenticeship programs to work within primary care settings, mainly with younger age groups. This initiative re-anchors that pipeline on older adults and on AAAIL apprenticeship placement with a specialized focus on geriatric care; in partnership with AKHCAN and its unique focus on high school student recruitment into the profession of CHWers. They will provide the 40-hour Tier 1 CHW approved training and Trager will provide the specialized geriatric care training through a CHW apprenticeship, already approved by the KY DPH Office of CHWs and the KY Department of Labor. CHWs additionally earn DSMP, CDSMP, and PEARLS facilitator certifications through Trager's Administration for Community Living (ACL) master-trainer authority. Under ANCHOR, CHW apprenticeships are placed not only at AAAILs but on EMS care teams of partner agencies and the CHW curriculum adds PRAPARE SDOH screening, intraoral-camera oral-disease screening (feeding the planned teledentistry hubs at KY's three dental colleges – separate proposal), multigenerational kinship-caregiver and postpartum-BH navigation, and geriatric-care content for emergency response (dementia, polypharmacy, falls, end-of-life).

The fourth role embedded at every AAAIL partner site is the ***Tele-Wellness Navigator,*** an AAAIL-employed senior-center staffer trained by Trager in tele-behavioral-health workflow, teledental image capture, HIPAA privacy, scheduling, technology setup, and warm hand-offs. The Navigator is the single human point that makes the AAAIL-equipped rooms work as multi-pillar TeleHub spoke sites. The navigators will be recruited from the pre-licensure pipeline.

Each of KY's 15 AAAILs receives a five-year subaward calibrated to its rural-county count and older-adult population to embed the trained geriatric workforce in the community spaces older Kentuckians already trust: senior centers, AAAIL-affiliated provider clinics, faith-based community organizations, and other partner sites across each AAAIL's district. Embedding happens through two complementary modes. **Virtual presence** provides a low-footprint access point at any partner site (a private nook, a tablet or laptop,

reliable broadband, and a Tele-Wellness Navigator connecting rural older adults to master-level trained therapists from SW, MFT, and Psychiatric Nursing practicing remotely through the Trager TI-IFC TeleHub and to teledentistry hubs at KY's three dental colleges. **In-person presence sustained by** AAAIL-employed pre-licensure SW/Nursing health navigators and certified CHWs deliver DSMP, CDSMP, PEARLS, kinship-caregiver support, oral-disease screening, and EMS-team SDOH coordination directly in those same spaces, with an in-home/in-center pathway for older adults who cannot travel. The funding underwrites the workforce, the broadband and tele-equipment that make embedding possible, and modest privacy upgrades, not a new building. Trager's existing monthly Project ECHO for Older Adults, which is already attended by direct-care staff from every KY AAAIL, will expands to a twice-monthly cadence and becomes the continuous-learning collaborative that holds the entire workforce together.

The work is purposefully aligned with the ***Workforce Development priority*** of KY's Rural Health Transformation Plan (RHTP) as its primary horizontal anchor and explicitly contributes to four of the five named RHTP initiatives: Rural Community Hubs for Chronic Care Innovation (core), Rapid Response to Recovery (BH) (core), Rooted in Health: Rural Dental Access (core, as the rural spoke feeding the three-university teledental hubs), and From Crisis to Care: Integrated EMS Response. It provides adjacent support to PoWERing Maternal & Infant Health through Grandparents Raising Grandchildren programs in the AAAILs and partnerships with KY's Family Caregiver Support programs and Family Resource and Youth Services Centers (FRYSCs). It builds on and operationalizes statewide infrastructure that KY has built through HRSA workforce grants, Administration for Community Living (ACL) chronic-disease and caregiver support programs, and University of Louisville support through the Trager TeleHub, the ACL PEARLS/DSMP licensing, and the existing monthly Project ECHO that already convenes every KY AAAIL.

Over five years, the initiative's primary workforce outcomes will be: (1) ≥75 BH professionals (master's-level SWers, MFTs, and PMHNPs) who graduate with the Geriatric Tele-BH Certificate and are placed in rural-serving practice through the TeleHub, with the ability to directly bill for their BH services; (2) ≥150 pre-licensed bachelor/foundational SW and Nursing students trained in health navigation, chronic-disease management, and whole-health age-friendly care, also certified as PEARLS/CDSMP/DSMP facilitators, employable at AAAILs and the broader rural provider network; (3) ≥75 CHWs certified by the state with specialized certifications in BH, DSMP/CDSMP and PEARLS facilitation, PRAPARE SDOH-screening competency, intraoral-camera oral-disease screening, kinship and postpartum-BH navigation, and structured apprenticeship placement on EMS care teams (Crisis to Care Components 1 and 2 — Medicaid-billable for the chronic-disease and BH portions of their scope); (4) 15 Tele-Wellness Navigators trained and embedded as the cross-pillar tele-care anchor at each AAAIL partner site; and (5) a permanent statewide community of practice through the expanded twice-monthly Project ECHO. The workforce produced will, in turn, deliver ≥3,000 tele-behavioral-health visits, graduate ≥956 older adults from DSMP/CDSMP/PEARLS, complete > 3,000 CHW-led intraoral-camera screenings (triaging suspected disease into the 3 university teledentistry hubs), provide ≥ 250 kinship caregiving and post-partum support to grandparents and intergenerational families in every AAAIL service area, and contribute to a measurable and significant reduction in avoidable EMS calls and ED visits among older adults. First budget period request (15 months): $14,071,327. Total Potential Five-Year Request: $56,285,308.

1. Rationale and Statement of Need

1.1 The workforce gap is the binding constraint

KY is the 10th most rural state in the nation, with 41.6% of its 4.5 million residents (≈1.87M people) living in 109 rural and non-metropolitan counties. KY ranks 41st of 50 states in overall health, 43rd in social and economic factors, and consistently among the ten worst states for diabetes prevalence and diabetes-related mortality. BH workforce shortages place 107 of KY's 120 counties under federal Health Professional Shortage Area (HPSA) designation, and 91.7% of counties are ambulance deserts.

These statistics describe the consequence; the cause and the lever is workforce. Although rural areas account for 20% of the population, less than 10% of BH providers (psychiatrists, psychologists, LCSWs, counselors, MFTs, PMHNPs) serve these communities, with a projected decline in supply of these professionals in 10 years. Geriatric-trained therapists are even scarcer. Free Diabetes Self-Management Education and Support (DSMES) is unavailable across most rural counties, and only 0.4% of KY adults with diagnosed diabetes engaged in DSMES in 2023 not because the programs are ineffective, but because there are too few trained facilitators to deliver them. PEARLS, the most rigorously evaluated lay-led depression-care program for older adults, is delivered in very few only one organizations in the entire state, of which UofL Trager Institute is one. Even where Medicare and Medicaid telehealth flexibilities now permit reimbursable virtual therapy visits, rural older Kentuckians cannot benefit if no trained facilitator with geriatric and remote-delivery competencies is on the other side of the screen. The same workforce gap holds across the other RHTP pillars: rural EMS faces a workforce gap so severe that 21% of prehospital providers will not renew their license in KY and the number of new certified paramedics is less than the number leaving the workforce; rural dental access is constrained by hygienist and dentist shortages so severe that 32 counties have dentist-to-population ratios above 1:5,000; and maternal-care deserts now classify nearly 46% of KY counties.

The picture is sharper still for rural older Kentuckians. Adults age 65+ make up roughly 18% of KY's population, and that share is highest in the same Appalachian and far-Western counties where workforce shortages are deepest. Rural older adults experience higher rates of late-life depression, anxiety, and complicated grief than their urban counterparts, yet fewer than half of older adults with a diagnosable mental health condition receive any treatment, a gap that widens further in rural areas. They also carry a disproportionate burden of multiple chronic conditions, with diabetes prevalence exceeding 20% and one in two older Kentuckians with diabetes also reporting depression. Older men in rural KY have among the highest suicide rates in the United States. The same workforce gap that limits BH access for the general population is therefore most consequential for older adults, who need geriatric-trained, dementia-informed, and culturally-competent providers delivering care close to home The same older adults are the heaviest users of EMS, the most affected by oral-disease neglect, and often the kinship caregivers shouldering the consequences of a maternal-health gap in the next generation.

1.2 The specific workforce competencies that are missing

The workforce gap is not only a shortage of bodies; it is a mismatch between the training new professionals receive and the clinical and community-facing skills rural older adults require. This initiative is designed around the following geriatric-specialized competencies that are not consistently produced by KY's BH, community-health-worker, and EMS training pipelines today:

- Brief, evidence-based tele-mental-health interventions calibrated for older adults: behavioral activation, problem-solving therapy, CBT for late-life anxiety, late-life depression interventions, grief

response support, caregiver stress and respite counseling, motivational interviewing, and brief alcohol/SUD interventions delivered remotely (Pillar 3 of RHTP).

- Late-life depression and anxiety detection and treatment, including suicide risk assessment in older men (a population with the highest suicide rate in the U.S.) and grief and bereavement support (Pillar 3 of RHTP).
- Dementia-friendly engagement, cognitive screening, and the ability to distinguish cognitive impairment from depression — competencies essential for any provider seeing patients aged 65+ (All pillars of RHTP).
- Trauma-informed care for older adults, including elder abuse and neglect identification, ageism in care delivery, and Appalachian and rural cultural humility (All pillars of RHTP).
- Group facilitation and fidelity-based delivery of evidence-based chronic disease self-management programs (DSMP, CDSMP) and PEARLS — the specific CHW competencies the RHTP needs in every rural community (Pillar 1 of RHTP).
- Care coordination across primary care, the AAAIL aging-services network, caregivers, and the TeleHub, including motivational interviewing and warm-hand-off skills (Pillar 1 of RHTP).
- Social determinants of health screening using PRAPARE (and related instruments) for use on EMS care teams, paired with the post-response case-management activities the state has explicitly named for CHWs (Pillar 5 of RHTP).
- Oral-disease screening using intraoral cameras, image capture, and triage protocols into the teledentistry hubs the Commonwealth plans to fund at KY's 3 dental colleges (UofL, UK & Pikeville)— competencies modeled on existing lay-screener training programs in dentistry (Pillar 4 of RHTP).
- Kinship-caregiver and postpartum behavioral-health navigation for grandparent caregivers in AAAIL Grandparents Raising Grandchildren programs and through both the national and KY's Family Caregiver Support Programs and FRYSCs (Pillar 2 of RHTP).
- Geriatric-care content for emergency response: dementia-aware emergency response, polypharmacy and falls assessment, end-of-life and palliative protocols, advance-care-planning lookup, and warm hand-off from EMS to behavioral-health and chronic-care services (Pillar 5 of RHTP).

