

Kentucky Department
for Public Health

State Health Improvement Plan Progress Report

2025

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Published: 11/2025

Signature Page

This progress report has been approved and adopted by the Kentucky Department for Public Health.



John Langefeld, MD
Commissioner

12/3/2025

(date)

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Acknowledgements

The following individuals and organizations contributed to this report. Others not mentioned here include public health professionals who developed reports and compiled data for the source documents and reference materials used to compile this status report.

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- Elizabeth Anderson-Hoagland, Chronic Disease and Prevention Branch (CDPB), PQI
- Lisa Arvin, CDPB, PQI
- Courtney Austin, Harm Reduction Branch, Division of Public Health Protection and Safety (PHPS)
- Ellen Cartmell, Commissioner's Office
- Carrie Conia, OPIA, PQI
- Kristen Martin, Childhood Mental Health Section, Division of Maternal and Child Health (MCH)
- Heather Stone, OPIA, PQI
- Shellie Wingate, Health Care Access Branch (HCAB), PQI
- KDPH workgroup members who served on a State Health Improvement Plan (SHIP) workgroup

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- Sean Regnier, University of Kentucky (UK)
- Adam Trosper, BHDID
- Cabinet for Health and Family Services (CHFS)
- Nonprofit organizations
- Academia
- Healthcare systems/advocates
- Faith-based organizations

Suggested Citation: Kentucky Department for Public Health (KDPH). State Health Improvement Plan (SHIP) Progress Report. Frankfort, Kentucky: Cabinet for Health and Family Services, Kentucky Department for Public Health, November 26, 2025.



Introduction and Overview

A State Health Improvement Plan (SHIP) is developed to identify statewide public health priorities, address public health challenges and identify how the health department and community partners will work together to improve the health of the population. A comprehensive SHIP is used to set priorities, identify and direct resources and implement projects, programs and policies. The Kentucky Department for Public Health (KDPH) convened more than 100 public health partners and local health department leaders in Fall 2023 to discuss the health status of Kentucky, identify public health priorities and engage partners to participate in workgroups to create a comprehensive plan. Continued work was carried out via virtual meetings with one KDPH staff and one external partner serving as co-chairs for each workgroup. For each of the five priority areas, workgroups identified goals, objectives and corresponding activities using the SMARTIE system of goal setting: Specific, Measurable, Achievable, Relevant, Inclusive and Equitable. Workgroups identified responsible organizations or drivers for each objective and activity, understanding that the SHIP is a state plan, not solely a public health plan.

Annual meetings have been held, where all workgroups share progress on workplans, discuss potential barriers and make additional connections with partners and the public. The [Our Healthy Kentucky Home campaign](#), which has partnered with SHIP workgroups, is a Team Kentucky initiative with the KDPH to engage and inspire Kentuckians on a personal journey of achievable health and wellness improvements through increased physical activity, improved nutritional health and decreased social isolation through targeted interventions. In addition to this campaign, there are numerous opportunities to align with initiatives at the local and federal levels, such as [Make America Healthy Again](#). This combined messaging will help enhance programming across the state.

- **Access to Care:** Improve workforce development and network adequacy and improve standardization of provider data collection, reporting and transparency.
- **Mental Health:** Improving the mental health of Kentucky children and adults is a new priority for the 2024-2028 SHIP and addresses “adverse childhood events” impact on mental health throughout the lifespan.
- **Smoking, Vaping and Tobacco:** Engage with healthcare organizations and multi-sectored partnerships to expand evidence-based tobacco control policies and translate evidence to practice.
- **Nutrition:** Increase consumption of fruits and vegetables through expansion of produce prescription voucher programs, maintaining or increasing enrollment and use of food assistance programs and increasing healthy food access.
- **Drug Use:** Addresses prevention, harm reduction, treatment, and recovery.

