



CHAMPAIGN COUNTY
DEVELOPMENTAL
DISABILITIES BOARD
CHAMPAIGN COUNTY
MENTAL HEALTH BOARD

Champaign County Mental Health Board (CCMHB) Meeting Agenda **Wednesday, October 22, 2025, 5:45PM**

*This meeting will be held in person at the
Shields-Carter Room of the Scott M. Bennett Administrative Center, 102 East Main Street, Urbana, IL 61801
Members of the public may attend in person or watch the meeting live through this link:
<https://uso2web.zoom.us/j/81393675682> Meeting ID: 813 9367 5682*

- I. Call to order**
- II. Roll call**
- III. Approval of Agenda***
- IV. 2025 Schedules, Draft 2026 Schedules, and Draft PY27 Allocation Timeline (pages 3-9) *No action is needed.***
- V. CCMHB Acronyms and Glossary (pages 10-21) *No action needed.***
- VI. Public Participation/Agency Input *See below for details.*****
- VII. Other Business: CLOSED SESSION**
 - *The Board may move to “enter into Closed Session for Semi-Annual Closed Session Minutes Review pursuant to 5 ILCS 120/2(c)(21). The following individuals will join this closed session: members of the Champaign County Mental Health Board, and Executive Director Canfield.”*
 - *If the motion is approved, those authorized will meet in The Putman Room and move for roll call and discussion. When discussion ends, they will return to the Shields-Carter Room, and the Board will call for a motion to return to Open Session, with a new roll call.*
 - *Once the Open Session is re-established, the recommended action is to “accept the February 19, 2020, February 26, 2020, July 21, 2021, and March 20, 2024 closed session minutes as presented (or revised) and to continue maintaining them as closed.”*
- VIII. Chairperson’s Comments – Molly McLay**
- IX. Executive Director’s Comments – Lynn Canfield**
- X. Approval of CCMHB Board Meeting Minutes (pages 22-27)***
Action is requested to approve the minutes of the CCMHB’s September 17, 2025 meeting and CCDDDB-CCMHB September 24, 2025 joint study session.
- XI. Vendor Invoice Lists (pages 28-41)***
Action is requested to accept the “Vendor Invoice Lists” and place them on file.
- XII. Old Business**
 - a) **REVISED 2026 Budget (pages 42-66)***

A memorandum requests approval of revisions to the previously approved CCMHB budget. Updated budget documents and the County presentations of CDDDB, CCMHB, and IDDSI budgets are included as background.

XIII. New Business

- a) **DRAFT Revisions to CCMHB Funding Requirements** (pages 67-87)
For information are draft revised “CCMHB Requirements and Guidelines for Allocations of Funds” and briefing memorandum on the proposed changes.

XIV. Reports

- a) **Staff Reports** (pages 88-108)
For information only, staff reports are included in the packet.
- b) **Evaluation Capacity Building Project Update**
An oral update will be provided. See resources developed by the team at <https://www.familyresiliency.illinois.edu/resources/microlearning-videos>.
- c) **Community Behavioral Health Needs Assessment Activities** deferred.
- d) **disAbility Resource Expo Update** (pages 109-110)
An oral update will be provided. See also <https://disabilityresourceexpo.org>
- e) **PY2025 MHB Utilization Summaries** (pages 111-122)
For information only is a report summarizing the utilization results of programs funded by the MHB during PY2025.

XV. Public Participation/Agency Input *See below for details.***

XVI. Board to Board Reports (page 123)

XVII. County Board Input

XVIII. Champaign County Developmental Disabilities Board Input

XIX. Board Announcements and Input

XX. Adjournment

** Board action is requested.*

***Public input may be given virtually or in person.*

If the time of the meeting is not convenient, you may communicate with the Board by emailing stephanie@ccmhb.org or leon@ccmhb.org any comments for us to read aloud during the meeting.

The Chair reserves the right to limit individual time to five minutes and total time to twenty minutes.

All feedback is welcome.

The Board does not respond directly but may use input to inform future actions.

Agency representatives and others providing input which might impact Board actions should be aware of the [Illinois Lobbyist Registration Act, 25 ILCS 170/1](#), and take appropriate [steps to be in compliance with the Act](#).

For accessible documents or assistance with any portion of this packet, please [contact us](#) (leon@ccmhb.org).



CCMHB 2025 Meeting Schedule

5:45PM Wednesday after the third Monday of each month

~~Brookens Administrative Building, 1776 East Washington Street, Urbana, IL~~

Scott M. Bennett Administrative Center, 102 E. Main, Street Urbana, IL 61801

<https://us02web.zoom.us/j/81393675682> (if it is an option)

January 22, 2025 – Shields-Carter Room

January 29, 2025 – *Study Session* - Shields-Carter Room

February 19, 2025 – Shields-Carter Room

March 19, 2025 – Shields-Carter Room

April 16, 2025 – *Study Session* -Shields-Carter Room

April 30, 2025 –Shields-Carter Room (*off cycle*)

May 21, 2025 – Shields-Carter Room

May 28, 2025 – Shields-Carter Room (*off cycle*)

July 23, 2025 – Shields-Carter Room

August 20, 2025 – *Study Session* - Shields-Carter Room

September 17, 2025 – Shields-Carter Room

September 24, 2025 – *Joint Study Session w CCDDDB* - Shields-Carter

October 22, 2025 – Shields-Carter Room

October 29, 2025 – *Joint Study Session w CCDDDB* - Shields-Carter

November 19, 2025 – Shields-Carter Room

December 10, 2025 – *Study Session* - Shields-Carter - *tentative*

December 17, 2025 – Shields-Carter Room - *tentative*

This schedule is subject to change due to unforeseen circumstances.

Meeting information is posted, recorded, and archived at <http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

Please check the website or email stephanie@ccmhb.org to confirm meeting times and locations.

All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend, virtually or in person, to observe and to offer thoughts during "**Public Participation**" or "**Public Input.**"

An individual's comments may be limited to five minutes, and total time for input may be limited to twenty minutes. The Board does not respond directly but may use the content to inform future actions.

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CCMHB 2026 Meeting Schedule

5:45PM the Wednesday following the third Monday of each month, plus study sessions and off-cycle meetings
Scott M. Bennett Administrative Center, 102 E. Main Street, Urbana, IL
<https://us02web.zoom.us/j/81393675682> (if it is an option)

January 21, 2026 – Shields-Carter Room
January 28, 2026 – *Study Session* - Shields-Carter Room
February 18, 2026 – Shields-Carter Room
March 18, 2026 – Shields-Carter Room
March 25, 2026 – *Study Session* - Shields-Carter Room
April 22, 2026 – Shields-Carter Room
April 29, 2026 – *Study Session* - Shields-Carter Room
May 20, 2026 – *Study Session* - Shields-Carter Room
May 27, 2026 – Shields-Carter Room (*off cycle*)
June 24, 2026 – Shields-Carter Room (*off cycle*)
July 22, 2026 – Shields-Carter Room
August 26, 2026 – Shields-Carter Room – *tentative (off cycle)*
September 23, 2026 – Shields-Carter Room
September 30, 2026 – *Joint Study Session w CCDDDB* - Shields-Carter
October 21, 2026 – Shields-Carter Room
October 28, 2026 – *Study Session* - Shields-Carter Room
November 18, 2026 – Shields-Carter Room
December 9, 2026 – Shields-Carter Room (*off cycle*)

This schedule is subject to change due to unforeseen circumstances.

Meeting information is posted, recorded, and archived at <http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>
Please check the website or email stephanie@ccmhb.org to confirm meeting times and locations.

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CCDDB 2025 Meeting Schedule

9:00AM Wednesday after the third Monday of each month
~~Brookens Administrative Building, 1776 East Washington Street, Urbana, IL~~
Scott M. Bennett Administrative Center, 102 E. Main, Street Urbana, IL 61801
<https://us02web.zoom.us/j/81559124557>

January 22, 2025 – Shields-Carter Room
February 19, 2025 – Shields-Carter Room
March 19, 2025 – Shields-Carter Room
~~**March 26, 2025 5:45PM** – *joint meeting with CCMHB* CANCELLED~~
April 16, 2025 – Shields-Carter Room (*off cycle*)
~~**April 30, 2025** – Shields-Carter Room – *tentative* CANCELLED~~
May 21, 2025 – Shields-Carter Room
~~**June 18, 2025** – Shields-Carter Room CANCELLED~~
July 23, 2025 – Shields-Carter Room
~~**August 20, 2025** – Putman Room – *tentative* CANCELLED~~
~~**September 17, 2025** – Putman Room CANCELLED, rescheduled to...~~
September 24, 2025 – Shields-Carter Room
September 24, 2025. 5:45PM – Shields-Carter Room – *joint study session*
October 22, 2025 – Shields-Carter Room
October 29, 2025 5:45PM – Shields-Carter Room – *joint study session*
November 19, 2025 – Putman Room
December 17, 2025 – Putman Room - *tentative*

This schedule is subject to change due to unforeseen circumstances.

Meeting information is posted, recorded, and archived at
<http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

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CCDDB 2026 Meeting Schedule

9:00AM the fourth Wednesday of each month

Scott M. Bennett Administrative Center, 102 E. Main, Street Urbana, IL 61801

<https://us02web.zoom.us/j/81559124557>

January 28, 2026 – Shields-Carter Room

February 25, 2026 – Shields-Carter Room - *tentative*

March 25, 2026 – Shields-Carter Room

April 22, 2026 – Shields-Carter Room

April 29, 2026 – Shields-Carter Room – *tentative*

May 27, 2026 – Shields-Carter Room

June 24, 2026 – Shields-Carter Room

July 22, 2026 – Shields-Carter Room

August 26, 2026 – Shields-Carter Room - *tentative*

September 23, 2026 – Shields-Carter Room

September 30, 2026 5:45 PM – Shields-Carter Room – *joint study session with MHB*

October 28, 2026 – Shields-Carter Room

November 25, 2026 – Shields-Carter Room

December 9, 2026 – Shields-Carter Room (*off cycle*)

This schedule is subject to change due to unforeseen circumstances.

Meeting information is posted, recorded, and archived at

<http://www.co.champaign.il.us/mhbddb/DDDBMeetingDocs.php>

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IMPORTANT DATES

2026 Meeting Schedule with Subjects, Agency and Staff Deadlines, and PY27 Allocation Timeline

The schedule offers dates and subject matter of meetings of the Champaign County Mental Health Board. Subjects are not exclusive to any given meeting, as other matters requiring Board review or action may also be addressed. Study sessions may be scheduled on topics raised at meetings, brought by staff, or in conjunction with the CCDDDB. Included are tentative dates for steps in the funding allocation process for PY27 and deadlines related to PY25 and PY26 agency contracts. **Regular meetings and study sessions are scheduled to begin at 5:45PM and may be confirmed with Board staff.**

11/28/25 Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.

12/17/25 Regular Board Meeting - tentative

12/19/25 Online System opens for Applications for PY2027 Funding.

12/31/25 Agency PY25 Independent Audits, Reviews, Compilations due.

1/21/26 Regular Board Meeting
Mid-Year Program Presentations

1/28/26 Study Session: Mid-Year Program Presentations

1/28/26 Agency PY26 2nd Quarter and CLC progress reports due.

2/2/26 Deadline for submission of applications for PY27 funding (Online system will not accept any forms after 4:30PM).

2/18/26 Regular Board Meeting
Discuss list of PY27 Applications and Review Process

3/18/26 Regular Board Meeting

3/25/26	Study Session
4/15/26	<i>Program summaries released to Board, posted online with CCMHB April 22 meeting packet.</i>
4/22/26	Regular Board Meeting Board Review of Funding Requests
4/29/26	Study Session Continued Board Review of Funding Requests
4/29/26	<i>Agency PY2026 3rd Quarter Reports due.</i>
5/13/26	<i>Allocation scenarios released to Board, posted online with CCMHB May 13 study session packet.</i>
5/20/26	Study Session Discussion of PY2027 Allocations
5/27/26	Regular Board Meeting – off cycle PY2027 Allocations
6/1/26	<i>For contracts with a PY26-PY27 term, all updated PY27 forms should be completed and submitted by this date.</i>
6/16/26	<i>Deadline for agency application/contract revisions. Deadline for agency letters of engagement w/ CPA firms.</i>
6/24/26	Regular Board Meeting – off cycle Election of Officers
6/18/26	<i>PY2027 agency contracts completed.</i>
6/30/26	<i>Agency Independent Audits, Reviews, or Compilations due. (only applies to those with calendar FY, check contract)</i>
7/22/26	Regular Board Meeting Draft FY2027 Budgets

8/26/26	Regular Board Meeting – <i>tentative (off cycle)</i>
<i>8/26/26</i>	<i>Agency PY2026 4th Quarter reports, CLC progress reports, and Annual Performance Outcome Reports due.</i>
9/23/26	Regular Board Meeting Draft Three Year Plan 2025-27 with 2027 Objectives
9/30/26	Joint Study Session with CCDDb
10/21/26	Regular Board Meeting Draft Program Year 2028 Allocation Criteria
10/28/26	Study Session
<i>10/28/26</i>	<i>Agency PY2027 First Quarter Reports due.</i>
11/18/26	Regular Board Meeting Approve Three Year Plan with One Year Objectives Approve PY28 Allocation Criteria
<i>11/27/26</i>	<i>Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.</i>
12/9/26	Regular Board Meeting – <i>off cycle</i>
<i>12/18/26</i>	<i>Online system opens for applications for PY28 funding.</i>
<i>12/31/26</i>	<i>Agency Independent Audits, Reviews, Compilations due.</i>

Agency and Program Acronyms

AA- Alcoholics Anonymous
AIR – Alliance for Inclusion and Respect (formerly Anti-Stigma Alliance)
BLAST – Bulldogs Learning and Succeeding Together, at Mahomet Area Youth Club
CC – Community Choices or Courage Connection
CCCAC or CAC – (Champaign County) Children’s Advocacy Center
CCCHC – Champaign County Christian Health Center
CCDDB or DDB – Champaign County Developmental Disabilities Board
CCHCC – Champaign County Health Care Consumers
CCHS – Champaign County Head Start, a department of the Champaign County Regional Planning Commission (also CCHS-EHS, for Head Start-Early Head Start)
CCMHB or MHB – Champaign County Mental Health Board
CCRPC or RPC – Champaign County Regional Planning Commission
CN - Crisis Nursery
CSCNCC - Community Service Center of Northern Champaign County, also CSC
CU TRI – CU Trauma & Resiliency Initiative
Courage Connection – previously The Center for Women in Transition
DMBGC - Don Moyer Boys & Girls Club
DREAAM – Driven to Reach Excellence and Academic Achievement for Males
DSC - Developmental Services Center
ECHO – a program of Cunningham Children’s Home
ECIRMAC or RAC – East Central Illinois Refugee Mutual Assistance Center or The Refugee Center
ECMHS - Early Childhood Mental Health Services, a program of CCRPC Head Start
FD – Family Development, previously Family Development Center, a DSC program
FF - FirstFollowers
FS - Family Service of Champaign County
FST – Families Stronger Together, a program of Cunningham Children’s Home
GCAP – Greater Community AIDS Project of East Central Illinois
ISCU - Immigrant Services of Champaign-Urbana
MAYC - Mahomet Area Youth Club
NA- Narcotics Anonymous
NAMI – National Alliance on Mental Illness
PATH – regional provider of 211 information/call services
PEARLS - Program to Encourage Active Rewarding Lives
PHC – Promise Healthcare
PSC - Psychological Services Center (UIUC) or Problem Solving Courts (Drug Court)
RAC or ECIRMAC – East Central Illinois Refugee Mutual Assistance Center
RACES – Rape Advocacy, Counseling, and Education Services
RCI – Rosecrance Central Illinois
RPC or CCRPC – Champaign County Regional Planning Commission
UNCC – Urbana Neighborhood Community Connections Center
UP or UP Center – Uniting Pride
UW or UWCC – United Way of Champaign County
WELL – The Well Experience
WIN Recovery – Women in Need Recovery
YAC – Youth Assessment Center, a program of CCRPC

Glossary of Other Terms and Acronyms

211 – Information and referral services call service

988 – Suicide and Crisis Lifeline

ABA – Applied Behavioral Analysis - an intensive behavioral intervention targeted to autistic children and youth and others with associated behaviors.

ACA – Affordable Care Act

ACEs – Adverse Childhood Experiences

ACMHAI – Association of Community Mental Health Authorities of Illinois

ACL – federal Administration for Community Living

ACT- Acceptance Commitment Therapy

ACT – Assertive Community Treatment

ADD/ADHD – Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder

ADL – Activities of Daily Living

ALICE - Asset Limited, Income Constrained, Employed

A/N – Abuse and Neglect

ANSA – Adult Needs and Strengths Assessment

APN – Advance Practice Nurse

ARC – Attachment, Regulation, and Competency

ARCH – Access to Respite Care and Help

ARMS – Automated Records Management System - used by law enforcement

ASAM – American Society of Addiction Medicine - may be referred to in regard to assessment and criteria for patient placement in level of treatment/care.

ASD – Autism Spectrum Disorder

ASL – American Sign Language

ASQ – Ages and Stages Questionnaire – screening tool used to evaluate a child’s developmental and social emotional growth.

ASQ-SE – Ages and Stages Questionnaire – Social Emotional screen.

ATOD – Alcohol, Tobacco, and Other Drugs

BARJ - Balanced and Restorative Justice approach

BD – Behavior Disorder

BJMHS - Brief Jail Mental Health Screening Tool

CADC – Certified Alcohol and Drug Counselor - provides clinical services, certified by the Illinois Alcoholism and Other Drug Abuse Professional Certification Association.

CALAN or LAN – Child and Adolescent Local Area Network

CANS – Child and Adolescent Needs and Strengths - a multi-purpose tool to support decision making, including level of care, service planning, and monitoring of outcomes of services.

C-CARTS – Champaign County Area Rural Transit System

CATS – Child and Adolescent Trauma Screen

CBCL – Child Behavior Checklist

CBT – Cognitive Behavioral Therapy

CC – Champaign County

CCBHC – Certified Community Behavioral Health Clinic

CCBoH – Champaign County Board of Health

CCHVC - Champaign County Home Visiting Consortium

CCMHDDAC or MHDDAC – Champaign County Mental Health and Developmental Disabilities Agencies Council

CCSO – Champaign County Sheriff's Office

CDC – federal Centers for Disease Control and Prevention

CDS – Community Day Services - day programming for adults with I/DD

CES – Coordinated Entry System

CESSA – Community Emergency Services and Support Act - an Illinois law also referred to as the Stephon Watts Act, requiring mental health professionals be dispatched to certain crisis response.

C-GAF – Children's Global Assessment of Functioning

CGAS – Children's Global Assessment Score

CHW – Community Health Worker

CILA – Community Integrated Living Arrangement - Medicaid-waiver funded residential services for people with I/DD

CIT – Crisis Intervention Team - law enforcement officers trained to respond to calls involving an individual exhibiting behaviors associated with mental illness or substance use disorder.

CLC – Cultural and Linguistic Competence

CLST – Casey Life Skills Tool

CMS – federal Centers for Medicare and Medicaid Services

COC - Continuum of Care Program

CQL – Council on Quality and Leadership

CPTSD or c-PTSD – Complex Post-Traumatic Stress Disorder

CRSS- Certified Recovery Support Specialist

CRT – Co-Responder Team - mobile crisis response intervention coupling a CIT trained law enforcement officer with a mental health crisis worker. Also CCRT – Crisis Co-Responder Team.

CSEs – Community Service Events, as described in a funded agency’s program plan, may include public events (including mass media and articles), consultations with community groups and/or caregivers, classroom presentations, and small group workshops to promote a program or educate the community. Meetings directly related to planning such events may also be counted here. Actual direct service to clientele is counted elsewhere

CSPH – Continuum of Service Providers to the Homeless

CSPI – Childhood Severity of Psychiatric Illness. A mental health assessment instrument

CST – Community Support Team

CY – Contract Year, July 1-June 30. Also Program Year (PY), most agencies’ Fiscal Year (FY)

CYFS – Center for Youth and Family Solutions (formerly Catholic Charities)

DASA – Division of Alcoholism and Substance Abuse in the Illinois Department of Human Services, renamed DSUPR, and later merged with Division of Mental Health and renamed as Division of Behavioral Health and Recovery.

DBHR – (Illinois) Division of Behavioral Health and Recovery

DBT - Dialectical Behavior Therapy

DCFS – (Illinois) Department of Children and Family Services

DECA – Devereux Early Childhood Assessment for Preschoolers

DEI – Diversity, Equity, and Inclusion

Detox – abbreviated reference to detoxification - a general reference to drug and alcohol detoxification program or services, e.g. Detox Program

DD – Developmental Disability

DDD or IDHS DDD – (Illinois) Department of Human Services - Division of Developmental Disabilities

DFI – Donated Funds Initiative - source of matching funds for some MHB funded contracts. The Illinois Department of Human Services administers the DFI Program funded with federal Title XX Social Services Block Grant. The DFI program requires community-based agencies to match the DFI funding with locally generated funds at 25 percent of the total DFI award.

DHFS – (Illinois) Department of Healthcare and Family Services, previously IDPA (Illinois Department of Public Aid)

DHS – (Illinois) Department of Human Services

DMH or IDHS DMH – (Illinois) Department of Human Services - Division of Mental Health, now merged with DSUPR and renamed as Division of Behavioral Health and Recovery.

DOJ – federal Department of Justice

DSM – Diagnostic Statistical Manual

DSP – Direct Support Professional - a certification required for those serving people with I/DD

DT – Developmental Therapy (children), or Developmental Training (adults), now renamed as Community Day Services

DV – Domestic Violence

EAP – Employee Assistance Program

EBP - Evidence Based Practice

EHR – Electronic Health Record

EI – Early Intervention

EMS – Emergency Medical Services

EPDS – Edinburgh Postnatal Depression Scale – a screening tool used to identify mothers with newborn children who may be at risk for prenatal depression.

EPSDT – Early Periodic Screening Diagnosis and Treatment - intended to provide comprehensive and preventative health care services for children under age 21 who are enrolled in Medicaid.

ER – Emergency Room

ES – Emergency Shelter

FACES – Family Adaptability and Cohesion Evaluation Scale

FAST – Family Assessment Tool

FFS – Fee for Service - reimbursement or performance-based billings are the basis of payment

FOIA – Freedom of Information Act

FPL – Federal Poverty Level

FQHC – Federally Qualified Health Center

FTE – Full Time Equivalent - aggregated number of employees supported by the program. Can include employees providing direct services (Direct FTE) to clients and indirect employees such as supervisors or management (Indirect FTE).

FY – Fiscal Year, which for the County is January 1 through December 31

GAAP - Generally Accepted Accounting Principles

GAF – Global Assessment of Functioning - subjective rating scale used by clinicians to rate a client's level of social, occupational and psychological functioning. The scale included in the DSM-IV has been replaced in the DSM-V by another instrument.

GAGAS - Generally Accepted Government Auditing Standards

GAO - Government Accountability Office

GAIN-Q – Global Appraisal of Individual Needs-Quick - the most basic form of the assessment tool, taking about 30 minutes to complete and consists of nine items that identify and estimate the severity of problems of the youth or adult .

GAIN Short Screen - Global Appraisal of Individual Needs - made up of 20 items (four five-item subscales). The GAIN-SS subscales identify internalizing disorders, externalizing disorders, substance use disorders, crime/violence.

GSRC – Gender and Sexuality Resource Center

GSA – Gender/Sexuality Alliances

HACC – Housing Authority of Champaign County

HBS – Home Based Support – an Illinois Medicaid-waiver program for people with I/DD

HCBS – Home and Community Based Supports - a federal Medicaid program

HEARTH Act – Homeless Emergency and Rapid Transition to Housing

HFS or IDHFS – Illinois Department of Healthcare and Family Services

HHS – federal department of Health and Human Services

HIC – Housing Inventory Counts

HIPPA – Health Insurance Portability and Accountability Act

HMIS – Homeless Management Information System

HRSA – Health Resources and Services Administration - housed within the federal Department of Health and Human Resources and responsible for Federally Qualified Health Centers.

HSSC – Homeless Services System Coordination

HUD – Housing and Urban Development

I&R – Information and Referral

ILAPSC – Illinois Association of Problem-Solving Courts

ICADV – Illinois Coalition Against Domestic Violence

ICASA – Illinois Coalition Against Sexual Assault

ICDVP – Illinois Certified Domestic Violence Professional

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ICJIA – Illinois Criminal Justice Authority

ID or I/DD – Intellectual Disability or Intellectual/Developmental Disability

IDHFS or HFS – Illinois Department of Healthcare and Family Services

IDHS DDD – Illinois Department of Human Services Division of Developmental Disabilities

IDHS DMH or DMH – (Illinois) Department of Human Services - Division of Mental Health

IDOC – Illinois Department of Corrections

IECAM - Illinois Early Childhood Asset Map

IEP – Individualized Education Plan

I/ECMHC – Infant/Early Childhood Mental Health Consultation

IGA – Intergovernmental Agreement

IM+CANS – Illinois Medicaid Comprehensive Assessment of Needs and Strengths

IOP – Intensive Outpatient Treatment

IPLAN - Illinois Project for Local Assessment of Needs - a community health assessment and planning process that is conducted every five years by local health jurisdictions in Illinois. Based on the *Assessment Protocol for Excellence in Public Health* (APEX-PH) model, IPLAN is grounded in the core functions of public health and addresses public health practice standards. The completion of IPLAN fulfills most of the requirements for Local Health Department certification under Illinois Administrative Code Section 600.400: Certified Local Health Department Code Public Health Practice Standards. The essential elements of IPLAN are:

1. an organizational capacity assessment;
2. a community health needs assessment; and
3. a community health plan, focusing on a minimum of three priority health problems.

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan

ISSA – Independent Service & Support Advocacy

JDC – Juvenile Detention Center

JJ – Juvenile Justice

JJPD – Juvenile Justice Post Detention

LAN – Local Area Network

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LGTBQIA + – Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Asexual, Ally

LIHEAP – Low Income Home Energy Assistance Program

LPC – Licensed Professional Counselor

LSA – Life Skills Assessment

MAP – Matching to Appropriate Placement - a tool focused on those seeking stable housing

MAR/MAT – Medication Assisted Recovery/Medication Assisted Treatment

MBSR – Mindfulness-Based Stress Reduction

MCO – Managed Care Organization - entity under contract with the state to manage healthcare services for persons enrolled in Medicaid.

MCR – Mobile Crisis Response - previously SASS, a state program that provides crisis intervention for children and youth on Medicaid.

MDT – Multi-Disciplinary Team

MH – Mental Health

MHFA – Mental Health First Aid

MHDDAC or CCMHDDAC – Mental Health and Developmental Disabilities Agencies Council

MHP – Mental Health Professional - Rule 132 term, typically referring to a bachelor's level staff providing services under the supervision of a QMHP.

MI – Mental Illness or Mental Impairment

MI – Motivational Interview

MIDD – A dual diagnosis of Mental Illness and Developmental Disability

MISA – A dual diagnosis condition of Mental Illness and Substance Abuse

MOU – Memorandum of Understanding

MRT – Moral Reconation Therapy

NACBHDD – National Association of County Behavioral Health and Developmental Disability Directors

NACO – National Association of Counties

NADCP – National Association of Drug Court Professionals

NMT – Neurodevelopmental Model of Therapeutics

NOFA – Notice of Funding Availability

NOFO – Notice of Funding Opportunity

NOMS – National Outcome Measures (used by SAMHSA)

NTPC – NON-Treatment Plan Clients, described in program plans, may be recipients of material assistance, non-responsive outreach cases, cases closed before a plan was written because the client did not want further service beyond first few contacts or cases assessed for another agency. Continuing NTPCs are those who were served before the first day of July and received services within the first quarter. New NTPCs are those new in a given quarter.

OCD – Obsessive-Compulsive Disorder

ODD – Oppositional Defiant Disorder

OMA – Open Meetings Act

OP – Outpatient (treatment)

ODU/SUD – Opioid Use Disorder/Substance Use Disorder

PAS – Pre-Admission Screening

PCI – Parent Child Interaction groups

PCP – Person Centered Planning

PFS - Protective Factors Survey

PIT- Point in Time count - a count of sheltered and unsheltered homeless persons carried out on one night in the last 10 calendar days of January or at such other time as required by HUD.

PLAY – Play and Language for Autistic Youngsters - an early intervention approach that teaches parents ways to interact with their child who has autism that promotes developmental progress.

PLL – Parenting with Love and Limits – an evidence-based group/family therapy for youth/families involved in juvenile justice system.

PLWHA – People living with HIV/AIDS

PPSP – Parent Peer Support Partner

PSH – Permanent Supportive Housing

PSR – Patient Service Representative

PTSD – Post-Traumatic Stress Disorder

PUNS – Prioritization of Urgency of Need for Services - IDHS-DDD database to assist with planning and prioritization of services for individuals with disabilities based on level of need.

PWD – People with Disabilities

PWI – Personal Well-being Index

PY – Program Year, July 1 to June 30. Also Contract Year (CY), often agency Fiscal Year (FY).

QCPS – Quarter Cent for Public Safety - the funding source for the Juvenile Justice Post Detention programming. Also referred to as Quarter Cent.

QIDP – Qualified Intellectual Disabilities Professional

QMHP – Qualified Mental Health Professional - a licensed Master's level clinician with field experience.

REBT - Rational Emotive Behavior Therapy

RFI – Request for Information

RFP – Request for Proposals

RTC – Residential Treatment Center

SA – Sexual Assault. Also Substance Abuse

SACIS – Sexual Assault Counseling and Information Service

SAD – Seasonal Affective Disorder

SAMHSA – Substance Abuse and Mental Health Services Administration - a division of the federal Department of Health and Human Services.

SASS – Screening Assessment and Support Services - a state program that provides crisis intervention for children and youth on Medicaid.

SBIRT – Screening, Brief Intervention, Referral to Treatment - a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders.

SCs – Service Contacts/Screening Contacts - an agency's phone and face-to-face contacts, information and referral contacts, initial screenings/assessments, crisis services, or similar.