Beyond producing this competency set, the workforce being trained is positioned to support transitions of care for rural older Kentuckians returning home from hospital and skilled-nursing-facility stays. AAAIL-employed CHWs and Tele-Wellness Navigators coordinating with TeleHub clinicians, primary care, EMS care teams, and aging-services case managers are well placed to follow patients through 30- and 90-day post-discharge windows when fall risk, medication errors, and unmanaged depression most often drive avoidable rehospitalization. Embedding tele-BH, DSMP/CDSMP, PEARLS, and CHW Social Determinants of Health (SDOH) navigation into AAAIL post-discharge follow-up is a measurable opportunity to reduce ED revisits and rehospitalizations and to keep older adults living independently at home.

1.3 Area Agencies on Aging and Independent Living (AAAILs) — the strategic cross-pillar partner and the professional home for this workforce

AAAILs are positioned to serve as valuable strategic partners in advancing KY's Rural Health Transformation Plan across all identified pillars, particularly in efforts focused on chronic disease management among older adults, persons with disabilities, and underserved rural populations. Rural communities throughout KY experience disproportionately high rates of chronic conditions such as

diabetes, hypertension, cardiovascular disease, obesity, and dementia, while simultaneously facing barriers related to transportation, healthcare workforce shortages, limited specialty care access, and social isolation. These same barriers also affect access to oral healthcare, BH services, emergency response systems, and maternal health supports, contributing to poorer health outcomes and widening disparities across generations. Because AAAILs already maintain strong community connections and regional service networks, they are well-positioned to help bridge the gap between healthcare systems and community-based supports that influence long-term health outcomes. Their experience coordinating services for older adults, caregivers, and vulnerable populations complements clinical care models by helping address social determinants of health, improve care navigation, and increase engagement in preventive and self-management services.

AAAILs are strong implementation partners because of their established relationships with local organizations, healthcare providers, senior centers, faith communities, emergency response stakeholders, and rural service networks across KY. Their infrastructure and community presence support the expansion of evidence-based chronic disease interventions, oral health education and referral initiatives, BH outreach and navigation services, caregiver supports, and age-friendly care models in areas where healthcare access is often limited. In partnership with emergency medical services (EMS), AAAILs help strengthen community paramedicine efforts, improve follow-up care after emergency events, reduce avoidable hospital utilization, and connect high-risk individuals to ongoing supports that improve health stability. Additionally, while AAAILs traditionally focus on aging populations, their community-based expertise and cross-sector partnerships also support intergenerational maternal health initiatives through family caregiver education, intergenerational support programs, social service coordination, and resource navigation in underserved rural communities where access to maternal and family health services remains limited. Involving AAAILs in the Rural Health Transformation Plan strengthens opportunities for coordinated, person-centered care while helping healthcare systems better reach vulnerable rural populations outside traditional clinical settings. ANCHOR demonstrates how AAAILs can offer a promising pathway for expanding community engagement, improving continuity of care, and strengthening integrated systems of support throughout rural communities.

Workforce strategies fail in rural KY when newly trained professionals have nowhere durable to practice. KY's 15 ADDs each house an AAAIL with statutory responsibility under the Older Americans Act for coordinating aging services across their service area. Collectively, AAAILs operate or fund a network of provider organizations and senior centers that are the most familiar, trusted gathering places for rural older adults. AAAILs provide the sole infrastructure with both statewide rural reach and an ongoing relationship with the older-adult population; they connect people to information, referrals, and services to stay independent; help individuals navigate long-term services and supports (LTSS) and plan for care; support families and caregivers with resources, planning, and respite through the KY and National Family Caregiver Support programs; and promote aging in place and community living.

By tying the workforce being produced through this initiative to AAAILs, senior centers, and the wider aging network as employers focusing on health navigation and chronic-disease management (CHWs and Tele-Wellness Navigators) and as virtual practice settings (BHWET-trained therapists working from the TeleHub connecting with older-adult patients in AAAIL equipped private rooms), the initiative addresses the retention problem that has historically defeated rural workforce investments. Trainees do not have to relocate to a metro health system to use their training; the practice is in their hometown. The RHTP narrative explicitly identifies AAAILs, ADDs, and senior centers as Key Stakeholders for the Rural Community Hubs for Chronic Care Innovation initiative, and identifies *"EMS and CHW Training Organizations"* as Key Stakeholders for the From Crisis to Care initiative. Trager — a federally-funded BHWET training site, ACL

master-trainer authority for DSMP/CDSMP/PEARLS, and convener of every KY AAAIL through Project ECHO — is exactly the kind of CHW training organization the state has named. This proposal converts those identifications into a workforce-development engine that serves multiple RHTP initiatives at once.

1.4 The older adult is the unifying force across all five RHTP pillars

Older Kentuckians do not experience the RHTP's five pillars as separate problems. The same rural older adult is simultaneously at risk of diabetes and obesity (Rural Community Hubs), late-life depression and anxiety (Rapid Response to Recovery), oral disease and tooth loss (Rooted in Health), kinship caregiving stress and grandchild-rearing responsibility (PoWERing Maternal & Infant Health), and avoidable EMS calls driven by falls, polypharmacy, and dementia (From Crisis to Care). The conditions are coupled inside the person. Producing a workforce trained for one pillar without the others under-performs on all of them; producing a workforce trained across the older-adult experience yields compounding gains.

BH and chronic disease are tightly coupled

Roughly one in two older Kentuckians with diabetes also experiences clinically significant depression, and the relationship runs in both directions, according to the CDC. Untreated depression undermines the self-management behaviors on which diabetes and other chronic-disease outcomes depend — medication adherence, daily glucose monitoring, exercise, healthy eating, and adequate sleep. The chronic-disease burden — including fatigue, pain, declining function, fear of complications, and shrinking social networks — accelerates depressive symptoms, social withdrawal, and disengagement from care. The result is a self-reinforcing cascade that drives both behavioral-health crises and avoidable medical events: emergency-department visits, hospitalizations, rehospitalizations, premature loss of independence, and elevated suicide risk that already carries among the highest age-specific suicide rates in the United States.

A workforce that addresses one condition without the other will under-perform on both. A workforce trained in both — clinical depression and anxiety care delivered through tele-mental-health, paired with community-based chronic-disease self-management and lay-led depression care — produces compounding gains. Every diabetes self-management cohort that also reduces depression symptoms moves both HbA1c and PHQ-9 in the same six-week window. Every late-life depression intervention that improves activation, sleep, and motivation makes diabetes self-management possible the next month. This is why the same workforce — BH-trained therapists practicing through the TI-IFC TeleHub, AAAIL-employed CHWs certified in DSMP, CDSMP, and PEARLS, pre-licensure SW and Nursing health navigators, and Tele-Wellness Navigators bridging the two — is deployed against both anchor conditions simultaneously.

Oral disease and dental access compound chronic disease and BH

Untreated oral disease in older adults is independently associated with worsened diabetes control, increased cardiovascular risk, malnutrition, depression, and avoidable ED visits for non-traumatic dental pain; KY reports $44M in ED costs for those visits alone. Rural older adults face the steepest barriers to dental care: 42.4% of KY adults did not visit a dentist in the past year, and rural Appalachian counties have the lowest dental visit rates and the highest rates of complete tooth loss among seniors. Embedding intraoral-camera screening into the existing CHW visit at AAAIL senior centers and triaging suspected disease into the potential teledentistry hubs at KY's 3 dental colleges (UofL, UK & Pikeville) (separate proposal to RHTP) makes the same workforce a rural spoke for the dental pillar without adding new buildings, new staff, or duplicating the multi-university dental hygienist application that is already addressing the hygienist-training side of Rooted in Health.

Kinship caregiving sits at the intersection of maternal, behavioral, and aging-services need

Grandparent caregivers are often the first to absorb the impact of a mother's unmet needs — substance use disorder, untreated mental health, trauma, incarceration, or serious maternal health complications. BH

sits at the heart of why these kinship families form and why they need sustained, coordinated support. The same CHWs that ANCHOR trains for chronic-disease and behavioral-health work are uniquely positioned to support kinship families through AAAIL Grandparents Raising Grandchildren programs, KY's Family Caregiver Support Program, the National Family Caregiver Support Program, and FRYSCs. A CHW can help a grandmother access treatment for her daughter, schedule BHcare for a grandchild, coordinate transportation to a postpartum visit, and connect the family to benefits, childcare, and legal support which are services that align directly with PoWERing Maternal & Infant Health's postpartum focus (more than 50% of maternal mortality occurs between 43 days and 12 months postpartum).

Emergency care for older adults is the proximal consequence of every other gap
Falls, polypharmacy, unmanaged depression, dementia-related crises, and dental pain are leading reasons rural older adults are picked up by EMS or transported to the ED. The workforce ANCHOR produces — CHWs delivering chronic-disease self-management, PEARLS, oral screening, kinship navigation, and post-discharge follow-up — reduces those upstream drivers. And the workforce ANCHOR places **on EMS care teams** closes the post-response case-management loop the state has named as essential for transforming rural EMS from a transport service into a prevention-and-coordination service.