Figure 1: The SHIP Priorities At-a-Glance

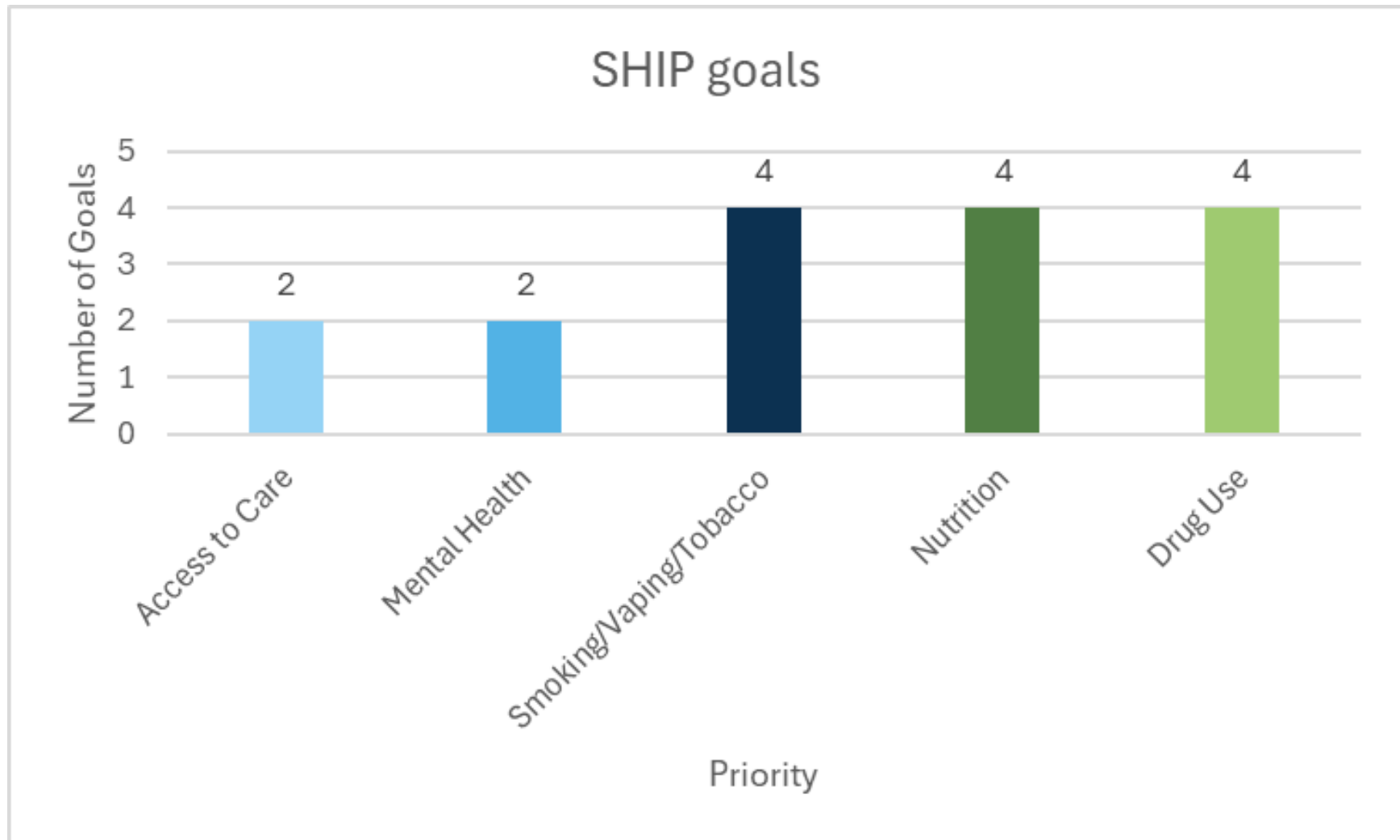


Figure 2: The number of goals per SHIP priority area. All SHIP goals are in progress.

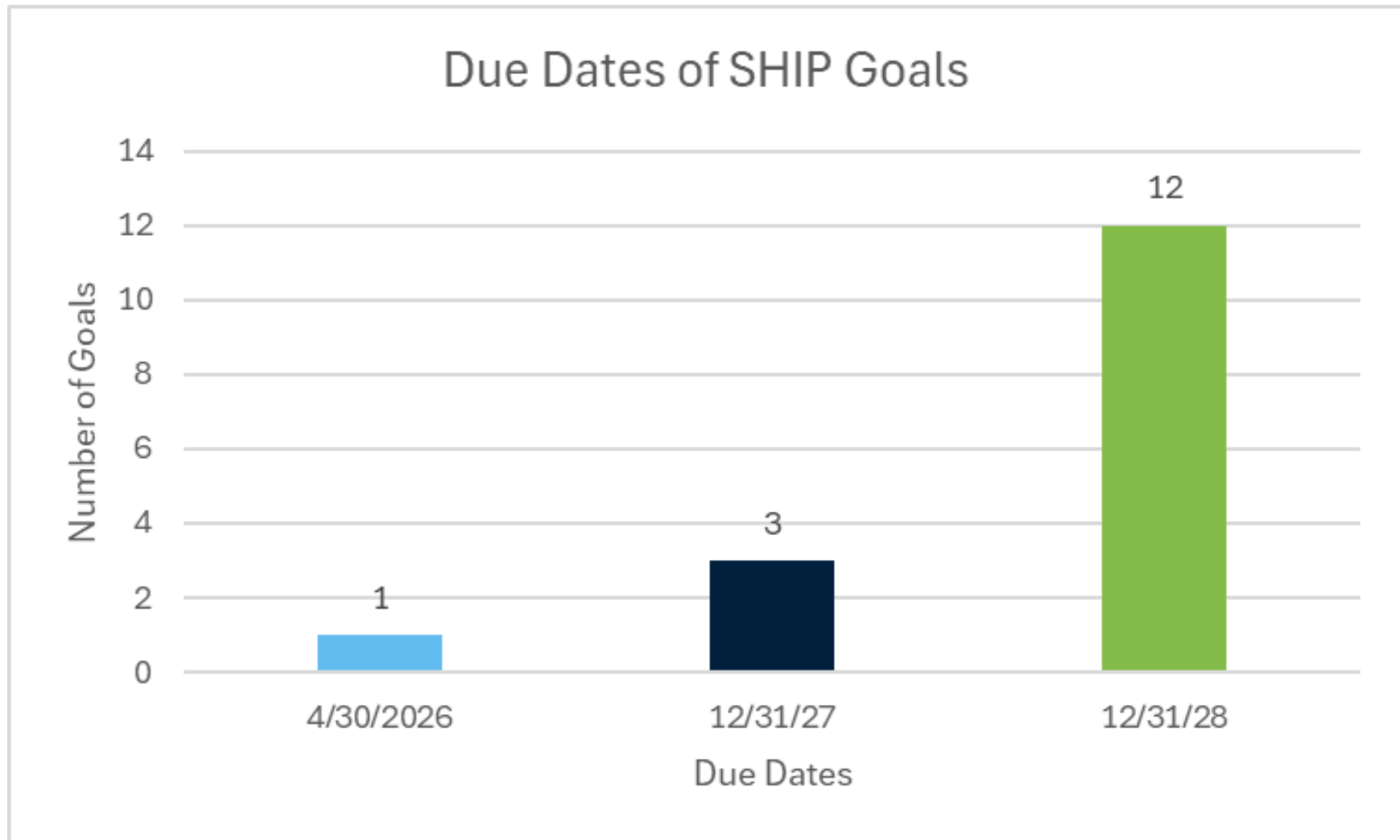
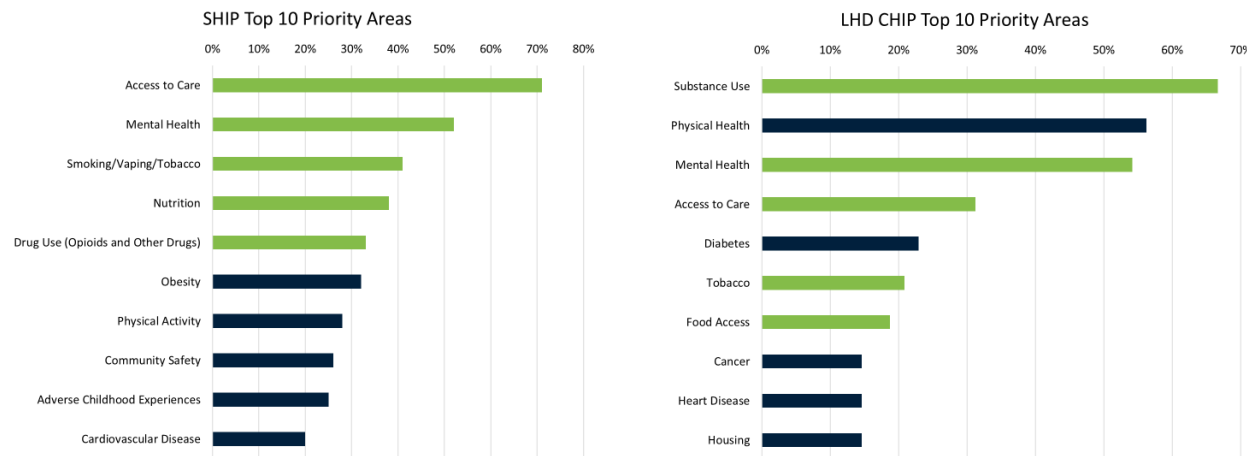


Figure 3: Due dates of SHIP goals.