SDOH – Social Determinants of Health

SDQ – Strengths and Difficulties Questionnaire

SDS – Service Documentation System

Seeking Safety – present-focused treatment for clients with history of trauma and substance use

SED – Serious Emotional Disturbance

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

SIM – Sequential Intercept Mapping - a model developed by SAMHSA

SMI – Serious Mental Illness

SNAP – Supplemental Nutrition Assistance Program

SOAR – SSI/SSDI Outreach, Access, and Recovery - assistance with applications for Social Security Disability and Supplemental Income, provided to homeless population.

SOFFT – “Saving Our Families Together Today,” merged with the LAN (Local Area Network)

SSI – Supplemental Security Income - a program of Social Security

SSDI – Social Security Disability Insurance - a program of Social Security

SSPC – Social Skills and Prevention Coaches

SUD – Substance Use Disorder (replaces SA – Substance Abuse)

SUPR or IDSUPR – (Illinois Division of) Substance Use Prevention & Recovery

TANF – Temporary Assistance for Needy Families

TBRA – Tenant-Based Rental Assistance

TF-CBT – Trauma-Focused Cognitive Behavioral Therapy

TH – Transitional Housing

TPCs – Treatment Plan Clients, service participants with case records and treatment plans. Continuing TPCs are those who were served during the prior program year and then received services within the first quarter of the current program year. New TPCs have treatment plans written in a given quarter. Each TPC is reported only once during a program year.

TPITOS - The Pyramid Infant-Toddler Observation Scale - used by Champaign County Head Start

TPOT - Teaching Pyramid Observation Tool - used by Champaign County Head Start

TCU DS - Texas University Drug Screening tool

VAWA - Violence Against Women Act

VOCA - Victims of Crime Act

WHODAS – World Health Organization Disability Assessment Schedule - assessment instrument for health and disability, used across all diseases, including mental and addictive disorders

WIOA – Workforce Innovation and Opportunity Act

WIC – Women, Infants, and Children - a food assistance program for pregnant women, new mothers and young children eat well and stay healthy.

WRAP – Wellness Recovery Action Plan - a manualized group intervention for adults that guides participants through identifying and understanding their personal wellness resources and helps them develop an individualized plan to use these resources daily to manage their mental illness.

YASI – Youth Assessment and Screening Instrument - assesses risks, needs, and protective factors in youth, used in Champaign County by Youth Assessment Center and Juvenile Detention Center.

**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD
REGULAR MEETING**

Minutes—September 17, 2025

*This meeting was held
at the Scott M. Bennett Administrative Center, Urbana, IL
and with remote access.
5:45 p.m.*

MEMBERS PRESENT: Alejandro Gomez, Tony Nichols, Molly McLay, Elaine Palencia, Kyle Patterson, Jon Paul Youakim

MEMBERS EXCUSED: Chirs Miner, Emily Rodriguez, Jane Sprandel

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville

OTHERS PRESENT: Jacinda Dariotis, UIUC; Jeniece Nance, Dave Barr, Urbana Neighborhood Connection Center (UNCC); Danielle Matthews, DSC; Justin Michael Hendrix (HITNHOMEBOY); Ann Percy, Cunningham Children’s Home; Jessie Hickenmueller, RPC

CALL TO ORDER:

CCMHB President McLay called the meeting to order at 5:45 p.m.

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

The agenda was approved.

CCDDB and CCMHB SCHEDULES:

Updated copies of CCDDB and CCMHB meeting schedules and CCMHB allocation timeline were included in the packet.

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was included for information.

CITIZEN INPUT / PUBLIC PARTICIPATION:

Dave Barr and Jeniece Nance from Urbana Neighborhood Connections Center (UNCC) stated their audit was complete and appreciated the support.

PRESIDENT’S COMMENTS:

CCMHB President Molly McLay recognized new board member, Alejandro Gomez. She thanked Joe Omo-Osagie for his service to the board and the community.

EXECUTIVE DIRECTOR’S COMMENTS:

None.

APPROVAL OF MINUTES:

CCMHB minutes from July 23, 2025 and August 20, 2025 were included in the board packet for review.

MOTION: Dr. Youakim moved to approve the CCMHB minutes from July 23, 2025 and August 20, 2025. Mr. Patterson seconded the motion. A voice vote was taken and the motion passed unanimously.

APPROVAL OF VENDOR INVOICE LISTS:

The Vendor Invoice List was included in the packet.

MOTION: Ms. McLay moved to accept the Vendor Invoice Lists as presented in the Board packet. Ms. Palencia seconded. A voice vote was taken and the motion passed.

OLD BUSINESS:

Deferred Agency Request:

Action deferred on April 30 is now requested for considering funding for Urbana Neighborhood Connections Center (UNCC). Their audit was received on August 5, 2025.

MOTION: Ms. McLay moved to consider the UNCC funding request for PY2026. Dr. Youakim seconded. A roll call vote was taken and all members voted aye. The motion passed.

Review of PY2026 Funding Request:

With the PY24 audit complete, the UNCC request for PY26 funding was reviewed and discussed by the Board. The DRAFT staff program summary was included for information only. Mr. Leon Bryson gave an overview of the program. Dr. Youakim made additional comments regarding their application for funding and the needs in our community. Dr. Nance from UNCC answered Board questions.

Additional PY2026 Allocation Decision:

Board members had a lengthy discussion regarding past procedures with late audits and the work of UNCC in our community.

MOTION: Mr. Patterson moved to approve CCMHB funding in the amount of \$382,180 per year for the period of July 1, 2025 to June 30, 2027 for Urbana Neighborhood Connections-Community Study Center, subject to the caveats presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Dr. Youakim seconded. A roll call vote was taken and the motion passed unanimously.

NEW BUSINESS:**DRAFT Three Year Plan for 2026-2028:**

An initial draft of a three year plan for fiscal years 2026-2028 with objectives for 2026 was included in the packet. A briefing memorandum described the process.

DRAFT PY2027 Allocation Priorities:

An initial draft of PY2027 funding allocation priorities and decision support criteria was presented in the packet.

REPORTS:**Staff Reports**

Staff reports were included in the packet.

Evaluation Capacity Building Project Update:

An oral update was provided. See resources developed by the team at <https://www.familyresiliency.illinois.edu/resources/microlearning-video>

Community Behavioral Health Needs Assessment Activities:

Included for information only were notes from the September meeting of the Community Health Plan Behavioral Health Workgroup.

disAbility Resource Expo Update:

For information was a memorandum from the Expo Coordinators. See also <https://disabilityresourceexpo.org>

Fourth Quarter PY2025 Funded Program Service Reports:

Fourth quarter service activity reports for programs funded by the CCMHB in PY2025 were included in the packet. These reports are not cumulative.

PY2026 Funded Programs:

A summary of programs funded by CCMHB, CCDDDB, and IDDSI was included in the packet for information only.

PUBLIC PARTICIPATION AND AGENCY INPUT:

None.

BOARD TO BOARD REPORTS:

None.

COUNTY BOARD INPUT:

None.

CCDDDB INPUT:

None.

BOARD ANNOUNCEMENTS AND INPUT:

None.

ADJOURNMENT:

The meeting adjourned at 7:30 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDDB Operations and Compliance Coordinator

**Minutes are in draft form and subject to CCMHB approval.*

**CHAMPAIGN COUNTY
MENTAL HEALTH BOARD and
DEVELOPMENTAL DISABILITIES BOARD
JOINT STUDY SESSION**

Minutes—September 24, 2025

*This meeting was held
at the Scott M. Bennett Administrative Center, Urbana, IL and remotely.*

5:45 p.m.

MEMBERS PRESENT: Molly McLay, Chris Miner, Tony Nichols, Elaine Palencia, Kyle Patterson, Vicki Niswander, Anne Robin, Jane Sprandel, Jon Paul Youakim, Emily Rodriguez, Susan Fowler

MEMBERS EXCUSED: Alejandro Gomez, Kim Fisher, Neil Sharma

STAFF PRESENT: Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville

OTHERS PRESENT: Danielle, Theodora, Kelli Martin, Lindsey Anderson, Patty Walters DSC; Eric Beasley, Marella McMurray, Jennifer Buoy, Tobie Wood, Becca Obuchowski, Hannah Sheets, Community Choices; Angela Yost, Jessie Heckenmueller, CCRPC; Chapin Rose, Illinois State Senator; Sharon Costabile, Engage IL

CALL TO ORDER:

CCMHB President McLay called the meeting to order at 5:53 p.m.

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

The agenda was approved.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

PRESIDENT’S COMMENTS:

Ms. Niswander welcomed the advocates. Ms. McLay welcomed everyone as well.

EXECUTIVE DIRECTOR’S COMMENTS:

There were no comments from Director Canfield.

Senator Chapin Rose made a few comments regarding his support for the disability community.

STUDY SESSION: “Resources for People with Intellectual/Developmental Disabilities”

Presenter bios and survey results were included in the packet. Survey results were shared by advocates from DSC and Community Choices.

Sharon Costabile from Engage Illinois spoke regarding the organization and shared personal stories. Board members were given an opportunity to ask questions following the presentation.

Results of the CCRPC Annual Preferences Survey were shared.

PUBLIC PARTICIPATION AND AGENCY INPUT:

None.

BOARD ANNOUNCEMENTS AND INPUT:

The study session on October 29th will be a joint study session.

ADJOURNMENT:

The meeting adjourned at 7:20 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Operations and Compliance Coordinator

**Minutes are in draft form and subject to CCMHB approval.*

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
1 CHAMPAIGN COUNTY TREASURER										
Sep '25	IDD5I25-089	09/01/2025	090525A	51147	19,336.00	19,336.00	09/30/2025	INV	PD	IDD5I25-089 Community
CHECK DATE: 09/05/2025										
1 INVOICES					19,336.00					

** END OF REPORT - Generated by Chris M. wilson **

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
18805 C-U AT HOME Sep '25 MHB25-021 CHECK DATE: 09/05/2025		09/01/2025	090525A	51206	21,391.00	21,391.00	09/30/2025	INV	PD	MHB25-021 Shelter Case
1 CHAMPAIGN COUNTY TREASURER										
Sep '25 MHB25-004 CHECK DATE: 09/05/2025		09/01/2025	090525A	51144	4,523.00	4,523.00	09/30/2025	INV	PD	MHB25-004 Homeless Ser
Sep '25 MHB25-026 CHECK DATE: 09/05/2025		09/01/2025	090525A	51143	32,371.00	32,371.00	09/30/2025	INV	PD	MHB25-026 Early Childh
Sep '25 MHB26-006 CHECK DATE: 09/05/2025		09/01/2025	090525A	51149	5,325.00	5,325.00	09/30/2025	INV	PD	MHB26-006 Champaign Co
Sep '25 MHB26-025 CHECK DATE: 09/05/2025		09/01/2025	090525A	51145	6,362.00	6,362.00	09/30/2025	INV	PD	MHB26-025 Youth Assess
Sep '25 Office Rent CHECK DATE: 09/05/2025		09/01/2025	090525A	51148	2,266.68	2,266.68	09/30/2025	INV	PD	Sep'25 Office Rent 053
					50,847.68					
18254 CHAMPAIGN COUNTY CHRISTIAN HEALTH CENTER Sep '25 MHB26-029 CHECK DATE: 09/12/2025		09/01/2025	091225A	506789	8,333.00	8,333.00	09/30/2025	INV	PD	MHB26-029 Mental Heath
18259 CHAMPAIGN COUNTY HEALTH CARE CONSUMERS										
Sep '25 MHB25-066 CHECK DATE: 09/05/2025		09/01/2025	090525A	506715	8,750.00	8,750.00	09/30/2025	INV	PD	MHB25-066 Disability A
Sep '25 MHB26-044 CHECK DATE: 09/05/2025		09/01/2025	090525A	506715	8,094.00	8,094.00	09/30/2025	INV	PD	MHB26-044 CHW Outreach
Sep '25 MHB26-045 CHECK DATE: 09/05/2025		09/01/2025	090525A	506715	8,607.00	8,607.00	09/30/2025	INV	PD	MHB26-045 Justice Invo
					25,451.00					
10148 COMMUNITY SERVICE CENTER OF NORTHERN Sep '25 MHB26-008 CHECK DATE: 09/05/2025		09/01/2025	090525A	51217	5,888.00	5,888.00	09/30/2025	INV	PD	MHB26-008 Resource Con
18092 COURAGE CONNECTION										
Sep '25 MHB25-007 CHECK DATE: 09/05/2025		09/01/2025	090525A	51219	10,669.00	10,669.00	09/30/2025	INV	PD	MHB25-007 Courage Conn

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
10163 CRISIS NURSERY										
Sep '25 MHB26-005	09/05/2025	09/01/2025	090525A	51220	7,500.00	7,500.00	09/30/2025	INV	PD	MHB26-005 Beyond Blue
18305 CUNNINGHAM CHILDRENS HOME										
Sep '25 MHB25-018	09/05/2025	09/01/2025	090525A	51222	16,975.00	16,975.00	09/30/2025	INV	PD	MHB25-018 ECHO Housing
Sep '25 MHB25-036	09/05/2025	09/01/2025	090525A	51222	23,511.00	23,511.00	09/30/2025	INV	PD	MHB25-036 Families Str
10170 DEVELOPMENTAL SERVICES CENTER OF					40,486.00					
Sep '25 MHB26-012	09/05/2025	09/01/2025	090525A	51226	58,500.00	58,500.00	09/30/2025	INV	PD	MHB26-012 Family Devel
10175 DON MOYER BOYS & GIRLS CLUB										
Sep '25 MHB25-015	09/05/2025	09/01/2025	090525A	51229	7,131.00	7,131.00	09/30/2025	INV	PD	MHB25-015 CU Change
10185 EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR										
Sep '25 MHB26-001	09/05/2025	09/01/2025	090525A	51230	6,286.00	6,286.00	09/30/2025	INV	PD	MHB26-001 Family Suppo
10183 ALEXANDER F CAMPBELL										
766-2552	09/12/2025	09/02/2025	091225A	506797	2,449.95	2,449.95	09/20/2025	INV	PD	Q4 FY25 MHB25-038 CCMH
100 EMPLOYEE VENDOR										
Bowdry 9/2/25	09/12/2025	08/29/2025	091225A	51729	56.81	56.81	09/30/2025	INV	PD	Travel Log 7/1/25 - 8/
										PAYEE: Bowdry, Kim
18343 FAMILY SERVICE OF CHAMPAIGN COUNTY										
Sep '25 MHB26-014	09/05/2025	09/01/2025	090525A	51232	11,860.00	11,860.00	09/30/2025	INV	PD	MHB26-014 Counseling
Sep '25 MHB26-016	09/05/2025	09/01/2025	090525A	51232	3,182.00	3,182.00	09/30/2025	INV	PD	MHB26-016 self-help Ce

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
Sep '25 MHB26-017 CHECK DATE: 09/05/2025		09/01/2025	090525A	51232	17,863.00	17,863.00	09/30/2025	INV	PD	MHB26-017 Senior Couns
10214 FIRST FOLLOWERS					32,905.00					
Sep '25 MHB25-003 CHECK DATE: 09/05/2025		09/01/2025	090525A	51234	7,916.00	7,916.00	09/30/2025	INV	PD	MHB25-003 Peer Mentori
Sep '25 MHB25-034 CHECK DATE: 09/05/2025		09/01/2025	090525A	51234	5,791.00	5,791.00	09/30/2025	INV	PD	MHB25-034 FirstSteps C
20173 GREATER COMMUNITY AIDS PROJECT OF EAST CENTRAL IL					13,707.00					
Sep '25 MHB25-022 CHECK DATE: 09/05/2025		09/01/2025	090525A	506726	5,130.00	5,130.00	09/30/2025	INV	PD	MHB25-022 Advocacy, Ca
10242 GROW IN ILLINOIS										
Sep '25 MHB25-011 CHECK DATE: 09/05/2025		09/01/2025	090525A	51238	13,140.00	13,140.00	09/30/2025	INV	PD	MHB25-011 Peer Support
19785 IMMIGRANT SERVICES OF CHAMPAIGN-URBANA										
Sep '25 MHB26-010 CHECK DATE: 09/05/2025		09/01/2025	090525A	506728	16,688.00	16,688.00	09/30/2025	INV	PD	MHB26-010 Immigrant Me
20570 JP MORGAN CHASE BANK										
6233 8/29/25 CHECK DATE: 09/12/2025		08/29/2025	091225A	506817	1,769.99	1,769.99	09/12/2025	INV	PD	Acct # 4485 9279 0007
10348 MCS OFFICE TECHNOLOGIES INC										
01-710824 CHECK DATE: 09/05/2025		08/25/2025	090525A	506748	67.50	67.50	09/24/2025	INV	PD	Service Ticket # 52519
01-710983 CHECK DATE: 09/12/2025		09/01/2025	091225A	506828	609.00	609.00	10/01/2025	INV	PD	Sep '25 MHB/DOB Managed
01-711051 CHECK DATE: 09/12/2025		09/04/2025	091225A	506828	33.75	33.75	10/04/2025	INV	PD	Service Ticket #52697
01-711069 CHECK DATE: 09/12/2025		09/08/2025	091225A	506828	135.00	135.00	10/08/2025	INV	PD	Service Ticket #52645

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
10374 MINUTEMAN PRESS					845.25					
85296 CHECK DATE: 09/05/2025		06/06/2025	090525A	51273	64.82	64.82	07/06/2025	INV	PD	100 Flyers: Disability
19988 NACBHDD										
INV000172 CHECK DATE: 09/19/2025		09/10/2025	091925A	52037	120.00	120.00	10/09/2025	INV	PD	Registration Shandra S
18413 PROMISE HEALTHCARE										
Sep '25 MHB26-013 CHECK DATE: 09/05/2025		09/01/2025	090525A	51278	30,000.00	30,000.00	09/30/2025	INV	PD	MHB26-013 Mental Health
Sep '25 MHB26-041 CHECK DATE: 09/05/2025		09/01/2025	090525A	51278	10,416.00	10,416.00	09/30/2025	INV	PD	MHB26-041 Wellness
10453 QUILL CORPORATION					40,416.00					
4552511 CHECK DATE: 09/12/2025		08/29/2025	091225A	506839	50.03	50.03	09/28/2025	INV	PD	Acct # 8197518
45606335 CHECK DATE: 09/12/2025		09/04/2025	091225A	506839	26.34	26.34	10/04/2025	INV	PD	Acct # 8197518
45657465 CHECK DATE: 09/19/2025		09/08/2025	091925A	506895	15.77	15.77	10/08/2025	INV	PD	Acct # 8197518
45699675 CHECK DATE: 09/19/2025		09/10/2025	091925A	506895	83.28	83.28	10/10/2025	INV	PD	Acct # 8197518
10464 RAPE, ADVOCACY, COUNSELING & EDUCATION SERVICES					175.42					
Sep '25 MHB26-002 CHECK DATE: 09/05/2025		09/01/2025	090525A	51280	9,009.00	9,009.00	09/30/2025	INV	PD	MHB26-002 Sexual Violence
Sep '25 MHB26-035 CHECK DATE: 09/05/2025		09/01/2025	090525A	51280	16,350.00	16,350.00	09/30/2025	INV	PD	MHB26-035 Sexual Trauma
10488 ROSECRANCE, INC.					25,359.00					
Sep '25 MHB25-019 CHECK DATE: 09/05/2025		09/01/2025	090525A	51286	7,052.00	7,052.00	09/30/2025	INV	PD	MHB25-019 Benefits Cas

Champaign County, IL

VENDOR INVOICE LIST

INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
Sep '25 MHB25-023 CHECK DATE: 09/05/2025		09/01/2025	090525A	51286	8,333.00	8,333.00	09/30/2025	INV	PD	MHB25-023 Recovery Hom
Sep '25 MHB25-030 CHECK DATE: 09/05/2025		09/01/2025	090525A	51286	20,000.00	20,000.00	09/30/2025	INV	PD	MHB25-030 Crisis Co-Re
19284 FEIN-BURSONI INC CHECK DATE: 09/19/2025		09/09/2025	091925A	52051	500.00	500.00	09/24/2025	INV	PD	Expo - Smile Politely
10563 TROPHYTIME, INC. CHECK DATE: 09/12/2025		09/04/2025	091225A	506849	10.00	10.00	10/04/2025	INV	PD	Plastic Signage
10595 UNITING PRIDE CHECK DATE: 09/05/2025		09/01/2025	090525A	51298	15,838.00	15,838.00	09/30/2025	INV	PD	MHB25-009 Children, Yo
10583 UNIVERSITY OF ILLINOIS CHECK DATE: 09/05/2025		09/01/2025	090525A	51299	11,152.16	11,152.16	09/30/2025	INV	PD	MHB23-039 Building Age
10597 URBANA ADULT EDUCATION CHECK DATE: 09/05/2025		09/01/2025	090525A	51303	6,726.00	6,726.00	09/30/2025	INV	PD	MHB25-042 C-U Early
10683 WIN RECOVERY INC CHECK DATE: 09/05/2025		09/01/2025	090525A	51317	15,250.00	15,250.00	09/30/2025	INV	PD	MHB26-069 Community Su
10687 XEROX CORPORATION CHECK DATE: 09/12/2025		09/01/2025	091225A	51719	199.06	199.06	10/01/2025	INV	PD	Aug '25 Copier Service
53 INVOICES					480,370.14					

Champaign County, IL

VENDOR INVOICE LIST



INVOICE	P.O.	INV DATE	CHECK RUN	CHECK #	INVOICE NET	PAID AMOUNT	DUE DATE	TYPE	STS	INVOICE DESCRIPTION
** END OF REPORT - Generated by Chris M. Wilson **										

Champaign County, IL



ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG	OBJECT PROJ	JNL	EFF DATE	SRC	REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
20000154	501002				OFFICE SUPPLIES						
25/09	148 09/02/25	API	000100	98886					51729		
	W 091225A	Reim vacuum cleaner bags	7/28/	Unknown						13.13	13.13
25/09	148 09/02/25	API	010453	98887					506839		
	W 091225A	Dte stmp, slf-ink, blk ink		QUILL CORPORATION						11.87	25.00
25/09	148 09/02/25	API	010453	98887					506839		
	W 091225A	MrcI Magic Eraser orig 6/9Ct		QUILL CORPORATION						11.01	36.01
25/09	148 09/02/25	API	010453	98887					506839		
	W 091225A	Lysol spray crisp linen 19 oz		QUILL CORPORATION						10.06	46.07
25/09	148 09/02/25	API	010453	98887					506839		
	W 091225A	Black/white tape (12Mm)		QUILL CORPORATION						17.09	63.16
25/09	148 09/02/25	API	010453	99263					506839		
	W 091225A	Qsi p40 .81 x 2.19 self-inking		QUILL CORPORATION						26.34	89.50
25/09	148 09/02/25	API	010563	99253					506849		
	W 091225A	Plastic Signage		TROPHYTIME, INC.						10.00	99.50
25/09	148 09/02/25	API	020570	99008					506817		
	W 091225A	HP.com 8/5/25		JP MORGAN CHASE BANK						-38.88	60.62
25/09	148 09/02/25	API	020570	99008					506817		
	W 091225A	walmart.com 8/6/25		JP MORGAN CHASE BANK						18.99	79.61
25/09	306 09/10/25	API	010453	99834					506895		
	W 091925A	Tissue facial boutiq 6/pk		QUILL CORPORATION						15.77	95.38
		LEDGER BALANCES --- DEBITS:								-38.88	95.38
										NET:	
20000154	501004				POSTAGE, UPS, FEDEX						
25/09	141 09/02/25	API	010578	98951					51692		
	W 091225A	Jul 25 MHB Postage Used		UNITED STATES POST O						140.35	140.35
25/09	141 09/02/25	API	010578	98951					51692		
										59.02	199.37

Champaign County, IL



ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	UNITED STATES	POST	O	AMOUNT	NET LEDGER BALANCE
	W 091225A	Aug 25	MHB	Postage Used							
	LEDGER BALANCES ---- DEBITS: 199.37 CREDITS: .00 NET: 199.37										
20000154	501005	FOOD NON-TRAVEL									
25/09	306 09/10/25	API 010453		99877			506895				
	W 091225A	Just water spring 300W1	24Ct	QUILL CORPORATION						83.28	83.28
	LEDGER BALANCES --- DEBITS: 83.28 CREDITS: .00 NET: 83.28										
20000154	501017	EQUIPMENT LESS THAN \$5000									
25/09	148 09/02/25	API 020570		99008			506817				
	W 091225A	Amazon.com 8/11/25		JP MORGAN CHASE BANK						85.98	85.98
25/09	148 09/02/25	API 020570		99008			506817				
	W 091225A	Lenovo 8/14/25		JP MORGAN CHASE BANK						1,659.01	1,744.99
	LEDGER BALANCES ---- DEBITS: 1,744.99 CREDITS: .00 NET: 1,744.99										
20000154	501019	OPERATIONAL SUPPLIES									
25/09	148 09/02/25	API 020570		99008			506817				
	W 091225A	walmart.com 8/6/25		JP MORGAN CHASE BANK						19.89	19.89
	LEDGER BALANCES ---- DEBITS: 19.89 CREDITS: .00 NET: 19.89										
20000154	502001	PROFESSIONAL SERVICES									
25/09	20 09/01/25	API 010583	MHB23-039	98713			51299				
	W 090525A	Sep'25	MHB23-039	Building Agen UNIVERSITY OF ILLINO						11,152.16	11,152.16
25/09	148 09/02/25	API 010183	MHB25-038	98888			506797				
	W 091225A	Q4 FY25	MHB25-038	CCMHB/CCDDB			EMK CONSULTING LLC			2,449.95	13,602.11
25/09	565 09/25/25	API 010076	MHB25-048	100847			52429				
	W 100325A	Q3 2025	Disability Resource	Ex ALLISON BOOT						3,875.00	17,477.11

ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
25/09	565 09/25/25	API 010076	MHB25-048	100847		52429	187.50	17,664.61
	W 100325A	Q3 2025 AIR Public Relations	C ALLISON BOOT					
25/09	565 09/25/25	API 019587	MHB25-049	100849		52501	5,000.00	22,664.61
	W 100325A	Q3 2025 Disability Resource	Ex BOOT					
	LEDGER BALANCES	----	DEBITS:	22,664.61	CREDITS:		.00	22,664.61
20000154	502002		OUTSIDE SERVICES					
25/09	148 09/02/25	API 010348	MHB25-040	98964		506828	609.00	609.00
	W 091225A	Sep'25 MHB/DOB Managed IT Serv	MCS OFFICE TECHNOLOG					
25/09	148 09/02/25	API 010348	99195			506828	33.75	642.75
	W 091225A	Service Ticket #52697 - Remove	MCS OFFICE TECHNOLOG					
25/09	148 09/02/25	API 010348	99443			506828	135.00	777.75
	W 091225A	Service Ticket #52645 - Set up	MCS OFFICE TECHNOLOG					
25/09	565 09/25/25	API 010348	100845			507001	67.50	845.25
	W 100325A	Service Ticket #53048 No Sound	MCS OFFICE TECHNOLOG					
	LEDGER BALANCES	----	DEBITS:	845.25	CREDITS:		.00	845.25
20000154	502003		TRAVEL COSTS					
25/09	148 09/02/25	API 000100	98886			51729	38.71	38.71
	W 091225A	55.3 Miles 7/24/25 - 8/28/25	Unknown					
25/09	148 09/02/25	API 000100	98886			51729	4.97	43.68
	W 091225A	7.1 Miles 8/7/25	Unknown					
	LEDGER BALANCES	----	DEBITS:	43.68	CREDITS:		.00	43.68
20000154	502004		CONFERENCES AND TRAINING					
25/09	306 09/10/25	API 019988	99833			52037	120.00	120.00
	W 091925A	Registration Shandra Summervil	NACBHDD					

Champaign County, IL



ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL	EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
	LEDGER BALANCES	----	DEBITS:		120.00	CREDITS:		.00	120.00
20000154	502013		RENT						
25/09	20 09/01/25		API 000001 203	98714			51148	2,266.68	2,266.68
	W 090525A	Sep'25	Office Rent 053	CCT					
	LEDGER BALANCES	----	DEBITS:	2,266.68		CREDITS:		.00	2,266.68
20000154	502019		ADVERTISING, LEGAL NOTICES						
25/09	306 09/10/25		API 019284	100031			52051	500.00	500.00
	W 091925A	Expo - Smile Politely	2025 ha	SMILE POLITELY					
	LEDGER BALANCES	----	DEBITS:	500.00		CREDITS:		.00	500.00
20000154	502024		PUBLIC RELATIONS						
25/09	148 09/02/25		API 020570	99008			506817	25.00	25.00
	W 091225A	Champaign Park District	8/1/25 JP MORGAN CHASE BANK						
	LEDGER BALANCES	----	DEBITS:	25.00		CREDITS:		.00	25.00
20000154	502025		CONTRIBUTIONS & GRANTS						
25/09	20 09/01/25		API 000001 MHB26-006	98663			51149	5,325.00	5,325.00
	W 090525A	Sep'25	MHB26-006 Champaign Cou	CCT					
25/09	20 09/01/25		API 000001 MHB25-026	98672			51143	32,371.00	37,696.00
	W 090525A	Sep'25	MHB25-026 Early Childho	CCT					
25/09	20 09/01/25		API 000001 MHB25-004	98674			51144	4,523.00	42,219.00
	W 090525A	Sep'25	MHB25-004 Homeless Serv	CCT					
25/09	20 09/01/25		API 000001 MHB26-025	98675			51145	6,362.00	48,581.00
	W 090525A	Sep'25	MHB26-025 Youth Assessm	CCT					
25/09	20 09/01/25		API 010148 MHB26-008	98676			51217	5,888.00	54,469.00

