CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Champaign County Mental Health Board (CCMHB) Meeting Agenda
Wednesday, July 22, 2026, 5:45PM

This meeting will be held in person at the Shields-Carter Room of the Bennett Administrative Center, 102 E. Main St., Urbana, IL 61801. Members of the public may attend in person or virtually, using https://us02web.zoom.us/j/81393675682 Meeting ID: 813 9367 5682

I. **Call to order**

II. **Roll call**

III. **Approval of Agenda***

IV. **Schedules and Timelines**

For information only are the CCMHB Meeting Schedule and Timeline, posted here (https://ccmhddbrds.org/ords/f?p=189:9::::::), and the Champaign County Developmental Disabilities Board (CCDDB) Meeting Schedule and Timeline, posted here (https://ccmhddbrds.org/ords/f?p=189:8::::::).

V. **Acronyms and Glossary**

For information only, an updated glossary of terms is posted here (https://ccmhddbrds.org/ords/f?p=189:12::::::).

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

VII. **Chairperson's Comments – Jane Sprandel**

VIII. **Executive Director's Comments – Lynn Canfield**

IX. **Approval of CCMHB Board Meeting Minutes** (pages 5-14)*

Action is requested to approve minutes of the CCMHB May 27, 2026 meeting.

X. **Vendor Invoice Lists** (pages 15-20)*

Action is requested to accept the "Vendor Invoice Lists" and place them on file.

XI. **Old Business**

a) **Evaluation Capacity Building Project Annual Report** (pages 21-62)

The evaluation team will present their annual report. See other resources developed by the team at *https://www.familyresiliency.illinois.edu/resources/microlearning-videos*. No action is requested.

XII. New Business

a) **DRAFT 2027 Budgets** (pages 63-78)*

A Decision Memorandum presents attached draft 2027 CCMHB and I/DD Special Initiative fund budget documents for board review and approval, with background details, CCDDB draft budget, and intergovernmental agreement for information.

b) **DRAFT RFP for Evaluation Capacity Building Project** (pages 79-102)*

A Decision Memorandum presents an attached draft Request for Proposals for Evaluation Capacity Building. Action is requested to approve the draft and bid notice.

c) **Setting the Stage for 2027 and Program Year 2028** (pages 103 - 112)

For information only are a briefing memorandum detailing current Three-Year plan objectives and tactics, Program Year 2027 funding allocation priorities, and lists of Program Year 2027 awards.

XIII. Reports

a) **Staff Reports** (pages 113– 126)

Reports from Kim Bowdry, Leon Bryson, Lynn Canfield, and Stephanie Howard-Gallo are included in the packet for information only.

b) **Community Behavioral Health Needs Assessment Activities** (pages 127-130)

Minutes of the May workgroup meeting are included for information only.

c) **Anti-Stigma Projects** (pages 131-134)*

A report on planned anti-stigma activities for 2026 is included in the packet, with suggested decisions related to 2027. See also *https://disabilityresourceexpo.org* and *https://champaigncountyair.com/*. Action is requested.

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

XV. Board to Board Reports (pages 135-136)

XVI. County Board Input

XVII. Champaign County Developmental Disabilities Board Input

XVIII. Board Announcements and Input

XIX. Adjournment

Next Meeting: August 19, 2026 (tentative) or September 23, 2026

* 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).*

(This page is intentionally left blank.)

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

(CCMHB) MEETING MINUTES

May 27, 2026

This meeting was held at the Scott M. Bennett Administrative Center

102 E. Main St., Urbana, IL

and with remote access.

5:45 p.m.

MEMBERS PRESENT:

Den Arres, Molly McLay, Elaine Palencia, Kyle Patterson, Jane Sprandel, Jen Straub, Jon Paul Youakim

MEMBERS EXCUSED:

Alejandro Gomez, Tony Nichols

STAFF PRESENT:

Kim Bowdry, Leon Bryson, Lynn Canfield, Stephanie Howard-Gallo, Shandra Summerville

OTHERS PRESENT:

Claudia Lennhoff, Champaign County Healthcare Consumers (CCHCC); Katie Harmon, Andi France, Courage Connection; Madison Palmer, Uniting Pride; Cindy Crawford, Community Services Center of Northern Champaign County (CSCNCC); Brenda Eakins, GROW in IL; Jim Hamilton, Promise Healthcare; Liz Miner, Dave Kellerhals, Rosecrance

CALL TO ORDER:

CCMHB President McLay called the meeting to order at 5:47 p.m.

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

An additional set of minutes were added to the agenda. The Evaluation Capacity Project update will be postponed to the July meeting. 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. The June CCMHB meeting will be cancelled.