2. Why Trager Is Positioned to Lead This Workforce Initiative

The Trager Institute is uniquely qualified to lead this work because the four assets a rural geriatric workforce initiative requires — an accredited training pipeline, master-trainer authority for the relevant evidence-based programs, a clinical practice setting where graduates can immediately deploy, and a statewide community of practice connecting every AAAIL — are all already operational and federally funded at Trager. Rather than asking the Commonwealth to underwrite a new training system from a blank sheet of paper, RHTP funds will scale and connect workforce assets that HRSA, ACL, and the University of Louisville have already invested in over the past decade.

Among those federally funded assets, Trager's HRSA Geriatric Workforce Enhancement Program (GWEP) is directly relevant to this initiative. The Trager GWEP currently trains over 3,000 health-care professionals each year — including physicians, nurses, pharmacists, dentists, social workers, caregivers, and community partners — in age-friendly and dementia-friendly practice across 112 training sites statewide. The program has established three FlourishCare Centers of Excellence (located in the KIPDA, BRADD, and CVADD regions) that already serve as practice and dissemination hubs for geriatric-specialized care. The GWEP's curriculum, dementia-friendly content, age-friendly health systems framework, and Centers of Excellence are the geriatric clinical-content backbone the BH geriatric concentration will draw on. RHTP funds will not duplicate this infrastructure, they will expand and scale it into all 15 AAAILs and into a permanent rural-serving workforce.

2.1 An accredited BH training pipeline

Trager's HRSA BH Workforce Education and Training (BHWET) program currently trains 48 master's-level BH trainees per cohort across SW, MFT, and PMHNP programs. Trainees receive $25,000 stipends, eight months of TeleHub-based experiential training, structured supervision through the TI-IFC Supervision Model, simulated interprofessional case management experiences, Project ECHO sessions, and dedicated trauma-informed-care preparation. Trager also holds an active HRSA BHWET Paraprofessional grant — a complementary federal training pipeline that focuses on community-based behavioral-health support roles, including peer-recovery coaches, behavioral-health case managers, and CHWs embedded in behavioral-health teams. This dual BHWET portfolio gives Trager institutional credibility and operational infrastructure

for both master's-level professional and paraprofessional behavioral-health workforce production, the foundation on which the CHW apprenticeship model described in Section 3.4 is built.

Under this RHTP initiative, Trager will add a **Geriatric Tele-BH Concentration** to BHWET training — a new, structured competency track covering age-friendly tele-mental-health, brief problem-solving therapy and behavioral activation for rural older adults, late-life depression and anxiety, suicide risk assessment, dementia-informed engagement and cognitive screening, elder-abuse identification, motivational interviewing for chronic-disease behavior change, and PEARLS facilitation. Each cohort will graduate an estimated 15 professional BH trainees from SW, MFT, and PMHNP; 30 pre-licensed SW and nursing trainees; and 15 state-certified CHWs prepared to serve rural older Kentuckians from day one.

2.2 Master-trainer authority for the CHW evidence-based programs

Through Trager's ACL FlourishCare Evidence-Based Program Initiative, the Institute holds active Stanford Self-Management Resource Center licensure to deliver and train others in DSMP and CDSMP and is the only organization in KY that has continuously delivered the PEARLS program for older adults with depression. Trager has at least one PEARLS Master Trainer and additional certified facilitators on staff and has been certified by Stanford and the PEARLS national office to train new facilitators. This means the entire CHW pipeline — every facilitator certification, every recertification, every fidelity observation can be produced in-state by Trager, without out-of-state travel, contracted third-party trainers, or programmatic delays. It is the rarest and most operationally important authority KY has available for this work.

For the foundational (Tier 1) CHW competency training that precedes the BH-specialized apprenticeship and evidence-based program certification, Trager is partnering with the Appalachian KY Health Care Access Network (AKHCAN), a Mount Sterling-based nonprofit whose 40-hour Tier 1 basic CHW training is approved by the KY Department of Public Health Office of CHWs. AKHCAN's curriculum, delivered in person and virtually by experienced healthcare professionals through simulations, case studies, and rural-community real-world scenarios, has deep roots in Appalachian KY, with a structured recruitment program at regional high schools. Together, AKHCAN and Trager produce a complete CHW workforce pipeline: AKHCAN delivers the foundational competency training, and Trager delivers the specialized BH training paired with DSMP, CDSMP, and PEARLS evidence-based program certifications, supervised apprenticeships at the 15 AAAILs (and, under ANCHOR, on rotation with EMS care teams), and ongoing Project ECHO continuing education.

2.3 A clinical practice setting purpose-built for the workforce being produced

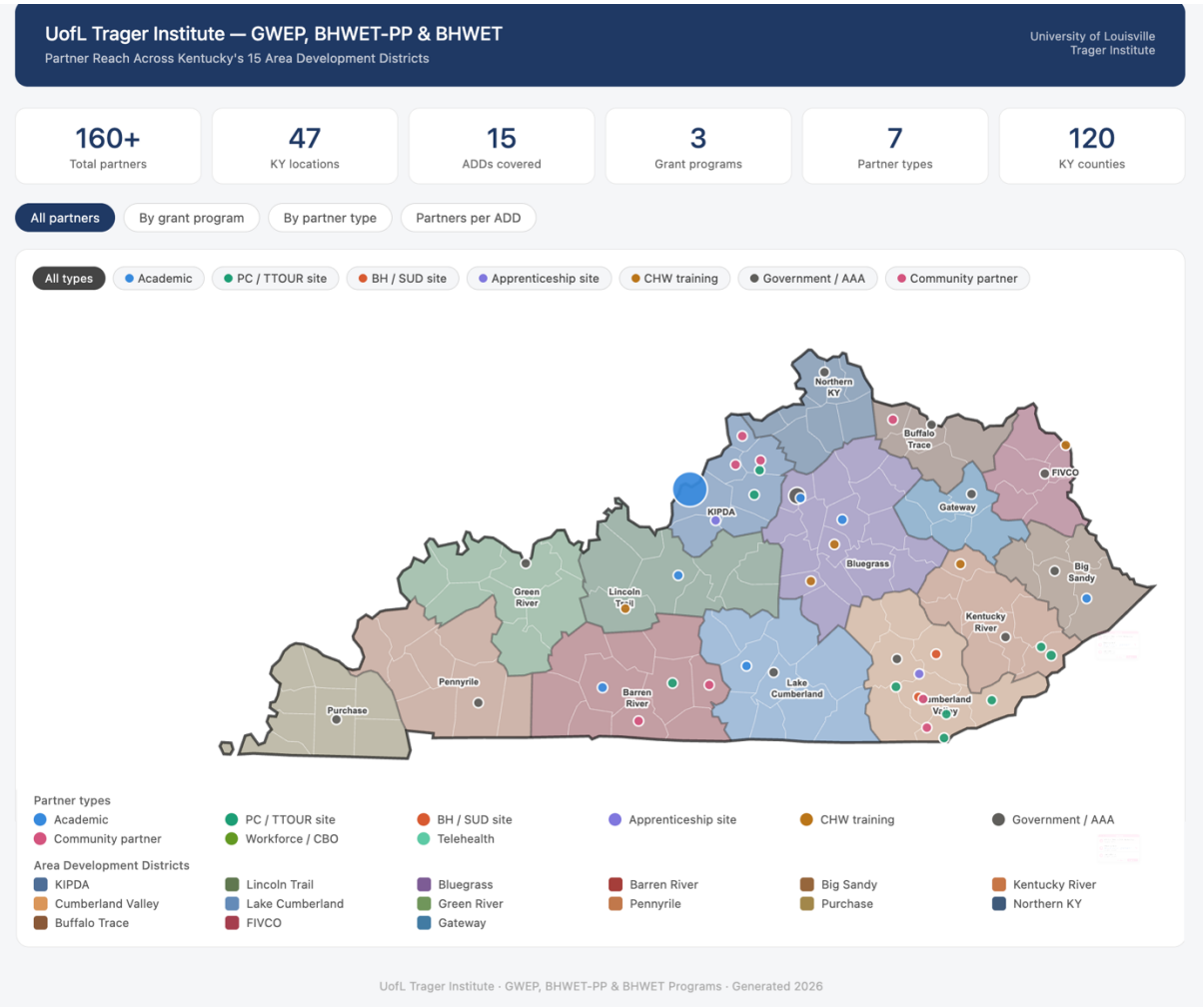
A workforce pipeline without a place to practice is not a workforce. The TI-IFC TeleHub is a fully operational, CARF-accredited virtual BH hub, physically located within UofL's Optimal Aging Clinic and designed expressly to integrate BH into primary and community-based care across rural KY. The TeleHub conducts tele-BH assessments, delivers brief evidence-based interventions, coordinates with CHWs and peer supports for social needs, and arranges psychiatric consultations through UofL Psychiatry and Family Medicine. It already integrates with KY Health Information Exchange (KHIE) for EHR interoperability and with the KY Department of BH, Developmental and Intellectual Disabilities (DBHDID) for statewide BH policy alignment. Newly trained BH geriatric-concentration graduates can immediately practice through the TeleHub, billing under TeleHub credentials, supervised by TeleHub clinical leads, and consulting with TeleHub psychiatry. Adding rural senior centers and other AAAIL provider partners as authorized spoke sites (and, under ANCHOR, as teledental spoke sites feeding the three-university teledentistry hubs and as tele-consultation partners for the From Crisis to Care Treat-in-Place model) is an incremental — not foundational — expansion of an infrastructure already designed for the workforce we are training.