Local to State Comparison of Health Improvement Plan Priorities



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Figure 4: This depicts 2024 data. There is much overlap between state and local community concerns/needs. Working together across the state with those doing the work at the local level creates synergy that allows us to make a bigger impact on improving health outcomes.

The priority workgroups are continuously seeking new partnerships to implement the work plans. If you are interested in joining a workgroup, please use the [link here](#) or the QR code below and a member of the KDPH OPIA will be in touch.



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State Health Improvement Plan (SHIP)



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Figure 5: Timeline of the SHIP Steps in the Process.

Section 1: Access to Care

The access to care workgroup meets twice a year (in 2025, it was February 14 and August 11). There are 91 individuals who are committed to working in the access to care priority area.

Goal 1: The workgroup is currently focusing on expanding access to Public Health Registered Dental Hygienists (PHRHD) through Federally Qualified Health Centers. Legislation was filed and passed the House during the 2025 legislative session, but did not pass the Senate. The Board of Dentistry has updated regulations to ensure the role and responsibilities related to PHRDHs are clear and consistent regardless of employer. Working to get legislation passed again during the 2026 legislative session.


Goal 2: Cabinet for Health and Family Services (CHFS) is also making changes to the Kentucky Health Information Exchange (KHIE) and procuring a contract for a Kentucky Analytics Platform. Both efforts should be integrated into this goal.

Access to Care Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Goal 1: Improve Workforce Development and network adequacy by December 2028.	Goal 1 is partially met.	No modification.
Objective 1.1: Increase healthcare provider participation in loan repayment programs.	Objective 1.1 is met. See progress under activity 1.1.1.	Modified Objective 1.1 to make it more specific and time-bound: By December 2028, the KY Primary Care Office (PCO) will increase National Health Service Corps (NHSC) and Kentucky loan repayment program awardees by 10% statewide.
Activity 1.1.1: By December 2028, the KY PCO will increase NHSC and Kentucky loan repayment program awardees by 10% statewide.	Activity 1.1.1 is met. A 15.4% increase occurred.	No modification.



Access to Care Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Objective 1.2: Collect more comprehensive and uniform data from healthcare licensure boards to create an accurate baseline for workforce capacity and network adequacy.	Activity 1.2 is not met.	No modification.
Activity 1.2.1: By December 2025, 100% of licensure boards will participate in developing a list of comprehensive, uniform data and 90% of boards will implement data collection and reporting.	Activity 1.2.1 is not met-0%.	Modified Activity 1.2.1 to make it more time-bound: By December 2027, 100% of licensure boards will participate in developing a list of comprehensive, uniform data and 90% of boards will implement data collection and reporting.
Objective 1.3: Examine the current payment and delivery system and identify opportunities for improving access and efficiency.	Objective 1.3 is not met.	No modification.
Activity 1.3.1: By 2028, improve access to qualified health care practitioners of all types in underserved sites and settings.	Activity 1.3.1 is not met. 0 sites.	No modification.
Goal 2: Improve standardization of health professional data collection, reporting and transparency.	Goal 2 is not met.	No modification.
Objective 2.1: Develop a Health Data Trust (HDT) to collect, house and analyze paid claims data from all government-purchased/administered health insurance plans (required) and other health insurance plans (voluntary).	Objective 2.1 is not met. See progress under the activities 2.1.1a and 2.1.1b.	Modified Objective 2.1 to adjust language utilized: Develop a Health Data Utility (HDU) to collect, house and analyze administrative, clinical, social, and public health data. This would include paid claims data from all government-purchased/administered health insurance plans (required) and other health plans (voluntary).



Access to Care Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
<div data-bbox="205 315 361 418">  </div> <p>Activity 2.1.1a: By 2026, a Health Data Trust (HDT) Governance Board will be created and functioning.</p>	<p>Activity 2.1.1a is not met. A HDT Governance Board has not been created yet. Legislation did not advance in 2025; however, workgroup members continue to meet with legislators and the 7/30/25 International Joint Commission (IJC) on Health Services was devoted to a discussion about health data. Will pursue a bill in the 2026 legislative session.</p>	<p>Modified Activity 2.1.1a to adjust language utilized: Changed name to HDU.</p>
<p>Activity 2.1.1b: By 2027, the Governance Board will design a HDU ready to implement pending legislation and funding.</p>	<p>Activity 2.1.1b is not met. Due to activity 2.1.1a not being established, no progress has been made on activity 2.2.1b for the board to create the HDU.</p>	<p>No modification.</p>
<p>Objective 2.2: Develop a recommended list of demographic data measures and an implementation guide for data collection and reporting by health professionals across settings/statewide.</p>	<p>Objective 2.2 is not met.</p>	<p>No modification.</p>
<p>Activity 2.2.1: By 2028, develop a data guide to support health professionals across settings to collect uniform, consistent health data on diverse demographics.</p>	<p>Activity 2.2.1 is not met.</p>	<p>No modification.</p>



Section 2: Mental Health

The mental health priority area workgroup held its annual meeting on March 31, 2025. There are 105 individuals who are committed to working in the mental health priority area workgroup.

The specifics of the activities may shift as partners continue to meet. There are several programs and projects already in existence that address SHIP activities. The partners have been encouraged to identify existing projects and align SHIP work to address gaps or increase capacity.

Mental Health Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Goal 1: To improve mental health of Kentucky children.	Goal 1 is partially met.	Modified Goal 1 to make it more specific and time-bound: Annually, improve the mental health of Kentucky children by increasing access to behavioral health services, programming and resources.
Objective 1.1: Increase awareness of and access to telehealth mental health services.	Objective 1.1 is partially met.	Modified Objective 1.1 to make it more specific and time-bound: Increase awareness of and access to telehealth mental health services by increasing the capacity and accuracy of well-developed resources by December 2028.
Activity 1.1.1: The Mental Health SHIP Workgroup will increase the awareness of and access to telehealth mental health services by creating a fact sheet that contains resources, mapping available providers for underserved communities and then distributing it to communities of high need by the end of 2028.	Activity 1.1.1 is partially met. The Mental Health SHIP workgroup has identified that a fact sheet is likely not needed. Find Help Now is a platform that catalogs telehealth behavioral health services across the state. The workgroup is identifying ways to partner with Find Help Now to 1) increase utilization	No modification.