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was included for information.

CITIZEN INPUT / PUBLIC PARTICIPATION:

Claudia Lennoff from Champaign County Healthcare Consumers (CCHCC) expressed her appreciation for the funding of their disability program.

Jim Hamilton from Promise Healthcare expressed the importance of their new application for the mobile clinic and the importance of serving rural Champaign County.

Melissa Pappas from Rosecrance announced the Rosecrance Urgent Care Open House on May 29, 2026.

PRESIDENT'S COMMENTS:

CCMHB Chair Molly McLay stated this was her last meeting as President and shared a personal story of what her service to the CCMHB has meant to her.

EXECUTIVE DIRECTOR'S COMMENTS:

Director Canfield discussed the importance of the CCMHB's difficult decisions.

APPROVAL OF MINUTES:

Minutes from the April 22, April 29, and May 20, 2026 CCMHB meetings were included in the board packet for review. McLay pointed out typos that should be corrected.

> **MOTION: Ms. McLay moved to approve the minutes as amended of the CCMHB's meetings on April 22, 2026, April 29, 2026, and May 20, 2026. Ms. Straub 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: Mx. Arres moved to accept the Vendor Invoice Lists as presented in the Board packet. Dr. Youakim seconded. A voice vote was taken and the motion passed.**

NEW BUSINESS:

Allocation Decisions for Program Year 2027:

For consideration by the CCMHB, a decision memorandum (added as addendum) presented staff suggestions related to funding for the Program Year 2027 (July 1, 2026 through June 30, 2027). Decision authority rests with the CCMHB and their sole discretion concerning appropriate use of available dollars based on assessment of community needs, best value, alignment with decision support criteria, pricing, affordability, and distribution across categories of need and service intensity. Scenarios were discussed during the May 20 study session. Possible motions were presented in the memorandum.

Director Canfield reviewed the decision making process and the content of the decision memorandum.

> **MOTION: Ms. Sprandel moved to authorize the Executive Director to conduct contract negotiations as specified in the memorandum. Mx. Arres seconded. A roll call vote was taken and the motion passed unanimously.**
>
> **MOTION: Ms. McLay moved to authorize the Executive Director to implement contract maximum reductions as described in the memorandum. Ms. Sprandel seconded. A roll call vote was taken and the motion passed unanimously.**
>
> **MOTION: Mx. Arres moved to include in all contracts a provision for specific exceptions to Funding Requirements and Guidelines, as described in the memorandum. Dr. Youakim seconded. A roll call vote was taken and the motion passed unanimously.**
>
> **MOTION: Ms. McLay moved to include in all contracts the requirement to share documentation of the onset of work on the audit, review, or compilation, as described in the memorandum. Ms. Sprandel seconded. A roll call vote was taken and the motion passed unanimously.**

Ms. McLay reviewed each application by stating the program name, the amount requesting, and if they are a new or returning program. Director Canfield reviewed possible scenarios and provisions.

Brightpoint – Healing Beyond Violence – NEW – requested $217,106

MOTION: Mx. Arres moved to deny CCMHB funding of $217,106 for Brightpoint – Healing Beyond Violence. Ms. Palencia seconded. A roll call vote was taken and the motion passed unanimously.

CCRPC – Community Services – Homeless Services System Coordination – requested $189,007

MOTION: Ms. Straub moved to approve CCMHB funding of $189,007 per year for a two-year term, for CCRPC – Community Services – Homeless Services System Coordination, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

CU at Home – Life Skills Case Management – NEW – requested $305,000

MOTION: Mx. Arres moved to deny CCMHB funding of $305,000 for CU at Home – Life Skills Case Management. Ms. Palencia seconded. A roll call vote was taken and the motion passed unanimously.

CU at Home – Shelter Case Management – requested $295,000

MOTION: Ms. Sprandel moved to approve CCMHB funding of $295,000 per year for a two-year term, for CU at Home – Shelter Case Management, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

CU Early – CU Early – requested $86,701

MOTION: Dr, Youakim moved to approve CCMHB funding of $86,701 per year for a two-year term, for CU Early – CU Early, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Straub seconded. A roll call vote was taken and the motion passed unanimously.

Champaign County Head Start – Early Childhood MH Services – requested $411,062

MOTION: Ms. Straub moved to approve CCMHB funding of $411,062 per year for a two-year term, for Champaign County Head Start – Early Childhood MH Services, subject to the caveats as 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.