Champaign County, IL



ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
	W 090525A	Sep'25	MHB26-008	Resource Conn COMMUNITY SERVICE	CE			
25/09	20 09/01/25	API 010163	MHB26-005	98678		51220	7,500.00	61,969.00
	W 090525A	Sep'25	MHB26-005	Beyond Blue C CRISIS NURSERY				
25/09	20 09/01/25	API 010170	MHB26-012	98685		51226	58,500.00	120,469.00
	W 090525A	Sep'25	MHB26-012	Family Develo DEVELOPMENTAL SERVIC				
25/09	20 09/01/25	API 010175	MHB25-015	98686		51229	7,131.00	127,600.00
	W 090525A	Sep'25	MHB25-015	CU Change DON MOYER BOYS & GIR				
25/09	20 09/01/25	API 010185	MHB26-001	98687		51230	6,286.00	133,886.00
	W 090525A	Sep'25	MHB26-001	Family Suppor EAST CNTRL IL REFUGE				
25/09	20 09/01/25	API 010214	MHB25-034	98695		51234	5,791.00	139,677.00
	W 090525A	Sep'25	MHB25-034	FirstSteps CO FIRST FOLLOWERS				
25/09	20 09/01/25	API 010214	MHB25-003	98696		51234	7,916.00	147,593.00
	W 090525A	Sep'25	MHB25-003	Peer Mentorin FIRST FOLLOWERS				
25/09	20 09/01/25	API 010242	MHB25-011	98700		51238	13,140.00	160,733.00
	W 090525A	Sep'25	MHB25-011	Peer Support GROW IN ILLINOIS				
25/09	20 09/01/25	API 010464	MHB26-035	98706		51280	16,350.00	177,083.00
	W 090525A	Sep'25	MHB26-035	Sexual Trauma RAPE, ADVOCACY, COUN				
25/09	20 09/01/25	API 010464	MHB26-002	98707		51280	9,009.00	186,092.00
	W 090525A	Sep'25	MHB26-002	Sexual Vtoien RAPE, ADVOCACY, COUN				
25/09	20 09/01/25	API 010488	MHB25-019	98708		51286	7,052.00	193,144.00
	W 090525A	Sep'25	MHB25-019	Benefits Case ROSECRANCE, INC.				
25/09	20 09/01/25	API 010488	MHB25-030	98709		51286	20,000.00	213,144.00
	W 090525A	Sep'25	MHB25-030	Crisis Co-Res ROSECRANCE, INC.				
25/09	20 09/01/25	API 010488	MHB25-023	98710		51286	8,333.00	221,477.00
	W 090525A	Sep'25	MHB25-023	Recovery Home ROSECRANCE, INC.				
25/09	20 09/01/25	API 010595	MHB25-009	98711		51298	15,838.00	237,315.00
	W 090525A	Sep'25	MHB25-009	Children, You UNITING PRIDE				

Champaign County, IL



ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL	EFF DATE	SRC	REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
25/09	W 090525A	20 09/01/25	API 010597	MHB25-042	98683	URBANA ADULT EDUCATI	51303		6,726.00	244,041.00
25/09	W 090525A	20 09/01/25	API 010683	MHB26-069	98712		51317		15,250.00	259,291.00
25/09	W 090525A	20 09/01/25	API 018092	MHB25-007	98677	Courage Conne	51219		10,669.00	269,960.00
25/09	W 090525A	20 09/01/25	API 018259	MHB26-044	98665	CHW Outreach	506715		8,094.00	278,054.00
25/09	W 090525A	20 09/01/25	API 018259	MHB25-066	98668	Disability Ap	506715		8,750.00	286,804.00
25/09	W 090525A	20 09/01/25	API 018259	MHB26-045	98670	Justice Invol	506715		8,607.00	295,411.00
25/09	W 090525A	20 09/01/25	API 018305	MHB25-018	98680	ECHO Housing	51222		16,975.00	312,386.00
25/09	W 090525A	20 09/01/25	API 018305	MHB25-036	98681	Families Stro	51222		23,511.00	335,897.00
25/09	W 090525A	20 09/01/25	API 018343	MHB26-014	98692	Counseling	51232		11,860.00	347,757.00
25/09	W 090525A	20 09/01/25	API 018343	MHB26-016	98693	Self-Help Cen	51232		3,182.00	350,939.00
25/09	W 090525A	20 09/01/25	API 018343	MHB26-017	98694	Senior Counse	51232		17,863.00	368,802.00
25/09	W 090525A	20 09/01/25	API 018413	MHB26-013	98703	Mental Health	51278		30,000.00	398,802.00
25/09	W 090525A	20 09/01/25	API 018413	MHB26-041	98705	PROMISE HEALTHCARE	51278		10,416.00	409,218.00
25/09	W 090525A	20 09/01/25	API 018805	MHB25-021	98682		51206		21,391.00	430,609.00

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ACCOUNT DETAIL HISTORY FOR 2025 09 TO 2025 09

ORG YR/PR	OBJECT PROJ JNL EFF DATE	SRC REF1	REF2	REF3	CHECK #	OB	AMOUNT	NET LEDGER BALANCE
	W 090525A	Sep'25	MHB25-021	Shelter Case	C-U	AT HOME		
25/09	20 09/01/25	API 019785	MHB26-010	98701	506728		16,688.00	447,297.00
	W 090525A	Sep'25	MHB26-010	Immigrant Men IMMIGRANT SERVICES				
25/09	20 09/01/25	API 020173	MHB25-022	98698	506726		5,130.00	452,427.00
	W 090525A	Sep'25	MHB25-022	Advocacy, Car GREATER COMMUNITY				
25/09	148 09/02/25	API 018254	MHB26-029	99476	506789		8,333.00	460,760.00
	W 091225A	Sep'25	MHB26-029	Mental Heath CHAMPAIGN COUNTY CHR				
	LEDGER BALANCES	----	DEBITS:	460,760.00	CREDITS:		.00	460,760.00
							NET:	
20000154	502046		EQUIP LEASE/EQUIP RENT					
25/09	148 09/02/25	API 010687	248	98965	51719		199.06	199.06
	W 091225A	Aug'25	Copier Service 053	XEROX CORPORATION				
	LEDGER BALANCES	----	DEBITS:	199.06	CREDITS:		.00	199.06
							NET:	
20000154	502048		PHONE/INTERNET					
25/09	350 09/09/25	API 018287		99843	51978		52.52	52.52
	W 091925A	MHB Phones Sep 25		CONSOLIDATED COMMUNI				
	LEDGER BALANCES	----	DEBITS:	52.52	CREDITS:		.00	52.52
							NET:	
	GRAND TOTAL	----	DEBITS:	489,658.59	CREDITS:		-38.88	489,619.71
							NET:	

68 Records printed

** END OF REPORT - Generated by Chris M. Wilson **



DECISION MEMORANDUM

DATE: October 22, 2025
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: REVISIONS to FY2026 CCMHB Budget

Overview:

This memorandum presents recommended revisions to budgets for the Champaign County Mental Health Board (CCMHB), Champaign County Developmental Disabilities Board (CCDDB), and I/DD Special Initiatives (IDDSI) Funds for County Fiscal Year 2026 (January 1 - December 31, 2026), each of which was initially approved on July 23. Board approval is requested for the CCMHB revised budget only. CCDDB and IDDSI fund budgets are for information only. The IDDSI Fund is under joint authority of the Boards.

These budget plan revisions are based on updates from the County Executive, Administrator, and Budget Director, as expense estimates have been updated since July, as the result of contract negotiations and Champaign County Board budget hearings and finance committee meetings. Final budgets will be presented to the County Board for their appropriations process in November. Because the CCDDB and CCMHB each have authority over their budgets, approval of any revisions to funds under their authority is requested prior to submission to the County Board which authorizes levies and publishes all budgets.

Attached are proposed draft 2026 CCMHB, CCDDB, and IDDSI Fund Budgets, with background details including comparisons of proposed 2026, projected 2025, and actual revenues and expenditures for fiscal years 2014 through 2024.

Highlights of Initial Versions:

- Projected 2026 property tax revenue assumes 3.5% growth over 2025 for the CCDDB and CCMHB, with no adjustment for collection rate below 100%.
- Miscellaneous Revenue includes revenue returned by agencies in a different fiscal year than paid (CCDDB and CCMHB budgets).
- Miscellaneous Revenue also includes Expo revenue and any refunds or honoraria. These are paid to the CCMHB and then split between the Boards (CCMHB budget).
- Contributions & Grants are the largest expense in each budget, as they include contracts with organizations for services to populations of focus (all three budgets).

- Neither Board will transfer an amount to the I/DD Special Initiatives Fund, but both will be asked to approve use of fund balance to cover 2026 expenses.
- The I/DD Special Initiatives budget is based on joint decisions by the Boards regarding allocations to providers for special projects.
- Some CCMHB expenses are not shared by the CCDDb (MHB Contributions & Grants and MHB-specific insurance, for example).
- Some expenditure categories have changed as the County's Chart of Accounts is adjusted to conform with government accounting standards (CCMHB budget).
- Expo consultant charges and other costs are included with other Professional Services, Rental, Printing, Advertising, Operational Supplies, and Uniforms. The CCDDb/CCMHB Financial Manager has set these up so that they can be tracked upon request, but they are not separated in the presented budgets (CCMHB budget).

Revisions for Review and Approval:

- For all three funds, 2025 projections have been updated to our most reasonable estimates.
- Proposed changes to the previously approved budgets are *italicized* in the drafts attached. (CCDDb and CCMHB).
- Due to the changes below, total costs to be split by the CCMHB and CCDDb are greater than originally estimated, resulting in a larger share to transfer from the CCDDb (as expense) to the CCMHB (as revenue).
- My initial estimate for outside services was based on misreading of current actual cost. This line is increased from \$9,000 to \$10,800.
- The County has negotiated health insurance costs for the full group, including CCDDb-CCMHB staff. At an increase of 29.8%, my initial projection was too low. This line is increased from \$97,233 to \$138,726.
- Expenses lowered to balance increased costs: personnel, travel, contributions & grants.
- Salary changes align with non-bargaining unit increases. Initial estimates were based on a 2025 compensation study and employment contract, which will be amended to clarify.
- Total salaries are the basis for FICA and IMRF calculations, also adjusted.

Decision Section:

Motion to approve the attached REVISED 2026 CCMHB Budget, with anticipated revenues and expenditures of \$7,410,462.

☐ Approved
☐ Denied
☐ Modified
☐ Additional Information Needed

Draft 2026 CCMHB Budget

LINE ITEM	BUDGETED REVENUE	
400101	Property Taxes, Current	\$6,849,360
400103	Back Property Taxes	\$2,000
400106	Mobile Home Tax	\$4,200
400104	Payment in Lieu of Taxes	\$2,000
400476	CCDDB Revenue	\$479,902
400801	Investment Interest	\$50,000
400901	Gifts & Donations	\$1,000
400902	Misc & Expo Revenue	\$22,000
	TOTAL REVENUE	\$7,410,462

LINE ITEM	BUDGETED EXPENDITURES	
500102	Appointed Official	\$119,771
500103	Regular FTE	\$421,334
500105	Temporary Salaries & Wages	\$500
500108	Overtime Wages	\$500
500301	Social Security/FICA	\$41,513
500302	IMRF Employer Cost	\$19,265
500304	Workers' Comp Insurance	\$2,165
500305	Unemployment Insurance	\$1,981
500306	Health/Life Insurance	\$138,726
	Personnel Total	\$745,755
501001	Stationery & Printing (Printing & Copier Suppl)	\$4,000
501002	Office Supplies	\$3,000
501003	Books, Periodicals, and Manuals	\$200
501004	Postage, UPS, Fed Ex	\$2,000
501005	Food, Non-Travel	\$2,000
501012	Uniforms (Expo T-shirts)	\$750
501013	Non-Food Supplies	\$250
501017	Equipment Less Than \$5000	\$8,400
501019	Operational Supplies	\$2,750
501021	Employee Development/Recognition	\$200
	Commodities Total	\$23,550
502001	Professional Services	\$220,000
502002	Outside Services (Computer Services)	\$10,800
502003	Travel Costs	\$6,000
502004	Conferences and Training (Employee only)	\$3,000
502005	Training Programs (Non-Employee)	\$5,000
502007	Insurance (Non-Payroll)	\$23,000
502012	Repairs and Maintenance (short term)	\$0
502013	Rent (Office, Expo Storage/Booths/Venue)	\$43,500
502014	Finance Charges/Bank Fees	\$30
502019	Advertising, Legal Notices (adds Expo Marketing & Promotion)	\$10,000
502021	Dues, License, & Membership	\$20,000
502022	Operational Services (Zoom, domain names, web hosting, surveys)	\$5,000
502024	Public Relations (Anti-Stigma)	\$7,000
502025	Contributions & Grants	\$6,255,827
502037	Repairs and Maintenance (Bldg, Alarm)	\$1,000
502045	Attorney/Legal Services	\$1,500
502046	Equipment Lease/Rental (Copier)	\$2,500
502047	Software License & SAAS (user license, software cloud & installed)	\$14,000
502048	Phone/Internet	\$3,000
	Services Total	\$6,631,157
700101	Interfund Transfer, CCDDB (Share of Expo and some of Other Misc Rev)	\$10,000
	Interfund Transfers TOTAL	\$10,000
	TOTAL EXPENSES*	\$7,410,462

Draft 2026 CCDDDB Budget

LINE ITEM	BUDGETED REVENUE	
400101	Property Taxes, Current	\$5,624,961
400103	Back Property Taxes	\$2,000
400106	Mobile Home Tax	\$3,000
400104	Payment in Lieu of Taxes	\$4,000
400801	Investment Interest	\$43,000
600101	Interfund Transfer (Expo and some Other Misc Rev) from MHB	\$10,000
400902	Other Miscellaneous Revenue	\$3,000
	TOTAL REVENUE	\$5,689,961

LINE ITEM	BUDGETED EXPENDITURES	
5002001	Professional Services (42.15% of an adjusted set of CCMHB Admin Expenses)	\$479,902
502007	Insurance	\$4,983
502025	Contributions & Grants	\$5,205,076
	TOTAL EXPENSES	\$5,689,961

Draft 2026 I/DD Special Initiatives

Fund Budget

LINE ITEM	BUDGETED REVENUE	
400801	Investment Interest	\$4,000
-	From Fund Balance	\$229,117
	TOTAL REVENUE	\$233,117

LINE ITEM	BUDGETED EXPENDITURES	
501017	Equipment Less than \$5,000 (includes a designated gift for the benefit of one individual, accessed at family request, with balance \$5063 as of October 4, 2025)	\$5,063
502001	Professional Services (legal, accounting, if needed)	\$0
502025	Contributions and Grants	\$228,054
	TOTAL EXPENSES	\$233,117

Background for 2026 CCMHB Budget, with 2025 Projections and Earlier Actuals

2026 BUDGETED REVENUE		2025 PROJECTED	2024 ACTUAL	2023 ACTUAL	2022 ACTUAL	2021 ACTUAL	2020 ACTUAL	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$6,849,360	\$6,636,977	\$6,304,478	\$5,937,146	\$5,492,390	\$5,278,325	\$4,880,491	\$4,813,598	\$4,611,577	\$4,415,651	\$4,246,055	\$4,161,439	\$4,037,720
Back Property Taxes	\$2,000	\$2,000	\$0	\$0	\$8,824	\$0	\$3,382	\$6,489	\$494	\$2,731	\$2,486	\$2,861	\$1,612
Mobile Home Tax	\$4,200	\$4,200	\$3,543	\$3,920	\$3,700	\$0	\$3,736	\$4,062	\$3,909	\$3,766	\$3,903	\$3,995	\$3,861
Payment in Lieu of Taxes	\$2,000	\$2,000	\$327	\$2,916	\$1,474	\$3,679	\$1,088	\$2,604	\$3,406	\$3,201	\$2,970	\$2,869	\$2,859
CCDDB Revenue	\$479,902	\$420,444	\$389,917	\$389,194	\$358,450	\$366,344	\$346,706	\$409,175	\$310,783	\$287,697	\$377,695	\$330,637	\$337,536
Investment Interest	\$50,000	\$56,270	\$88,482	\$99,693	\$47,855	\$1,343	\$7,627	\$45,950	\$41,818	\$18,473	\$3,493	\$1,385	\$1,015
Gift & Donations	\$1,000	\$1,000	\$575	\$450	\$0	\$100	\$2,900	\$4,706					
Expo Revenue (combined with Other Misc Rev)	\$0	\$0	\$0	\$0	\$0	\$100	\$13,805	\$14,275	\$21,613	\$5,225	\$18,822	\$26,221	\$28,192
Other Misc Revenue	\$22,000	\$23,000	\$19,667	\$22,057	\$55,161	\$2,205	\$80	\$129,028	\$29,955	\$117,195	\$21,340	\$67,599	\$85,719
*ARPA Funding			\$0	\$0	\$0	\$770,436							
TOTAL REVENUE	\$7,410,462	\$7,145,891	\$6,806,989	\$6,455,376	\$5,967,854	\$6,422,532	\$5,259,815	\$5,429,887	\$5,023,555	\$4,853,939	\$4,676,764	\$4,597,006	\$4,498,514

* Per the County Board, the full amount of ARP request was deposited during 2021, with half spent in 2021 and the other half in 2022. This results in the appearance of a surplus in 2021 and deficit in 2022, though the fund balance covered it.

2026 BUDGETED EXPENDITURES (SEE PAGE 5 FOR DETAILS)		2025 PROJECTED	2024 ACTUAL	2023 ACTUAL	2022 ACTUAL	2021 ACTUAL	2020 ACTUAL	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Personnel	\$745,755	\$646,029	\$595,483	\$581,916	\$564,444	\$564,542	\$544,001	\$517,053	\$522,073	\$449,220	\$577,548	\$502,890	\$532,909
Commodities	\$23,550	\$22,550	\$18,887	\$19,411	\$10,930	\$8,632	\$12,362	\$11,147	\$10,049	\$6,263	\$7,998	\$11,237	\$9,282
Services (not Contrib & Grants)	\$375,330	\$349,200	\$325,811	\$342,829	\$283,066	\$268,512	\$286,912	\$286,376	\$404,059	\$432,828	\$410,157	\$382,870	\$375,735
*Contributions & Grants	\$6,255,827	\$6,083,397	\$5,855,312	\$5,227,318	\$5,288,028	\$5,063,438	\$4,495,820	\$3,993,283	\$3,648,188	\$3,593,418	\$3,428,015	\$3,335,718	\$3,673,966
Interfund Expenditures	\$10,000	\$10,000	\$5,907	\$132,599	\$6,908	\$28,430	\$5,819	\$406,505	\$56,779	\$57,288	\$60,673	\$0	\$0
Interest on Tax Case	\$0	\$0	\$0	\$0	\$0	\$0	\$1,648						
TOTAL EXPENSES	\$7,410,462	\$7,111,176	\$6,801,400	\$6,304,073	\$6,153,376	\$5,933,554	\$5,346,562	\$5,214,364	\$4,641,148	\$4,539,017	\$4,484,391	\$4,232,715	\$4,591,892

Additional Information about Expenses (Proposed 2026 versus Projected 2025)

Personnel Costs			Services (not Contributions and Grants)			Interfund Expenditures		
PERSONNEL	2026	2025	SERVICES	2026	2025	INTERFUND TRANSFERS	2026	2025
Appointed Official	\$119,771	\$116,282	Professional Services*	\$220,000	\$205,000	CCDDB Share of Expo and some of MHB Misc Revenue	\$10,000	\$10,000
Regular FTE	\$421,334	\$409,062	Attorney/Legal Services*	\$1,500	\$1,000			
Temporary Wage/Sal	\$500	\$1,000	Outside Services (e.g., Computer)	\$10,800	\$11,000			
Overtime Wages	\$500	\$500	Travel Costs	\$6,000	\$6,000			
FICA	\$41,513	\$40,189	Conferences and Training (employee only)**	\$3,000	\$4,000			
IMRF	\$19,265	\$15,444						
W-Comp	\$2,165	\$2,101	Training Programs (Non-Employee)	\$5,000	\$5,000			
Unemployment	\$1,981	\$3,166						
Health/Life Insurance	\$138,726	\$58,285	Insurance (Non-Payroll)	\$23,000	\$20,000			
			Equipment Maintenance	\$0	\$200			
			Repairs (Brookens)	\$1,000	\$5,000			
			Rental (Office and Expo)***	\$43,500	\$37,500			
			Rental (Equipment)	\$2,500	\$2,500			
			Finance Charges/Bank Fees	\$30	\$0			
			Advertising, Legal Notices (adds Expo marketing)***	\$10,000	\$7,000			
			Public Relations***	\$7,000	\$5,000			
			Dues/Licenses	\$20,000	\$20,000			
			Operational Svs (Zoom, etc)	\$5,000	\$3,000			
			Software License	\$14,000	\$14,000			
			Phone/Internet	\$3,000	\$3,000			
				\$375,330	\$349,200			

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Additional Information about Services

SERVICES	2026	2025	
Professional Services*	\$220,000	\$205,000	Includes some costs determined by the County, for Accounting Services, Payroll and IT, and External Audit. Also includes the cost of independent contractors: coordinating the Expo and social media, assisting with MHFA trainings, providing support to agencies for Evaluation Capacity Building, maintaining Expo and AIR websites, maintaining and improving the online application system, sharing state DD info and advocacy, language access and accessibility, shredding, reviews of agency audits and reviews, 211 information services, and human resources services through AAIM.
Public Relations***	\$7,000	\$20,000	\$15,000 Eberfest film sponsorship, offset by Alliance contributions. \$3,000 estimated for other community events and anti-stigma art show(s) and promotion. \$2,000 sponsorships of other events, in which Expo, AIR, or the Boards are promoted.
disability Resource Expo***	\$0	\$0	<i>Now charged to Professional Services, Rental, Advertising, and PR with Expo-related.</i> Support for Expo events, including venue, supplies, food, interpreters, advertising, t-shirts, storage space, etc. Expo Coordinators, interpreters, and PAs charged to Professional Services. <i>Costs offset by exhibitor fees and sponsorships.</i>
CCMHB Contributions & Grants	\$6,255,827	\$6,083,397	CCMHB payments to agencies from January 1 to June 30, 2025, as authorized in May 2024, plus payments authorized in May 2025 to be made from July through December 2025.
CCDDB Contributions & Grants	\$5,205,076	\$5,068,949	Actual CCDDB payments to agencies from January 1 to June 30, 2025, as authorized in May 2024, plus payments authorized in May 2025, to be made from July 2025 through December 2025.
Dues/Licenses	\$20,000	\$20,000	\$1,000 national trade association (NACBHDD), \$3,000 AAIM (paid every three years), \$16,000 state trade association (ACMHA), small amounts Human Services Council, Arc of Illinois, possible NADSP membership.
Conferences/Training	\$3,000	\$4,000	\$500 registration for NACo and NACBHDD Legislative and Policy Conferences (offset by ACMHA). Registration fees for other conference/training for staff members might include Mental Health America, Federation of Families, Arc of IL, NADD, or similar. Mental Health First Aid training and certification. <i>Costs of travel and meal per diems for staff for any of these conferences are included in different lines.</i>
Non-Employee Conferences / Trainings**	\$5,000	\$10,000	Registration, costs of travel, lodging, and food for board members to attend National or State Association meetings and other conferences or trainings of interest. Also charged here are the costs associated with Mental Health First Aid trainings and monthly learning opportunities/trainings for non-employees (e.g., case managers, other service providers, stakeholders), which can include presenters, rental, refreshments, materials, promotion. Some virtual trainings.
Unexpected			Changes in supports to agencies, non-employee trainings, Public Relations, Expo costs. Public health barrier to large gatherings. Cost of moving offices to a different location, greater need for legal counsel. Budget amendment if employee resignation (with benefits payout) or change in staffing. Fund balances are lowest in May, at which point there should be enough for 6 months operating + any tax liability + share (57.85%/42.15%) of accrued staff benefits. If first tax distribution does not occur by mid-June, fund balance may be used.

Calculation of the CCDDDB Administrative Share (“Professional Services”)

Adjustments:		2026	2025
CCMHB Contributions & Grants		\$6,255,827	\$6,083,397
Eberffest AIR anti-stigma film		\$0	\$15000
MHB-specific insurance cost		\$6078	5285
CCDDDB Share of Donations & Misc Rev		\$10,000	\$10,000
Adjustments Total:		\$6,271,905	\$6,113,682
CCMHB Total Expenditures:		\$7,410,462	\$7,111,176
Total Expenditures less Adjustments:		\$1,138,557	\$997,494

		2026	2025*
		CCDDDB Share	CCDDDB Share
Total Expenditures less Adjustments		\$1,138,557	\$997,494
Adjusted Expenditures x 42.15%		\$479,902	\$420,444
Monthly Total for CCDDDB Admin		\$39,992	\$35,037

*At the end of the Fiscal Year, actual expenses are updated, some revenues (e.g., Expo) are shared, and adjustments are made to the CCDDDB current year share.

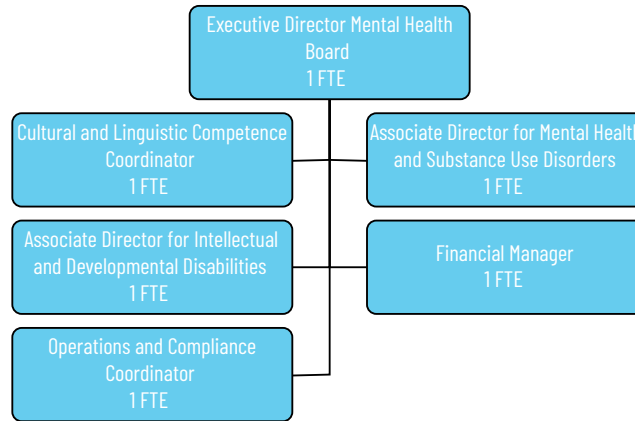
Background for 2026 CCDDDB Budget, with 2025 Projections and Earlier Actuals

2026 BUDGETED REVENUES	2025 PROJECTED	2024 ACTUAL	2023 ACTUAL	2022 ACTUAL	2021 ACTUAL	2020 ACTUAL	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$5,624,961	\$5,450,544	\$4,879,251	\$4,511,249	\$4,334,187	\$4,001,872	\$3,982,668	\$3,846,413	\$3,684,009	\$3,595,174	\$3,545,446	\$3,501,362
Back Property Taxes	\$2,000	\$2,000	\$0	\$7,246	\$0	\$2,773	\$5,369	\$412	\$2,278	\$2,105	\$2,437	\$1,398
Mobile Home Tax	\$3,000	\$3,000	\$3,222	\$3,039	\$0	\$3,066	\$3,361	\$3,261	\$3,142	\$3,305	\$3,404	\$3,348
Payment in Lieu of Taxes	\$4,000	\$4,000	\$2,396	\$1,210	\$3,021	\$0	\$2,154	\$2,841	\$2,671	\$2,515	\$2,445	\$2,479
Investment Interest	\$43,000	\$44,840	\$84,072	\$35,285	\$791	\$4,054	\$23,508	\$24,062	\$10,883	\$2,318	\$1,488	\$812
Gifts & Donations (MHB transfer)	\$10,000	\$10,000	\$5,064	\$6,908	\$0	\$5,819	\$106,505	\$6,779	\$7,288	\$10,673	\$0	\$0
Other Misc Revenue	\$3,000	\$5,000	\$50,550	\$0	\$971	\$9,524	\$8,955	\$6,408	\$14,432	\$0	\$0	\$11,825
TOTAL REVENUE	\$5,689,961	\$5,519,384	\$5,024,555	\$4,564,937	\$4,338,970	\$4,027,108	\$4,132,520	\$3,890,176	\$3,724,703	\$3,616,091	\$3,555,220	\$3,521,224

2026 BUDGETED EXPENDITURES	2025 PROJECTED	2024 ACTUAL	2023 ACTUAL	2022 ACTUAL	2021 ACTUAL	2020 ACTUAL	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Professional Services (42.15% of some MHB costs)	\$479,902	\$387,736	\$389,194	\$358,450	\$366,344	\$330,445	\$309,175	\$310,783	\$287,697	\$379,405	\$330,637	\$337,536
Contributions & Grants	\$5,205,076	\$4,557,261	\$4,090,901	\$3,777,207	\$3,514,153	\$3,659,691	\$3,435,748	\$3,250,768	\$3,262,938	\$3,206,389	\$3,069,122	\$3,224,172
Insurance specific to DDB	\$4,983	\$4,333										
Interfund Transfer, CILA Fund	\$0	\$0	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$50,000	\$0
Interfund Transfer to MH	\$0						\$100,000					
Interest on Tax Case	\$0		\$0	\$0	\$0	\$1,363						
TOTAL EXPENSES	\$5,689,961	\$4,949,330	\$4,530,095	\$4,185,657	\$3,930,497	\$4,041,499	\$3,894,923	\$3,611,551	\$3,600,635	\$3,635,794	\$3,449,759	\$3,561,708

Special Revenue Funds

Mental Health Board Special Revenue Fund (2090-053)



Mental Health Board positions: 6 FTE

The Champaign County Mental Health Board (CCMHB), consisting of nine volunteer Board members who are selected and appointed by the Champaign County Executive and Board, was established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. Seq.), “The Community Mental Health Act,” by a referendum approved by Champaign County voters. Through passage of the referendum, a property tax levy supports fulfillment of the Board’s mission in compliance with the Act. To help meet its obligations, the Board employs an administrative team consisting of an Executive Director and five specialized staff.

MISSION STATEMENT

The mission of the Champaign County Mental Health Board is the promotion of a local system of services for the prevention and treatment of mental or emotional, intellectual or developmental, and substance use disorders, in accordance with the assessed priorities of the citizens of Champaign County.

Revenue raised through the levy is distributed, using a competitive application process, to community-based organizations serving Champaign County residents who have mental health or substance use disorders or intellectual/developmental disabilities (I/DD). Because most organizations’ fiscal years align with the state fiscal year, July 1 through June 30, and because many rely on state funding, the CCMHB and other local funders use this as the contract period (or “Program Year”), providing for clear, uniform financial reporting and increased accountability. These CCMHB funds are allocated as Contributions and Grants expenditures.

Some activities contributing to the local system are undertaken outside of those agency services budgeted through Contributions and Grants. Additional strategies by which the CCMHB promotes a local system include: 211 information and referral call services; Cultural and Linguistic Competency technical assistance and training; Mental Health First Aid trainings; monthly presentations and learning opportunities for service providers and interested parties; anti-stigma awareness through social media, website, and community events; projects with UIUC student groups and instructors; promotion of the work of artists and entrepreneurs with lived experience; collaborative community needs assessments to

understand the priorities of Champaign County citizens; and a large annual disAbility Resource Expo with searchable, comprehensive online resource guide. These activities are budgeted as expenditures other than Contributions and Grants, and many are shared with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability, referred to as Champaign County Developmental Disabilities Board (CCDDDB) through intergovernmental agreement, included in revenue which is transferred from the CCDDDB to the CCMHB. The CCMHB also oversees an I/DD Special Initiatives fund in partnership with the CCDDDB; details on that project are included in the I/DD Special Initiatives Fund documents.