Mental Health Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
	of the site, 2) connect with providers to ensure their information is on the site and 3) increase the overall capacity of the site for end users to find telehealth opportunities.	
Objective 1.2: Increase awareness of and access to resources on mental health.	Objective 1.2 is partially met.	Modified Objective 1.2 to make it more specific and time-bound: Increase awareness of and access to resources on mental health through school and youth-based programming by December 2027.
Activity 1.2.1: The Mental Health SHIP workgroup will create a physical activity and mindfulness program that will be implemented in after-school programs and public libraries across the State; first phase of the program will be a pilot program in counties that do not offer physical activity classes and will have the goal of observing a decrease in self-reported anxiety and depression levels among participating students within one academic year.	Activity 1.2.1 is partially met. Youth Thrive is already doing work in social-emotional learning and the impact of healthy living. There are several available toolkits, programs, frameworks, etc., to support this work and the workgroup does not need to create something new. The sub-group does need to identify what will be chosen to promote and how the sub-group will promote the toolkit/program/framework selected.	Modified Activity 1.2.1 to make it more specific: The MH SHIP workgroup will promote a physical activity and mindfulness program.
Activity 1.2.2: The Mental Health SHIP workgroup will create a “Trauma-Informed Schools Initiative” to increase awareness of trauma-informed care among educators and staff in Kentucky schools by providing a comprehensive resource packet containing training materials and implementation tools,	Activity 1.2.2 is partially met. There are a number of trauma-informed school initiatives already in existence. Mental health sub-group members have reviewed the existing toolkit and made suggested changes. The sub-group members will continue to connect on updates. Next steps include connecting with	No modification.



Mental Health Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
aiming to reach 20% of Kentucky schools within its first year.	those efforts to see where it makes the most sense for SHIP to address gaps.	
Objective 1.2: Improve mental health for persons with disabilities (intellectual, physical or other).	Objective 1.2 is partially met.	Modified Objective 1.2 to make it more specific and time-bound: Improve mental health for children with disabilities by increasing access to existing resources and supports by December 2028.
Activity 1.3.1: The Mental Health SHIP workgroup will improve the mental health of children with disabilities (physical, intellectual, etc.) by creating and launching a website that will provide resources for parents/caregivers of children with disabilities in Kentucky, including resources on disability rights, educational resources, healthcare services and recreational opportunities.	Activity 1.3.1 is partially met. A University of Kentucky (UK) partner has developed a procedure for developing comprehensive resource guides for every county in KY which are being used by local health departments (LHDs). This protocol has been identified as a method for creating similar guidance that is focused on resources for children with disabilities.	No modification.
Goal 2: To improve the mental health of Kentucky adults.	Goal 2 is partially met.	Modified Goal 2 to make it more specific and time-bound: Annually, improve the mental health of Kentucky adults by increasing access to care as well as supporting specific underserved populations such as adults with disabilities and justice-involved adults.
Objective 2.1: Improve mental health access to care in existing programs for persons with disabilities (intellectual, physical, developmental and other).	Objective 2.1 is partially met.	Modified Objective 2.1 to make it more specific and time-bound: Promote mental health accessibility for persons with disabilities by December 2028.
Activity 2.1.1: By December 2028, the Mental Health SHIP workgroup will collaborate with community liaisons to prioritize delivery of mental health resources and services for	Activity 2.1.1 is partially met. A UK partner has developed a procedure for developing comprehensive resource guides for every county in KY which are being used by LHDs.	No modification.



Mental Health Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
consumers with disabilities, while actively seeking to address systemic barriers and disparities that may hinder access to needed supports.	This protocol has been identified as a method for creating similar guidance that is focused on resources for adults with disabilities.	
Objective 2.2: Improve mental health access to care in existing programs for justice-involved adults leaving Kentucky jails and prisons.	Objective 2.2 is partially met.	Modified Objective 2.2 to make it more time-bound: Improve mental health access to care to existing programs for justice-involved adults leaving Kentucky jails and prisons by December 2028.
For activity 2.2.1: By December 2028, the Mental Health SHIP Workgroup will work collaboratively with community liaisons to prioritize delivery of mental health resources and services for consumers who are justice-involved and working towards reintegration into their communities, while actively seeking to address systemic barriers and disparities that may hinder access to needed supports.	Activity 2.2.1 is not met. The Mental Health SHIP Workgroup has identified several partners who are working on similar activities. They will meet in the coming weeks to align work.	No modification.
Objective 2.3: Improve telehealth access and awareness for mental health services.	Objective 2.3 is partially met. We have identified that a fact sheet is unlikely to be needed. Find Help Now is a platform that catalogs telehealth behavioral health services across the state. The workgroup is identifying ways to partner with Find Help Now to 1) increase utilization of the site, 2) connect with providers to ensure their information is on the site and 3) increase the overall capacity of the site for end users to find telehealth opportunities.	No modification.
Activity 2.3.1: By December 2028, the Mental Health SHIP workgroup will decrease reported	Activity 2.3.1 is partially met. A UK partner has developed a procedure for developing	No modification.





Mental Health Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
mental health distress in Kentuckians by launching an accessible website that will provide web-based resources to individuals and families in Kentucky to improve coping skills and mental clarity.	comprehensive resource guides for every county in KY that are being used by LHDs. This protocol has been identified as a method for creating similar guidance that is focused on resources for children with disabilities.	
Activity 2.3.2: The Mental Health SHIP Workgroup will increase the awareness of and access to telehealth mental health services by creating a fact sheet that contains resources and mapping available providers for underserved communities and then distributing it to communities of high need by the end of 2028.	Activity 2.3.2 is partially met. The Mental Health SHIP workgroup has identified that a fact sheet is likely not needed. Find Help Now is a platform that catalogs telehealth behavioral health services across the state. The workgroup is identifying ways to partner with Find Help Now to 1) increase utilization of the site, 2) connect with providers to ensure their information is on the site and 3) increase the overall capacity of the site for end users to find telehealth opportunities.	No modification.