2.4 A statewide community of practice already convening every AAAIL (Project ECHO)

Trager has, for several years, convened a monthly Project ECHO for Older Adults that is attended by direct-care workers from every one of KY's AAAILs. ECHO is a hub-and-spoke knowledge-sharing community in which AAAIL staff present cases, receive specialist input, and share what is working in their districts — exactly the continuous-learning structure a distributed rural workforce needs. Every AAAIL leader and many of their case-management staff already know Trager and have an existing trusted relationship with the proposed program team. Under this initiative, ECHO will expand to a twice-monthly cadence (one BH session, one chronic-disease session, with rotating modules on geriatric-EMS coordination, oral-disease screening, and kinship-caregiver navigation) and become the formal continuing-education and quality-improvement engine for every BH professional, CHW, pre-licensure trainee, and Tele-Wellness Navigator in the program, the workforce equivalent of the rural ED's grand rounds.

2.5 Aligned partners and statewide infrastructure

Trager brings existing statewide partnerships that strengthen this workforce strategy. All the partnerships are illustrated in the map below



Locally we partner with UofL Health (academic health system) and UofL Peace Hospital (inpatient BH referral pathway). Statewide we partner with the KY Coalition for Healthy Communities (KCHC) for workforce recruitment and community education; Mountain Comprehensive Health Corporation (FQHC

anchor in Eastern KY); the Department of Public Health Office of CHWers and the KY Association for CHWers – dedicated to the CHW workforce growth in KY; the Department for Aging and Independent Living (DAIL) — committed to statewide DSMP infrastructure; KHIE; and DBHDID. Under ANCHOR, partnerships are formally extended to: (a) EMS partner agencies that hold KBEMS-approved hands-on skills training certification, for the CHW EMS-team apprenticeship pathway; (b) the three KY dental colleges (UofL; UK & Pikeville) that will operate the teledentistry hubs (separate potential initiative under the RHTP), with ANCHOR's CHW intraoral-camera screening at AAAIL spoke sites as the rural spoke feeders; and (c) KY's Family Caregiver Support Program, the National Family Caregiver Support Program, and the FRYSCs, which together form the trusted kinship-and-family relationship infrastructure on which the PoWERing Maternal & Infant Health adjacent contribution rests. The initiative will coordinate operationally with the Commonwealth's Rural Community Hubs and the centralized tele-BH hub identified in the RHTP narrative, ensuring this workforce strategy complements, rather than duplicates, the broader KY plan.

3. The Initiative: A Geriatric-Specialized Rural Workforce, Trained and Placed Across 15 AAAILs

3.1 Model overview: train → embed → equip → deliver

The initiative is structured as a four-stage workforce model. Training and placement are the primary objective; the practice setting and the services delivered are the durable outcomes that prove the workforce is in place and that justify continued investment.

- **Stage 1 (TRAIN)**:*Three coordinated training pipelines.* The BH pipeline runs each BH professional cohort (SW, MFT, PMHNP) through the Geriatric Tele-BH Concentration: didactic modules, simulated older-adult tele-mental-health cases, supervised TeleHub rotations, PEARLS facilitator certification, and Project ECHO. The pre-licensure training pipeline trains BSWs, foundational MSWs, and BSNs in health navigation, care coordination, and age-friendly whole-health care for older adults, with PEARLS/CDSMP/DSMP facilitator certifications layered on top. The CHW pipeline trains AAAIL-employed Community Health Workers as DSMP/CDSMP leaders and PEARLS facilitators through Trager's licensed master trainers, with required fidelity observation, booster training, and recertification on Stanford and PEARLS national schedules; under ANCHOR the CHW curriculum adds PRAPARE SDOH screening, intraoral-camera oral-disease screening, kinship and postpartum-BH navigation, and geriatric-care content for emergency response.
- **Stage 2 (EMBED)**: *Embedding the workforce in rural-serving practice*. Trainees from the BH geriatric concentration are placed into the Trager TI-IFC TeleHub clinical roster, where they practice under TeleHub credentialing and bill through TeleHub-authorized payer pathways while continuing supervision and ECHO participation. Pre-licensed SWers and nurses are hired as health navigators at the AAAILs and wider provider network sites. CHWs complete BH-focused apprenticeships at the AAAILs and an apprenticeship rotation on EMS care teams. CHWs are continuously employed by their home AAAIL or a wider provider-network site, with the AAAIL or network site serving as the long-term employer of record.
- **Stage 3 (EQUIP**): *Each AAAIL equips the practice setting.* Each of the 15 AAAILs uses its annual subaward to partner with at least one senior center or other appropriate provider within the aging network to designate or renovate a private, HIPAA-compliant tele-BH room (acoustic-privacy door, telehealth-grade video, reliable broadband) and a group-workshop space for DSMP/CDSMP; the same private rooms become teledental spoke sites with the addition of an intraoral-camera kit and

capture/portal software. The space exists for the workforce; without it, training does not convert to care.

- **Stage 4 (DELIVER)**: *Workforce-produced services.* With workforce trained and placed and space equipped, BH-trained therapists deliver scheduled tele-BH visits (brief interventions, late-life depression and anxiety care, suicide risk assessment, grief, brief alcohol/SUD interventions) with TeleHub psychiatry consultation as indicated. Pre-licensed trainees provide health navigation and care coordination. CHWs deliver six-week DSMP/CDSMP cohorts and the eight-session PEARLS program, complete intraoral-camera screenings triaged into the three-university teledentistry hubs, support Grandparents Raising Grandchildren programming and Family Caregiver Support / FRYSC referrals and contribute PRAPARE SDOH screening and post-response case management on EMS care teams. The volume of services delivered is the ongoing proof that the workforce we trained is at work.

3.2 Statewide reach: a workforce in every AAAIL, in every rural county

AAAILs are the only entities with the geographic mandate, statutory authority, and existing relationship with the older-adult population to ensure equitable rural placement of this workforce. Each of KY's 15 ADDs/AAAILs will receive an equitable annual subaward for five years to host the workforce produced by this initiative — a CHW (Trager-certified facilitator), a Tele-Wellness Navigator, and an equipped practice setting that BH-trained therapists serve through the TeleHub. AAAIL subawards are calculated using a transparent, equitable formula modeled on the federal Older Americans Act Intrastate Funding Formula (45 CFR 1321.49): a $250,000 base award per AAAIL, plus $15,000 per rural county served, plus $1,000 per 1,000 older adults in the service area. This formula balances a fixed-cost floor (so every AAAIL can stand up the program, hire and supervise CHWs, and deliver workshops) with workload-sensitive scaling for geographic and demographic burden. The subawards intentionally avoid a competitive selection model: every rural KY community deserves a trained workforce, not just the districts most able to compete for funding.

The 15 AAAILs are listed below; specific senior-center or other appropriate network partners in each district will be finalized in Year 1, prioritizing facilities with reliable broadband, available private space, and existing congregate programming.

AAAIL	Region	Rural Counties Served (illustrative)
Barren River	South-Central KY	Allen, Barren, Butler, Edmonson, Hart, Logan, Metcalfe, Monroe, Simpson, Warren
Big Sandy	Eastern KY (Appalachia)	Floyd, Johnson, Magoffin, Martin, Pike
Bluegrass	Central KY	Anderson, Bourbon, Boyle, Clark, Estill, Franklin, Garrard, Harrison, Jessamine, Lincoln, Madison, Mercer, Nicholas, Powell, Scott, Woodford
Buffalo Trace	Northeastern KY	Bracken, Fleming, Lewis, Mason, Robertson
Cumberland Valley	Eastern KY (Appalachia)	Bell, Clay, Harlan, Jackson, Knox, Laurel, Rockcastle, Whitley
FIVCO	Eastern KY	Boyd, Carter, Elliott, Greenup, Lawrence
Gateway	Northeastern KY	Bath, Menifee, Montgomery, Morgan, Rowan
Green River	Western KY	Daviess, Hancock, Henderson, McLean, Ohio, Union, Webster

KIPDA	North-Central KY	Bullitt, Henry, Oldham, Shelby, Spencer, Trimble (rural counties)
Lake Cumberland	South-Central KY	Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor, Wayne
Lincoln Trail	Central KY	Breckinridge, Grayson, Hardin, Larue, Marion, Meade, Nelson, Washington
Northern KY	Northern KY	Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen, Pendleton (rural)
Pennyrile	Western KY	Caldwell, Christian, Crittenden, Hopkins, Livingston, Lyon, Muhlenberg, Todd, Trigg
Purchase	Far Western KY	Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, McCracken, Marshall
KY River	Eastern KY (Appalachia)	Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry, Wolfe

The 15 AAAIL service areas, taken together, cover every KY county — including all 109 rural counties identified in the RHTP target population. The proposed AAAIL-anchored design is therefore the only multi-pillar geriatric workforce delivery model in the proposal landscape that achieves complete statewide rural coverage on day one.

3.3 What each AAAIL's subaward funds — workforce first

The subaward to each AAAIL is structured to fund the workforce first and the practice setting second. Required uses, with documented quarterly reporting to Trager, are:

- **Workforce:** Community Health Worker (≥2.0 FTE): hired and employed by the AAAIL, certified by Trager-licensed master trainers as a DSMP/CDSMP leader and PEARLS facilitator, with PRAPARE SDOH-screening competency, intraoral-camera oral screening competency, kinship and postpartum-BH navigation training, and structured apprenticeship rotation on a EMS partner team.
- **Workforce:** Tele-Wellness Navigator (≥1.0 FTE): trained by Trager in tele-BH workflow, teledental image capture and triage, health navigation, HIPAA privacy, technology setup, scheduling, warm hand-offs, and rural older-adult engagement.
- **Workforce:** partial FTE for AAAIL program oversight, ECHO participation, and quarterly quality reporting (sustaining the workforce after initial training).
- **Practice setting (maintenance):** private telehealth room, acoustic treatment, ADA-compliant access, telehealth-grade camera, microphone, monitor, cart, broadband enhancement; group-workshop space for DSMP/CDSMP; intraoral camera and capture/portal software for teledental triage.
- **Workforce-enabled outreach and recruitment:** communication with primary care, faith communities, congregate meal sites, Family Caregiver Support and Grandparents Raising Grandchildren program rosters, FRYSCs, and AAAIL Information & Assistance lines so the trained workforce has a steady stream of older adults and kinship families to serve.
- **Participant supports that protect workforce productivity:** transportation vouchers (where applicable), and language access.