Please see <http://ccmhddbrds.org> for information on these supports, agency programs currently funded by the CCMHB, funding guidelines and financial accountability policy, Three Year Plan, allocation priorities and timelines, and aggregate annual reports of the funded agencies’ performance outcomes.

BUDGET HIGHLIGHTS – Per Allocation Priority Category

The first six months of 2026 Contributions and Grants is comprised of payments on contracts selected for their alignment with annually determined funding allocation priorities. Priorities for the agency contract period of PY2026 (July 1, 2025 through June 30, 2026) were developed, considered, and approved prior to an open, public, competitive, field-initiated funding opportunity, launched at the end of 2024. Early in 2025, the Board accepted applications for funding within this priorities framework.

For the first six months of 2026, all agency contracts are for two-year terms, staggered so that approximately half expire at one time. This practice may continue for PY2027, as it adds stability to services offered by non-profit and governmental entities and reduces paperwork for all.

Safety and Crisis Stabilization.

For the agency PY2026 contract year, the CCMHB has awarded contracts for: services for people who have justice system involvement or who are diverted from deeper involvement via these resources; services to those enrolled in Champaign County Drug Court; various case management and housing supports and other services, including for people who do not have a permanent address or are in re-entry from jail or prison; crisis co-response and follow-up for domestic offense calls in northern Champaign County and rural areas; Youth Assessment Center support; and interruption of community violence. The CCMHB encourages innovative practices with improved behavioral health outcomes, high return on investment, and cost-shift impact. Related collaborations include: the Illinois Criminal Justice Information Authority's Byrne State Crisis Intervention Program advisory board and Champaign County Problem Solving Courts, Reentry Council, Continuum of Service Providers to the Homeless, Rantoul Service Providers, Youth Assessment Center Advisory Council, and Crisis Intervention Team Steering Committee.

Healing from Interpersonal Violence.

To improve health and success of survivors, reduce the stigma and isolation associated with interpersonal violence, disrupt cycles of violence, promote trauma-informed care and crisis response, the CCMHB funds counseling services, child victim services, and other supports for survivors of domestic violence and sexual assault.

Closing the Gaps in Access and Care.

Recommended Practices are supported by an evidence base, cultural context, and sound clinical judgment. Innovative Practices have value for populations not thoroughly included in prevailing research and often not engaged in services. Many programs are for services not covered by Medicaid or other payor, and CCMHB funding focuses on those who do not have the financial means to pay for services. With growing evidence of positive outcomes, peer support organizations are funded and encouraged to partner. For the agency contract year PY2026, the CCMHB funds: coordination of homeless services; benefits enrollment; case management; housing and employment supports for those with risk of homelessness; refugee and immigrant services; self-help center; services for senior citizens and those family members providing their care; wellness and mental health supports at a Federally Qualified Health Center and a free clinic; resource center in northern Champaign County; family therapy for multi-system involved youth; and substance use recovery services.

Thriving Children, Youth, and Families.

The Champaign County Community Coalition consists of representatives from the Cities of Champaign and Urbana, Urbana and Champaign schools and park districts, Parkland College, University of Illinois at Urbana-Champaign, United Way of Champaign County, Champaign Urbana Public Health District, law enforcement, State's Attorney's Office, and other County government. The Coalition promotes healthier and safer communities through events, training, violence interruption, and positive opportunities for youth, leading with System of Care values – family-driven, youth-guided, trauma-informed, culturally responsive. For the agency contract year PY2026, the CCMHB contracts for services and supports for children, youth, and families, also aligned with these principles. The partnerships promoted through the Coalition are a continued focus.

Intellectual/Developmental Disabilities.

Per Intergovernmental Agreement with the CCDD, the CCMHB committed \$934,945 for the agency contract year PY2026, for programs serving people with I/DD. Contracts funded by the CCMHB align with a shared priority for services for very young children. Early childhood providers continue a robust interagency partnership to better support young children and their families through home visits; most incorporate trauma-informed and other System of Care principles. One offers PLAY Project, an evidence-based program for young children with autism.

NEW for PY2026 – Strengthening the Behavioral Health Workforce.

While no agency contracts focus solely on this priority, some align with it by adjusting specific staff salaries to more competitive levels in order to reduce turnover and vacancy rates, both of which are harmful to people who utilize the services offered by funded programs.

The second six months of 2026 Contributions and Grants is comprised of anticipated payments on contracts selected for their alignment with annually determined funding allocation priorities. Priorities for the agency contract period of PY2027 (July 1, 2026 through June 30, 2027) are developed, considered, and approved prior to an open, public, competitive, field-initiated funding opportunity, launched at the end of 2025. Early in 2026, the Board will accept applications for funding within the priorities framework set in late 2025. Board and staff members will review submitted applications to determine best values for the residents of Champaign County, and the Board will make a majority of final allocation decisions in late Spring. Successful applications will deliver services and receive payments beginning July 1, 2026 and through June 30, 2027.

Department Summary

		2024 Actual	2025 Original	2025 Projected	2026 Budget
Revenues					
Property Taxes					
400101	Property Taxes - Current	6,304,478	6,634,170	6,636,977	6,849,360
400103	Property Taxes - Back Tax	0	2,000	2,000	2,000
400104	Payment In Lieu Of Taxes	327	2,000	2,000	2,000
400106	Mobile Home Tax	3,543	4,200	4,200	4,200
Property Taxes Total		6,308,348	6,642,370	6,645,177	6,857,560
Intergov Revenue					
400476	Other Intergovernmental	386,077	446,102	420,444	479,902
Intergov Revenue Total		386,077	446,102	420,444	479,902
Misc Revenue					
400801	Investment Interest	97,730	56,270	56,270	50,000
400901	Gifts And Donations	575	1,000	1,000	1,000
400902	Other Miscellaneous Revenue	19,667	23,000	23,000	22,000
Misc Revenue Total		117,972	80,270	80,270	73,000
Revenues Total		6,812,397	7,168,742	7,145,891	7,410,462
Expenditures					
Personnel					
500102	Appointed Official Salary	110,745	116,282	116,282	119,771
500103	Regular Full-Time Employees	389,584	409,062	409,062	421,334
500105	Temporary Staff	158	1,000	1,000	500
500108	Overtime	0	500	500	500
500301	Social Security-Employer	36,638	40,189	40,189	41,513
500302	Imrf - Employer Cost	13,038	14,237	15,444	19,265
500304	Workers' Compensation Insuranc	1,927	2,101	2,101	2,165
500305	Unemployment Insurance	1,900	1,739	3,166	1,981
500306	Ee Hlth/Lif (Hlth Only Fy23)	53,040	106,877	58,285	138,726
Personnel Total		607,029	691,987	646,029	745,755
Commodities					
501001	Stationery And Printing	4,135	4,000	4,000	4,000
501002	Office Supplies	2,072	4,000	3,000	3,000
501003	Books, Periodicals, And Manual	0	300	300	200
501004	Postage, Ups, Fedex	1,314	2,000	2,000	2,000
501005	Food Non-Travel	1,298	1,500	2,000	2,000

Department Summary

		2024 Actual	2025 Original	2025 Projected	2026 Budget
501012	Uniforms/Clothing	543	1,000	750	750
501013	Dietary Non-Food Supplies	123	250	250	250
501017	Equipment Less Than \$5000	7,191	7,500	7,500	8,400
501019	Operational Supplies	2,212	3,000	2,750	2,750
501021	Employee Develop/Recognition	0	285	0	200
Commodities Total		18,887	23,835	22,550	23,550
Services					
502001	Professional Services	203,483	193,000	205,000	220,000
502002	Outside Services	10,102	10,000	11,000	10,800
502003	Travel Costs	4,132	9,000	6,000	6,000
502004	Conferences And Training	550	4,000	4,000	3,000
502005	Training Programs	1,075	10,000	5,000	5,000
502007	Insurance (Non-Payroll)	11,674	20,000	20,000	23,000
502012	Repair & Maint	0	200	200	0
502013	Rent	37,421	37,500	37,500	43,500
502014	Finance Charges And Bank Fees	2	30	30	30
502019	Advertising, Legal Notices	4,591	12,000	7,000	10,000
502021	Dues, License, & Membership	16,070	20,000	20,000	20,000
502022	Operational Services	1,987	5,000	3,000	5,000
502024	Public Relations	15,100	20,000	5,000	7,000
502025	Contributions & Grants	5,855,312	6,080,090	6,083,397	6,255,827
502037	Repair & Maint - Building	0	100	5,000	1,000
502045	Attorney/Legal Services	0	2,500	1,000	1,500
502046	Equip Lease/Equip Rent	2,389	2,500	2,500	2,500
502047	Software License & Saas	10,641	14,000	14,000	14,000
502048	Phone/Internet	2,657	3,000	3,000	3,000
Services Total		6,177,186	6,442,920	6,432,627	6,631,157
Interfund Expense					
700101	Transfers Out	5,907	10,000	10,000	10,000
Interfund Expense Total		5,907	10,000	10,000	10,000
Expenditures Total		6,809,010	7,168,742	7,111,206	7,410,462

Fund Balance

2024 Actual	2025 Projected	2026 Budget
3,839,214	3,839,214	3,798,351

Expense Per Capita (in actual dollars)

2024 Actual	2025 Projected	2026 Budget
\$30.94	\$33.22	\$34.82

ALIGNMENT to STRATEGIC PLAN**County Board Goal 1 - Champaign County is a high-performing, open, and transparent local government organization**

With statutory responsibility to plan and evaluate systems of services and supports, CCMHB members and staff maintain involvement in state and national trade associations and advisory committees to maximize advocacy impact and access to state and federal leadership.

Funding decisions are made in open, properly noticed public meetings. Requests for funding are reviewed in open meetings prior to these decisions. Public participation is welcomed at meetings and study sessions. Members of the public may also offer input via Board staff by email.

Strategic plan objectives and funding allocation priorities are reviewed and approved annually during open meetings, with opportunities for public and stakeholder input, and finalized before public Notification of Funding Availability is made, 21 days prior to the application period. A timeline for these and related activities is included in board packets, online, and upon request.

An online application and reporting system is maintained and updated to support these functions at <http://ccmhddbrds.org>. Members of the public, agency representatives, stakeholders, and CCMHB members and staff contribute to revisions of materials and the online system.

At <http://ccmhddbrds.org> are links to information about funded programs and other activities, along with downloadable documents of interest to agencies and the public.

During open meetings, Board members review requests for funding and participate in deliberations about final allocations as well as policies and procedures.

The online system receives: agency applications for funding; agency reports of service activity, financial activity, CLC progress, and annual performance outcomes; aggregate and sortable data; announcements; and downloadable documents. Many reports are made public, posted online or in board meeting materials, summarized, and available upon request.

Funded agencies use CCMHB approved expenditure and revenue categories and accrual accounting. All are required to submit an annual audit, financial review, or compilation report, depending on total agency revenue level. These are conducted by independent CPA firms. CCMHB staff and consultant review the reports for alignment to standards and to understand agencies' financial standing and eligibility for future funding.

Board meeting schedules, agendas, minutes, and recordings are posted for the public on the Champaign County government's website.

Educational and collaborative opportunities advance the local system of services and supports.

County Board Goal 2 - Champaign County maintains high-quality public facilities and roads and provides a safe rural transportation system

For the fullest inclusion of people with I/DD, two small group homes were maintained at a high standard from 2015 through 2020. Due to critical direct support staff shortages, the homes were vacated and sold in 2021 and 2022. Although the CCMHB does not maintain a facility or transportation system directly, portions of contracts with service providers may cover costs related to facilities and transportation used by people with MI, SUD, or I/DD.

County Board Goal 3 - Champaign County promotes a safe, just, and healthy community

Many CCMHB and contracted agency activities are meant to: mitigate the impacts of trauma and violence; reduce unnecessary or inappropriate incarceration, hospitalization, or institutionalization of people with MI, SUD, and/or I/DD; and improve health and social integration, including of those in reentry and their loved ones. Efforts are made through crisis response and stabilization, benefits enrollment, intensive case management, peer support and mentoring, and collaboration with law enforcement, health care, and education.

Staff participate in the Champaign County Reentry Council, Drug Court Steering Committee, Crisis Intervention Training Steering Committee, Youth Assessment Center Advisory Board, and more. Some crisis response efforts are based on the earlier work of the County's Jail Task Force, Justice and Mental Health Collaboration Project, and Racial Justice Task Force, and some relate to the federal 988 crisis call system. When opportunities arise, staff and board members contribute to statewide efforts, such as the ICJIA State Crisis Intervention Program advisory board, and local collaborations such as the Champaign County Community Coalition and the UIUC Campus Community Compact.

To achieve the shared goal of making Champaign County the healthiest community in the State of Illinois, CCMHB staff meet with health and behavioral healthcare providers and funders who have similar needs assessment processes and strategic plan goals.

A 211 call service is co-funded with the United Way of Champaign County.

An accessible, searchable online resource directory is maintained at <http://disabilityresourceexpo.org>.

The System of Care approach can improve outcomes for children, youth, and families, especially those impacted by violence and other trauma. Community-wide trauma education continues.

CCMHB staff organize learning and networking opportunities for providers of mental health, substance use, and I/DD services, collaborating with the UIUC School of Social Work to offer Continuing Education Units at no cost to participants.

With other units of government, educators, providers, stakeholders, and advocacy groups, the CCMHB collaborates on wellness/recovery programming, innovative practices, and anti-stigma initiatives, e.g., <http://champaigncountyAIR.com> and related social media.

County Board Goal 4 - Champaign County is a county that supports planned growth to balance economic growth with the preservation of our natural resources

In accordance with the Community Mental Health Act, the CCMHB advocates at the state and national levels for and with people who have mental health, substance use, or developmental disability-related needs. Staff participate in trade association activities and committees, advocating for other sources of revenue for services and for alignment of policies with best practices.

The CCMHB seeks to understand the impact of changes to state and federal programs to make effective and ethical investments of local funding. Independently and through collaboration, the CCMHB pursues sustainable, efficient supports with other funders and community partners.

The majority of this fund is allocated to community-based organizations to provide services through a professional workforce that contributes to the economy and character of the County. Many programs allow people with behavioral health conditions and I/DD to thrive and contribute to the community's economy and culture.

County Board Goal 5 - Champaign County is a county that maintains safe and accurate county records and performs county administrative, governance, election, and taxing functions for county residents

In accordance with the Community Mental Health Act, the CCMHB allocates funding as established through the original referendum.

Online records are maintained at the County government website and <http://ccmhddbrds.org>. Paper and electronic files are also maintained and stored as required by the Local Records Act.

DESCRIPTION

The CCMHB was established under Illinois Revised Statutes (405 ILCS – 20/ Section 0.1 et. Seq.) and is responsible for planning, coordinating, evaluating, and allocating funds for a comprehensive local system of mental health, intellectual/developmental disabilities, and substance use services for Champaign County.

On an annual cycle, the CCMHB evaluates, plans, and funds supports for people with mental illness, substance use disorders, and intellectual/developmental disabilities, with special emphasis on underinvested populations. Service providers demonstrate financial and programmatic accountability and report on the impact of their services. Providers and Board staff meet approximately monthly for updates and coordination of services. Collaboration with other government, funding organizations, peer networks, community-based providers, and parent and youth groups is also within the purview of the CCMHB and enhances evaluation and planning.

OBJECTIVES

In collaboration with Champaign County Government and community stakeholders, ensure that people with disabilities or behavioral health conditions are diverted to services and supports and away from Jail whenever appropriate.

In collaboration with the Champaign County Community Coalition and partners, address the effects of trauma and violence, promote recovery, and improve the system of care for children, youth, and families.

Based on annually approved priorities and decision support criteria and timeline, issue contracts for services and supports for people who have mental health or substance use disorders or intellectual/developmental disabilities.

Monitor program and financial accountability for all such contracts with community-based organizations.

Through monitoring and collaboration, assist with improving services and access to services.

Based on the findings of the regional collaborative health plan (IPLAN) and community health needs assessment, implement FY2026 objectives for the CCMHB Three Year Plan.

Improve the outcome and program performance measures and tools associated with funded programs, using input from stakeholders, people who use or seek services, and the contracted research team.

In collaboration with the CCDD and consistent with the intent of the intergovernmental agreement between the two Boards, assess the current staffing array and responsibilities to modernize functions and ensure efficient government.

Performance Indicators

Indicator	2024 Actual	2025 Projected	2026 Budget
Number of contracts awarded and executed for services or supports for people with mental health or substance use disorders or intellectual/developmental disabilities	45	39	38
Number of people served who have a mental health/substance use disorder or intellectual/developmental disability	21,267	21,000	21,000
Number of state or federal advocacy activities or reports completed by Board members and staff	15	16	12
Number of desk reviews conducted (number of reports submitted), per agency contract	20 (24)	24 (24)	24 (24)
Number of agency contract compliance reviews by CCMHB staff, per contract	0.5	0.5	0.5
Number of improvements to the tracking or reporting of program performance, utilization, cultural and linguistic competence plans, or financial activities (i.e., an enhancement or revision implemented during the fiscal year)	3	4	3
Number of funded (not funded) organizations represented at collaborative meetings with board staff	35 (8)	32 (7)	33 (7)
Number of funded programs participating as target programs in the Evaluation Capacity project	2	2	2
Percentage of required reports received in compliance with terms of contract	90%	90%	95%

I/DD Special Initiatives (2101-054)

MISSION STATEMENT

The mission of the I/DD Special Initiatives fund, formerly the Community Integrated Living Arrangement (CILA) project, has been to expand the availability of “smaller setting” homes for people with intellectual and developmental disabilities (I/DD) and, to the extent possible, assure that people from Champaign County have integrated residential options within the County. The project arose in response to a large number of residents having no choice other than to utilize CILA services in communities far from Champaign County or to remain in family homes with limited care.

BUDGET HIGHLIGHTS

In 2014, the Champaign County Mental Health Board (CCMHB) and the Champaign County Developmental Disabilities Board (CCDDb) committed to purchasing properties for use as CILA houses, each with a capacity of 4 or fewer people. Each board contributed toward the purchase of the houses. During 2019, the CCMHB paid the mortgage balance, and the Boards amended their intergovernmental agreement to define future contributions and prepare for several possibilities.

From 2015 through 2020, two houses were in operation, with services provided by Individual Advocacy Group (IAG) and funded by the state of Illinois Department of Human Services-Division of Developmental Disabilities (IDHS-DDD). To stabilize the organization’s staffing level and

revenue for local operations, IAG worked with CCMHB and CCDDb members and staff, local families, IDHS-DDD, and Independent Service Coordination staff to create additional day and residential services in the community. This was successful for a while in the face of persistent barriers, namely the I/DD workforce shortage and uncertainty of state/federal CILA funding. During 2020 and 2021, the workforce shortage led to reduced operations and closure and sale of the homes.

The Boards no longer transfer revenue to this fund. Using fund balance, the primary expenses are contracts with organizations to provide a range of supports to such individuals as would have been eligible for this project, had it continued to offer housing with 24-hour staff.

\$5,063 of budgeted expenditures result from a gift designated for a particular individual. This ‘trust’ is accessed at the request of the individual’s family and restricted by terms set by the private donor.

Initially held in 090-054, fund 101-054 was established in FY2016 in collaboration with the Champaign County Auditor’s Office, for transparency in CILA fund financial activities. The fund was renamed as “I/DD Special Initiatives” and is now focused on solutions to critical service capacity barriers.

Department Summary

		2024 Actual	2025 Original	2025 Projected	2026 Budget
Revenues					
Misc Revenue					
400801	Investment Interest	21,406	6,000	6,000	4,000
	Misc Revenue Total	21,406	6,000	6,000	4,000
	Revenues Total	21,406	6,000	6,000	4,000
Expenditures					
Commodities					
501017	Equipment Less Than \$5000	0	5,063	5,063	5,063
	Commodities Total	0	5,063	5,063	5,063
Services					
502001	Professional Services	1,420	1,000	0	0
502025	Contributions & Grants	220,646	233,000	233,000	228,054
	Services Total	222,066	234,000	233,000	228,054
	Expenditures Total	222,066	239,063	238,063	233,117

Fund Balance

2024 Actual	2025 Projected	2026 Budget
495,067	262,004	32,887

ALIGNMENT to STRATEGIC PLAN**County Board Goal 1 - Champaign County is a high-performing, open, and transparent local government organization**

The CILA project's service provider was initially determined by a Request for Proposal process, compliant with the Open Meetings Act. Related discussions and decisions occurred during public meetings of each of the CCDDb and CCMHB.

The current phase of this project retains a focus on individuals who have I/DD and complex service needs, particularly those needs which are not easily met by a local provider agency. The focus shifts from housing to funding of shorter-term supports. Allocation priorities, review of proposals, and award decisions are discussed and approved during public meetings of the two Boards.

County Board Goal 2 - Champaign County maintains high-quality public facilities and roads and provides a safe rural transportation system

For fullest inclusion of people with I/DD, two small CILA group homes were maintained at a high standard from 2015 through 2020. Due to critical direct support staff shortages, the homes were vacated and sold in 2021 and 2022. This County Board Goal is no longer addressed directly by this fund.

County Board Goal 3 - Champaign County promotes a safe, just, and healthy community

At the heart of this project is the goal of full community integration of persons with I/DD, aligned with terms of the State of Illinois' Ligas Consent Decree. Barriers to the Community Integrated Living Arrangement (CILA) model of care have increased, requiring new strategies.

County Board Goal 4 - Champaign County is a county that supports planned growth to balance economic growth with the preservation of our natural resources

The majority of this fund is allocated to contracts with community-based organizations to provide services through a professional workforce which contributes to the economy and character of the County. These services and supports help people with I/DD and their families to thrive and contribute to the community's economy and culture. The CCMHB and CCDDb are aware of service options funded by the state through its partnership with federal Centers for Medicare and Medicaid Services. CCDDb and CCMHB members and staff engage in advocacy and support programs which help eligible people secure other available funding.

County Board Goal 5 - Champaign County is a county that maintains safe and accurate county records and performs county administrative, governance, election, and taxing functions for county residents

In accordance with the Community Mental Health Act and the Community Care for Persons with Disabilities Act, the CCMHB and CCDDb each allocate funding and enter into agreements as established by their respective original referenda.

Records are maintained at the Champaign County government website and at <http://ccmhdbdrds.org>. Paper and electronic files are maintained and stored as required by the Local Records Act.

DESCRIPTION

The CCMHB was established under Illinois Revised Statutes (405 ILCS – 20/ Section 0.1 et. seq.) to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents of Champaign County."

The CCMHB is responsible for planning, coordinating, evaluating, and allocating funds for the comprehensive local system of mental health, developmental disabilities, and substance use services for Champaign County.

The CCDDb was established under Illinois Revised Statutes (50 ILCS 835 Section 0.05-14), the "Community Care for Persons with Developmental Disabilities Act," and also has authority to own facilities to be used in the provision of services to people with intellectual and developmental disabilities.

The CCDDb is responsible for planning, coordinating, evaluating, and allocating funds for services and supports for people with intellectual and/or developmental disabilities.

The Boards promote systems of services for the benefit of Champaign County residents, with special emphasis on historically underresourced populations and on those without the means to pay for these services and supports.

The I/DD Special Initiatives project is a collaboration between the Boards, in recognition of their shared responsibility for people with I/DD and according to their Intergovernmental Agreement as amended.

OBJECTIVES

Continue to explore and expand virtual and technology supports for people with I/DD, to foster their fullest community involvement, aligned with public health guidance and state and federal policies.

When feasible, restore and expand small group home or other integrated residential capacity for Champaign County residents who have intellectual and developmental disabilities.

Through CCMHB and CCDDb allocation processes, fund appropriate supports for Champaign County residents who have I/DD and complex support needs.

Performance Indicators

Indicator	2024 Actual	2025 Projected	2026 Budget
Total dollars appropriated for IDDSI	220,646	239,063	233,117
Number of improvements to the tracking or reporting of program performance, utilization, cultural and linguistic competence plans, or financial activities (i.e., an enhancement or revision implemented during the fiscal year)	3	4	3
Number of agency contract compliance reviews by CCDDb/CCMHB Staff, per contract	n/a	1	1
Number of desk reviews conducted (number of reports submitted) per agency contract	21 (28)	24 (28)	23 (28)
Number of people receiving a support through contracts with agencies from this fund	90	148	150

Developmental Disabilities Board Special Revenue Fund (2108-050)

The Champaign County Board for Care and Treatment of Persons with a Developmental Disability, referred to as the Champaign County Developmental Disabilities Board (CCDDDB), consists of five volunteer Board members who are selected by the Champaign County Executive and Board. It was established under the Illinois County Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 55, Sections 105/0.01 to 105/13 inclusive) by a referendum approved by Champaign County voters in 2004. Through passage of the referendum, a property tax levy supports fulfillment of the Board's mission in accordance with the Act. On January 1, 2019, the Act was revised as the Community Care for Persons with Developmental Disabilities Act, 50 ILCS 835 (0.05–14). Shortly after the CCDDDB was established and its members appointed, it entered into an Intergovernmental Agreement with the Champaign County Mental Health Board (CCMHB) to purchase administrative services through its paid staff team, described in the CCMHB Fund documents.

MISSION STATEMENT

The mission of the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDDB) is the advancement of a local system of programs and services for the treatment of people with intellectual/developmental disabilities, in accordance with the assessed priorities of the citizens of Champaign County.

Revenue raised through the levy is distributed, using a competitive application process, to community-based organizations serving Champaign County residents who have intellectual/developmental disabilities (I/DD). Because most organizations' fiscal years align with the state fiscal year, July 1 through June 30, and because many rely on state funding, the CCDDDB and other local funders use this as the contract period (or "Program Year"), allowing for clear, uniform financial reporting and increased accountability. These CCDDDB funds are allocated as Contributions and Grants expenditures, nearly 92% of the total budget.

Some activities contributing to the local system are undertaken outside of the agency services which are budgeted as Contributions & Grants. Other strategies by which the CCDDDB promotes a local system include: information and referral through the call service 211; Cultural and Linguistic Competency technical assistance and training; monthly presentations and learning opportunities for service providers and interested parties; anti-stigma awareness through social media, website, and events; projects with UIUC student groups and instructors; promotion of the work of artists and entrepreneurs with disabilities; collaborative community needs assessment to understand the priorities of Champaign County citizens; and a large annual disAbility Resource Expo event with searchable, comprehensive online resource guide. Per an Intergovernmental Agreement between the CCDDDB and the Champaign County Mental Health Board (CCMHB), these activities are co-funded and paid as a share of the CCMHB's administrative costs, through Professional Services. The two boards also co-fund and share authority over the I/DD Special Initiatives fund to offer supports for people with complex support needs.

Please see <http://ccmhddbrds.org> for information on these supports, agency programs currently funded by the CCDDDB, funding guidelines and financial accountability policy, Three Year Plan, allocation priorities and timelines, and annual reports of the funded agencies' aggregate performance outcomes.

BUDGET HIGHLIGHTS

Recommended Practices, Core Services, and Innovative Supports.

The ten-year-plus "Employment First" project prepares providers, families, and businesses for community employment of people with I/DD. Its most well-known product is the "Leaders in Employing All People" (LEAP) certification and training. It stands as an example of interagency collaboration. The CCDDDB also funds: customized employment and varied employment supports; self-advocacy and family groups; traditional services, especially for those with no other source of funding; and service coordination, planning, and linkage. Per the intergovernmental agreement with the CCMHB, care for young children is prioritized and funded, including the use of evidence-based and recommended practices. Decreasing provider capacity and workforce shortages present challenges across the country, state, and county; CCDDDB contracts help stabilize supports for Champaign County residents and their families.

Responding to Community Input.

Feedback from community members, including people with I/DD and their loved ones, informs the Board's strategic plan and funding priorities, with common themes: the desire for a full community life; stigma as a barrier; and difficulty accessing services, often due to limited transportation, insufficient state/federal funding, or low awareness of services. For the agency contract year PY2026, July 1, 2025 to June 30, 2026, the CCDDDB supports: independent living and community employment programs; transformation of day programming from facility-based to community; assisting young adults in the transition from high school; conflict free case management and service planning for people who qualify for but do not yet receive state funding; case management and clinical supports for people with DD and behavioral health needs; transportation services; and workforce retention initiatives. Feedback from providers and board members is used to revise the annual funding priorities and to improve the online application and reporting system used by applicants and funded organizations. PY2026 priority categories are: Advocacy and Linkage; Home Life; Personal Life; Work Life; Community Life; Strengthening the I/DD Workforce; and Young Children and their Families. The Three Year Plan with objectives specific to 2026 will inform future allocation priorities and Board/staff practices.

Workshops and Presentations.

CCDDB staff coordinate a monthly learning opportunity especially for case managers working with people who have I/DD. Topics are determined by the group's interests and the Board's goals and priorities. Most learning opportunities offer continuing education units and help attendees network. The target audience has expanded to include other service providers, family members, stakeholders, and agency financial staff. Topics also cover pressing needs (narcotics administration, e.g.). These are held in-person when appropriate and affordable and virtually when not.

Cultural and Linguistic Competence.

A coordinator with CLC certifications in behavioral health and I/DD consults with service providers to improve access and engagement of underinvested communities. This supports agencies' quality improvement efforts and alignment with National Standards for Culturally and Linguistically Appropriate Services in Health and Healthcare.

Reporting of Service-Level Data.

Programs report service-level data through a HIPAA compliant online system introduced in 2017. CCDDB staff are able to examine and report on utilization across programs as well as per person served.

I/DD Special Initiatives, formerly Community Integrated Living Arrangement (CILA) Expansion.

This collaboration with the CCMHB was established to purchase and operate small group homes for people who had been unable to secure appropriate services locally. Due to critical direct staff shortages, the homes were vacated and sold in 2021 and 2022. The project focus shifted from housing to short-term supports for Champaign County residents who have I/DD and complex support needs.