Section 3: Smoking/Vaping/Tobacco



The smoking/vaping/tobacco priority workgroup meets twice a year (they met on December 9, 2024, and August 4, 2025). There are 42 individuals who are committed to working in the smoking/vaping/tobacco priority area workgroup.

Smoking, Vaping, Tobacco Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Goal 1: Healthcare Engagement: Engage and educate healthcare organizations on evidence-based policies to create supportive environments for tobacco treatment to improve patient/client outcomes.	Goal 1 is partially met.	Goal 1 modified to include time-bound: Engage and educate healthcare organizations on evidence-based policies to create supportive environments for tobacco treatment to improve patient/client outcomes by December 2028.
Objective 1.1: Promote consistent universal screening for tobacco use as a prerequisite for intervening with patients or clients who use tobacco.	Objective 1.1 is partially met.	No modification.
Activity 1.1.1: By 2028, establish a baseline and produce a 5% increase in the percentage of current adult smokers who received advice to quit smoking or using tobacco from a healthcare provider.	Activity 1.1.1 is partially met.	Modified Activity 1.1.1 due to changes in funding: By 2028, establish a baseline of current adult smokers who received advice to quit smoking or using tobacco from a healthcare provider.
Objective 1.2: Increase provider, insurer and partner knowledge to include regular provision of nicotine replacement therapy.	Objective 1.2 is partially met.	No modification.
Activity 1.2.1: Increase the awareness of nicotine replacement therapy effectiveness and no-cost availability by 2028, as measured by an increase in the number of people participating in training on this topic, as well as a 10% increase in the amount of nicotine replacement therapy distributed through identified sources.	Activity 1.2.1 is partially met.	Modified Activity 1.2.1 due to changes in funding: Increase the awareness of nicotine replacement therapy effectiveness and no-cost availability by 2028 as measured by an increase in the number of people participating in training on this topic, as well as an increase in the amount of nicotine replacement therapy distributed through identified sources.
Goal 2: Partnerships: Engage, advance and diversify partnerships to increase equity and	Goal 2 is partially met.	Goal 2 is modified to include a time-bound element: Engage, advance, and diversify partnerships to increase equity and achieve



Smoking, Vaping, Tobacco Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
achieve wider influence for a more significant impact.		wider influence for a more significant impact by December 2028.
Objective 2.1: Invest resources in amplifying underrepresented communities' voices, skills and needs.	Objective 2.1 is partially met.	No modification.
Activity 2.1.1: Identify and list three resources per area development district of community-driven organizations that serve underrepresented populations within the Commonwealth by 2028.	Activity 2.1.1 is partially met.	Modified Activity 2.1.1 due to changes in funding: Establish quit rates among identified demographic characteristics among Quit Now Kentucky (QNK) enrollees by 2028.
Objective 2.2: Tailor messages to be culturally relevant and accessible to populations experiencing tobacco-related disparities.	Objective 2.2 is not met.	Objective 2.2 was removed due to changes in funding.
Activity 2.2.1: Increase the use of Quit Now Kentucky by people facing health inequities by 20% by 2028.	Activity 2.2.1 is not met.	Activity 2.2.1 was removed due to changes in funding.
 <p>Goal 3: Policy Change: Facilitate evidence-based tobacco control policies that advance a healthier Kentucky.</p>	Goal 3 is partially met.	Modified Goal 3 to include time-bound: Facilitate evidence-based tobacco control policies that advance a healthier Kentucky by 2028.
Objective 3.1: Enact comprehensive smoke-free laws to decrease exposure to secondhand smoke in workplaces and public places.	Objective 3.1 is partially met.	Modified Objective 3.1 due to changes in funding: Increase state tobacco and smoking prevention and cessation resources by seeking available funds and opportunities within the Commonwealth.
 <p>Activity 3.1.1: By 2028, educate and support communities considering smoke-</p>	Activity 3.1.1 is partially met.	Modified Activity 3.1.1 due to changes in funding: Maintain the capacity of the state to address tobacco prevention and cessation activities through increased federal, state,



Smoking, Vaping, Tobacco Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
free policies and support those enacting and enforcing smoke-free policies, working toward comprehensive smoke-free laws across Kentucky.		Master Settlement Agreement and JUUL settlement funding.
Objective 3.2: Increase state funding for tobacco control based on CDC recommendations to reduce tobacco-related disease.	Objective 3.2 is partially met and is combined into the updated objective 3.1.	Objective 3.2 is removed due to changes in funding.
 <p>Activity 3.2.1: By 2028, increase state funding for tobacco control based on Centers for Disease Control and Prevention (CDC) recommendations to reduce tobacco-related disease.</p>	Activity 3.2.1 is partially met and is combined into the updated activity 3.1.1.	Activity 3.2.1 is removed due to changes in funding.
 <p>Activity 3.2.2: Secure all JUUL settlement funding available for allocation by the Kentucky General Assembly for evidence-informed tobacco control.</p>	Activity 3.2.2 is partially met and is combined into the updated activity 3.1.1.	Activity 3.2.2 is removed due to changes in funding.
Goal 4: Translate Evidence into Practice: Translate evidence-based initiatives into practice to maximize resources and impact.	Goal 4 is partially met.	Modified Goal 4 to include time-bound: Translate evidence-based initiatives into practice to maximize resources and impact by 2028.
Objective 4.1: Adapt evidence-based interventions to ensure they meet the needs of Kentucky populations and settings.	Objective 4.1 is partially met.	No modification.
Activity 4.1.1: Increase the number of Kentucky professionals trained to facilitate	Activity 4.1.1 is partially met.	Modified Activity 4.1.1 due to changes in funding: Maintain the number of Kentucky



Smoking, Vaping, Tobacco Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
evidence-informed prevention programs (e.g., CATCH My Breath) by 10% by 2028.		professionals trained to facilitate evidence-informed prevention programs (e.g., CATCH My Breath).
Activity 4.1.2: Increase the number of certified facilitators of evidence-informed cessation programs (e.g., Freedom from Smoking) in Kentucky by 10% by 2028.	Activity 4.1.2 is partially met.	Modified Activity 4.1.2 due to changes in funding: Maintain the number of certified facilitators of evidence-informed cessation programs (e.g., Freedom from Smoking) in Kentucky by 2028.
	New activity 4.1.3 is partially met.	Added Activity 4.1.3: Monitor enrollment in Quit Now Kentucky (QNK) and quit rates as available, depending on funding and resources.

Section 4: Nutrition

The nutrition priority area workgroup held its annual meeting on January 15, 2025. There are 106 individuals who are committed to working in the nutrition priority area workgroup.