3.4 Who is in this workforce, and how Trager trains and supports them

BH professionals (stipend and tuition scholarship supported) — BH Geriatric Tele-BH Concentration

Master's-level SWers, MFTs, and PMHNPs are trained through Trager's BH program, completing the new Geriatric Tele-BH Concentration (Section 2.1). They are recruited from all schools across KY. Each participant receives a one-year $20,000 tuition scholarship and a $25,000 living stipend. On graduation, they have the potential to be hired as clinicians through the Trager TI-IFC TeleHub under TeleHub clinical supervision and billing pathways, with psychiatric consultation and prescribing through UofL Psychiatry residents and faculty integrated with the TeleHub. Each therapist serves rural older Kentuckians via the AAAIL-equipped senior-center tele-rooms meaning they can build a rural-serving caseload without relocating from a metro setting. Services will be billable through private insurance, Medicare and Medicaid. Those not hired in the TeleHub will be connected with our Rural Health Employment Success Coordinator to facilitate hiring within the Rural Aging Network.

Pre-licensure SW students (BSW / foundation MSW) and nursing students (BSN) — community-facing EBP delivery training (stipend and tuition scholarship supported)

Bachelor of Social Work (BSW), first-year (foundation) Master of Social Work (MSW) students, and Bachelor of Nursing (BSN) from schools across KY complete a structured Geriatric Community Health and Behavioral Wellness practicum alongside the BH geriatric concentration cohort. Each participating student receives a one-year $20,000 tuition scholarship and a $25,000 living stipend, with priority given to students from rural KY counties and to those committing to post-graduation rural practice.

What distinguishes this pipeline is its training emphasis on community-facing, evidence-based, structured group interventions which are the modalities AAAILs need most but rural KY has least. Each BSW / foundation MSW / BSN student is trained and certified in: PEARLS (Program to Encourage Active, Rewarding Lives for Seniors) facilitator certification — eight-session in-home or in-center late-life depression-care delivery; Stanford CDSMP (Chronic Disease Self-Management Program) leader certification — six-week small-group chronic-disease self-management cohorts; and Stanford DSMP (Diabetes Self-Management Program) leader certification — six-week diabetes-focused self-management cohorts. The same Trager-licensed master trainers who certify the AAAIL-employed CHWs (Section 2.2) deliver these certifications, so BSW / foundation MSW / BSN students earn portable, fidelity-monitored EBP credentials that follow them into post-graduation practice. Again, those not hired at AAAIL will be connected with our Rural Health Employment Success Coordinator to facilitate hiring within the Rural Aging Network.

This pipeline positions BSW, foundation MSW, and BSN students between the master's-level clinical workforce (BH-trained therapists treating clinical depression, anxiety, and complicated grief) and the AAAIL-employed CHW workforce (lay-led EBP facilitation in the community). It contributes social-work and nursing-rooted supervised facilitation depth, an academic-credit-bearing pathway into rural geriatric practice, and an additional permanent stream of PEARLS, CDSMP, and DSMP facilitators who can co-lead cohorts during their practicum and continue facilitating these EBPs as licensed social workers or nurses after graduation. Practicum students rotate through Trager TI-IFC TeleHub team meetings, AAAIL-equipped senior-center sites, and Project ECHO sessions; complete supervised co-facilitation hours toward fidelity sign-off; and are jointly supervised by a Trager-licensed master trainer (program fidelity and clinical content) and a Social Work or nursing field instructor. By systematically training pre-licensure SW and Nursing students in PEARLS, CDSMP, and DSMP in addition to the AAAIL-employed CHWs trained directly under this initiative, the program expands KY's permanent rural evidence-based program-facilitator pool well beyond the workforce produced inside the grant period.

Community Health Workers — AAAIL-employed, Trager-certified geriatric CHWs

Each AAAIL hires CHWs (first as apprentices and then as employees for a total of 2) who are local to the communities they serve, and Trager-licensed master trainers certify them in three evidence-based programs: Stanford DSMP, Stanford CDSMP, and PEARLS. Selection prioritizes candidates with prior community ties, lived experience with the populations served, and language/cultural fit. CHW-led delivery is essential for cultural fit, sustained engagement, and the long-term sustainability of the program after the grant period: CHWs are increasingly reimbursable under KY Medicaid pathways, and AAAILs have demonstrated capacity to retain CHW staff long-term through Older Americans Act funding once the workforce is established.

Building on Trager's partnership with the Appalachian KY Health Care Access Network (AKHCAN; see Section 2.2), the initiative establishes a structured CHW apprenticeship pathway that mirrors the supervised-clinical-practice approach used for the BH-trained BH professionals. Each AAAIL-employed CHWer first completes AKHCAN's 40-hour Tier 1 foundational CHW training (KY DPH-approved competency curriculum), which establishes a baseline scope of practice. Each apprentice then completes a paid, supervised apprenticeship at their home AAAIL — co-supervised by a Trager-licensed master trainer (clinical content and program fidelity) and the AAAIL's program manager (community delivery, scheduling, and operations). During the apprenticeship, CHWs earn their DSMP, CDSMP, and PEARLS facilitator certifications; complete PRAPARE SDOH-screening training; observe and progressively co-lead small-group cohorts under fidelity observation; participate in the twice-monthly Project ECHO community of practice; and integrate with their AAAIL's Tele-Wellness Navigator and the TeleHub clinical team.

Under ANCHOR, the CHW apprenticeship adds a structured rotation on EMS care teams in the apprentice's AAAIL service area.

Each CHW spends a designated period riding along with or co-located at the EMS partner agency, applying PRAPARE SDOH screening during post-response case management, connecting patients to medical and social resources, coordinating transportation, facilitating telehealth, and supporting remote monitoring. AKHCAN's Appalachian roots and effective high-school recruitment strategies give the foundational training cultural validity in the eastern KY AAAILs (Big Sandy, KY River, Cumberland Valley, FIVCO, Gateway).

Tele-Wellness Navigators — the AAAIL practice partner

Each AAAIL's Tele-Wellness Navigator is trained by Trager in tele-BH workflow, teledental image capture and triage, technology setup, HIPAA privacy practices, warm hand-offs to TeleHub clinicians and to the 3 university teledental hubs, scheduling, and engagement of older adults who may be apprehensive about virtual care. Navigators are recruited from the pool of pre-licensed trainees who connect the trained BH workforce with the older adults who need it.

Project ECHO as the continuous-learning home for the entire workforce

Trager's existing monthly Project ECHO for Older Adults will be expanded to a twice-monthly cadence: one session focused on BH for rural older adults (TeleHub clinicians and AAAIL Tele-Wellness Navigators), one focused on chronic disease self-management and PEARLS (CHWs, AAAIL program managers, partnering primary care), with rotating modules on geriatric-EMS coordination (co-attended by EMS partner agencies), oral-disease screening and teledental triage (co-attended by the three dental colleges), and kinship-caregiver and postpartum-BH navigation (co-attended by KY Family Caregiver Support staff and FRYSC coordinators). For this initiative ECHO is not an extra; it is the workforce's continuing-education and case-consultation home, and it is also where the workforce produced through this initiative will continue to grow and adapt long after the grant period ends.

Faculty and trainers
Trager and SON faculty and clinical supervisors lead the geriatric BH curriculum, with content contribution from UofL Geriatric Medicine, UofL Psychiatry, and the Trager Optimal Aging Clinic. Trager's PEARLS Master Trainer and Stanford DSMP/CDSMP master trainers lead the CHW pipeline. External subject-matter contributors include the Department of Aging and Independent Living (DAIL) (DSMP statewide infrastructure), DBHDID (BH workforce policy), KBEMS-recognized partner agencies (EMS-team apprenticeship and PRAPARE training), the three KY dental colleges (teledental triage protocols), and KY Family Caregiver Support Program leads.

3.5 How ANCHOR contributes to the RHTP system — multi-initiative mapping

ANCHOR is intentionally structured as a single coordinated initiative whose horizontal workforce backbone contributes to all named RHTP initiatives rather than living inside any single one. The contributions below are not five new sub-projects; they are five named expressions of one disciplined older-adult workforce strategy. Four are core contributions (ANCHOR owns the workforce and the model); one is an adjacency (ANCHOR strengthens a partner-owned pillar through coordinated effort and shared infrastructure).

3.5.A Rural Community Hubs for Chronic Care Innovation (core contribution)

ANCHOR operationalizes the Rural Community Hubs concept for older adults statewide. Trager-certified CHWs deliver DSMP, CDSMP, and PEARLS in senior centers and AAAIL-affiliated provider clinics across all 109 rural counties. Pre-licensed BSW/MSW and BSN students are additionally certified in DSMP/CDSMP/PEARLS, doubling the rural EBP-facilitator pool. Trager holds the master-trainer certifications required to credential the entire CHW and pre-licensure pipeline in-state; the expanded twice-monthly Project ECHO gains a chronic-care sub-track that becomes the continuous-learning home for every facilitator in the program.

3.5.B Rapid Response to Recovery — BH (core contribution)

ANCHOR delivers the older-adult-population complement to the state's centralized teleBH hub. The Trager TI-IFC TeleHub — already CARF-accredited and integrated with UofL Psychiatry consult pathways — serves as the practice setting for BHWET-trained therapists who graduate with a new Geriatric Tele-BH Certificate. Fifteen AAAIL-equipped private rooms across the Commonwealth become TeleHub spoke sites, staffed by AAAIL-employed Tele-Wellness Navigators trained in HIPAA workflow, scheduling, and warm hand-offs. The TI-IFC TeleHub is positioned to interoperate with the state's centralized tele-BH hub as that hub is built.