Challenging the Stigma Associated with Intellectual/Developmental Disabilities.

Stigma is a barrier to services, funding, wellness, and full community participation of those who have I/DD as well as of their loved ones. The CCDDB supports community anti-stigma efforts such as art shows, social media campaigns, traditional print and online resource guides, community awareness events, trainings, and a large disAbility Resource Expo. Board staff work with UIUC student groups and local organizations to plan and support events to challenge stigma and promote inclusion.

Department Summary

		2024 Actual	2025 Original	2025 Projected	2026 Budget
Revenues					
Property Taxes					
400101	Property Taxes - Current	5,178,683	5,449,496	5,450,544	5,624,961
400103	Property Taxes - Back Tax	0	2,000	2,000	2,000
400104	Payment In Lieu Of Taxes	269	4,000	4,000	4,000
400106	Mobile Home Tax	2,911	3,000	3,000	3,000
Property Taxes Total		5,181,862	5,458,496	5,459,544	5,633,961
Misc Revenue					
400801	Investment Interest	101,873	44,840	44,840	43,000
400902	Other Miscellaneous Revenue	0	5,000	5,000	3,000
Misc Revenue Total		101,873	49,840	49,840	46,000

Department Summary

	2024 Actual	2025 Original	2025 Projected	2026 Budget
Interfund Revenue				
600101 Transfers In	5,907	10,000	10,000	10,000
Interfund Revenue Total	5,907	10,000	10,000	10,000
Revenues Total	5,289,643	5,518,336	5,519,384	5,689,961
Expenditures				
Services				
502001 Professional Services	386,077	446,102	420,444	479,902
502007 Insurance (Non-Payroll)	4,333	4,333	4,333	4,983
502025 Contributions & Grants	4,557,261	5,067,901	5,068,949	5,205,076
Services Total	4,947,671	5,518,336	5,493,726	5,689,961
Expenditures Total	4,947,671	5,518,336	5,493,726	5,689,961

Fund Balance

2024 Actual	2025 Projected	2026 Budget
3,959,960	3,959,960	3,959,960

Expense Per Capita (in actual dollars)

2024 Actual	2025 Projected	2026 Budget
\$23.68	\$25.48	\$26.81

ALIGNMENT to STRATEGIC PLAN

County Board Goal 1 - Champaign County is a high-performing, open, and transparent local government organization

With statutory responsibility to plan and evaluate systems of services and supports, CCDDb members and staff are active in state and national trade associations and advisory committees to maximize advocacy efforts and contact with state and federal leadership.

Funding decisions are made in open, properly noticed public meetings. Requests for funding are reviewed in open meetings prior to these decisions. Public participation is welcomed at meetings and study sessions. Members of the public may also offer input via Board staff by email.

Strategic plans and funding allocation priorities are reviewed and approved annually during open meetings, with opportunities for public and stakeholder input, and finalized before public Notification of Funding Availability is made, 21 days prior to the application period. A timeline for these and related activities is included in board packets, online, and upon request.

An online application and reporting system is maintained and updated to support these functions, at <http://ccmhddbrds.org>. Members of the public, agency representatives, stakeholders, and CCDDb members and staff contribute to revisions of materials and online system.

At <http://ccmhddbrds.org> are links to information about funded programs and other activities, along with downloadable documents of interest to agencies and the public.

During open meetings, Board members review requests for funding and participate in deliberations about final allocations as well as policies and procedures.

The online system receives: agency applications for funding; agency reports of service activity, financial activity, cultural and linguistic competence plan progress, and annual performance outcomes; aggregate and sortable data; announcements; and downloadable documents. Many reports are made public, posted online or in board meeting materials, summarized, and available upon request.

Funded agencies use CCDDb approved expenditure and revenue categories and accrual accounting. All are required to submit an annual audit, financial review, or compilation report, depending on total agency revenue level. These are conducted by independent CPA firms. CCDDb staff and consultant review the reports for alignment with standards and to understand agencies' financial standing and eligibility for future funding.

Board meeting schedules, agendas, minutes, and recordings are posted for the public on Champaign County government's website. Video recordings of board meetings have captions, and documents are accessible.

Educational and collaborative opportunities advance the local system of services and supports.

County Board Goal 2 - Champaign County maintains high-quality public facilities and roads and provides a safe rural transportation system

For the fullest inclusion of people with I/DD, two small group homes were maintained at a high standard from 2015 through 2020. Due to critical direct support staff shortages, the homes were vacated and sold in 2021 and 2022. Although the CCDDDB does not maintain a facility or transportation system directly, portions of contracts with service providers may cover costs related to facilities and transportation used by people with MI, SUD, or I/DD.

County Board Goal 3 - Champaign County promotes a safe, just, and healthy community

To achieve the shared goal of making Champaign County the healthiest community in the State of Illinois, CCDDDB staff meet with I health and behavioral healthcare providers and funders who have similar needs assessment processes and strategic plan goals.

A 211 call service is co-funded with the United Way of Champaign County.

An accessible, searchable online resource directory is maintained at <http://disabilityresourceexpo.org>.

CCDDDB staff organize learning and networking opportunities for providers of I/DD services, collaborating with the UIUC School of Social Work to offer Continuing Education Units at no cost to participants.

Case management improves coordination and access to benefits, services, and supports. A variety of services and supports are funded and monitored which increase the self-reliance, well-being, and community inclusion of people with intellectual/developmental disabilities.

With other units of government, educators, providers, stakeholders, and advocacy organizations, the CCDDDB collaborates on the planning of wellness and independent living programming for people with disabilities, innovative and recommended practices, and anti-stigma initiatives, e.g., <http://champaigncountyAIR.com> and <http://disabilityresourceexpo.org>. The disABILITY Resource Expo supports improving the health, inclusion, and quality of life of people with disabilities.

County Board Goal 4 - Champaign County is a county that supports planned growth to balance economic growth with the preservation of our natural resources

In accordance with the establishing Act, the CCDDDB advocates at the state and national levels for and with people who may use I/DD services. Staff participate in trade association activities and committees, advocating for other sources of revenue for services and for policy changes to improve the impact and cost.

The CCDDDB seeks to understand the impact of changes to state and federal programs to make effective and ethical investments of local funds. Independently and through collaboration, the CCDDDB pursues sustainable, efficient supports with other funders and community partners.

The majority of this fund is allocated for community-based services, much more cost-effective than institutional care. These services are delivered by a professional workforce, contributing to the economy and character of Champaign County. Many programs allow people with I/DD and their families to thrive and contribute to the community's economy and culture.

County Board Goal 5 - Champaign County is a county that maintains safe and accurate county records and performs county administrative, governance, election, and taxing functions for county residents

In accordance with the Community Care for Persons with Disabilities Act, the CCDDDB allocates funding as established through the original referendum.

Online records are maintained at the County government website and <http://ccmhddbrds.org>. Paper and electronic files are also maintained and stored as required by the Local Records Act.

DESCRIPTION

The CCDDDB was established by referendum and operates under the requirements of the Community Care for Persons with Disabilities Act (50 ILCS 835). All funds are allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The CCDDDB is responsible for planning, coordinating, monitoring, evaluating, and funding a comprehensive community-based system of intellectual/developmental disabilities programs and services.

Annually, applications for funding are assessed using CCDDDB established decision support criteria and are subject to the availability of funds. The nature and scope of applications vary significantly and may include treatment, early intervention, long term supports, service coordination and advocacy, and family support. Providers demonstrate financial and programmatic accountability and report on the impact of their services. Providers and Board staff meet approximately monthly for updates and coordination. Collaboration with other government, funding organizations, peer networks, community-based providers, and parent/youth groups are also within the purview of the CCDDDB and enhance evaluation and planning.

OBJECTIVES

To identify best practices and overcome barriers experienced by persons with I/DD, continue involvement with state and national advocacy organizations and trade association I/DD committees, for meetings, webinars, and learning communities. In addition to increasing people's engagement with their community through integrated housing and employment, integrated non-work activities connect people to resources, friends, and family. Innovations in support of people's aspirations and preferences are of value.

Participate in collaborative efforts to identify local resources and needs. Through trade association committees and opportunities, advocate for Champaign County residents who have I/DD. Through statewide coalitions, support redesign of the formal I/DD support system.

For planning and evaluation, use PUNS and other data to understand the service needs and outcomes of Champaign County residents with I/DD. Several programs report service-level data, allowing for analysis of service utilization and gaps. From those agencies accredited by the Council on Quality and Leadership, the summary (and anonymous) results of Performance Outcome Measure interviews may also inform the CCDDb's planning.

Strategize with service providers and stakeholders to address the workforce shortage and remove barriers to expanding service provider capacity and upholding client choice.

With service providers, advocates, and stakeholders, plan for best supports for people with challenging behavioral issues and complex service needs. This effort may involve other Champaign County government, law enforcement, educators, and healthcare providers, as well as non-traditional supports, in order to divert people with disabilities from unnecessary incarceration, hospitalization, and institutionalization.

Based on approved priorities and decision support criteria, issue contracts for services and supports for people who have intellectual/developmental disabilities.

Monitor program and financial accountability for all contracts with community-based organizations.

Through monitoring and collaboration, assist with improving services and access to services.

Based on the findings of the regional collaborative health plan (IPLAN) and community health needs assessment, implement 2026 objectives for the CCDDb Three Year Plan.

Improve the outcome and program performance measures and tools associated with funded programs, using input from stakeholders, people who use or seek services, and the consulting research team.

In collaboration with the CCMHB and consistent with the intent of the intergovernmental agreement between the two Boards, assess the current staffing array and responsibilities to modernize functions and ensure efficient government.

Performance Indicators

Indicator	2024 Actual	2025 Projected	2026 Budget
Number of contracts awarded and executed for services or supports for people with I/DD	15	16	16
Number of persons served who have I/DD (services for young children are funded by the CCMHB in PY23, PY24, and PY25)	950	1025	1050
Number of state or federal advocacy activities or reports completed by Board members and Staff	15	16	12
Number of desk reviews conducted (number of reports submitted) per agency contract	21 (28)	24 (28)	24 (28)
Number of agency contract compliance reviews by CCDDb Staff, per contract	0.5	0.5	0.5
Number of improvements to the tracking or reporting of program performance, utilization, cultural and linguistic competence plans, or financial activities (i.e., an enhancement or revision implemented during the fiscal year)	3	4	3
Number of funded (not funded) agencies represented in collaborative meetings with board staff	7 (4)	6 (5)	6 (5)
Number of funded agency programs participating as target programs in the Evaluation/Outcomes project	2	2	1
Percentage of reports received in compliance with contract	90%	95%	95%



BRIEFING MEMORANDUM

DATE: October 22, 2025
TO: Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: CCMHB Requirements and Guidelines for Allocation of Funds

Purpose:

This memorandum presents suggested revisions to the “Champaign County Mental Health Board Requirements and Guidelines for Allocation of Funds.” These requirements and guidelines clarify important aspects of the procurement and monitoring processes.

The proposed revisions are primarily based on input from independent Certified Public Accountant firms as they prepared reports on agencies’ use of funds. Proposed changes are *italicized* and highlighted, and language to be removed is lined out:

- Update to the current contract language, which is the standard for capital expenditure limit, changing this limit from \$1,000 to \$2,500.
- Minor changes for clarification or accuracy.
- Add a reminder that agencies should follow approved budgets category by category and as listed in the budget narrative, to prevent using funds for items not specified and approved.
- Add “or as a separate report per agreed-upon procedure engagement” to the section detailing supplementary information required in an audit, review, or compilation.
- Move details on the Financial Accountability Checklist to appear before those sections which say “Audit Only” because having it follow those sections has led some auditors to think that the checklist is also an Audit Only requirement.

Next Steps:

Subsequent feedback from Board members, staff, and stakeholders may be incorporated into a final draft version to be presented to the Board for review and approval in November. The edit features will be removed from the version approved by the Board.

CHAMPAIGN COUNTY MENTAL HEALTH BOARD REQUIREMENTS AND GUIDELINES FOR ALLOCATION OF FUNDS

INTRODUCTION

It is the policy of the Champaign County Mental Health Board (CCMHB) that: services be provided in the least restrictive environment appropriate to the needs and desires of the individual; CCMHB funding support be community based; and CCMHB planning and funding efforts be coordinated with governmental and non-governmental providers of services.

Funds allocated by the CCMHB shall be used to contract for mental health, intellectual/developmental disability (I/DD), and substance use disorder (SUD) supports and services for Champaign County residents, pursuant to the authority contained in the Community Mental Health Act, ILCS, Chapter 405, Act 20, Section 0.1, et.seq.

This policy should be reviewed by all agency staff responsible for contract management, including those who prepare applications for funding as well as those who record and report on contract activities, deliverables, and financials. This document offers guidance for contract compliance and clarification of expectations for fiscal accountability and financial management systems. In various sections of this document, the terms “applicant,” “agency,” “organization,” and “provider” refer to the entity seeking or receiving funding from the CCMHB. Acceptance of CCMHB funding establishes a legal obligation on the part of the contracted agency to use the funding in full accordance with the provisions, terms, and conditions of the contract. The funded agency assumes full responsibility for the conduct of project activities and deliverables and is responsible for meeting CCMHB compliance standards for financial management, internal controls, audits, and periodic reporting. An individual contract, once awarded, will contain additional details.

GENERAL AGENCY AND ADMINISTRATIVE REQUIREMENTS

1. Eligibility for CCMHB Funding

- (a) An applicant for funding may be an individual or a public or private entity providing mental health, I/DD, or SUD supports and services to residents of Champaign County.
- (b) An individual/sole proprietor who is appropriately certified or licensed by the applicable state or national entity, and who demonstrates capacity for appropriate service, financial, and administrative accountability and stability, is eligible to apply for funding.
- (c) Not-for-profit corporations are eligible to apply for funding. The agency must be chartered as a not-for-profit corporation in the State of Illinois and must be

established as a Section 501 (C) (3) under the Internal Revenue Code. The agency must have a board of directors representative of the service area. Consistent with the Internal Revenue Service conflict of interest policy, no staff member of the agency or relative of a staff member will be allowed to serve on the agency board.

- (d) For-profit organizations are eligible to apply for funding provided they meet other listed requirements and have a community based advisory committee representative of the service area and approved by the CCMHB.
- (e) The CCMHB and Champaign County Developmental Disabilities Board (CCDDDB) may administer other funds on behalf of the Champaign County Board. An intergovernmental agreement will be executed between the respective boards defining the purpose, term, payment, and mutual responsibilities of the parties in the management of the funds. Any such activity shall have a direct relationship to the mission of the CCMHB or CCDDDB. The management of such funds will comply with the CCMHB and/or CCDDDB Funding Guidelines.
- (f) Government agencies are eligible to apply with the caveat that there has been a presentation and formal review of the capability of the agency to fund the services and that funding was not available. Those with authority to raise a tax which can be used to pay for the desired services may not be eligible.
- (g) Departments and units within the University of Illinois and Parkland College related to the mission of the CCMHB are eligible to apply, provided other funds are not available to support the services.

2. Administrative Requirements of Applicants

- (a) Corporate by-laws at a minimum shall: encourage consumer representation on the board; require that at least one board member be a resident of Champaign County; prohibit board service by relatives of agency staff; specify the number of members of the board and include a mandatory board rotation policy; reference term limits for each board office; describe policies for recruitment, nomination, and election of board members and officers; address removal and replacement of board members; include an indemnification clause; and describe committee structures.
- (b) The provider must have its principal offices located within Champaign County. Exceptions must be approved by the CCMHB, and if the corporate board of directors is not local and the application is approved, the provider must have a local advisory board with a mechanism for providing direct input to the board of directors.
- (c) The provider must not discriminate in the acceptance of clients, employment of personnel, appointment to the board of directors, or in any other respect on the basis of race, color, religion, gender, sexual orientation, national origin, ancestry, disability, or on any other basis prohibited by law. Services shall not be denied based on a client's inability to pay.
 - (i) Any recipient of funds is required to submit a statement by its director certifying that it does not discriminate in the acceptance of clients,

employment of personnel, appointment of members of the board of directors, or in any other respect, on the basis of race, color, religion, national origin, ancestry, gender, sexual orientation, or physical or mental disability.

- (ii) Should any written charge or complaint of discrimination be made against an organization receiving funds, its employees, or agents in any court or regulatory or administrative body (whether federal, state, or local), the organization shall furnish a copy of said charge or complaint to the CCMHB. Said organization shall comply with any reasonable request for information about the status of said charge or complaint. The obligations imposed by this paragraph shall be subject to and subordinate to any claim of legal privilege and any non-waivable legal requirement of confidentiality imposed by statute, administrative rule or regulation, local ordinance, court order, pre-existing contract, or collective bargaining agreement. Failure to comply with this provision shall result in immediate termination of the contract.
- (iii) The CCMHB reserves the right to conduct its own investigation into any charge or complaint of a violation of this non-discrimination requirement.
- (iv) By this non-discrimination requirement and any efforts by the CCMHB, its agents, or employees to enforce it, the CCMHB assumes no responsibility for enforcement of or compliance by the recipient organization with any applicable federal, state, or local laws, regulations, or ordinances prohibiting discrimination. An organization receiving funds must agree to indemnify and hold harmless the CCMHB for any liability accruing to it for any charges or complaints of discrimination or similar civil rights violations based upon the acts of the organization receiving funds, its agents, or employees, and premised on the CCMHB's provision of these funds.
- (d) The provider shall develop, implement, and report on a Cultural and Linguistic Competence Plan for the agency's administration, staff, clients, and governance board and aligned with National Culturally and Linguistically Appropriate Services standards as set forth by the US Department of Health and Human Services.
- (e) The provider shall demonstrate a willingness and ability to enter into networking agreements or contracts with other providers to avoid overlapping services and to ensure best outcomes for people using or seeking those services. Said agreements must be updated and on file annually. Because of the CCMHB's commitment to the principle of continuity of care, agencies and programs must demonstrate a commitment to work cooperatively with all CCMHB-funded and CCDDDB-funded agencies and programs and such other health and human service agencies as are appropriate to the target population. Detailed working agreements with particular agencies with which the agency and program have a similar mission may be required by the CCMHB.
- (f) The provider will be expected to:
 - (i) Make available for inspection by the CCMHB copies of site, monitoring compliance, licensure/certification, evaluation, and audit visit reports performed by any funding authority.

- (ii) Cooperate fully in program evaluation and monitoring as conducted by CCMHB staff.
- (iii) Make available for inspection by the CCMHB copies of any request/application for new or adjusted funding in any program within the agency funded in whole or part by the CCMHB.
- (iv) Make available for annual inspection by the CCMHB copies of all agency budget applications, provider plan forms, program service and funding plans, service agreements, and fiscal reports prepared for the Department of Human Services, United Way, Department of Children and Family Services, or any other funding authority.
- (v) Provide services to each eligible client in accordance with a written individual plan (where applicable) which identifies client needs and assets as determined by assessment. At a minimum, the plan will describe long term goals, measurable short-term objectives, and expected outcomes of services with evaluative updates at least annually. Client files (where applicable) shall reflect written documentation of service units billed for reimbursement.
- (vi) Comply with all applicable Illinois and Federal laws and regulations with respect to safeguarding the use and disclosure of confidential information about recipients of services.
- (g) Admission and discharge policies and procedures shall be set forth in writing and be available for review.
- (h) Professional staff must be licensed, registered, or certified by the State of Illinois, as applicable to the discipline and current Illinois regulations/requirements.
- (i) All program facilities shall be in compliance with applicable State of Illinois licensure requirements and local ordinances with regard to fire, building, zoning, sanitation, health, and safety requirements.
- (j) All programs shall certify that they do not use CCMHB funds:
 - (i) To engage in proselytizing activities with consumers and/or require worship or religious instructional activities as a condition of participation.
 - (ii) For direct or indirect medical (physical health) services that are not related to mental health, substance use disorder, or developmental disabilities.
 - (iii) For programs or services under the jurisdiction of public school systems.

3. Accreditation Requirements for Eligible Organizations

All CCMHB funded agencies and programs shall strive to conform to appropriate standards established by recognized accrediting bodies in their field of services. For example, the CCMHB recognizes the standards promulgated by the following accrediting bodies as indicative of acceptable agency and program performance: Commission on Accreditation of Services for Families and Children, Joint Commission on Accreditation of Health Care Organizations, Commission on Accreditation of Rehabilitation Facilities, and the Council on Quality and Leadership.

Accredited agencies and programs shall provide the CCMHB with copies of relevant documents and correspondence between the agency and the accrediting body regarding agency and program compliance with accreditation standards. CCMHB staff shall

determine what documents and correspondence are relevant for the CCMHB monitoring purposes.

4. Organization Requirements in Lieu of Accreditation

All CCMHB funded agencies and programs not accredited by a recognized accrediting body shall make available for annual inspection by the CCMHB copies of the organization's policies and procedures including standard operating procedures (SOP) along with credentials of key staff (i.e., resumes). Quality management mechanisms must be described in detail. CCMHB staff may develop, make available to agencies, and periodically review a set of compliance indicators. The agency shall meet or exceed all compliance indicators as set forth by the CCMHB and its staff.

5. Organization Board Meetings

Agency governing boards must notify the CCMHB of all board meetings, meet in session open to the CCMHB, with the exception of sessions closed in conformity with the Open Meetings Act, and provide CCMHB with copies of minutes of all open meetings of the governing board. A request for a waiver or modification of the requirement to provide copies of all minutes may be made and considered as part of an individual contract negotiation.

6. Financial Requirements

- (a) The organization shall be managed in a manner consistent with sound fiscal standards and shall maintain written policies and procedures regarding its financial activities, including but not limited to payroll, purchasing, cash management, relevant fee schedules, contracts, and risk management. The funded agency should choose methods appropriate to the size of the organization and the scale of operations. Funded agencies will be expected to meet the standards specified in the contract, and failure to do so may be cause for suspension of payment or termination of the contract. In addition, an agency not in compliance with financial management standards shall not be eligible for CCMHB or CCDDDB funding for three years; eligibility may be reestablished after that period by demonstrating that the compliance issue has been corrected and no others exist.
- (b) An approved provider plan indicating projected levels of expenses and revenues is required for each CCMHB funded program.
- (c) The salaries and position titles of staff charged to CCMHB funded programs must be delineated in a personnel form incorporated into the contract. Employees whose salaries are charged in whole or in part to a CCMHB contract must maintain personnel activity reports to account for all compensated time including time spent on other activities.
- (d) CCMHB funds are restricted for use in the program(s) described in the contract(s) concerning obligation of funding. CCMHB funds in excess of **actual reimbursable expenses those expenses budgeted** by the program are subject to recovery upon completion of an independent audit, financial review, or compilation, as required (per Audit and Financial Accountability Requirements, below).

- (e) Organizations will establish and maintain an accrual accounting system in accordance with generally accepted accounting principles to include a level of documentation, classification of entries, and audit trails.
 - (i) Amounts charged to CCMHB funded cost centers for personnel services must be based on documented payrolls. Payrolls must be supported by time and attendance records or by employment contracts for individual employees.
 - (ii) The organization shall have accounting structures that provide accurate and complete information about all financial transactions related to each separate CCMHB contract.
 - (iii) Contract expenditure records must tie back to cost categories indicated in the final contract budget, including indirect cost charged to the contract. Actual expenditures will be compared with budgeted amounts. Variances greater than the threshold identified in the contract should be explained and may require approval by contract amendment.
 - (iv) Financial records must be supported by source documentation such as cancelled checks, invoices, contracts, travel reports and personnel activity reports. The same costs shall not be claimed and reported for more than one CCMHB contract or programs funded by other funding sources.
 - (v) Financial records shall be maintained on a current month basis and balanced monthly.
 - (vi) Costs may be incurred only within the term of the contract, and all obligations must be closed out no later than thirty (30) calendar days following the contract ending date.
 - (vii) All fiscal records shall be maintained for seven (7) years after the end of the contract term.
 - (viii) The CCMHB may establish additional accounting requirements for a funded program or agency. An agency may be required to engage the services of an independent audit firm during the term of the contract in order to implement adequate financial management systems for full compliance.
- (f) CCMHB funds may only be used for expenses that are reasonable, necessary, and related to the provision of services as specified in the contract. All allowable expenses that can be identified to a specific CCMHB funded program should be charged to that program on a direct basis. Allowable reimbursable expenses not directly identified to a CCMHB funded program must be allocated to all programs, both funded and non-funded.
- (g) The following expenses are non-allowable:
 - (i) Bad debts.
 - (ii) Contingency reserve fund contributions.
 - (iii) Contributions and donations.
 - (iv) Entertainment.
 - (v) Compensation for board members.
 - (vi) Fines and penalties.
 - (vii) Interest expense.
 - (viii) Sales tax.
 - (ix) Purchase of alcohol, tobacco, and non-prescription drugs.

- (x) Employee travel expenses in excess of IRS guidelines.
 - (xi) Lobbying costs.
 - (xii) Depreciation costs.
 - (xiii) Rental income received must be used to reduce the reimbursable expense by CCMHB funds for the item rented.
 - (xiv) Capital expenditures greater than \$2,500 per unit, unless granted prior approval by the Board. ~~\$1000, unless funds are specified for such purpose.~~
 - (xv) Supplanting funding from another revenue stream. The CCMHB may delay allocation decisions when anticipated funds from other sources may be influenced by their decisions.
 - (xvi) Supplementation of state or federal funds and/or payments subject to the coordination of benefits.
 - (xvii) Expenses or items not otherwise approved through the budget or ~~contract~~/budget amendment process.
 - (xviii) Expenses incurred outside the term of the contract.
 - (xix) Contributions to any political candidate or party or to another charitable purpose.
 - (xx) Excessive administrative costs including:
 - Any indirect administrative cost rate in excess of 20% (subject to review by the CCMHB) of the non-administrative portion of the budget, unless approved by the CCMHB.
 - Any indirect administrative costs that exceed those approved in the program/service budget.
 - Any indirect administrative costs for which an organization's cost allocation plan has not been submitted and deemed acceptable to the CCMHB.
- (h) Funded agencies shall provide safeguards for all funds provided through CCMHB contracts to assure they are used solely for authorized purposes. Further, control will be enhanced if the duties of agency staff are divided so no one person handles all aspects of a transaction from start to finish. Although complete separation of functions may not be feasible for a small agency, a measure of effective control may be achieved by planning staff assignment of duties carefully. Some examples of techniques for improving internal controls are:
- (i) Cash receipts should be recorded immediately and deposited daily. Deposits should be reconciled by a second party.
 - (ii) All bank accounts should be reconciled on a monthly basis by someone other than the person who signs the checks.
 - (iii) Checks to vendors should be issued only for payment of approved invoices, and supporting documents should also be recorded. The staff member responsible for issuing check payments should not have signing authority.
 - (iv) The staff person responsible for the physical custody of an asset should not have responsibility for keeping records related to that asset.

ALLOCATION AND DECISION PROCESS

1. All CCMHB allocation and contracting decisions are made in meetings open to the public. Allocation decisions will be based on statutory mandates, priorities and defined criteria related to the findings of various needs assessment activities sponsored by the CCMHB. To the extent possible, final decisions will be predicated on how well an application matches up with the statutory mandates, priorities, and criteria.
2. The CCMHB application for funding process shall include the following steps:
 - (a) A minimum of 21 calendar days prior to the application period start date, public notification of the availability of funding shall be issued via the News Gazette and/or other local news publications. This has typically occurred during the month of December. This announcement will provide information necessary for an organization to access application materials and submit an application for funding.
 - (b) Funding priorities and criteria will be approved no later than the December Board meeting.
 - (c) All potential applicants must register with the CCMHB. Information on the registration process will be provided by the CCMHB upon request. Access to application forms and instructions follows completion of the registration process.
 - (d) Technical assistance by Board staff may be requested at any time prior to the due date of the application, with the caveat that availability may be limited in the final week.
 - (e) Completed application(s) will be due on a date specified in the public notice. The due date will generally be in February. The CCMHB may extend the deadline due to extenuating circumstances by posting notice of the extended deadline to the CCMHB online application system.
 - (f) Access to application(s) will be provided to member(s) of the CCMHB upon a member(s) request and in a medium preferred by the member.
 - (g) The CCMHB may require some or all applicants to be present at a Board meeting to answer questions about their application(s).
 - (h) Staff will complete a summary of each application, for review and discussion by the CCMHB **at the April Board meeting typically during April.** Program summaries will include fiscal and service data, population served, and expected outcomes in relation to the funding priorities and criteria and goals of the Board. In addition, a decision support “match-up” process comparing the application to established and contemporaneous CCMHB criteria will be provided.
 - (i) Staff will complete preliminary funding **recommendations scenarios** for CCMHB review and discussion, **typically during May. at the May Board meeting.** The **recommendations scenarios** will be presented in the form of a decision memorandum. The CCMHB shall review, discuss, and come to a decision concerning authorization of funding, and a spending plan for the contract year.
 - (j) Once authorized by the CCMHB, staff will implement the spending plan and initiate the contracting process. Within the context of the final recommendations, the staff is authorized to negotiate and complete the contracts. Execution of the contracts requires the signatures of the respective Executive Directors, agency Board President, and the CCMHB President. The contract period is July 1 through

June 30. Contracts may be for one or two years. Types of programs eligible for a multi-year contract period shall be defined by the CCMHB as part of the funding priorities and criteria.

- (k) Allocation decisions of the CCMHB are final and not subject to reconsideration.
- (l) The CCMHB does not consider out-of-cycle funding requests or proposals.

AWARD PROCESS, CONTRACTS, AND AMENDMENTS

1. Award Procedures

Agencies awarded CCMHB funds shall receive written notification indicating program allocation(s). This will state the amount of the funds awarded, the effective time period of the award, name of program application receiving the award, and any additional conditions, stipulations, or need for a negotiation of provisions attached to the award. A separate Contract Process and Information sheet is to be reviewed and signed by agency staff, and other documents may be required prior to execution of the contract, such as a letter of engagement with independent CPA firm or certificate of insurance.