The effects of recently passed legislation are still unknown at this time, as to how SNAP and other programs will be impacted.

Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Goal 1: Expand fruit and vegetable produce prescription and voucher programs.	Goal 1 is partially met. The Women's Infants and Children's (WIC) Farmers' Market	Modified Goal 1 to make it time-bound: Expand fruit and vegetable produce



Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
	Nutrition Program (FMNP) WIC FMNP expanded by establishing a new FMNP Market in Shelby County and adding markets to existing FMNP Market Counties: Pike County (Belfry Clinic), Boone County, Kenton County and Rowan County.	prescription and voucher programs by July 2026.
Objective 1.1: Assess the current capacity of state fruit and vegetable produce prescription programs and identify best practices for implementation of fruit and vegetable produce programs.	Objective 1.1 is partially met. The assessment was completed and shared with workgroup 6/9/2025. The group is currently assessing potential partners in their local communities.	Modified Objective 1.1 to make it more specific and time-bound: By January 2026, the group will have identified either areas to work that currently do not have Fresh Fruit and Vegetable Program (FFVP) or areas that have existing programs that have capacity for expansion.
Activity 1.1.1: Baseline data will be collected from the Kentucky Department of Agriculture and other sources by 2025. This will be used to formulate a plan reflective of these findings related to fruit and vegetable voucher incentive programs and produce prescription programs to increase reach and disseminate best practices.	Activity 1.1.1 is partially met. Baseline data has been collected.	No modification.
Objective 1.2: Build collaborative networks to increase knowledge of best practices of fruit and vegetable voucher programs and promote enrollment and utilization of existing fruit and vegetable programs.	Objective 1.2 is partially met. The Kentuckiana Health Collaborative (KHC) and State Physical Activity and Nutrition (SPAN) program partnered to host the Food is Medicine (FIM) Symposium June 10, 2025, and provided excellent networking opportunities as well as sessions promoting this work and best practices for the work.	Modified Objective 1.2 to make it time-bound: Annually, build collaborative networks to increase knowledge of best practices of fruit and vegetable voucher programs and promote enrollment and utilization of existing fruit and vegetable programs.



Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Activity 1.2.1: By 2028, collaborate with stakeholders and decision-makers to develop educational and best practices materials to promote and increase enrollment and utilization of fruit and vegetable voucher incentive programs by 20%.	Activity 1.2.1 is partially met. Educational and best practices materials have been created. Enrollment has had a 0% increase.	No modification.
Goal 2: Maintain or increase the number of eligible Kentuckians enrolled and using food assistance programs (e.g., SNAP, WIC, Senior Farmer's Market Programs).	Goal 2 is partially met. The WIC FMNP and Senior FMNP seasons are still in process and final numbers are not available. Additionally, there was a 49% cut to the WIC FMNP this year. With anticipated new legislation, Supplemental Nutrition Assistance Program (SNAP) is currently an unknown.	No modification.
Objective 2.1: Understand, identify and address barriers to SNAP participation.	Objective 2.1 is partially met. Activities that have taken place or are currently taking place include: Cross-Cabinet Initiative that includes Office of Data Analytics (ODA), Department of Medicaid Services (DMS), Department of Community Based Services (DCBS) and the KDPH to identify Medicaid participants with diet-sensitive chronic diseases who are not utilizing food resources such as SNAP, SNAP-Ed, and WIC. The initiative will soon be expanded to include seniors. This is an ongoing initiative and completion will depend on SNAP's adaptation to new legislation.	No modification.
<div data-bbox="205 1245 361 1349"> Policy Focus </div> Activity 2.1.1: Collaborate with SNAP to streamline and reduce barriers to	Activity 2.1.1 is partially met. CHFS has submitted a plan to the US Department of Agriculture (USDA) Food and Nutrition Service (FNS) to expand SNAP Outreach activities to all 120 Kentucky counties. SNAP	No modification.



Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
SNAP participation by April 2026 by evaluating the application process, barriers to senior SNAP participation and troubleshooting obstacles such as lack of transportation for SNAP participants.	Outreach assists individuals in need by helping them access vital food resources. The submission focuses on the policy, systems and environmental changes within SNAP and uses community data to identify and address barriers to accessing healthy food.	
Objective 2.2: Increase redemption rates for the WIC Farmer's Market Nutrition Program.	Objective 2.2 is not met. A 49% cut to program will likely impact this objective.	No modification.
Activity 2.2.1: Through the partnership with the Kentucky Department of Agriculture (KDA) and the WIC Program, the State Physical Activity and Nutrition (SPAN) Program will provide funding to KDA for the purchase of hot spots and other technology to increase internet connectivity for Farmers Markets that accept WIC FMNP benefits via the digital platform by December 2025.	Activity 2.2.1 is partially met. The WIC Program is not a part of this goal. SPAN is to provide funding to the Kentucky Department of Agriculture (KDA) to provide Farmers' Markets hot spots and tablets so the Senior Farmers' Market Program can expand by administering the program via digital platform. Target date for the project should be moved to February 2026 to allow for final paperwork to be submitted and analyzed.	Modified Activity 2.2.1 to make it time-bound: Through the partnership with the Kentucky Department of Agriculture (KDA) and the WIC Program, the State Physical Activity and Nutrition (SPAN) Program will provide funding to KDA for the purchase of hot spots and other technology to increase internet connectivity for Farmers Markets that accept WIC FMNP benefits via the digital platform by February 2026.
Objective 2.3: Support WIC's promotion of new food packages to eligible families.	Objective 2.3 is not met. This objective will take place in 2026 when the new food package is slated to release.	No modification.
Activity 2.3.1: Through the partnership with the WIC Program, the Nutrition SHIP workgroup will support WIC's new food package roll-out leading up to the implementation date of April 2026 and continue efforts to ensure eligible families are made aware of increased offerings available from WIC.	Activity 2.3.1 is not met.	No modification.
Goal 3: Increase healthy food access through programming in communities.	Goal 3 is partially met. CHFS is working with partners to create referral networks that help	No modification.





Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
	individuals access food resources. For example, the University of Kentucky Food as Health Alliance refers patients with diet-sensitive chronic diseases to kynectors for assistance in accessing food support. This is an ongoing goal throughout the 5-year SHIP plan.	
Objective 3.1: Identify, support, advocate and collaborate with institutions and communities to adopt programs increasing healthy food access.	Objective 3.1 is partially met. CHFS is expanding the use of kynect resources to improve access to healthy foods, including Farmers' Markets, Double Dollars and other food assistance programs.	No modification.
Activity 3.1.1: By 2026, KDPH will have partnered with WIC, SNAP, and the KDA, along with local communities, LHDs and stakeholders, to identify how we can work to implement programming to benefit at-risk families and individuals who are food insecure or live in food deserts to increase access to healthy food. By 2027, areas that are food deserts or have food scarcity will have increased options for healthy food access through a variety of venues that can include but not be limited to expanded fresh food and produce at dollar stores, pop-up farmers markets and mobile markets. By the time of evaluation in 2028, food insecurity numbers (Feeding KY) will show a decrease in food insecurity in areas categorized as food deserts by 20% from baseline.	Activity 3.1.1 is partially met. In April of 2025, outreach materials were distributed to foster families and grandparents raising grandchildren to increase awareness of eligibility and healthy food access resources.	No modification.



Nutrition Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Goal 4: Increase knowledge of fruit and vegetable voucher programs.	Goal 4 is partially met. Nutrition SHIP workgroup will convene stakeholders and community organizations and collaborate with KDA in 2027 to assess current and promotional resources. A resource directory with access to available materials to promote programs will be created in 2028.	No modification.
Objective 4.1: Build collaboration between the KY Department of Agriculture and local organizations that interface with target populations to increase awareness and use of fruit and vegetable programs.	Objective 4.1 is partially met.	No modification.
Activity 4.1.1: Nutrition SHIP Workgroup will convene stakeholders and community organizations and collaborate with the KDA in 2025 to assess current and promotional resources. A resource directory will be created with access to available materials to promote programs in 2027.	Activity 4.1.1 is partially met.	No modification.

Section 5: Drug Use


The drug use priority area workgroup held its annual meeting on November 20, 2024. In addition, the four drug use priority area sub-groups meet on a quarterly basis. There are 60 individuals who are committed to working in the drug use priority area workgroup. There are 42 individuals who have signed up and participated in one of the four sub-groups for the drug use priority area.

Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
 <p>Goal 1: Reduce and prevent substance use by supporting and expanding the provision of evidence-based prevention programs, policies and practices (EBPPPs).</p>	Goal 1 is partially met.	Modified Goal 1 to make it more specific and time-bound: By the end of 2028, reduce and prevent substance use by expanding evidence-based prevention initiatives through the implementation school-based curricula in 200 schools, delivering at least 14 annual community trainings, publishing three annual data reports on polysubstance use by race, ethnicity, and co-morbidities, and offering a minimum of 14 educational opportunities per year focused on intentional and unintentional polysubstance use.
Objective 1.1: Increase utilization of evidence-based primary prevention policies, programs and practices.	Objective 1.1 is partially met.	Modified Objective 1.1 to make it more specific and time-bound: By the end of 2028, increase the utilization of evidence-based primary prevention policies, programs, and practices by supporting the implementation of 200 school-based prevention curricula and delivering at least 14 annual trainings and technical assistance sessions to communities and organizations.
Activity 1.1.1: Increase by 200 the number of schools implementing evidence-based prevention curricula by 2028.	Activity 1.1.1 is met; 284 new schools have implemented evidence-based prevention curricula.	No modification.
 <p>Activity 1.1.2 Provide at least 14 annual trainings and support technical assistance to communities and organizations</p>	Activity 1.1.2 is partially met; 3 trainings were offered.	No modification.



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
on evidence-based or evidence-informed programs, policies and practices, including two specific trainings related to substance use prevention in underserved communities.		
Objective 1.2: Increase public awareness of substance use, including intentional and unintentional polysubstance use and related consequences, including overdose mortality and morbidity.	Objective 1.2 is partially met.	Modified Objective 1.2 to make it more specific and time-bound: By the end of 2028, increase public awareness of substance use, including intentional and unintentional polysubstance use and related consequences such as overdose mortality and morbidity by producing and disseminating at least three annual data reports and delivering a minimum of 14 educational opportunities per year focused on polysubstance use.
Activity 1.2.1: Produce and disseminate a minimum of three reports per year that highlight intentional and unintentional polysubstance use and related consequences by race, ethnicity and co-morbidities to partners and communities by June 30 th of each year, beginning by June 30, 2025.	Activity 1.2.1 is partially met; four reports were disseminated.	No modification.
Activity 1.2.2: Provide a minimum of 14 educational opportunities per year that include information on intentional and unintentional polysubstance use.	Activity 1.2.2 is partially met; 14 educational opportunities were offered.	No modification.
Goal 2: Expand the availability and awareness of harm reduction services across the Commonwealth.	Goal 2 is partially met.	Modified Goal 2 to make it more specific and time-bound: By the end of 2028, expand harm reduction services across Kentucky by supporting the establishment of 10 new Harm Reduction Program sites, ensuring all



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
		Local Health Departments (LHDs) provide Overdose Education and Naloxone Distribution (OEND), and increasing OEND availability to 100% of CMHCs and FQHCs, and at least 50% of state correctional facilities and hospital emergency departments.
Objective 2.1: Expand harm reduction service availability in Kentucky's LHDs and Community-Based Organizations (CBOs).	Objective 2.1 is partially met.	Modified Objective 2.1 to make it more specific and time-bound: By the end of 2028, support local health departments and community-based organizations to expand harm reduction service availability to 10 new Harm Reduction Program sites.
 <p>Activity 2.1.1: Support LHDs to open 10 new Harm Reduction Program sites by the end of 2027.</p>	Activity 2.1.1 is partially met; eight new harm reduction program sites were opened.	No modification.
Objective 2.2: Promote and invest in including people with lived experience in Harm Reduction education in academic, public health and Healthcare Organizations (HCOs).	Objective 2.2 is partially met.	Modified Objective 2.2 to make it more specific and time-bound: By the end of 2028 promote and invest in the inclusion of people with lived experience in Harm Reduction education across academic, public health, and healthcare organizations by publishing at least 10 educational materials focused on the lived experiences.
Activity 2.2.1: Publish at least 10 Harm Reduction educational materials focusing on the lived experience of people who use drugs	Activity 2.2.1 is partially met; 16 harm reduction educational materials were published.	No modification.