3.5.C Rooted in Health — Rural Dental Access (core contribution as the rural spoke)

ANCHOR positions itself as the rural spoke that feeds the proposed teledentistry hubs at KY's three dental colleges. Rather than duplicating the multi-university dental application that already addresses dental-hygienist training, ANCHOR trains CHWs to identify oral disease in older adults using intraoral cameras — modeled on existing lay-screener training in dentistry — and to capture images at the same AAAIL-equipped private rooms used for tele-behavioral-health visits. Suspected disease is triaged into the teledentistry hubs at UofL, UK, and Pikeville for diagnosis and treatment routing. CHWs assigned proportionate effort to LHD-led Public Health Dental Hygiene (PHDH) teams without LHDs needing to recruit and train CHWs from scratch.

3.5.D From Crisis to Care — Integrated EMS Response (core contribution)

Post-response case management — chronic-disease interventions, preventive education, post-hospital follow-up, social-resource navigation, transportation coordination, telehealth facilitation, remote monitoring — is already in ANCHOR's CHWer scope for older adults; under ANCHOR, CHWs spent part of their time with EMS teams in their AAAIL service area to support these functions. ANCHOR also adds geriatric-care

content modules (dementia-aware emergency response, polypharmacy and falls assessment, end-of-life and palliative protocols, advance-care-planning lookup, warm hand-off) to both the CHW curriculum and ECHO sessions co-attended by EMS partner agencies. Furthermore, the Trager TI-IFC TeleHub is positioned to serve as a tele-consultation partner for the Treatment in Place model when an EMS encounter with an older adult involves BH, dementia, or end-of-life care; AAAIL-affiliated provider clinics and senior-center spoke sites are credible Transport to Alternative Destination endpoints for non-acute older-adult encounters; and ANCHOR's CHW-led fall-prevention and chronic-disease self-management work directly reduces avoidable EMS demand.

3.5.E PoWERing Maternal & Infant Health (adjacent support through kinship caregiving and Family Caregiver Support partnerships)

Grandparents Raising Grandchildren programs within the AAAILs are uniquely positioned to address maternal and BH, because grandparent caregivers are often the first to absorb the impact of a mother's unmet needs — substance use disorder, untreated mental health, trauma, incarceration, or serious maternal-health complications. ANCHOR embeds behavioral-health education, peer support, counseling referrals, and trauma-informed resources into Grandparents Raising Grandchildren programming and uses CHWs as the connective tissue between maternal-health providers, behavioral-health organizations, AAAILs, and KY's existing Family Caregiver Support Program**,** National Family Caregiver Support Program**,** and FRYSCs **—** systems that already hold trusted relationships with kinship families across the Commonwealth. A CHW can help a grandmother access treatment for her daughter, schedule BHcare for a grandchild, coordinate transportation to a postpartum visit, and connect the family to benefits, childcare, and legal support — services that align directly with the initiative's postpartum focus (more than 50% of maternal mortality occurs between 43 days and 12 months postpartum). ANCHOR does not duplicate the state's maternal-care-team model; it strengthens the kinship-caregiver and postpartum-BH leg of it by building on KY's existing family-support infrastructure for a more integrated, family-centered approach that supports grandparents, parents, and children simultaneously.

4. Alignment with the KY Rural Health Transformation Plan

This initiative is, first and foremost, a Workforce Development initiative under the RHTP. It contributes meaningfully to four of the five named RHTP initiatives — Rural Community Hubs (Chronic Care), Rapid Response to Recovery (BH), Rooted in Health (Oral Health), and From Crisis to Care (Integrated EMS) — and adjacent-supports the fifth (PoWERing Maternal & Infant Health). The table below maps the initiative against RHTP priorities in that order.

RHTP Initiative / Workstream	How ANCHOR Contributes	Trager Asset
Workforce Development (PRIMARY horizontal anchor)	Trains and credentials a geriatric-specialized rural workforce: ≥75 BH professionals (Geriatric Tele-BH Concentration), ≥150 pre-licensure SW/Nursing students trained in health navigation + DSMP/CDSMP/PEARLS facilitation, ≥75 AAAIL-employed CHWs trained as specialized BH CHWs and certified as DSMP/CDSMP/PEARLS facilitators (with PRAPARE SDOH screening, intraoral-camera oral screening, kinship/postpartum navigation, and EMS-team apprenticeship). All clinical and non-clinical workforce categories explicitly named in the RHTP narrative. Creates sustained rural jobs across KY over five years and a permanent twice-monthly Project ECHO continuing-education home for the workforce.	BHWET, BHWET-Paraprofessional, GWEP, ACL Evidence-Based Programs Initiative; AKHCAN Tier-1 CHW partnership

Rural Community Hubs for Chronic Care Innovation (core contribution)	The CHW + pre-licensure workforce is deployed against diabetes and obesity through DSMP, CDSMP, and PEARLS in senior centers and AAAIL-affiliated clinics; senior centers and AAAIL-affiliated provider clinics are the explicit hub-and-spoke delivery setting the RHTP narrative names; Project ECHO chronic-care sub-track holds the workforce in continuous learning.	ACL master-trainer authority for Stanford DSMP/CDSMP and PEARLS; AAAIL infrastructure
Rapid Response to Recovery — BH (core contribution)	BHWET-trained therapists practice through the CARF-accredited TI-IFC TeleHub from 15 AAAIL-equipped spoke sites; this is the older-adult-population complement to the state's centralized tele-BH hub. Reduces avoidable ED behavioral-health utilization through earlier, lower-acuity intervention; integrates with UofL Psychiatry consult pathway.	TI-IFC TeleHub; HRSA BHWET; KHIE integration; DBHDID alignment
Rooted in Health: Rural Dental Access (core contribution as the rural spoke)	ANCHOR CHWs trained in intraoral-camera oral-disease screening at AAAIL senior-center spoke sites, with images triaged into the planned teledental hubs at KY's 3 dental colleges (UofL, UK,Pikeville). ANCHOR CHWs assigned proportionate effort to LHD-led PHDH teams.	AAAIL-equipped spoke sites; ACL master-trainer authority for CHW certification; Trager-led ECHO oral-health module
From Crisis to Care: Integrated EMS Response (core contribution to Components 1 and 2)	Post-response case management is provided by ANCHOR's CHWers, with CHWs embedded alongside EMS teams in AAAIL service areas. ANCHOR further strengthens this model through geriatric-focused training modules and ECHO sessions co-attended by EMS partners. Trager's TI-IFC TeleHub also support Treatment in Place encounters involving BH, dementia, or end-of-life care, while AAAIL-affiliated clinics and senior centers provide credible alternative destinations for non-acute older-adult encounters. ANCHOR's CHW-led fall-prevention and chronic-disease self-management efforts also help reduce avoidable EMS utilization.	BHWET Paraprofessional + AKHCAN Tier-1 CHW training; ACL master-trainer authority; AAAIL + EMS network
PoWERing Maternal & Infant Health (adjacent support)	Grandparents Raising Grandchildren programming in AAAILs, supported by KY Family Caregiver Support Program and National Family Caregiver Support Program; CHW navigation as the connective tissue between maternal-health providers, BH organizations, AAAILs, and FRYSCs; postpartum-BH pathway through the TeleHub for the 43-day-to-12-month postpartum window. Does not duplicate state maternal-care-team model; strengthens the kinship-caregiver and postpartum-BH leg.	AAAIL Title III-E Caregiver Support; Family Caregiver Support partnerships; FRYSC partnerships; TI-IFC TeleHub
Tech-Enabled Care & Data Interoperability	Uses the existing TeleHub–KHIE integration to give the trained workforce an interoperable record of care; participates in RHTP-defined open-source FHIR data interoperability infrastructure and the CMS Interoperability Framework; supplies quarterly workforce and outcome dashboard data into the RHTP Transformation Team; teledental triage records flow back to AAAIL Tele-Wellness Navigators for follow-up.	KHIE integration; TI-IFC TeleHub EHR; Trager evaluation dashboards
Sustainability and Public-Private Partnership	Designed for Year-6+ workforce retention and continued service through Medicare/Medicaid telehealth reimbursement, CHW Medicaid pathways, AAAIL Older Americans Act funds, and DAIL infrastructure; aligns with the RHTP's PPP/endowment vision so the workforce continues to practice after RHTP funding ends.	Medicare/Medicaid telehealth credentialing; OAA Title III-B/D/E; DAIL DSMP infrastructure

5. Five-Year Implementation Plan

Each year's targets lead with workforce milestones (trained, embedded, retained), with service-volume targets included as the downstream proof point.