2. Contracting Format and Implementation Procedures

The contract shall include: standard provisions, (optional) special provisions, the program plan, personnel form (if applicable), rate schedule (if a fee for service contract), Business Associate Agreement (if service claims are to be entered), budget, required financial information, and agency Cultural and Linguistic Competence Plan. Completion of the contract requires the signatures of authorized representatives of the CCMHB and the provider. Subsequent to execution of the contract, any change or modification requires a contract amendment.

3. Types of CCMHB Contracts

(a) Grant Contract

Payment is predicated on the budget and obligations associated with the contract. Typically, payments are divided equally (i.e., 1/12 of the contract maximum per month) over the term of the contract, with May and June payments combined and released in June. Reconciliation takes place in the last quarter of the contract term. Accountability is tied to defined performance measures with targets and benchmarks. The annual renewal of a contract is subject to the allocation process and may result in re-negotiation of terms based on provider performance, needs assessment findings, or a desire by the CCMHB to redirect funding in response to a change in goals, objectives, or priorities. The decision to use the grant contract format rests with the CCMHB and is based on the appropriateness of this format to the objectives of the program plan.

(b) Fee for Service Contract

Payment is driven by retrospective billing for units of service provided within the constraints of the contract maximum. Typically, an “advance and reconcile” approach is used, with six monthly payments of 1/12th the contract maximum from July through December, and subsequent payment amounts based on reconciliation against billings beginning in January. Billing must be relatively proportional over the course of the contract term. Whenever possible and appropriate, CCMHB

contracts will establish rates based on those used by the State of Illinois. Fee for service contracts may be converted to a grant or value based payment structure.

(c) Consultation Contract

Payment is tied to a specific task or activity defined in the program plan.

Typically, payment is tied to an hourly rate or completion of specific tasks (i.e., deliverables). Approved expenses associated with the consult shall be defined in the contract. Consultation contracts are not subject to the allocation process referenced above but rather are negotiated by the Executive Director with Board President approval, with full board approval sought when deemed appropriate by the Board President.

(d) Special Initiative Contract

The format can be either grant or fee-for-service. Most approved applications from “new” providers shall be classified as special initiatives for a period up to three years.

(e) Capital Contract

Terms and conditions are directly tied to expenditures for capital improvements or equipment purchases. Payment is driven by an approved spending plan and/or invoices associated with approved items.

(f) Intergovernmental Agreement

The CCMHB, at its discretion and with agreement of the Champaign County Board, may enter into an intergovernmental agreement with other units of government for the delivery of services.

4. Later Effective Dates

Along with decisions for contract awards to be funded as of July 1, the Board may make decisions about awards which would go into effect later in the contract/program year, in the event of additional revenues which can be allocated to contracts.

5. Contract Amendments

The need for a contract amendment is driven by a change in conditions delineated in the original agreement and may be initiated by either party. The provider is required to report changes that modify the administrative structure and/or implementation of the program or financial plan. It is recognized that programs are dynamic, and it is prudent to make budget and program adjustments to better meet overall goals and objectives.

(a) To initiate the amendment process, the provider shall submit a written, formal request for an amendment to initiate the amendment process. All requests should describe the desired change(s) to the contract as well as the rationale for the change(s). Supporting documentation may be included when appropriate. The final decision regarding whether an amendment is necessary rests with the CCMHB Executive Director.

(b) Upon review of quarterly reports or other agency contract data, Board staff may contact the provider to discuss a possible contract amendment.

(c) In general, decisions about amendments fall under the purview of staff and are executed by the Board President and Executive Director without formal action by the Board. The Board shall be informed of all contract amendments.

- (d) Proposed amendments to redirect funds between contracts awarded to a single agency may be considered during the contract year, provided there is not an increase in total funding to the agency.
- (e) The Board President or the Executive Director may ask for a full CCMHB review and approval of a proposed amendment at the next regularly scheduled meeting, including a request to increase or decrease any contract award amount.
- (f) Proposed amendments that redirect approved dollars between agencies shall require the formal approval of the CCMHB.

GENERAL REQUIREMENTS FOR CCMHB FUNDING

1. CCMHB contracts shall specify the relationship between funding and services to be provided. Funding shall not be used for purposes other than those specified in the contract unless the contract has been amended.
2. The provider shall not use CCMHB funds to establish or add to a reserve fund.
3. CCMHB funds shall not be used for purposes related to construction of facilities or purchase of equipment unless capital improvement is the express purpose of the contract or is approved as part of the program plan.
4. CCMHB may provide advance payment(s) to the provider under contract with the Board. Any advance payment will be reconciled against financial reports or other method as defined by CCMHB. Request for advance payment will follow the contract amendment process.
5. Providers shall maintain accounting systems utilizing an accrual basis of accounting in accordance with generally accepted accounting principles, including expense and revenue classifications that can accurately and appropriately report and verify financial transactions using CCMHB forms and comply with the provisions for audits. Providers may be required to institute special accounting procedures to resolve identified problems in financial accountability.
6. Providers shall notify the CCMHB of any applications for funding submitted to other public and private funding organizations for services funded by the CCMHB, especially those that could result in a funding overlap.
7. Providers shall follow the budget plans as approved and contracting, tracking each expense and revenue according to the categories and items described in the budget narrative.
8. **Provider Reporting Requirements**
 - (a) Financial and service reporting requirements are delineated in the contract and are subject to revision from year to year. In general, quarterly financial and program reports are required for all fee for service, special initiative, and grant contracts. Quarterly financial reports and monthly billings are required for fee for service

contracts. Cultural and Linguistic Competence Plan progress reports are required twice a year per funded agency. Reports of outcomes experienced by people served are due annually for each program.

- (b) Change in the provider's corporate status shall be reported within 30 calendar days of the change.
- (c) Change in the provider's accreditation status shall be reported within 30 calendar days of the change.
- (d) The provider shall notify the CCMHB about accreditation and/or licensing site visits by the State of Illinois or accrediting organizations.
- (e) Additional reporting requirements may be included as provisions of the contract.
- (f) To avoid compliance actions as described in Section 9 (below), deadlines for submitting required reports and documents should be observed and met. All deadlines are posted publicly and in advance and have been established to give agencies adequate time to prepare reports. Late, incomplete, or inaccurate reports may cause a delay in CCMHB staff review and response. Revision or creation of reports after a deadline may also have inadvertent negative impacts on the online application and reporting system and its many users.

An Extension of a deadline may be requested in writing and, in most cases, by using the request form which is available in the online system reporting section. This form should be completed and sent to the appropriate CCMHB staff members prior to the deadline, for full consideration and for staff to facilitate access to the system's reporting and compliance sections. Board staff may approve these requests at their discretion.

IMPORTANT NOTE: Board staff are not authorized to approve extensions of deadlines for the submission of applications for funding or for annual independent audit, review, or compilation reports. In such situations, the full Board may consider an agency request presented to them during a Board meeting. To make a formal written request, the agency should provide full information to the CCMHB staff at least ten (10) calendar days in advance of the Board's regular or special meeting. The Board has complete discretion to approve or disapprove a request for extension.

9. Monitoring and Evaluation

- (a) CCMHB staff shall conduct provider financial and program site visits no less than every two years for the purposes of verifying reported financial and service information and reviewing compliance with the approved Program and Financial Plan.
- (b) CCMHB may survey all non-accredited agencies and programs for compliance with CCMHB Requirements in Lieu of Accreditation on an annual basis.
- (c) CCMHB staff may seek information to demonstrate continued compliance of all agencies and programs with appropriate standards in the interim between accreditation or certification surveys. Such information may address both individual agency and program issues as necessary, and system-wide issues and

may be obtained through such activities as periodic reports, on-site reviews, and special studies.

- (d) CCMHB staff shall conduct desk reviews of agency program activity and financial reports, typically submitted each quarter; additional information or revisions may be requested.
- (e) CCMHB staff shall conduct desk reviews of agency CLC Plan Action Steps and required training conducted within the organization. Agencies' progress reports are typically submitted after the second and fourth quarters; additional information or revisions may be requested.
- (f) The primary responsibility for on-going evaluation of services rests with the agencies and programs. For the CCMHB to monitor these activities, agencies and programs shall submit at least annually a report of the outcomes achieved by CCMHB-funded programs, in accordance with their annual Program Service Plan. This report shall also indicate how their results are used in agency and program management.
- (g) Additional monitoring and evaluation activities may be included as provisions of the contract.

10. Non-Compliance with the Terms and Conditions of the Contract

- (a) The CCMHB Executive Director or their representative shall notify the provider Executive Director and provider Board President in writing of any non-compliance issue. The provider shall provide a corrective action plan within 10 days and correct the deficiency within 30 days of receipt of the notification. Upon approval of the plan, CCMHB staff shall monitor implementation. If corrective action is not implemented within specified time frames, action may be taken to suspend, reduce, or terminate funding.
- (b) Corrective Action: If the compliance issue results from Board staff review of required agency reports or documents or from site visit findings, a Corrective Action Plan may be appropriate. If so, CCMHB staff will notify the provider in writing, and the provider shall respond with a written corrective action plan within 14 calendar days of the postmark of CCMHB staff notification. This Plan should identify a timeline for correction of the deficiency. Upon approval of the plan, CCMHB staff shall monitor implementation. If corrective action is not implemented within specified time frames, action may be taken to reduce, suspend, or terminate funding.
- (c) Suspension of Funding: Cause for suspension of funding shall exist when the provider fails to comply with terms of the award letter, terms and conditions of the contract, or CCMHB monitoring and reporting requirements.
- (d) The following procedures will be followed in the process of suspension of funding:
 - (i) The provider Executive Director and provider Board President shall be notified in writing, via certified mail, return receipt requested, by CCMHB staff that the agency funding has been suspended. The provider is responsible for sharing and updating accurate contact information.
 - (ii) The notification of suspension will include a statement of the requirements with which the provider is in non-compliance, the effective date of the

- suspension, and any conditions deemed appropriate for the agency to meet before termination of the suspension.
- (iii) If the provider disagrees with a compliance action, they may appeal as set forth below.
- (e) Reduction of the Contract Maximum: Cause for reduction of the grant award amount shall exist when a provider fails to expend CCMHB funds or deliver services in accord with the contract, which includes approved Agency Program and Financial Plans. The following procedures will be followed in the process of reduction of funding:
- (i) The reduction of the grant amount shall be in an amount determined by the CCMHB.
 - (ii) The provider Executive Director and provider Board President shall be notified, in writing, via certified mail, return receipt requested, by CCMHB staff that the contract maximum is being reduced. To ensure delivery of this and all communications, the provider is responsible for sharing and updating accurate contact information within the online reporting system and by email to CCMHB staff.
 - (iii) The notification of reduction will include a statement of the cause for reduction and include the amount by which the grant amount is reduced.
 - (iv) Within thirty (30) calendar days of the effective date of reduction, the agency may request a re-allocation of the amount by which the funding was reduced. If the reduction is identified after the contract period has ended, e.g., upon review of fourth quarter financial reports or independent audit, review, or compilation, reallocation is not likely to be approved.
- (f) Termination of Funds: Due cause for termination of a contract exists when a provider fails to take adequate action to comply with CCMHB requirements within ninety (90) calendar days of notification of suspension of funding; or repeatedly fails to comply with requirements of the CCMHB as stated in the notification of award, in the contract, in the applicable provisions of this document, or as a result of CCMHB staff monitoring. The following procedures will be followed in the process of termination of funding:
- (i) The provider Executive Director and Board President shall be notified, in writing, via certified mail, return receipt requested by the CCMHB Executive Director or other staff that termination of funding is being recommended to the Board. To ensure delivery of this and all communications, the provider is responsible for sharing and updating accurate contact information within the online reporting system and by email to CCMHB staff.
 - (ii) The notification of possible termination will include: a statement of the requirements with which the provider is non-compliant; a statement of the actions of the CCMHB taken to urge the provider to avert termination and move to compliance with CCMHB requirements; a statement of the responses of the agency; and the effective date of the recommended termination.

- (iii) The CCMHB shall consider and take action on the termination of funding at the next regularly scheduled meeting following the notification of the agency, or at an intervening special meeting if it so chooses.
- (g) Appeal procedures: The CCMHB Executive Director shall be responsible for implementing and interpreting the provisions pertaining to appeals. The Executive Director may however, delegate monitoring responsibility to other CCMHB staff. The following procedures will be followed in the appeal of suspension, reduction, or termination of funding:
 - (i) The provider may appeal the decision to suspend, reduce, or terminate funding by submitting a written request within fourteen (14) calendar days of the postmark of CCMHB staff notification.
 - (ii) The written formal appeal should include the reasons for reconsideration and, at minimum: (1) a thorough explanation of what happened to cause the noncompliance; (2) proof of corrective action that has been taken, or is underway, to ensure that the root cause has been repaired addressed and will not happen again; (3) a proposed plan for additional reporting by the agency and possible additional oversight by CCMHB relevant to the noncompliance for the remainder of the contract; and (4) other evidence relevant to the decision.
 - (iii) CCMHB shall review information from the CCMHB Executive Director and the agency at the next available regular meeting or at an intervening special meeting if the Board President so chooses. All written materials for consideration should be submitted by the provider a minimum of ten (10) calendar days prior to the meeting of the Board. The agency shall be afforded the opportunity to discuss the issue with the CCMHB prior to a final decision. Additional information may be required for the CCMHB to arrive at their final decision.

AUDIT AND FINANCIAL ACCOUNTABILITY REQUIREMENTS

In the course of doing business, agencies funded by the CCMHB should maintain a state of audit readiness. This means records relevant to financial and program aspects of contracts must be readily accessible. Failure to provide accurate and reliable information could result in questioned costs and disallowances. All funded agencies awarded contracts for direct services as part of the normal allocation cycle are required to have either an audit, financial review, or compilation conducted by an independent certified public accountant (CPA) registered by the State of Illinois, for the term of the CCMHB contract and following the close of its fiscal year. These reports must contain schedules using CCMHB/CCDDB approved source clarifications for reporting operating income and operating expenses. Contracts with consultants and other specified vendors are exempt from this requirement.

Prior to the execution of a contract between the provider and the CCMHB, the provider will demonstrate engagement with an independent CPA firm, through a letter from the firm stating that they will be performing the audit, review, or compilation, and specifying the timeline. If the CPA firm does not include a date of

completion in the letter of engagement, the agency should estimate the date and share relevant information to Board staff, to demonstrate efforts at timeliness.

1. Independent Audit (for agencies with \$500,000 total revenue or greater)

- (a) An independent CPA firm, licensed in the State of Illinois, performs an audit to provide a high level of assurance regarding the accuracy of financial statements, resulting in a formal report expressing an opinion on the presentation of the financial statements, identifying any significant or material weaknesses in internal control.
- (b) The resultant audit report is to be prepared in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in “Government Auditing Standards,” issued by the Comptroller General of the United States. The report shall contain the basic financial statements presenting the financial position of the agency, the results of its operations, and changes in fund balances. The report shall also contain the auditor’s opinion regarding the financial statements, taken as a whole, or an assertion to the effect that an opinion cannot be expressed. If the auditor expressed a qualified opinion, a disclaimer of opinion, or an adverse opinion, the reason therefore must be stated. Supplementary Information (see below) will also be required with the audit.
- (c) A funded agency with total revenue of \$500,000 or greater will be required to have an audit performed by an independent audit firm. An agency with total revenue of less than \$500,000 and greater than \$50,000 may choose or be required by the CCMHB to have an independent audit performed.
- (d) If a funded agency provider is not required by another funding organization (e.g., state government, federal government, a foundation, etc.) to have an audit completed, and if one is to be completed for the CCMHB contract, the funded agency may budget for and charge up to \$19,000 (total) to CCMHB for costs associated with this requirement.

2. Independent Financial Review (for agencies with total revenue over \$50,000 and below \$500,000)

- (a) An independent CPA firm licensed in the State of Illinois performs a review to provide a basic level of assurance on the accuracy of financial statements, based on inquiries and analytic and other procedures, and narrower in scope than an audit.
- (b) The resultant report is to be prepared in accordance with standards generally accepted in the United States of America. The report shall contain the basic financial statements presenting the financial position of the agency, the results of its operations, and changes in fund balances. Some of the supplementary information required for an audit will also be required in a review (see below).
- (c) A funded agency with total revenue of less than \$500,000 and greater than \$50,000 will be required to have a financial review performed by an independent audit firm. If the agency chooses or is required by another organization to have an independent audit, then a financial audit shall be completed in lieu of a review. This should be made clear prior to contract execution.

- (d) If a funded provider is not required by another funding organization (e.g., state government, federal government, a foundation, etc.) to have a financial review, and if one is to be completed for the CCMHB contract, the funded agency may budget for and charge up to \$13,000 (total) to CCMHB for costs associated with this requirement.

3. Compilation (for agencies with total revenue below \$50,000)

- (a) An independent audit firm licensed in the State of Illinois prepares a compilation report on financial statements, not providing a level of assurance but rather considering whether the financial statements appear appropriate in form and are free from obvious material misstatements.
- (b) The resultant report is prepared in accordance with standards generally accepted in the United States of America. Some of the supplementary information required for an audit will also be required in a compilation (see below).
- (c) A funded agency with total revenue of \$50,000 or less will be required to have a compilation performed by an independent audit firm.
- (d) If a funded agency provider is not required by another funding organization to have a compilation, and if one is required for the CCMHB contract, the funded agency may budget for and charge up to \$7,000 (total) to CCMHB for costs associated with this requirement.

4. Shared Cost

In the event that the funded provider is required by another funding organization to have an independent audit, financial review, or compilation, the cost is to be pro-rated across revenue sources. Audit, Financial Review, and Compilation cost limits still apply.

5. Supplementary Information (required of all agencies, regardless of total revenue)

The following supplementary financial information shall be completed by an independent CPA firm and included in the audit, review, or compilation report **or as a separate report per agreed-upon procedure engagement** (and failure to do so will make the report unacceptable):

- (a) Schedule of Operating Income by CCMHB-Funded Program: This schedule is to be developed using CCMHB approved source classification and format modeled after the CCMHB Revenue Report form. Detail shall include two separate columns per program listing total program as well as CCMHB-Funded only revenue. Individual sources of income should not be combined. Example: Funds received from several state or federal agencies should not be combined into one classification, such as “State of Illinois” or “Federal Government.”
- (b) Schedule of Operating Expenses by CCMHB-Funded Program: This schedule is to be developed using CCMHB approved operating expenses categories and format modeled after the CCMHB Expense Report form. Detail shall include two separate columns per program listing total program as well as CCMHB-Funded only expenses. The statement is to reflect program expenses in accordance with CCMHB reporting requirements including the reasonable allocation of administrative

- expenses to the various programs. The schedule shall **exclude** any expense charged to the Board from the list of non-allowable expenses (above).
- (c) CCMHB Payment Confirmation: CCMHB payment confirmation made to an agency required by the independent auditor during the course of the audit or review or compilation is to be secured from the CCMHB office.
 - (d) For Audit Only, Auditor Opinion on Supplementary Information: The independent auditor should clearly establish his/her position regarding the supplementary financial information presented in the Schedule of Operating Income by CCMHB-Funded Program and Operating Expenses by CCMHB-Funded Program. This can be done either by extending the overall opinion on the basic financial statements or by a supplementary opinion. If the independent auditor determines that the additional procedures necessary to permit a supplementary opinion on the schedules of operating income and expenses would materially increase the audit time, he/she may alternatively state the source of the information and the extent of his/her examination and responsibility assumed, if any.
 - (e) Capital Improvement Funds: If the agency has received CCMHB capital improvement funds during the last year, the audit or review or compilation shall include an accounting of the receipt and use of those funds.
 - (f) The independent CPA report must include, at a minimum, these items described in the “Financial Accountability Checklist”:
 - (i) Agency board-approved financial procedures in place that include separation of duties for preparation of payment authorization, approval of authorization and check signatories.
 - (ii) Agency board review of financial statements at Agency Board meetings and Source Document – Agency Board meeting minutes (dated).
 - (iii) Agency board Minutes with motion approving CCMHB/CCDDDB grant applications for current year.
 - (iv) Agency board minutes with motion approving the budget of the fiscal year under review.
 - (v) Verification that the agency has fulfilled its response to any findings or issues cited in the most recent Auditor’s issuing of a Management Letter, if applicable.
 - (vi) Demonstration of tracking of staff time (e.g. time sheets).
 - (vii) Proof of payroll tax payments for at least one quarter, with payment dates;
 - (viii) Form 941 or IL-941 or UC3, comparison of payroll tax amounts and alignment to period.
 - (ix) W-2s and W-3, comparison to the gross on 941.
 - (x) Verification of 501-C-3 status (IRS Letter), if applicable.
 - (xi) IRS 990 Form or AG990-IL, confirmation that 501-C-3 status is maintained.
 - (xii) IRS 990 Form or AG990-IL for associated foundation, if applicable.
 - (xiii) Secretary of State Annual Report.
 - (xiv) Accrual Accounting Method is in use.
 - (g) For Audit Only, Internal Controls: The independent auditor should communicate, in written form, material weaknesses in the agency’s internal controls when it

impacts on the CCMHB's funding. Copies of these communications are to be forwarded to the CCMHB with the audit report.

- (h) The independent CPA report must include, at a minimum, these items described in the "Financial Accountability Checklist":
 - (xv) Agency board approved financial procedures in place that include separation of duties for preparation of payment authorization, approval of authorization and check signatories.
 - (xvi) Agency board review of financial statements at Agency Board meetings and Source Document Agency Board meeting minutes (dated).
 - (xvii) Agency board Minutes with motion approving CCMHB/CCDDB grant applications for current year.
 - (xviii) Agency board minutes with motion approving the budget of the fiscal year under review.
 - (xix) Verification that the agency has fulfilled its response to any findings or issues cited in the most recent Auditor's issuing of a Management Letter, if applicable.
 - (xx) Demonstration of tracking of staff time (e.g. time sheets).
 - (xxi) Proof of payroll tax payments for at least one quarter, with payment dates.
 - (xxii) Form 941 or IL 941 or UC3, comparison of payroll tax amounts and alignment to period.
 - (xxiii) W 2s and W-3, comparison to the gross on 941.
 - (xxiv) Verification of 501 C 3 status (IRS Letter), if applicable.
 - (xxv) IRS 990 Form or AG990 IL, confirmation that 501 C 3 status is maintained.
 - (xxvi) IRS 990 Form or AG990 IL for associated foundation, if applicable.
 - (xxvii) Secretary of State Annual Report.
 - (xxviii) Accrual Accounting Method is in use.

6. Filing

The audit or review or compilation report is to be filed with the CCMHB within 6 months of the end of the agency's fiscal year. To facilitate meeting filing requirements, agencies are encouraged to contract with certified public accountants before the end of the fiscal year. A letter of engagement is required prior to contracting (as above.)

7. Late Audit, Review, or Compilation

If an agency board-approved, independently performed audit, review, or compilation report is not submitted to the CCDDB/CCMHB office prior to the aforesaid six-month deadline, payments on the agency's contract(s) will be suspended for three months or until the required report is received.

If the report is not received within three months, the current year contract(s) may be terminated, at the option of the CCMHB. Suspended payments will be released upon submission of the required report and resolution of any negative findings. If a satisfactory report and resolution of any negative findings are NOT received within 12 months after the close of the agency's fiscal year, the parties agree that the CCMHB has no obligation to the agency to issue the suspended payments, and the contracts are terminated. An agency will not be eligible for subsequent CCMHB funding until the

required report is filed and any negative findings (including the return of excess revenue) are resolved.

8. Penalty

Failure to meet these requirements shall be cause for termination or suspension of CCMHB funding.

9. Repayment of Budgeted Costs

If the provider organization does not comply with the requirement to produce an audit or financial review or compilation as specified, the organization shall repay all Board CCMHB funds allocated for such purpose.

10. Records

All fiscal and service records must be maintained for seven years after the end of each budget period, and if need still remains, such as unresolved issues arising from an audit or review or compilation, related records must be retained until the matter is completely resolved.

11. Waiver

At the discretion of the CCMHB, independent audit or financial review or compilation requirements may be waived for special circumstances. The waiver provision shall be specified in the contract.

12. Request for Extension

Requests for extension of an independent audit, review, or compilation report and requests for waiver of the automatic cancellation cannot be granted by Board staff. If an agency anticipates that this annual report will be late, they should inform Board staff as early as possible and, if necessary, prepare a formal explanation and request to the full Board, to be considered during a regular or special meeting of the Board.

EXCEPTIONS TO THE PROVISIONS OF THE FUNDING GUIDELINES

All exceptions to the Funding Guidelines must have the prior approval of the CCMHB, except for those specific sections of the Funding Guidelines where the authority is delegated to the CCMHB's designee. Requests for exceptions that require the CCMHB's approval must be submitted to the Executive Director for review and submission to the CCMHB. Subsequently, the CCMHB's written decision will be transmitted to the agency. If the contract and funding guidelines are not in agreement, the contract shall prevail.

Kim Bowdry,
Associate Director for Intellectual & Developmental Disabilities
Staff Report – October 2025

CCDDB/CCMHB/IDDSI: I cloned the PY2026 1st Quarter programs and claims in the Online Reporting System. The cloning of programs and claims gives agencies the ability to report claims for the PY2026 2nd Quarter.

I completed the compilation of the PY2025 Performance Outcome Reports into one document. This document can be found in the Downloadable Files section of the Champaign County (Illinois) Mental Health Board (CCMHB) and Developmental Disabilities Board (CCDDB) Registration, Application, and Reporting System site (<https://ccmhddbrds.org>). I will continue reviewing all I/DD Performance Outcome Reports.

PY2026 1st Quarter Reports are due on October 29, 2025. Any agency in need of an extension should complete the 'Request for Extension of CCDDB-CCMHB Report Deadline' form prior to the deadline. Ms. Howard-Gallo emailed a quarterly report due date reminder to funded agencies on October 3, 2025. An important reminder is that the due date has changed to the last Wednesday of the month following the end of the quarter during PY2026.

I emailed the 'DRAFT CCDDB Three Year Plan 2026 – 2028 with draft FY2026 Objectives and Tactics' and 'Allocation Priorities and Decision Support Criteria for Program Year 2027' documents to stakeholders for feedback. We are accepting feedback until October 29, 2025. Updated versions of both documents will be presented to the CCDDB in November.

I have started downloading PY2025 claims data from the Online Reporting System. I will then sort out clients and claims. Through review of this data, I can see duplication of services and client specific program involvement. An overview of how services are utilized will be provided prior to the next application review.

I participated in September meeting with CCDDB/CCMHB staff and Family Resiliency Center staff, related to the Evaluation Capacity project.

I met with representatives from UIUC School of Social Work and the University of Illinois Leadership Center regarding a potential collaboration in offering a series of leadership trainings to agency providers.

I created Spanish, French, and Q'anjob'al versions of the Immigrant and Refugee Supports survey that has been distributed for the joint study session scheduled for October 29, 2025. Survey links were distributed to agency providers.

Contract Amendments: N/A

Learning Opportunities: The '[CCDDB/CCMHB Quarterly Reports Training](#)' was held via Zoom on October 7, 2025. Over 20 people, from 15 different CCDDB/CCMHB agencies, participated in the workshop.

In preparation for the training, I met with other staff to organize and practice the training. I created a Zoom registration for the training.

After the training, I edited captions and then added captions to the Zoom recording. I also posted the recording to the Online Reporting System. I created and emailed Certificates of Attendance for each participant. I also emailed the CCDDB/CCMHB Important Dates documents, a link to the training evaluation, and the Instructions for Completing Required Reports document, and the Request for Extension of Report Deadline form to each training participant.

Karen Simms is scheduled to present 'Keep Calm & Connected: Real-World Tools for Tough Times' on October 30, 2025. The presentation will be held at Champaign Public Library. Register [here](#) to attend.

DISABILITY Resource Expo: The 2025 Disability Resource Expo took place on October 18, 2025, from 11AM until 4PM, at Market Place Mall. I attended the Expo for the full day.

Prior to the Expo, I ordered supplies for the Children's Activity Bags. I participated in an Expo Steering Committee meeting on October 15, 2025. I completed several last-minute tasks during the weeks leading up to the Expo.

MHDDAC: The Mental Health and Developmental Disabilities Agency Council resumed meetings in September. At the September meeting, Mel Liong, PACE shared a brief presentation on the services offered by PACE. The October meeting is scheduled for October 28, 2025.

ACMHAI: I attended the October Executive Committee meeting. The I/DD Committee is scheduled to meet on November 13, 2025. The I/DD Committee meeting was rescheduled due to the Veteran's Day holiday.

NACBHDD: The NACBHDD I/DD Committee is scheduled to meet on November 11, 2025. This meeting will likely be rescheduled due to the Veteran's Day holiday.

Human Services Council (HSC): I was unable to attend the October HSC meeting due to a scheduling conflict.

Champaign County Transition Planning Committee (TPC): The next meeting of the TPC is scheduled for November 6, 2025, at Douglass Library.

Champaign County Local Inter-Agency Council (LIC): The next LIC meeting is scheduled for November 17, 2025.

Other: I also participated in several webinars.

Leon Bryson, Associate Director for Mental Health & Substance Use Disorders

Staff Report-October 2025

Summary of Activity: In September, I dedicated a substantial amount of time to the evaluation and organization of agency quarterly data for the PY25 Utilization Summaries for the Board packet. Additionally, I allocated time to compiling agencies' PY25 Performance Outcome Reports (PORs). The PY25 PORs will be accessible at ccmhddbrds.org.

The PY26 agency's first quarter reports are expected on Wednesday, October 26, 2025. The first quarter Program Activity/Consumer Service reports will be included in the upcoming board packet for the November 19th meeting.

On October 7, 2026, the CCMHB/CCDDB staff conducted a CCMHB/CCDDB Quarterly Reports training on how to complete the mandatory quarterly reports using the online system. The training proved valuable to new and seasoned users of the Online Reporting System. Approximately 23 people from various agencies attended the virtual course.

ACMHAI Committee: I attended the ACMHAI webinar "Social Media 101 and Beyond: Best Practices for Mental Health Boards."

CCMHDDAC Meeting: At the September meeting, members provided updates and heard a presentation from Mel Liong of PACE. Mel Liong introduced the Safe Housing Initiative by PACE, which aims to provide one-time financial support for application fees and housing deposits for individuals with disabilities, funded by the United Way of Champaign County. The next meeting is October 28th.