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
by the end of 2025. The educational suite will be revised and updated by the end of 2027.		
Objective 2.3: Expand the availability of Overdose Education and Naloxone Distribution (OEND) across the Commonwealth using the Find Naloxone Now KY platform.	Objective 2.3 is partially met.	Modified Objective 2.3 to make it more specific and time-bound: By the end of 2028, expand the availability of Overdose Education and Naloxone Distribution (OEND) across Kentucky by ensuring that, all Local Health Departments provide OEND, 100% of Community Mental Health Centers (CMHCs) and Federally Qualified Health Centers (FQHCs) offer OEND services, and at least 50% of state prisons/regional jails and hospital emergency departments participate, supported through promotion of the Find Naloxone Now KY platform.
Activity 2.3.1: All LHDs in Kentucky will provide Overdose Education and Naloxone Distribution (OEND) by the end of 2027.	Activity 2.3.1 is partially met. The Overdose Education and Naloxone Distribution (OEND) has occurred in 118 of 120 counties in Kentucky.	No modification.
Activity 2.3.2, 100 % of Community Mental Health Centers (CMHCs), 100% of Federal Qualified Health Centers (FQHCs), 50% of State Prisons/Regional Jails, and 50% of Hospital Emergency Departments (Eds) will provide OEND by the end of 2027.	Activity 2.3.2 is partially met. The expansion of OEND is in progress and will determine percentages in 2026.	No modification.
Goal 3: Increase availability of access to evidence-based and promising treatment services that support all Kentuckians in achieving recovery.	Goal 3 is partially met.	Modified Goal 3 to make it more specific and time-bound: By the end of 2028, increase the availability and accessibility of evidence-based and promising treatment services across Kentucky by expanding Medications for Opioid Use Disorder



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
		(MOUD) uptake and retention by 25%, establishing eight additional Certified Community Behavioral Health Clinics (CCBHCs), increasing utilization of FindHelpNowKY.org by 20%, and conducting five annual statewide trainings on evidence-based practices.
Objective 3.1: Expand utilization of evidence-based treatment services, including medications for opioid use disorder.	Objective 3.1 is partially met.	Modified Objective 3.1 to make it more specific and time-bound: By the end of 2028, expand the utilization of evidence-based treatment services in Kentucky by increasing Medications for Opioid Use Disorder (MOUD) uptake and retention by 25% across treatment settings, growing the number of Certified Community Behavioral Health Clinics (CCBHCs) to eight, and increasing use of FindHelpNowKY.org by 20%.
Activity 3.1.1: Increase Medications for Opioid Use Disorder (MOUD) uptake and retention by 25% across substance use treatment settings by 2028.	Activity 3.1.1 is partially met. The total number (not percentage) of KORE-funded programs as of March 30, 2025, was 4,491.	No modification.
Activity 3.1.2: Expand the number of Certified Community Behavioral Health Clinics (CCBHCs) in Kentucky to eight by 2028.	Activity 3.1.2 is partially met. The drug use SHIP workgroup currently has four certified CCBHCs with an additional eight undergoing certification for entry. Of those eight, six are Community Mental Health Centers (CMHCs), and two are Behavioral Health Service Organizations (BHSOs).	No modification.



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Activity 3.1.3: Increase the utilization of FindHelpNowKY.org by 20% by the end of 2027.	Activity 3.1.3 is partially met; 7200 users. The Drug Use SHIP Workgroup will determine the rate later.	No modification.
Objective 3.2: Support the provision of quality treatment through the promotion and support of professional development and workforce initiatives that improve the capacity and comp of service providers.	Objective 3.2 is partially met.	Modified Objective 3.2 to make it more specific and time-bound: By the end of 2028, support quality treatment by promoting professional development and workforce initiatives that enhance provider capacity, increasing the number of statewide trainings on evidence-based practices to five annually.
Activity 3.2.1: Increase the number of statewide trainings on evidence-based practices to five annually by the end of 2027.	Activity 3.2.1 is not met, 0 trainings offered currently for evidence-based practices.	No modification.
Goal 4: Expand access and availability of community-based recovery support services statewide.	Goal 4 is partially met.	Modified Goal 4 to make it more specific and time-bound: By the end of 2028, expand access to community-based recovery support services across Kentucky by increasing the number of NARR-certified recovery homes by 250, growing employer engagement in training and technical assistance to support hiring and retention of individuals with substance use disorder by 50%, certifying eight additional Recovery Ready Communities per year through 2027, and establishing six new Recovery Community Centers (RCCs).
Objective 4.1: Increase the availability of safe and affordable housing for individuals in recovery.	Objective 4.1 is partially met.	Modified Objective 4.1 to make it more specific and time-bound: Increase the availability of safe and affordable housing for individuals in recovery by adding 250 homes that meet National Alliance for



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
		Recovery Residencies (NARR) standards by 2028.
Activity 4.1.1: Increase by 250 the number of homes meeting the National Alliance for Recovery Residencies (NARR) standards by 2028.	Activity 4.1.1 is met, and 314 additional homes meet the NARR standards.	No modification.
Objective 4.2: Expand linkage and engagement in recovery-friendly education and employment resources.	Objective 4.2 is partially met.	Modified Objective 4.2 to make it more specific and time-bound: Expand linkage and engagement in recovery-friendly education and employment resources by increasing the number of employers participating in training and technical assistance to build capacity for hiring and retaining individuals with substance use disorder by 50% by 2028.
Activity 4.2.1: Increase the number of employers engaged in training and technical assistance to support the capacity to hire and retain individuals with substance use disorder by 50% by 2028.	Activity 4.2.1 is partially met; engaged employees increased by 2%.	No modification.
Objective 4.3: Create Recovery Ready Communities through increased awareness and education that decreases stigma and promotes utilization of recovery supports.	Objective 4.3 is partially met.	Modified Objective 4.3 to make it more specific and time-bound: Create Recovery Ready Communities by increasing awareness and education that reduces stigma and encourages use of recovery supports, as demonstrated by certifying eight new Recovery Ready Communities annually through 2028.
Activity 4.3.1: Increase the number of certified Recovery Ready Communities by eight per year through the end of 2027.	Activity 4.3.1 is partially met, with 4 additional places for a total of 25, according to the Kentucky Association of Counties.	No modification.



Goals, Objectives and Activities:	Progress made from 8/20/24-6/30/25:	Modifications made to Goals, Objectives and Activities (Response types are no or fill in what is modified):
Activity 4.3.2: Establish six additional Recovery Community Centers (RCCs) by 2028.	Activity 4.3.2 is partially met. It is unknown how many were added in this period, but as of 06/2025, there are 23.	No modification.