Year	Focus	Key Workforce Activities	End-of-Year Workforce + Service Targets
Year 1 (Jul 2026 – Sep 2027)	Curriculum, Infrastructure & Cohort 1 training	Finalize BHWET Geriatric Tele-BH Concentration curriculum, simulation cases, and supervisor training; execute subawards with all 15 AAAILs; renovate/equip 15 senior-center practice settings (BH and teledental); expand Project ECHO to twice-monthly cadence; finalize TeleHub spoke-site, scheduling, and billing workflows; finalize MOUs with EMS partner agencies and with the three KY dental colleges; engage Family Caregiver Support and FRYSC partners.	Workforce: ≥15 BH geriatric-concentration graduates; ≥30 pre-licensed BSW/MSW/BSN trainees; ≥15 CHWs certified with completed AAAIL apprenticeship. Practice settings: ≥15 operational senior-center sites (BH + teledental). Services: ≥500 telehealth visits; ≥190 DSMP/CDSMP/PEARLS completers; ≥ 500 CHW-led intraoral screenings; ≥ 50 kinship caregiving and post-partum support to grandparents and intergenerational families; first EMS-team CHW apprenticeship rotations under way.
Year 2 (Oct 2027 – Sep 2028)	Cohort 2 training; multi-pillar activation	Cohort 2 BH professional, pre-licensed students, and CHW apprenticeships; all 15 senior-center sites fully operational, with expansion into additional sites in larger AAAILs; embed workforce quality dashboards (caseload, fidelity, retention) into AAAIL quarterly reporting; integrate primary-care referrals (UofL Health, MCHC, FQHC); billing for all telehealth services through TeleHub. Activate first wave of CHW EMS-team apprenticeship placements in 5 AAAIL service areas. Activate intraoral-camera oral-disease screening at all 15 sites; first teledental triage routing to the three-university hubs.	Workforce: same per-cohort as Y1 (≥15+30+15). Practice settings: expand to additional senior-center sites in the bigger ADD regions. Services: ≥1,000 cumulative telehealth visits; ≥382 DSMP/CDSMP/PEARLS completers Y1+Y2; ≥1,000 CHW-led intraoral screenings; ≥100 kinship caregiving and post-partum support to grandparents and intergenerational families; CHWs rotate through EMS teams.
Year 3 (Oct 2028 – Sep 2029)	Cohort 3 training; multi-pillar steady state	Cohort 3 BH professional, pre-licensed students, and CHW apprenticeships; statewide MOU with DAIL on DSMP licensure renewal; billing for all telehealth services through TeleHub; CHWs connected to primary-care and EMS-team billing pathways in ADD districts. CHW EMS-team apprenticeships extended to all 15 AAAIL service areas. First published workforce-outcomes brief.	Workforce: same per-cohort. Practice settings: same as Y2 plus second sites in 5 largest AAAILs. Services: scaling to mid-point trajectory; first measurable preventable ED visits reductions.
Year 4 (Oct 2029 – Sep 2030)	Cohort 4 training; sustain workforce	Cohort 4 BH professional, pre-licensed students, and CHW apprenticeships; structured retention strategy for all newly trained workforce; all operations reimbursed at the maximum possible;	Workforce: same per-cohort. Practice settings: same as Y3. Services: full-scale multi-pillar delivery.

		submit value-based payment proposals; expand caregiver-focused PEARLS arm in partnership with Family Caregiver Support and FRYSCs; begin transferring ECHO leadership to AAAIL-based co-facilitators.	
Year 5 (Oct 2030 – Sep 2031)	Cohort 5 training; hand-off & permanently embed	Cohort 5 BH professional, pre-licensed students, and CHW apprenticeships; BH geriatric concentration permanently embedded as a master's offering for social work and nursing; BH spoke sites become CARF-accredited satellite sites for enhanced billing opportunities; finalize Public-Private Partnership / endowment per the RHTP sustainability plan; transfer ongoing workforce infrastructure to a Trager–DAIL–AAAIL governance compact; final external evaluation focused on workforce retention and outcomes across all four core RHTP-initiative contributions.	Workforce cumulative: ≥75 BH therapists; ≥150 pre-licensed health navigators; ≥75 CHWs; geriatric concentration institutionalized. Services: ≥3,000 cumulative telehealth visits; ≥956 DSMP/CDSMP/ PEARLS graduates; ≥3,000 CHW-led intraoral screenings; ≥250 kinship caregiving and post-partum support to grandparents and intergenerational families; documented reduction in preventable EMS calls and ED visits. Sustainability plan executed.

5.1 Governance and Project Management

Trager will function as the lead organization, in partnership with UofL School of Nursing, UofL School of Dentistry, the 15 AAAILs and AKHCAN. The staffing plan shown in the budget narrative allows for 30 positions with a total of 15.45 combined FTE, with a dedicated Executive Team to lead the initiative. A statewide AAAIL Steering Committee composed of the Executive Team and one designated lead from each of the 15 AAAILs will meet monthly to set operational priorities, surface implementation barriers, and approve cross-AAAIL policies (such as common screening tools, common consent language, and common quality metrics). The initiative will report quarterly into the Commonwealth's RHTP Transformation Team and align with the broader statewide Public-Private Partnership architecture proposed in the RHTP narrative. Sub-committees coordinate the four core RHTP-initiative contributions: a Chronic Care sub-committee (Rural Community Hubs), a BH sub-committee (Rapid Response to Recovery), an Oral Health sub-committee (Rooted in Health, including the three dental colleges), and a Crisis to Care sub-committee (EMS partner agencies). A separate Maternal & Kinship Family work group convenes Family Caregiver Support and FRYSC partners for the adjacent contribution.

6. Evaluation, Metrics, and Continuous Quality Improvement

Trager will engage an internal evaluation team led by the Institute's Director of Evaluation. The evaluation uses a mixed-methods RE-AIM (Reach, Effectiveness, Adoption, Implementation, Maintenance) framework and follows a Plan-Do-Study-Act (PDSA) cadence. Because workforce development is the primary objective, evaluation leads with workforce metrics — quantity trained, fidelity of training, placement, retention, and continued practice — and then captures the service-delivery and patient-outcome metrics produced by that workforce, structured to feed back into state RHTP-initiative outcome dashboards.

Domain	Indicator	Y5 Target
Workforce — BH (Primary)	BH professional trainees graduated with the Geriatric Tele-BH Concentration (cumulative)	≥75

Workforce — BH	Pre-licensed BSW/MSW/BSN trainees graduated with health-navigation skillset and certifications as facilitators of CDSMP/DSMP/PEARLS	≥150
Workforce — BH	% of geriatric-concentration graduates practicing through TeleHub or rural-serving setting at 12 months post-graduation	≥80%
Workforce — BH	% of supervised cases passing geriatric-competency fidelity review	≥85%
Workforce — CHW (Primary)	AAAIL-employed CHWs completing apprenticeships in specialized BH CHW practice and certified by Trager master trainers in DSMP/CDSMP and PEARLS (cumulative; contributes to Crisis to Care Outcome 1)	≥75
Workforce — Chronic Disease Facilitator pool	Pre-licensed BSW/MSW/BSN and CHWs certified by Trager master trainers in DSMP/CDSMP and PEARLS	≥225
Workforce — CHW	% CHWs completing PRAPARE SDOH-screening competency	100%
Workforce — CHW	% CHWs completing structured EMS-team apprenticeship rotation	≥80%
Workforce — CHW	CHW retention at AAAIL and provider-network sites at 24 months post-certification	≥70%
Workforce — CHW	% of delivered DSMP/CDSMP/PEARLS sessions passing fidelity observation	≥90%
Workforce — ECHO	Twice-monthly Project ECHO sessions delivered with ≥1 attendee per AAAIL	≥95% of sessions
Workforce — Sustainability	% Y5 workforce salaries covered by reimbursement, OAA, and non-RHTP funds	≥60%
Reach	Unique rural older Kentuckians served by the trained workforce (any component)	≥7,000
Reach	Counties with ≥1 active senior-center delivery site staffed by trained workforce	All 109 rural counties
Effectiveness — BH (Rapid Response to Recovery)	TeleHub visits delivered to rural older adults	≥3,000 cumulative
Effectiveness — BH	PHQ-9 / GAD-7 reduction at 12 weeks (clinically meaningful)	≥45% of completers
Effectiveness — BH	PEARLS completers with ≥50% reduction in PHQ-9	≥55% of completers
Effectiveness — Chronic Care (Rural Community Hubs)	DSMP/CDSMP/PEARLS completers (75% completion fidelity)	≥956 cumulative
Effectiveness — Chronic Care	Mean HbA1c reduction at 6 months among diabetic completers	≥0.5 percentage points
Effectiveness — Chronic Care	Mean weight reduction at 6 months among completers with BMI ≥30	≥3% baseline weight
Effectiveness — Oral Health (Rooted in Health spoke)	CHW-led intraoral screenings triaged to 3 university teledental hubs (cumulative)	≥3,000

Effectiveness — Oral Health	% of triaged screenings with documented teledental follow-up	≥70%
Effectiveness — Crisis to Care	% of CHWs documenting PRAPARE SDOH screening on EMS-team encounters during apprenticeship rotation	≥80%
Effectiveness — Crisis to Care (Outcome 3 contribution)	Reduction in preventable hospital ED visits in served AAAIL service areas (baseline established Y1)	Year-5 target set Y1
Effectiveness — Maternal Adjacent	Grandparent caregivers in AAAIL Grandparents Raising Grandchildren programming receiving BH navigation through ANCHOR CHWs (cumulative)	≥250
Adoption	AAAILs continuously operating an active site with trained workforce	15/15
Equity	% participants from federally designated MUAs/HPSAs	≥80%
Patient Experience	Net Promoter Score / CG-CAHPS-equivalent	≥70

Data collection will leverage existing systems wherever possible. TeleHub clinical encounters flow through KHIE-integrated EHR; DSMP/CDSMP and PEARLS data are captured in the Stanford Self-Management Resource Center reporting platform and the PEARLS data system; intraoral-screening images and triage outcomes flow through the 3 university teledental platform; CHW EMS-team apprenticeship rotation data flow through the KY Board of Emergency Medical Services (KBEMS) partner reporting; AAAIL quarterly reports flow into the Trager evaluation dashboard. Outcomes will be reported quarterly to the Commonwealth's RHTP Transformation Team and published annually in a public-facing dashboard, with explicit cross-references to the state's named outcome metrics for each of the RHTP-initiative contributions.