Continuum of Service Providers to the Homeless (CSPH): On October 7th, the CSPH appointed a new Chair and Vice Chair, Danielle Chynoweth and Damita Parsley. Members received state and federal updates on emergency and transitional housing, the HUD CoC Program, and Medicaid and SNAP. Charlene Murray proposed the Strides Revisioning Plan. CSPH will reconvene the Point-in-Time (PIT) Count Committee this month to plan for the 2025 PIT Count. This committee requires the participation of 5-6 CSPH members. The group will oversee examining the procedure for performing the unsheltered PIT Count, reviewing survey questions, and aiding with volunteer outreach on the night of the count.

Evaluation Capacity Committee Team: I attended and participated in the monthly meetings with the Evaluation Capacity project staff.

EXPO Steering Committee: Expo checks from various donors are still being received, and final meetings are taking place before the sixteenth Annual Disability Resource Expo, which will be held from 11 a.m. to 4 p.m. on October 18th at Market Place Mall.

Rantoul Service Provider's Meeting: In the September meeting members provided updates. Cindy Crawford, Executive Director of the Community Service Center, announced a food distribution event scheduled for October 27, which will utilize a drive-thru format. Diana Mendoza from the Legal Aid Society introduced new attorneys focused on human trafficking and labor exploitation, and Javaite Burton from United Way Champaign County discussed a

grant opportunity aimed at reducing child abuse and neglect. Additional updates included Jennifer Hesch from Crisis Nursery announcing her resignation and upcoming events, including a fall open house and a music play group. Jessie Heckenmueller from the Champaign County Regional Planning Commission provided hiring updates for the Youth Assistant Center.

SOFTT/LANS Meeting: The September meeting was via Webex. The group is brainstorming ideas for a Case Managers Workshop, and parent and local school outreach engagement strategies. The next meeting will be determined as it is near Thanksgiving holiday.

United Way Healthy Community: Child Well-Being Community Solutions Team: I am reviewing UWCC volunteer leadership Community Impact Committee (CIC) applications via a web-based platform as my schedule allows as part of the Request for Proposals. The applications will focus on Child Well-Being funding from United Way of Champaign County targeting services preventing child maltreatment and building healthier families through mental health and trauma-responsive services.

Other Activities:

- October 9th – 10th, I participated remotely at the University of Illinois Beyond Borders: Global Collaborations for Mental Health Services and Research Conference.
- October 6th, I attended the virtual discussion Brazelton Touchpoints Center: Somos Latine Families Episode 2: Creating Partnerships that Protect the Health and Well-being of Our Communities.
- October 3rd, I attended in person and participated in the Chancellor's Research Program Symposium at the University of Illinois.
- September 22nd, I attended the webinar: Federal Shifts, Local Impacts on Homelessness: What's Happening Now and What's Ahead.
- September 20th, I attended the 3rd Annual Black Mental Health and Wellness Conference at Parkland College.

Executive Director's Report – Lynn Canfield, October 2025

Activities of Staff and Board Members:

(To support MHB Three Year Plan goals 1-8 and DDB Three Year Plan goals 1-7)

With almost all **PY2025 agency reports** submitted, we have begun to sort and summarize results. Performance outcome reports offer results and insights which help with planning. These are aggregated and posted online, per Board. Review of year-end financial reports and CLC Plan progress will also help us understand how these results were accomplished.

Initial drafts of **PY2027 priorities and three-year plans** were presented in September and shared for public comment, which is being incorporated in the final drafts. Input from this fall's **study sessions** with members of special populations will also be used in final drafts for each Board to approve in November or December. Once priorities are finalized, we will make related changes to the online application system and to the instructions for applying for PY2027 funding. In addition, thanks to input from independent accounting firms, we have proposed some revisions to **Funding Requirements and Guidelines**. If these are approved, we will also update registration sections of the online application system so that the requirements match.

Agency allocations appear in **budgets** as Contributions & Grants, the largest expense category for each fund. Some smaller costs are for non-agency activities which also support individuals, families, agencies, and community, i.e., through Expo, community awareness, and training activities which are included in Personnel, Professional Services, Public Relations, Advertising, Books, Printing, Rental, Non-Employee Training, Food, and non-Food supply expenses. Determining what will be affordable for 2026 depends on projections of property tax revenues and operational costs. In July, the Boards approved 2026 budgets which used the best information available at that time. Each board is asked to consider revisions which result from updated projections and year-to-date expenses.

Anti-Stigma and Community Awareness:

(MHB goals 1, 3, 4, and 9 and DDB goals 1, 3, 5, and 8)

Resource information: 211 offers call-based information services. United Way, CCMHB, and CCDDDB co-fund this service. The Boards will pay \$2,000 (total) annually from 2026 - 2029.

Alliance for Inclusion and Respect (AIR) social media and website feature anti-stigma messaging and promotion of organizational members and local artists/entrepreneurs who have lived experience. AIR sponsored an 'anti-stigma' film, "Color Book" and art shows during Roger Ebert's Film Festival. MHB paid for sponsorship; this and other AIR costs are budgeted as Public Relations and offset by Donations. The festival will not be held in Champaign in 2026, so we have budgeted a lower amount for potential new events which may be of interest to both Boards.

disABILITY Resource Expo (at Market Place Mall, October 18) will have been held by the time of this Board meeting, and a full report from the Coordinators will be shared in a later packet.

I/DD Special Initiatives Fund:

(MHB goals 1 and 4 and DDB goals 1 and 5)

Focused on individuals with I/DD and complex support needs, allocation priorities relied on input from self-advocates. One contract addresses a high priority and has a two-year term. This fund now receives only interest income, with transfers from fund balance supporting the contract.

Support for Agency Programs:

(MHB goals 1, 3, 5, 6, 7, and 8 and DDB goals 1, 2, 3, 4, 6, and 7)

Activities described in staff reports:

- Cultural and Linguistic Competence training and assistance (Shandra Summerville).
- Collaborations: Community Coalition Race Relations and Goal Teams, Community Health Plan Priority Workgroups, Continuum of Service Providers to the Homeless, Crisis Intervention Team Steering Committee, Drug Court Steering Committee, Human Services Council, Local Funders Group, Local Interagency Council, MH and DD Agencies Council, SOFFT/LANS, Transition Planning Committee, Youth Assessment Center Advisory Committee, and more (Kim Bowdry, Leon Bryson, Shandra Summerville, or myself).
- Provider Learning Opportunities, free of charge and offering CEUs, to a primary audience of case managers but open to other interested parties (Kim Bowdry).
- Meetings with UIUC Family Resiliency Center team monthly for updates and planning on the Evaluation Capacity Project (Kim Bowdry, Leon Bryson, and myself).
- Quarterly Report Training (Kim Bowdry, Leon Bryson, Shandra Summerville, Chris Wilson).

Independent Contractors:

- EMK maintains the online application and reporting system, developing enhancements upon request, and offering technical support for users.
- John Brusveen, CPA, reviews agency annual audits, compilations, and financial reviews, summarizing findings and supporting our analysis and understanding of processes.

UIUC Leadership Center/School of Social Work: Kim Bowdry and I met with representatives regarding an eight-session series of workshops open to the community. The proposal is affordable and consistent with Board workforce priorities and with Ms. Bowdry's provider learning opportunities. Although it does not have a session solely devoted to financial management, the importance will be stressed throughout.

Executive Director Activities:

In addition to collaborations above and below, many of my regular activities lead directly to Board packet materials, and others are day to day such as processing information, maintaining systems, working through unique questions raised by agencies and partners, preparing and posting information for public access, planning meetings, reevaluating processes, following up on audits, etc. While these may not jump out in a staff report, they are the heart of the work, and I rely on our team for all of it.

Intergovernmental/Interagency Collaborations:

(MHB goals 1, 2, 4, 9, and 10 and DDB goals 1,2, 3, 5, 8, and 9)

Beyond Borders: Global Mental Health Research and Services Conference: under the direction of Dr. Flora Cohen, university and community partners planned and supported the inaugural hybrid conference and resource fair October 9-10. Due to illness, I was unable to moderate or set up but attended virtual sessions. The agenda is [posted at this link](#).

Champaign County Department Heads: with the County Executive, Administrator, and representatives from other Departments, these meetings update us on facilities, IT, personnel policies, budgets, etc. Upcoming focus will be establishment of a Safety Committee.

Local Funders Group: includes the Cities, Community Foundation, and United Way, to share allocation processes and decisions, data on utilization and outcomes, priorities for funding, and strengthening the local system of services. The full group has not met in several months.

Metropolitan Intergovernmental Council: local government representatives meet on topics of interest. By the time of this meeting, I will have presented to the group on 988 crisis response.

Student Mental Health Community of Practice at the University of Illinois: MHB President McLay and I attend monthly meetings. This fall are presentations from members/programs.

UIUC Student Projects: On September 29, I was a guest lecturer for Social Work 520: Social Welfare Planning. With our recent first drafts of three-year plans and allocation priorities, it was not hard to find connections between each student's focus area and our own efforts. I invited them, as members of our community, to share any reactions they might have to these drafts.

Partnerships related to Underrepresented Populations and/or Justice System:
(MHB goals 1, 2, 5, 6, 7, 8, and 10 and DDB goals 1, 2, 3, and 7)

Alternative Response Task Force: the City of Urbana is restarting these stakeholder discussions of response models. I plan to attend all sessions, along with MHB member Chris Miner.

Champaign County Community Coalition: the Executive Committee has convened with some urgency on housing instability and loss of federal funding for safety net programs. Goal Teams meetings are held monthly, with broad public participation, but I am often unable to attend.

Crisis Intervention Team (CIT) Steering Committee: representatives of law enforcement, EMS, hospital, behavioral health, providers of service to people in crisis or with housing insecurity, peer supporters, and other interested parties meet in even numbered months to promote CIT training and share updates.

Drug Court Steering Committee: the group meets periodically for collaboration across services and funders. The County has a Redeploy Illinois grant and will seek more funding for Problem Solving Courts; I have attended planning conversations with this group and one meeting with state officials about our local needs and efforts. Drug Court Graduation ceremony will have taken place on October 20 (I will attend if another obligation wraps up in time.)

CESSA Region 6 Advisory Committee: For these monthly public meetings, I represent the region's MHBs and DDBs. The focus has been on preparing call centers, developing subregional advisory groups, and clarifying the roles of first responders from law enforcement and behavioral health in advance of implementation of CESSA, which has been delayed.

State and National Associations and Advocacy:
(MHB goal 10 and DDB goal 9)

I attend meetings of statewide groups **Going Home Coalition (I/DD)**, **They Deserve More Coalition (I/DD)**, **Mental Health Summit**, and the **Department of Behavioral Health and Recovery and Trade Associations**. Some content overlaps; all of it is relevant to our work.

Association of Community Mental Health Authorities of Illinois (ACMHAI): I participate in Executive Committee and I/DD Committee meetings and am a Legislative Committee Co-Chair. Legislative liaisons update us on Illinois General Assembly and Governor's Office activity likely to impact our communities and help us advance the membership's advocacy priorities.

During virtual August membership meetings, we had trainings on Rural Behavioral Health ([the archived recording is linked here](#)) and Culturally and Linguistically Relevant Services ([recording linked here](#)). The business meeting which followed included regular items such as committee and community updates. Later in the month, ACMHAI's long-serving Treasurer LeAnne Shoemaker passed away. We will honor her at the in-person December membership meeting.

Committees host webinars, recently presentations on DuPage and Fox Valley mental health system (link not yet available), on Engage Illinois, the recording of which is [archived at this link](#), and on effective use of social media, [with recording linked here](#). After this presentation, I received guidance from Assistant State's Attorney Muller on how to comply with the Record Retention Act and related. Presenters recommended CivicPlus to maintain compliance with the law. We can use the webinar to improve the reach of Expo and AIR social media. This fall, Expo coordinators and committee members developed catchy content for people to repost widely.

National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD): as Vice Chair, I attend Executive Committee meetings to review positions and finances and plan upcoming events. We opted not to sign on to a letter critical of proposed cuts to Dept of Health and Human Services budget, because they did not directly impact members; within a week came proposed cuts that would harm SAMHSA and most states, including Illinois. Our Chair shared an analysis of financial losses already experienced by SAMHSA but not clearly represented on government websites, to support advocacy efforts. I attended the summer board meeting virtually, for a presentation on the American Foundation for Suicide Prevention, policy and committee updates, officer reports, closed sessions, establishment of a membership committee, and 'year ahead' report. Regular meetings of the Directors of State Associations, I/DD, and Behavioral Health Committees have been very focused on understanding actual and proposed changes to federal programs as well as any members' states' responses.

National Association of Counties (NACO): I participate in Healthy Counties and Resilient Counties Advisory Board meetings when they're not held at the same time. The former has a focus on equity and social determinants of health, the latter disaster preparedness. I have served on the Health Steering Committee (HSC) for many years as Vice Chair of its Behavioral Health Subcommittee. Recently the HSC has taken a greater interest in behavioral health issues (and I/DD!) We are currently voting on priorities and will soon be invited to submit new or continuing resolutions. Policy resolutions accepted by the full committee are forwarded to the NACO board and, if adopted (as all of them have been), become part of NACO's Federal Policy Priorities, [linked here](#). As NACBHDD Vice Chair, I am on NACO's Board of Directors through 2026. Some votes require in person attendance, and I have not traveled since the L& P Conference ([see pages 10-43 of March DDB packet](#)), but I in virtual meetings during which positions are determined and plans finalized. This year we have had some difficulty defining items that are in the best interest of all counties, and we have revisited some processes to ensure they are fair.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report – October 2025 Board Meeting

SUMMARY OF ACTIVITY:

Fourth Quarter Reporting:

The Children's Advocacy Center, Courage Connection, Christian Health Center, GCAP, and Promise Healthcare (all CCMHB funded) requested an extension. GCAP's reports are not yet submitted. We are working with GCAP representatives to complete the reports.

First Quarter Reporting:

First quarter financial and program reporting is due October 29th at 11:59 p.m. I sent them a reminder of the upcoming deadline on October 3rd, along with the form to submit if they needed an extension.

Audits:

Audits are due at the end of the year.

Community Awareness/Anti-Stigma Efforts/Alliance for Inclusion and Respect (AIR):

I organized an art sale at the 2025 disABILITY Resource Expo on October 18, 2025 at Marketplace Mall. So far, 8 artists/groups have signed on. There is no cost to the artists and we provide tables, chairs, etc.

Trainings:

I completed Cyber Security training, as required by Champaign County employees.

Other:

- Prepared meeting materials for CCMHB/CCDDB regular meetings and study sessions/presentations.
- Attended meetings for the CCMHB/CCDDB.
- Composed minutes for the CCMHB/CCDDB meetings.
- I will be on vacation for 2 weeks in October.

October 2025

Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

CCMHB/DDB Cultural Competence Requirements for Annual CLC Plans connected to National CLAS (Culturally and Linguistically Appropriate Services) Standards

Annually for submitting CLC Plan with actions supporting the National CLAS Standards. Cultural Competence is a journey, and each organization is responsible for meeting the following requirements:

1. **Annual Cultural Competence Training-** All training related to building skills around the values of CLC and ways to engage marginalized communities and populations that have experienced historical trauma, systematic barriers to receiving quality care. Each organization is responsible for completing and reporting on the training during PY25/26
2. **Recruitment of Diverse backgrounds and skills for Board of Director and Workforce-** Report activities and strategies used to recruit diverse backgrounds for the board of directors and workforce to address the needs of target population that is explained in the program application.
3. **Cultural Competence Organizational or Individual Assessment/Evaluation-** A self-assessment organizational should be conducted to assess the views and attitudes towards the culture of the people that are being served. This also can be an assessment that will identify bias and other implicit attitudes that prevent a person from receiving quality care. This can also include client satisfaction surveys to ensure the services are culturally responsive.
4. **Implementation of Cultural Competence Values/Trauma Informed Practices-** The actions in the CLC Plan will identify actions that show how policies and procedures are responsive to a person culture and the well-being of employees/staff and clients being served. . This can also show how culturally responsive, and trauma informed practices are creating a sense of safety and positive outcomes for clients that are being served by the program.
5. Outreach and Engagement of Underrepresented and Marginalized Communities defined in the criteria in the program application.
6. **Inter-Agency Collaboration-** This action is included in the program application about how organizations collaborate with other organizations formally (Written agreements) and informally through activities and programs in partnership with other organizations. Meetings with other organizations without a specific activity or action as an outcome is not considered interagency collaboration.
7. **Language and Communication Assistance-** Actions associated with CLAS Standards 5-8 must be identified and implemented in the Annual CLC Plan. The State of Illinois requires access an accommodation for language and communication access with qualified interpreters or language access lines based on the client's communication needs. This includes print materials as assistive communication devices.

National Enhanced CLAS Standards for Health and Healthcare Reading Materials

Here is the Link to the [15 Enhanced National CLAS Standards](#)

Here is the link to the Blueprint on how National CLAS Standards can be implemented at every level in an organization. [CLAS Blueprint](#)

Agency Cultural and Linguistic Competence (CLC) Technical Assistance, Monitoring, Support and Training for CCMHB/DDB

Agency Monitoring:

- Community Choices- Board and Staff Training- November 12, 2025
- Quarterly Reporting Training for Funded Organizations hosted by CCMHB/DDB Staff Members- October 7
- October 10- Emergency SNAP Benefits Meeting
This is a virtual briefing to learn more about the federal government's SNAP cuts and work requirement changes taking effect in November 2025. Hosted by Senator Faracci and Representative Carol Ammons.

Anti-Stigma Activities/Community Collaborations and Partnerships

Disability Resource Expo

Volunteer Coordination and Recruitment to community groups was disseminated. We still need a few more volunteers for the afternoon. Please sign-up if you are interested or email me at shandra@ccmhb.org to receive the sign-up link.

Volunteer Sign-up and Recruitment is happening for Disability Expo

Final Expo Steering Committee October 13

Disability Resource Expo- October 18

October 10 is World Mental Health Day

The overall objective of World Mental Health Day is to raise awareness of mental health issues around the world and to mobilize efforts in support of mental health.

The Day provides an opportunity for all stakeholders working on mental health issues to talk about their work, and what more needs to be done to make mental health care a reality for people worldwide

[Campaign Information for World Mental Health Day 2025](#)

Youth Led Oral History Project Funded by Community Foundation of East Central Illinois

In collaboration with Tracy Dace at DREAAM, the oral history project titled "In Their Own Words: Black Narratives of Strength Across Generations." This project is generously funded by the Community Foundation of East Central Illinois as part of their Untold Stories Community Grant Initiative. The goal is

to honor and preserve the voices, experiences, and wisdom of Black/African American individuals who have made a meaningful impact in Champaign County.

Community Learning Lab/ School of Social Work

October 8th, I met with Katie Shumway and a group of people from South Africa and Bangladesh about the work that I do as the cultural competence coordinator and partnerships that we have worked with the University of Illinois and CCMHB/DDB to bridge the gap between campus and community.

ACMHAI:

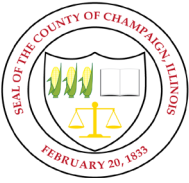
Executive Committee Meeting- October 2

Human Services Council –

Attended the Meeting October 2- There was a connection made with First Followers about a person who needed services that have returned to our community from incarceration.

**FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMTNL DISABILITY BOARD****COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09**

	ACTUAL	ACTUAL	2025
	2024	2025	ANNUAL
	- SEP	- SEP	BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	4,914,179.96	2,839,807.51	5,449,496.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,000.00
04 PAYMENT IN LIEU OF TAXES	268.59	370.21	4,000.00
06 MOBILE HOME TAX	2,910.73	0.00	3,000.00
4001 PROPERTY TAX TOTAL	4,917,359.28	2,840,177.72	5,458,496.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	77,137.54	7,625.27	44,840.00
4008 INVESTMENT EARNINGS TOTAL	77,137.54	7,625.27	44,840.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	0.00	0.00	5,000.00
4009 MISCELLANEOUS REVENUES TOTAL	0.00	0.00	5,000.00
TOTAL REVENUES	4,994,496.82	2,847,802.99	5,508,336.00
EXPENDITURES			
5020 SERVICES			
01 PROFESSIONAL SERVICES	319,023.00	334,575.00	446,102.00
07 INSURANCE (NON-PAYROLL)	4,333.00	4,333.00	4,333.00
25 CONTRIBUTIONS & GRANTS	3,372,199.00	3,784,751.00	5,067,901.00
5020 SERVICES TOTAL	3,695,555.00	4,123,659.00	5,518,336.00
TOTAL EXPENDITURES	3,695,555.00	4,123,659.00	5,518,336.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	10,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	10,000.00
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	10,000.00



FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMTNL DISABILITY BOARD
COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09

<u>ACTUAL</u>	<u>ACTUAL</u>	<u>2025</u>
2024	2025	ANNUAL
- SEP	- SEP	BUDGET

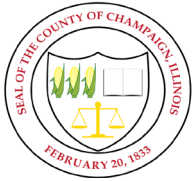
NET CHANGE IN FUND BALANCE	-1,298,941.82	1,275,856.01	0.00
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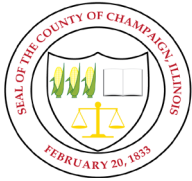
FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT

COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09

	ACTUAL	ACTUAL	2025
	2024	2025	ANNUAL
	- SEP	- SEP	BUDGET
REVENUES			
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	18,377.31	1,057.35	6,000.00
4008 INVESTMENT EARNINGS TOTAL	18,377.31	1,057.35	6,000.00
TOTAL REVENUES	18,377.31	1,057.35	6,000.00
EXPENDITURES			
5010 COMMODITIES			
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	5,063.00
5010 COMMODITIES TOTAL	0.00	0.00	5,063.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	0.00	0.00	1,000.00
25 CONTRIBUTIONS & GRANTS	201,010.00	154,688.00	233,000.00
5020 SERVICES TOTAL	201,010.00	154,688.00	234,000.00
TOTAL EXPENDITURES	201,010.00	154,688.00	239,063.00
OTHER FINANCING SOURCES (USES)			
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	0.00
NET CHANGE IN FUND BALANCE	182,632.69	153,630.65	233,063.00

**FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD****COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09**

	ACTUAL	ACTUAL	2025
	2024	2025	ANNUAL
	- SEP	- SEP	BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	5,982,474.52	3,457,955.84	6,634,170.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,000.00
04 PAYMENT IN LIEU OF TAXES	326.98	450.80	2,000.00
06 MOBILE HOME TAX	3,543.48	0.00	4,200.00
4001 PROPERTY TAX TOTAL	5,986,344.98	3,458,406.64	6,642,370.00
4004 INTERGOVERNMENTAL REVENUE			
76 OTHER INTERGOVERNMENTAL	319,023.00	334,575.00	446,102.00
4004 INTERGOVERNMENTAL REVENUE TOTAL	319,023.00	334,575.00	446,102.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	72,985.59	7,336.67	56,270.00
4008 INVESTMENT EARNINGS TOTAL	72,985.59	7,336.67	56,270.00
4009 MISCELLANEOUS REVENUES			
01 GIFTS AND DONATIONS	575.00	1,050.00	1,000.00
02 OTHER MISCELLANEOUS REVENUE	16,516.78	31,230.17	23,000.00
4009 MISCELLANEOUS REVENUES TOTAL	17,091.78	32,280.17	24,000.00
TOTAL REVENUES	6,395,445.35	3,832,598.48	7,168,742.00
EXPENDITURES			
5001 SALARIES AND WAGES			
02 APPOINTED OFFICIAL SALARY	80,928.98	84,975.22	116,282.00
03 REGULAR FULL-TIME EMPLOYEES	275,087.68	286,854.33	409,062.00
05 TEMPORARY STAFF	0.00	0.00	1,000.00
08 OVERTIME	0.00	0.00	500.00
5001 SALARIES AND WAGES TOTAL	356,016.66	371,829.55	526,844.00
5003 FRINGE BENEFITS			
01 SOCIAL SECURITY-EMPLOYER	25,998.12	26,967.71	40,189.00
02 IMRF - EMPLOYER COST	9,209.81	11,562.65	14,237.00
04 WORKERS' COMPENSATION INSURANC	1,364.31	1,653.23	2,101.00



FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09

	ACTUAL	ACTUAL	2025
	2024	2025	ANNUAL
	- SEP	- SEP	BUDGET
05 UNEMPLOYMENT INSURANCE	1,899.88	2,110.59	1,739.00
06 EE HEALTH/LIFE	35,401.20	37,805.64	106,877.00
5003 FRINGE BENEFITS TOTAL	73,873.32	80,099.82	165,143.00
5010 COMMODITIES			
01 STATIONERY AND PRINTING	853.35	791.71	4,000.00
02 OFFICE SUPPLIES	1,562.43	2,379.09	4,000.00
03 BOOKS, PERIODICALS, AND MANUAL	0.00	0.00	300.00
04 POSTAGE, UPS, FEDEX	560.71	771.52	2,000.00
05 FOOD NON-TRAVEL	1,020.97	1,142.52	1,500.00
12 UNIFORMS/CLOTHING	0.00	0.00	1,000.00
13 DIETARY NON-FOOD SUPPLIES	122.66	109.93	250.00
17 EQUIPMENT LESS THAN \$5000	3,606.84	2,998.57	7,500.00
19 OPERATIONAL SUPPLIES	2,212.33	19.89	3,000.00
21 EMPLOYEE DEVELOP/RECOGNITION	0.00	0.00	285.00
5010 COMMODITIES TOTAL	9,939.29	8,213.23	23,835.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	150,667.15	156,663.33	193,000.00
02 OUTSIDE SERVICES	6,100.67	7,033.50	10,000.00
03 TRAVEL COSTS	2,411.73	3,656.63	9,000.00
04 CONFERENCES AND TRAINING	550.00	650.00	4,000.00
05 TRAINING PROGRAMS	0.00	0.00	10,000.00
07 INSURANCE (non-payroll)	5,285.00	5,285.00	20,000.00
12 REPAIRS AND MAINTENANCE	0.00	0.00	200.00
13 RENT	21,342.33	21,962.42	37,500.00
14 FINANCE CHARGES AND BANK FEES	2.17	0.00	30.00
19 ADVERTISING, LEGAL NOTICES	765.20	500.00	12,000.00
21 DUES, LICENSE & MEMBERSHIP	16,069.99	16,969.99	20,000.00
22 OPERATIONAL SERVICES	1,987.02	1,843.55	5,000.00
24 PUBLIC RELATIONS	15,100.00	25.00	20,000.00
25 CONTRIBUTIONS & GRANTS	4,443,377.00	4,098,332.00	6,080,090.00
37 REPAIR & MAINT - BUILDING	0.00	0.00	100.00
45 ATTORNEY/LEGAL SERVICES	0.00	0.00	2,500.00
46 EQUIP LEASE/EQUIP RENT	1,592.48	1,592.48	2,500.00
47 SOFTWARE LICENSE & SAAS	10,640.80	11,340.03	14,000.00
48 PHONE/INTERNET	2,067.53	1,482.79	3,000.00
5020 SERVICES TOTAL	4,677,959.07	4,327,336.72	6,442,920.00



FUND DEPT 2090-053 : MENTAL HEALTH - MENTAL HEALTH BOARD

COMBINED REPORTING FOR YEAR: 2025 FROM PERIOD: 00 THROUGH PERIOD: 09

	ACTUAL	ACTUAL	2025
	2024	2025	ANNUAL
	- SEP	- SEP	BUDGET
TOTAL EXPENDITURES	5,117,788.34	4,787,479.32	7,158,742.00
OTHER FINANCING SOURCES (USES)			
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	0.00	0.00	-10,000.00
7001 OTHER FINANCING USES TOTAL	0.00	0.00	-10,000.00
TOTAL OTHER FINANCING SOURCES (USES)	0.00	0.00	-10,000.00
NET CHANGE IN FUND BALANCE	-1,277,657.01	954,880.84	0.00

Champaign County, IL



PROJECT BUDGET REPORT

FOR 01/01/2025 - 12/31/2025

Original Budget	Net Budget Amendments	Revised Budget	Requisitions	Encumbrances	Actuals	Available Budget	Percent Used
Project: DisExpo - disability Resource Expo							
E DisExpo	-COMM -OPER SUPP -	2,500.00	0.00	0.00	2,300.44	199.56	92.02%
E DisExpo	-COMM -STA PRINT -	5,000.00	0.00	0.00	791.71	4,208.29	15.83%
E DisExpo	-COMM -Uniform -	1,000.00	0.00	0.00	0.00	1,000.00	0.00%
TOTALS for Phase/Source: COMM -							
	0.00	8,500.00	0.00	0.00	3,092.15	5,407.85	36.38%
F DisExpo							
	-MISC REV -OtherMisc -	-15,000.00	0.00	0.00	-9,504.00	-5,496.00	63.36%
TOTALS for Phase/Source: MISC REV -							
	0.00	-15,000.00	0.00	0.00	-9,504.00	-5,496.00	63.36%
E DisExpo							
	-SERVICES -JB REQ TRV-	200.00	0.00	0.00	99.06	100.94	49.53%
E DisExpo	-SERVICES -LEGAL ADV -	5,000.00	0.00	0.00	1,049.00	3,951.00	20.98%
E DisExpo	-SERVICES -PR -	500.00	0.00	0.00	25.00	475.00	5.00%
E DisExpo	-SERVICES -PROF SVC -	50,000.00	0.00	0.00	36,625.00	13,375.00	73.25%
E DisExpo	-SERVICES -Rent -	12,500.00	0.00	0.00	1,788.00	10,712.00	14.30%
TOTALS for Phase/Source: SERVICES -							
	0.00	68,200.00	0.00	0.00	39,586.06	28,613.94	58.04%
EXPENSE TOTALS for Project: DisExpo - disability Resource Expo							
	0.00	76,700.00	0.00	0.00	42,678.21	34,021.79	55.64%
FUNDING SOURCE TOTALS for Project: DisExpo - disability Resource Expo							
	0.00	-15,000.00	0.00	0.00	-9,504.00	-5,496.00	63.36%
TOTALS for Project: DisExpo - disability Resource Expo							
	0.00	61,700.00	0.00	0.00	33,174.21	28,525.79	
TOTALS FOR EXPENSE STRINGS							
	0.00	76,700.00	0.00	0.00	0.00	42,678.21	17.43
TOTALS FOR FUNDING SOURCE STRINGS							
	0.00	-15,000.00	0.00	0.00	0.00	-9,504.00	20.22

PROJECT BUDGET REPORT

FOR 01/01/2025 - 12/31/2025

Original Budget	Net Budget Amendments	Revised Budget	Requisitions	Encumbrances	Actuals	AvaiTable Budget	Percent Used
REPORT TOTAL	Original Budget 0.00	Net Budget Amendments 61,700.00	Revised Budget 61,700.00	Requisitions 0.00	Encumbrances 0.00	Actuals 33,174.21	AvaiTable Budget 28,525.79

RESOURCES AVAILABLE
FOR ALL AGES!!!

DISABILITY EXPO

DISABILITY
RESOURCE
EXPO

Reaching Out For
Answers

Proudly Announcing
2025's Featured Sponsor
Thrivent Financial!

Saturday, October 18 • 11am - 4pm

Market Place Mall

2000 N Neil St, Champaign

Shuttle Services from Neil & Center to Market Place Mall's JC Penney Doors Provided by UIUC's DRES Transportation



Shuttle Schedule:



10:30am - Neil & Center to JC Penney
11:00am - JC Penney to Neil & Center
11:30am - Neil/Center to JC Penney
12:00pm - JC Penney to Neil & Center
12:30pm - Neil & Center to JC Penney
1:00pm - JC Penney to Neil & Center
1:30pm - Neil & Center to JC Penney
2:00pm - JC Penney to Neil & Center
2:30pm - Neil & Center to JC Penney
3:00pm - JC Penney to Neil & Center

Utilization Summaries for PY2025 Champaign County Mental Health Board Funded Programs

TPC = Treatment Plan Client
NTPC = Non-Treatment Plan Client
CSE = Community Service Event
SC = Screening Contact or Service Contact
Other = as defined in individual program contract

Many of the contract award amounts listed are not equal to actual cost of the program, as agencies are completing independent audit reports, which will be used to determine any excess revenue to be returned; excess revenue often results from understaffing, one cause of underutilization. These may result in future revisions to this report.

Detail on each program's performance toward defined consumer outcomes during the contract period, July 1, 2024 to June 30, 2025, is available at <http://ccmhddbrds.org>, among downloadable public files and titled "CCMHB PY25 Performance Outcome Reports." It is also posted on our section of the County website, [Public Documents Page](#), under [the same name](#).

Priority: Collaboration with Champaign County Developmental Disabilities Board (CCDDb), Very Young Children and their Families

Champaign County Regional Planning Commission Head Start/Early Head Start Early Childhood Mental Health Services \$216,800 (for I/DD Services)

Addresses social-emotional concerns in the early childhood period and identifies developmental issues and risk. The social-emotional portion of the program focuses on aiding the development of self-regulation, problem solving skills, emotional literacy, empathy, and appropriate social skills. Accomplishments in these areas will affect a child's ability to play, love, learn and work within the home, school and other environments. (\$171,663 of the total contract is for mental health services, the remainder is \$216,800 for I/DD.)

Utilization targets: 116 TPC, 380 NTPC, 5 CSE, 3000 SC, 12 Other (workshops, trainings, professional development efforts with staff and parents).

Utilization actual: 116 TPC, 62 NTPC, 3 CSE, 1572.5 SC, 15 Other (workshops, trainings, professional development efforts with staff and parents), 557 hours of service.

CU Early

CU Early - \$16,145 (for I/DD Services)

Bilingual home visitor for at risk Spanish speaking families, serving expectant families and children up to age 3; completion of developmental screenings on all enrolled children alongside the parent to ensure that children are developing on track; referral to Early Intervention if there is a suspected disability or concern with the child's development. 2020 IECAM data on Champaign County estimated there were 1,157 children under age 5 who speak Spanish, that 555 Spanish

speaking children were under 3, and that 1,188 children under 2 lived in poverty. (\$64,578 of the total contract relates to mental health, another \$16,145 to I/DD.)

Utilization targets: 20 TPC, 5 NTPC, 464 SC, 4 CSE

Utilization actual: 27 TPC, 7 NTPC, 714 SC, 17 CSE

DSC

Family Development \$656,174

Serves children birth to five years, with or at risk of developmental disabilities, and their families. Culturally responsive, innovative, evidence-based services. Early detection and prompt, appropriate intervention can improve developmental outcomes for children with delays, disabilities, or living in at-risk environments. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments.

Utilization targets: 655 TPC, 200 SC, 15 CSE

Utilization actual: 1045 TPC, 186 SC, 16 CSE

Priority: Thriving Children, Youth, and Families

Champaign County RPC Head Start/Early Head Start

Early Childhood Mental Health Services \$171,663 (for MH Services)

See above for service information and year-end data, disability types combined.

CU Early

CU Early - \$64,578 (for MH Services)

See above for service information and year-end data.

Crisis Nursery

Beyond Blue – Champaign County \$90,000

Supports mothers experiencing perinatal depression, with a focus on the mental health and well-being of children and families, by strengthening the parent child bond through playgroups, support groups, and home visiting services. Through coordination with the Home Visitors Consortium, Crisis Nursery focuses on families experiencing perinatal depression and then blends this programming with Prevention Initiative funding from the Illinois State Board of Education which focuses on the development of children birth-3 years.

Utilization targets: 24 TPC, 56 NTPC, 300 SC, 86 CSE, 550 Other (hours of in-kind/respite care)

Utilization actual: 21 TPC, 44 NTPC, 346 SC, 93 CSE, 790 Other

Cunningham Children's Home

Families Stronger Together \$282,139

Trauma informed, culturally responsive, and therapeutic and preventative services to youth... involved in or vulnerable to being involved in the juvenile justice system. Focus is primarily on preventative services for the younger

population. FST can offer early intervention services to Treatment Plan Client (TPC) youth and families. The FST program utilizes the ARC framework in working with these youth, families, and community.

Utilization targets: 40 TPC, 75 NTPC, 1935 SC, 10 CSE

Utilization actual: 19 TPC, 109 NTPC, 972 SC, 9 CSE

Don Moyer Boys & Girls Club

CU Change \$85,575

High yield programming, mental health resources and intensive case management... to address issues encountered in the educational setting, social settings, family, and community. With a focus on... stabilization of the family unit to support youth in graduating from high school with a plan for the future.

Utilization targets: 20 TPC, 20 NTPC, 480 SC, 48 CSE

Utilization actual: 19 TPC, 22 NTPC, 492 SC, 65 CSE

Don Moyer Boys & Girls Club

Community Coalition Summer Initiatives \$100,000

Supports youth and community mental health needs during critical out-of-school time over the summer months, when a lack of services is prevalent. Focused on violence prevention, enhancement of positive community engagement, academic enrichment, recreational activities, arts exploration, and leadership skill building. Services and supports by specialized providers, through subcontracts with Don Moyer Boys and Girls Club. The Champaign County Community Coalition and DMBGC support and reinforce System of Care principles and values, particularly relative to system-involved youth with emotional and environmental challenges. Reports to and through Champaign County Community Coalition and CCMHB.

Utilization targets: 11,7500 SC, 900 NTPC, 30 CSE

Utilization actual: 11,965 SC 864 NTPC, 46 CSE

East Central IL Refugee Mutual Assistance Center

Family Support and Strengthening \$62,000

Supports and strengthens refugee and immigrant families transitioning and adjusting to American culture and expectations in Champaign County. Staff speak over ten languages in house, with other languages available through qualified translators... offers a connection to area resources that is culturally and linguistically appropriate. Staff often accompany clients on appointments as advisors and trusted advocates. The goal is to give low-income immigrants better access to quality care and services, leading to thriving families and client self-sufficiency.

Utilization targets: 60 TPC, 2140 NTPC, 50 CSE, 2200 SC, 15 Other (hours of workshops)

Utilization actual: 38 TPC, 3531 NTPC, 70 CSE, 3,569 SC, 8 Other

Rosecrance Central Illinois

Child & Family Services \$10,476 (2 Quarters of data; contract cancelled early)

For Champaign County residents aged 5 to 17 (and their families) with MH disorder and a need for counseling, transportation, case management, wellness, and psychiatric services supported by a licensed nurse who provides medication education, health and wellness promotion, and care coordination; multi-disciplinary team and coordination between psychiatrist and clinician; individual, group, or family counseling sessions, using skill-building, psychoeducation, Cognitive Behavior Therapy, and Play Therapy; and transportation.

Utilization targets: 30 TPC, 10 NTPC, 250 SC, 5 CSE

Utilization actual: 32 TPC, 3 NTPC, 514 SC, 4 CSE

Uniting Pride of Champaign County

Children, Youth & Families Program \$190,056

Uniting Pride (UP) works to create a county inclusive of LGBTQ+ children, youth, adults, and families by providing programming and support across the lifespan. UP assists individuals dealing with depression, anxiety, substance use, or suicidal ideation. Support groups meet in-person and/or on Zoom depending on participant preferences. UP provide trainings to organizations, agencies, schools to build inclusive communities accepting of LGBTQ+ members. UP has launched a food pantry, increased free gender-affirming clothing program, and greatly expanded online resources.

Utilization targets: 100 NTPC, 300 SC, 100 CSE

Utilization actual: 375 NTPC, 809 SC, 250 CSE

Priority: Safety and Crisis Stabilization

CU at Home

Shelter Case Management \$256,700

The services and supports offered through the program meet the client's essential needs in the midst of crisis. The program provides intensive case management and care coordination to assist the client in moving from crisis to stabilization, and ultimately community integration. The program eliminates the need for clients to be homeless, decreases their contact with law enforcement, or the need for clients to seek stability through hospitalization.

Utilization targets: 50 TPC, 25 NTPC, 5500 SC, 50 CSE

Utilization actual: 40 TPC, 31 NTPC, 5,131 SC, 56 CSE

Champaign County Health Care Consumers

Justice Involved CHW Services & Benefits \$90,147

For people who have justice-involvement, Community Health Worker services area offered at the Champaign County jail and in community. Works with individuals experiencing behavioral health issues, helping them enroll in health insurance, food stamps, and other public benefits programs; helps stabilize individuals with resources and benefits; and helps them navigate the health care system to get their needs met.

Utilization targets: 50 TPC, 25 NTPC, 200 SC, 8 CSE, 10 Other (Rx fund)
Utilization actual: 121 TPC, 11 NTPC, 201 SC, 16 CSE, 5 Other (Rx fund)

Champaign County Regional Planning Commission – Community Services

Youth Assessment Center (YAC) \$76,350

Early intervention and diversion for youth, particularly those overrepresented in the juvenile justice system, and for youth whose behavior may be symptomatic of issues best served outside the juvenile justice system. Screens for needs, risks, and protective factors; uses Balanced and Restorative Justice (BARJ) approach; completes and reviews Station Adjustment as the working plan; may include weekly check-ins with case manager, curfew checks with police officer, reparation through written apology, community service hours, and linkage to social service, MH, or SUD treatment. Screening scores determine access to weekly phone counseling, group programming (CBT approach), and partnership with UIUC Psychological Services Center/Childhood Adversity & Resiliency Services to reduce barriers to MH treatment.

Utilization targets: 115 TPC, 25 NTPC, 100 SC, 70 CSE, 50 Other (referred but ineligible)

Utilization actual: 99 TPC, 24 NTPC, 173 SC, 70 CSE, 52 Other

FirstFollowers

FirstSteps Community Reentry House \$69,500

A transition house for men (and, new in PY25, one for women) returning home to Champaign County after incarceration. Rent-free housing in homes donated by the Housing Authority of Champaign County, for up to four people at a time; furniture, appliances, computers, kitchen equipment, exercise equipment, basic clothing items, and food until the person has the means to pay either through employment or Link Card. Staff assist residents in transition, help them set up plans of action and goals, provide transportation to potential employment or service opportunities, and facilitate their integration into the community. Projected length of engagement is 3-12 months.

Utilization targets: 8 TPC, 15 NTPC, 8 SC, 15 CSE

Utilization actual: 6 TPC, 18 NTPC, 36 SC, 6 CSE

First Followers

Peer Mentoring for Re-entry \$95,000

Formerly incarcerated individuals serve as peer mentors of the program as well as providing direct support to clients. Provides counseling and social/emotional supports, workforce development programs, housing, assistance in accessing photo IDs and transportation, and more.

Utilization targets: 47 TPC, 147 NTPC, 18 SC, 18 CSE

Utilization actual: 36 TPC, 42 NTPC, 48 SC, 8 CSE

Rosecrance Central Illinois

Criminal Justice PSC \$336,000

Community-based behavioral health program to reduce reliance on institutional care, with qualified professionals meeting those involved with the criminal justice system where they are—Champaign County jail, probation, or community. Using a person-centered, client-driven plan, the staff coordinates across systems, with and on behalf of people with justice system involvement. Case managers conduct screening, assessment, case management, and group therapy while individuals are in jail and help with the transition from incarceration to re-entry into the community.

Utilization targets: 45 TPC, 100 NTPC, 500 SC

Utilization actual: 21 TPC, 174 NTPC, 229 SC

Rosecrance Central Illinois

Crisis Co-Response (CCRT) \$310,000

Responds to need for behavioral health support in Urbana, Rantoul, and Champaign County, to reduce the number of repeat calls to law enforcement for social emotional behavioral (SEB) needs by increasing available services, eliminating barriers to existing services, and increasing individuals' capacity to engage in treatment, while offering law enforcement an alternative to formal processing.

Utilization targets: 70 TPC, 10 NTPC, 250 SC, 50 CSE

Utilization actual: 26 TPC, 37 NTPC, 192 SC, 56 CSE

Rosecrance Central Illinois

Specialty Courts \$93,450 (2 Quarters of data; contract cancelled early)

Coordinates across systems, with and on behalf of people with substance use disorders or mental illness who have justice system involvement. Clinicians provide Specialty Court clients behavioral health assessments, individualized treatment plans, and group and individual counseling services. Intensive case management to help clients overcome barriers and connect to mental health treatment and resources such as food, clothing, medical and dental services, employment, housing, education, transportation, and childcare.

Utilization targets: 45 TPC, 800 SC, 4 CSE, 1,000 Other = # hours case management, # hours counseling. Other represents services funded by other sources leveraged through CCMHB support for non-billable activities crucial to the operation of the Specialty Court

Utilization actual: 40 TPC, 664 SC, 1 CSE, Other 111 (hours assessment, hours case management, and hours counseling)

Women in Need (WIN) Recovery

Re-Entry & Recovery Home \$183,000

Gender-responsive, trauma-informed, health-promoting services for women and gender minorities, as an alternative to incarceration upon reentry. Service navigation and assistance to meet individualized self-identified needs that may include housing, case management, support plan with self-identified goals and assessments of progress, physical/mental/emotional health care services, substance misuse/trauma recovery, education, employment, legal assistance,

leadership training, peer-facilitated support groups, civic participation/community outreach, family therapy/reunification, compliance with parole/probation/DCFS/ other, and recovery-based programming. All residents are provided curriculum books for trauma, parenting, and recovery classes.

Utilization targets: 10 CSE, 40 SC, 0 NTPC, 12 TPC

Utilization actual: 58 CSE, 81 SC, 1 NTPC, 22 TPC

Priority: Healing from Interpersonal Violence

Champaign County Children's Advocacy Center (CAC)

Children's Advocacy \$63,911

Using a child-centered, evidence-based, coordinated response to allegations of child sexual abuse and serious physical abuse, the CAC promotes healing and justice for young victims through: a family-friendly space for initial interview and parent meeting; a legally-sound, developmentally appropriate child forensic interview; comprehensive case management provided by the CAC Family Advocate to help the family navigate the crisis; crisis counseling to the child and any non-offending family member; referrals to specialized medical services; and coordination of the investigation through multidisciplinary case reviews.

Utilization targets: 130 TPC, 40 NTPC, 170 SC, 8 CSE

Utilization actual: 222 TPC, 49 NTPC, 182 SC, 8 CSE

Courage Connection

Courage Connection \$128,038

"Our clients are not just victims, they are survivors. They have survived interpersonal violence and are reaching out to us to find healing. According to Boston University, interpersonal violence, also called intimate partner violence or domestic violence, is a pattern of behavior used to establish power and control over another person. Through our counseling and advocacy programs, we walk alongside our clients on their healing journey as we help them restore their sense of personal freedom, power, and well-being. All our services are also victim services but we also want to focus on this healing aspect of our work."

Utilization targets: 600 TPC, 150 NTPC, 750 SC, 200 CSE

Utilization actual: 229 TPC, 53 NTPC, 371 SC, 216 CSE

Rape Advocacy, Counseling & Education Services

Sexual Trauma Therapy Services \$140,000

Improves the health and success of survivors by providing confidential trauma therapy and crisis intervention services to survivors of sexual violence and stalking. Therapy services at RACES are part of the agency's Survivor Services Program. Master's level clinicians provide trauma-informed, culturally competent therapy through multiple treatment modalities, utilizing approaches that best meet the goals and the needs identified by clients. Cognitive-behavioral therapy, EMDR, and arts-based therapy, provided by five full-time staff members at

Urbana office and contractual therapist with office in Rantoul, to increase access to therapy services for survivors in the area.

Utilization targets: 170 TPC, 250 NTPC, 25 SC (non-client crisis intervention contacts), 2 CSE, 2 Other (# therapeutic groups)

Utilization actual: 168 TPC, 237 NTPC, 136 SC, 10 CSE, 22 Other

Rape Advocacy, Counseling & Education Services

Sexual Violence Prevention Education \$75,000

Services for residents of Champaign County aged three and older, at no cost. Uses a comprehensive, multi-level, evidence-informed strategy to provide age-appropriate programming to students, parents, teachers, and other community members. Special attention is given to ensuring the inclusion of historically underserved and marginalized communities, including racial and ethnic minorities, rural residents, members of the LGBTQ+ community, and individuals with disabilities. The most common locations for RACES prevention programming are K-12 schools.

Utilization targets: 4000 (# attending) SC, 600 CSE, 10 Other (JDC presentations)

Utilization actual: 3898 (# attending) SC, 747 CSE, 1 Other

Priority: Closing the Gaps in Access and Care

Champaign County Christian Health Center

Mental Health Care at CCCHC \$33,000

A psychiatrist provides direct mental health care to patients; mental health patients receive mental health screenings, primary care, prescriptions, and referrals to specialized care as needed. Primary care providers also treat or refer those with mental health conditions, especially anxiety and depression. Provided to any uninsured and underinsured resident of Champaign County, typically between the ages of 18 and 64 (as those under 18 and over 64 generally have some form of health care coverage).

Utilization targets: 200 TPC, 500 NTPC, 800 SC, 8 CSE, 100 Other

Utilization actual: 183 TPC, 1389 NTPC, 70 SC, 33 CSE, 19 Other

Champaign County Health Care Consumers

CHW Outreach & Benefit Enrollment \$86,501

Works with individuals experiencing behavioral health issues, helping them enroll in health insurance, food stamps, and other public benefits programs. Community Health Workers help stabilize individuals with resources and benefits and help navigating the health care system to get their needs met... establishes trust with clients by helping them gain and maintain access to many needed benefits, provides emotional support, and helps them identify services they need in a non-stigmatizing and supportive way.

Utilization targets: 160 TPC, 25 NTPC, 780 SC, 8 CSE, 11 Other (Rx fund)

Utilization actual: 279 TPC, 19 NTPC, 1305 SC, 22 CSE, 12 Other (Rx fund)

Champaign County Health Care Consumers

Disability Application Services \$105,000

Evaluations of disabling conditions and determinations of whether to apply for SSI or SSDI or both (depending on client's work history); assistance applying for and appealing adverse decisions; coordinating with attorney if an appeal is needed; emotional/psychological support for individuals applying. The decision to apply for disability and the process of doing so can be challenging to the individual as they must come to terms with the idea that they are "disabled." Additional services include helping clients to access health services to document their disabling conditions.

Utilization targets: 69 TPC, 8 NTPC, 700 SC, 5 CSE, 12 Other (Rx fund)

Utilization actual: 139 TPC, 21 NTPC, 1460 SC, 21 CSE, 49 Other (Rx fund)

Champaign County Regional Planning Commission – Community Services

Homeless Services System Coordination \$54,281

Supports, facilitates, and directs the IL-503 Continuum of Care (CoC) aka Champaign County Continuum of Service Providers to the Homeless; supports the body's mission to end homelessness in Champaign County through a coordinated network of resources for those who are homeless or at-risk of becoming homeless; coordinates efforts across the CoC membership to support its goals and the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act regulations; and builds and maintains collaborative partnerships with members and affiliates, working closely with the Executive Committee.

Utilization targets: 10 TPC, 45 NTPC, 60 SC, 30 CSE

Utilization actual: 23 TPC, 30 NTPC, 205 SC, 29 CSE

Community Service Center of Northern Champaign County

Resource Connection \$68,609

A multi-service program aimed at assisting residents of northern Champaign County with basic needs and connecting them with mental health and other resources. Serves as a satellite site for various human service agencies providing mental health, physical health, energy assistance, and related social services. Features an emergency food pantry, prescription assistance, clothing and shelter coordination, and similar services for over 1,700 households.

Utilization targets: 1500 NTPC, 3700 SC, 900 Other (contacts with other agencies using CSCNCC as a satellite site), 0 CSE

Utilization actual: 1460 NTPC, 5598 SC, 933 Other, 2 CSE

Cunningham Children's Home

ECHO Housing and Employment Support \$203,710

Housing First Approach: prioritized permanent housing as a platform from which participants can pursue goals and improve quality of life. Customized

Employment: connects eligible participants with Illinois workNet as an approach towards competitive employment for individuals with significant disabilities;

program based on determination of individuals' strengths, needs, and interests.
Case management: assists participants in applying for eligible benefits.

Utilization targets: 20 TPC, 15 NTPC, 510 SC, 25 CSE

Utilization actual: 29 TPC, 8 NTPC, 1053 SC, 89 CSE, 1 Other

Family Service of Champaign County

Counseling \$30,000

Affordable, accessible counseling services to families, couples and people of all ages. Serves Drug Court clients and participates in Specialty Courts collaboration. Clients are given tools and supports to successfully deal with life challenges such as divorce, marital and parent/child conflict, depression, anger management, anxiety, abuse, substance abuse/dependency, and trauma. Strength-based, client-driven services utilize family and other natural support systems and are respectful of the client's values, beliefs, traditions, customs, and personal preferences. Clients can be as young as 5.

Utilization targets: 40 TPC, 20 NTPC

Utilization actual: 15 TPC, 28 NTPC

Family Service of Champaign County

Self-Help Center \$28,930

Self-Help Center maintains and publishes information about and referral to local support groups. Provides information about local self-help groups and provides training, assistance, and publicity for group facilitators in Champaign County. Information is available online and in printed directory and specialized support group listings. Provides consultation services, workshops, conferences, educational packets and maintains a lending library of resource materials.

Utilization target: 300 CSE

Utilization actual: 259 CSE

Family Service of Champaign County

Senior Counseling & Advocacy \$178,386

Caseworkers assist with needs and challenges faced by seniors (60 or older) with multiple needs in terms of their emotional and/or physical health, as well as their requesting assistance in completing numerous applications and contacts with various safety net programs and service providers. Services are provided over the phone, Zoom, in the home, or in the community.

Utilization targets: 325 TPC, 700 NTPC, 2900 SC, 4 CSE, 2500 Other

Utilization actual: 179 TPC, 592 NTPC, 3392 SC, 19 CSE, 323 Other

GCAP

Advocacy, Care, and Education (New) \$61,566

Addresses existing gaps in care for people living with HIV/AIDS (PLWHA)... holistic support, empowering individuals through: Independent Living Skills (education on life skills, budgeting, managing finances, and building self-reliance); Transportation Assistance (access to essential services, appointments, and opportunities); and Social Connection & Belonging (access to community activities, learning, and peer support). People to be served are those in GCAP

transitional or emergency/rapid rehousing units, those who are unsheltered or at risk of becoming unsheltered and interested in GCAP housing or supportive services, and those receiving emergency assistance.

Utilization targets: 8 CSE, 20 SC, 60 NTPC, 10 TPC, 0 Other (hours of assistance)

Utilization actual: 13 CSE, 40 SC, 96 NTPC, 19 TPC, 72 Other

GROW in Illinois

Peer Support \$157,690

A peer support group assisting with personal recovery and mental health of individual sufferers which may include addictions. Through leadership and community building, individuals attending weekly group meetings are given the tools and support to help them in their recovery and personal growth. Weekly group meetings / Organizer and Recorder meetings, Leaders meetings, and monthly socials. Groups (3 to 15 members) include in-person as well as virtual sessions for men and for women, and are held in various locations around the County, including the Champaign County Jail.

Utilization targets: 150 NTPC, 2000 SC, 24 CSE

Utilization actual: 332 NTPC, 2511 SC, 25 CSE

Promise Healthcare

Mental Health Services with Promise \$330,000

Mental health services to achieve the integration of medical and behavioral health care as supported by both the National Council for Community Behavioral Healthcare and the National Association of Community Health Centers. Mental health and medical providers collaborate, make referrals, and even walk a patient down the hall to meet with a therapist. Patients receive MH treatment through counselor, psychiatrist, or primary care provider. Counseling and psychiatry available at Frances Nelson, Promise Healthcare, Promise Urbana School Health Center, and by appointment.

Counseling Utilization targets: 600 TPC, 400 NTPC, 2800 SC, 4 CSE, 50 Other (patients with no other pay source)

Counseling Utilization actual: 806 TPC, 1029 NTPC, 3226 SC, 265 Other (patients with no other pay source)

Psychiatric Utilization targets: 1000 TPC, 900 NTPC (receiving psych meds through primary care), 3200 SC (psychiatric service encounters), 2 CSE, 100 Other (patients with no other pay source)

Psychiatric Utilization actual: 2615 TPC, 4218 NTPC (receiving psych meds through primary care), 9446 (psychiatric service encounters), 4 CSE (CI Living presentations), 545 Other (patients with no other pay source)

Promise Healthcare

Promise Healthcare Wellness \$107,078

Case Managers and Community Health Workers assist patients to address barriers to care, access to transportation, Medicaid and Marketplace insurance enrollment, Promise Sliding Fee Scale enrollment, SNAP enrollment, and enrollment in Medication Assistance Programs. Accepts outside referrals for

behavioral health services and enabling services. Staff assess patient need for enabling services and assist individuals in accessing behavioral health services.

Utilization targets: 200 TPC, 400 NTPC, 1600 SC, 15 CSE, 150 Other (Utilizing a Social Determinant of Health screening tool - PRAPARE).

Utilization actual: 410 TPC, 1,807 NTPC, 2,563 SC, 40 CSE, 924 Other

Rosecrance Central Illinois

Benefits Case Management \$84,625

Benefits Case Manager assists clients with benefits enrollment, outreach and education, benefits counseling, and assistance with obtaining myriad resources available to behavioral health clients. Helps clients obtain the benefits necessary to receive coverage for behavioral health and medical services, as well as other public benefit programs. May assist clients with access to housing, employment, healthy food, and other resources.

Utilization targets: 600 SC, 250 NTPC

Utilization actual: 521 SC, 167 NTPC

Rosecrance Central Illinois

Recovery Home \$100,000

An alcohol and drug-free environment that provides individuals a safe, supportive living environment. Individuals go through a peer support recovery program while developing independent living skills in a community setting. Staff assist clients in addressing “problems in living” and the social determinants of health. The recovery home model demonstrates efficacy in mitigating risk of relapse and decreasing psychiatric symptoms when involved in 12-Step recovery and developing social supports.

Utilization targets: 22 TPC, 65 SC

Utilization actual: 14 TPC, 53 SC

Terrapin Station Sober Living, Inc.

Recovery Home \$44,436 (Contract cancelled after 2nd Quarter)

Equitable housing for dual diagnosis persons in recovery from drug addiction, homelessness, and the justice system, in a manner that is forward-thinking and original. Intensive individualized case management; support for activities of daily living and relapse prevention skills; access to vocational/educational programs; assistance linking to medical, psychiatric, counseling, and dental services in the community; education on money management/budgeting; education on accessing peer or community supports and activities such as church, AA/NA meetings, other sobriety-based/mental health support groups, recreational activities, transportation services, and provision of service work/volunteer/work opportunities.

Utilization targets: 9 NTPC

Utilization actual: 5 NTPC

In memory of Terrapin's Founder, Nelson K. Novak, who leveraged his own creativity, genius, and recovery to support others.

CCMHB 2025 Board to Board Liaison

	Jane Sprandel	Kyle Patterson	Chris Milner	Elaine Palencia	Emily Rodriguez	Don Paul Youakim	Alejandro Gomez	Molly McRay	Anthony Nichols
Courage Connection (4th Mon., 5:30pm)									
CCRPC (Head Start and Community Services)									
Cunningham Children's Home (meets qtrly)									
Children's Advocacy Ctr (4th Thurs., 9 am)									
CC Health Care Consumers(4th Thurs., 6 p.m.)									
Christian Health Center (last Sat., 10 a.m.)									
Community Service Ctr (3rd Thurs., 4:30 pm)									
Crisis Nursery (2nd Wed., 5:30 pm)									
CU at Home (4th Wed., 8 am)									
CU Early (Unit 116 mtg)									
Don Moyer (3rd Tues., 7 am)									
DSC (4th Thurs., 5:30 pm)									
ECIRMAC/Refugee Ctr (2nd Tues., 4 pm)									
Family Service (2nd Mon., noon)									
First Followers (generally 3rd Fri., 5 pm)									
GCAP (??)									
GROW in IL (last Mon., 7 pm)									
Promise Healthcare (4th Tues., 6 pm)					X				
RACES (3rd Thurs., 6 pm)									
Rosecrance (last Tues, 4:30 pm)									
Uniting Pride (2nd Wed., 6:30 pm)									
WIN Recovery (2nd Monday, 5:30 p.m.)									
Expo Committees (various)	X								
Community Coalition (2nd Wed., 3:30pm)			X						
Student Mental Health Collab (1st Mon., 11AM, in person 2-3x/semester)								X	