7. Sustainability Beyond Year 5 — Keeping the Workforce in Place

Sustainability is engineered from Year 1 through four parallel pathways, each focused on workforce retention:

- Reimbursement diversification (workforce salary coverage). By Year 2, the TeleHub will operate completely under Medicare and KY Medicaid telehealth reimbursement for BH services, with senior centers credentialed as spoke sites through CARF-accredited spoke sites that will support enhanced reimbursement options. Trager will work with KY Medicaid and the MCOs to establish CHW reimbursement pathways for DSMP/CDSMP/PEARLS and for PRAPARE-based post-response case management on EMS care teams — converting grant-funded positions into reimbursement-funded positions and securing the trained workforce in rural KY.
- Older Americans Act and DAIL alignment. AAAILs will integrate Tele-Wellness Navigator and CHW positions into their Older Americans Act Title III-B, III-D, and III-E funding plans, leveraging DAIL's stated commitment to statewide DSMP infrastructure. The Title III-E caregiver-support funding stream specifically anchors the Maternal-adjacent CHW work with Grandparents Raising Grandchildren and Family Caregiver Support. AAAILs are durable, ongoing employers — the right institutional home for the CHW workforce we are producing.
- Permanent embedding of the BH Geriatric Tele-BH Concentration. By Year 5, the geriatric concentration becomes a permanent feature of master's-level behavioral-health training (Social Work, MFT, PMHNP) and a permanent BSN/BSW curricular concentration, independent of HRSA BHWET cycle funding — ensuring the pipeline of geriatric-competent therapists and pre-licensure facilitators continues indefinitely.
- Public-Private Partnership and endowment. ECHO, supervision, fidelity monitoring, master-trainer capacity, and the multi-pillar coordination infrastructure (teledental triage routing, EMS-team apprenticeship rotations, Family Caregiver Support partnerships) transfer to an independent non-profit governance compact jointly stewarded by Trager, DAIL, and AAAIL leadership, aligned with the RHTP-defined PPP architecture.

Board of Directors Training Overview
Racial Equity and Cultural Humility Principles

Purpose of This Training

This overview is intended to provide board members with a foundational understanding of racial equity and cultural humility principles as they relate to organizational leadership, governance, and inclusive service delivery. The concepts outlined below are designed to support respectful engagement, informed decision-making, and organizational accountability in diverse communities.

Understanding Cultural Humility and Racial Equity

Cultural humility and racial equity are ongoing approaches that encourage organizations and leaders to create environments that are fair, inclusive, and responsive to the needs of all individuals. These approaches emphasize self-awareness, respectful engagement, and continuous learning rather than assuming complete understanding of another person's experiences or background.

The goal is not perfection or expertise, but rather a commitment to thoughtful reflection, openness, and organizational improvement.

Key Principles

1. Lifelong Learning and Self-Reflection

Cultural humility encourages individuals to continuously reflect on their own experiences, assumptions, and perspectives. This includes recognizing that everyone brings individual experiences and unconscious biases into interactions and decision-making processes.

Key concepts include:

- Maintaining openness to learning from others
- Reflecting on personal perspectives and assumptions
- Recognizing that growth and understanding are ongoing processes.

2. Recognizing and Addressing Power Imbalances

Organizations and leaders should be mindful of how power and influence can affect communication, decision-making, and access to opportunities or services.

This principle encourages:

- Inclusive participation in discussions and planning
- Respect for diverse viewpoints and lived experiences.
- Creating opportunities for all voices to be heard

3. Institutional Accountability
Racial equity and cultural humility extend beyond individual interactions and include examining organizational systems, policies, and practices.

Organizations are encouraged to:

- Review policies and procedures for fairness and accessibility.
- Promote equitable opportunities within hiring, leadership, and service delivery.
- Foster transparency and accountability in organizational practices

4. Respectful and "Other-Oriented" Engagement
Cultural humility emphasizes approaching others with curiosity, respect, and openness rather than relying on assumptions or stereotypes.

This includes:

- Listening actively and respectfully
- Seeking to understand individual experiences
- Avoiding assumptions based on background or identity.

5. Organizational Modeling
Boards and leadership teams play a vital role in modeling inclusive values and practices throughout the organization.
Examples may include:

- Supporting inclusive organizational policies
- Encouraging respectful communication
- Promoting equitable access to programs, services, and opportunities

Important Training Concepts

Equity vs. Equality
While equality focuses on treating everyone the same, equity recognizes that individuals and communities may have different experiences, needs, or barriers. Equity seeks to ensure fair access and opportunity by recognizing and responding to those differences appropriately.

Understanding Implicit Bias
Implicit biases are unconscious attitudes or associations that may influence perceptions, interactions, or decisions.

Training in this area often focuses on:

- Increasing awareness of unconscious assumptions
- Encouraging thoughtful decision-making
- Promoting fair and consistent practices

Active Listening and Open Dialogue
Constructive conversations about diversity, inclusion, and equity require respectful communication and openness to differing perspectives.
Effective practices include:

- Listening without interruption or judgment
- Remaining open to feedback and discussion
- Encouraging respectful and productive dialogue

Understanding Intersectionality
Individuals may experience the world differently based on multiple aspects of identity, such as race, age, gender, disability, socioeconomic background, or other life experiences.

Recognizing intersectionality helps organizations better understand the complexity of community needs and experiences.

Moving from "Cultural Competence" to "Cultural Humility"
Traditional "cultural competence" models often suggested that individuals could fully master knowledge about other cultures or communities. Cultural humility shifts the focus toward:

- Continuous learning
- Self-awareness
- Relationship-building
- Respectful engagement

This approach recognizes that understanding others is an ongoing process rather than a completed achievement.

Role of the Board of Directors
Boards of Directors have an important leadership role in supporting inclusive and equitable organizational practices. This may include:

- Supporting policies that promote fairness and accessibility.
- Encouraging respectful organizational culture
- Ensuring accountability and transparency
- Supporting training and professional development opportunities
- Considering the diverse needs of the communities served

Conclusion
Racial equity and cultural humility principles are intended to strengthen organizations by promoting fairness, respect, accountability, and inclusive engagement. These principles support thoughtful governance, effective communication, and responsive service delivery while encouraging ongoing learning and organizational improvement. By fostering awareness, openness, and accountability, organizations can continue working toward environments where all individuals feel respected, valued, and included.

NKADDS
AGING AND DISABILITY SERVICES

Recognizing and Reporting Adult Abuse, Neglect, and Exploitation
Training Guide for Board Members

Purpose of This Training

This document provides essential information to help staff recognize, respond to, and report adult abuse, neglect, and exploitation.

The Scope of the Issue

- 1 in 10 adults age 60+ experience abuse
- Approximately 5 million cases annually in the U.S.
- About 6,000 cases reported annually in Kentucky
- Abuse is significantly underreported

Key Principles

- Abuse is a crime
- Every adult has the right to be safe
- Abuse can occur anywhere
- Anyone can be a victim or perpetrator

Legal Framework

Under KRS 209:

- Reporting is mandatory
- Reasonable suspicion is enough

Specifics on Abuse, Neglect and Exploitation

1. Abuse (Physical, Sexual, Emotional)

Includes physical harm, sexual abuse, intimidation, and emotional harm.

Examples:

- Hitting, slapping, choking
- Improper restraints
- Sexual assault
- Verbal threats or humiliation

2. Neglect
Failure to provide necessary care.

Examples:
• Lack of food, water, hygiene
• Ignoring medical needs

3. Self-Neglect
Failure to care for oneself.

Indicators:
• Malnutrition
• Poor hygiene
• Unsafe living conditions

4. Exploitation
Misuse of funds or property.

Examples:
• Unauthorized use of money
• Misuse of power of attorney

Effects of Abuse
• Fear, anxiety, depression
• Isolation
• Stress symptoms

Reporting Requirements
When to Report:
• Any reasonable suspicion
Where to Report:
DCBS (Department for Community Based Services)
1-877-597-2331

Guidelines:
• Report immediately
• Anonymous reporting allowed

Legal Consequences for not reporting:

- Class B misdemeanor
- Up to 90 days jail
- Up to $250 fine

Protections:

- Protection from liability when reporting in good faith

After a Report:

- DCBS reviews and investigates.
- Law enforcement may be involved

Key Takeaways:

- Recognize signs
- Report immediately
- You are legally responsible

Case Study#1- Local Elder Abuse Case

The Office of Medicaid Fraud and Abuse Control investigated allegations of **elder abuse** at a Northern Kentucky hospital and prosecuted four individuals connected to the crime. After completing the investigation, the Attorney General's Office announced that former hospital employees pleaded guilty to the charges they faced and received jail sentences.

According to legal documents, two registered nurses and two certified nursing assistants assisted each other in abusing one of their patients in the Behavioral Health Unit. These staff members improperly restrained the older adult by placing two thirty-five-pound therapeutic water bags on the patient and some furniture around their medical recliner chair. They left the patient there for around fifteen hours. Three of the defendants pleaded guilty to reckless abuse or neglect of an adult. This is a class A misdemeanor, punishable by up to twelve months in jail. They received the maximum twelve-month jail sentence. They were also forced to forfeit their professional licenses and must remain on the Caregiver Misconduct Registry for seven years. They agreed to assist the Cabinet for Health and Family Services in resolving the administrative case associated with their offense.

A month or so later, the last defendant also pleaded guilty to reckless **abuse or neglect** of an adult and agreed to forfeit their professional license. They also received a sentence of twelve months in jail.

Case Study #2- Financial Exploitation

Local bank alerted county police of possible exploitation of an elderly client. His savings account had gone from a balance of $96,000 to zero in six months. The elderly man insisted to police that he had willingly given the money to a young man who lived with him. He denied that the young man had committed any wrongdoing and refused to press charges. Further investigation by police revealed that the young man had forged checks for $24,000. Police asked the Cabinet to assess the elderly man's physical and mental state. Police accompanied a state social worker and nurse consultant to the home, since the alleged perpetrator still lived there. The client was found to be mentally alert, fully oriented, and free of acute mental or physical distress. He was more worried about keeping the alleged perpetrator out of jail than about losing his money. The client said he had helped raise the young man and would go to any length to protect him from going to jail. He acknowledged that the young man had stolen some checks and forged his name, but he said he had freely given the young man most of his savings. With no money left from his life savings, the client was forced to live on his Social Security check. For at least two months, he did not take his prescribed medications because he could no longer afford to buy them. Although the client refused to press charges, police arrested the alleged perpetrator and charged him with check forgery.