CC Healthcare Consumers – Disability Application Services – requested $121,000

MOTION: Ms. Palencia moved to approve CCMHB funding of $121,000 per year for a two-year term, for Champaign County Healthcare Consumers – Disability Application Services, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

City of Champaign Township Strides Shelter – Behavior Health Program – NEW – requested $150,000
Board members expressed their regrets in not having the funds to support this program this year. They were encouraged to apply again next year.

MOTION: Ms, Sprandel moved to deny CCMHB funding of $150,000 for City of Champaign Township Strides Shelter – Behavior Health Program. Ms. Palencia seconded. A ro;; call vote was taken and the motion passed unanimously.

Courage Connection – Courage Connection – requested $176,476

MOTION: Ms. Straub moved to approve CCMHB funding of $176,476 per year for a two-year term, for Courage Connection – Courage Connection, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Mr. Patterson seconded. A roll call vote was taken and the motion passed unanimously.

Cunningham Children's Home – ECHO Housing and Employment - requested $264,351

MOTION: Ms. Palencia moved to approve CCMHB funding of $264,351 per year for a two-year term, for Cunningham Children's Home – ECHO Housing and Employment, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Sprandel seconded. A roll call vote was taken and the motion passed unanimously.

Cunningham Children's Home –Families Stronger Together – requested $298,532

MOTION: Ms. McLay moved to approve CCMHB funding of $298,532 per year for a two-year term, for Cunningham Children's Home – Families Stronger Together, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Straub seconded. A roll call vote was taken and the motion passed unanimously.

Don Moyer Boys and Girls Club – CU Change – requested $94,135

MOTION: Ms. Sprandel moved to approve CCMHB funding of $94,135 per year for a two-year term, for Don Moyer Boys and Girls Club – CU Change, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

Don Moyer Boys and Girls Club – Community Coalition Summer Initiatives – requested $100,000

MOTION: Ms. Palencia moved to approve CCMHB funding of $100,000 per year for a two-year term, for Don Moyer Boys and Girls Club – Community Coalition Summer Initiatives, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Mx. Arres seconded. A roll call vote was taken and the motion passed unanimously.

Family First Advocacy – Empowering Bridge Program – NEW – requested $233,355

Board members stated they hope the agency will apply again next year.

MOTION: Ms. Straub moved to deny CCMHB funding of $233,355 for Family First Advocacy, NFP – Empowering Bridge Program. Dr. Youakim seconded. A roll call vote was taken and the motion passed unanimously.

FirstFollowers – FirstSteps Community Reentry House – requested $69,500

MOTION: Ms. Palencia moved to approve CCMHB funding of $69,500 per year for a two-year term, for FirstFollowers – FirstSteps Community Reentry House, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Sprandel seconded. A roll call vote was taken and the motion passed unanimously.

FirstFollowers – Peer Mentoring for Reentry – requested $120,000

MOTION: Mx. Arres moved to approve CCMHB funding of $90,000 per year for a two-year term, for FirstFollowers – Peer Mentoring for Reentry, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Straub seconded the motion. A roll call vote was taken and the motion passed unanimously.

GCAP – Advocacy, Care, and Education Services – requested $113,878

MOTION: Dr. Youakim moved to approve CCMHB funding of $113,878 per year for a two-year term, for Greater Community AIDS Project of East Central Illinois – Advocacy, Care, and Education Services, subject to the caveats as presented in the memorandum, and to authorize the CCMHB

Executive Director and Board Officer to execute the agreement. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

GROW in Illinois – Peer Support – requested $179,805

MOTION: Ms. McLay moved to approve CCMHB funding of $171,805 per year for a two-year term, for GROW in Illinois – Peer Support, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Straub seconded. A roll call vote was taken and the motion passed unanimously.

Habitat for Humanity – Homebuyer Program – NEW – requested $229,560

MOTION: Mx. Arres moved to deny CCMHB funding of $229,560 for Habitat for Humanity – Homebuyer Program. Dr. Youakim seconded. A roll call vote was taken and the motion passed unanimously.

Promise Healthcare – Mobile Clinic – NEW – requested $200,000

MOTION: Ms. Palencia moved to deny CCMHB funding of $200,000 for Promise Healthcare – Mobile Clinic. Ms. Sprandel seconded. A roll call vote was taken and the motion passed unanimously.

Rosecrance Central Illinois – Behavioral Health Urgent Care – NEW – requested $360,000

Board members expressed their regret that there was not enough funding to be allocated for this program. The agency is encouraged to apply for funding for this program next year.

MOTION: Ms. Sprandel moved to deny CCMHB funding of $360,000 for Rosecrance Central Illinois – Behavioral Health Urgent Care. Dr. Youakim seconded. A roll call vote was taken. Patterson, Palencia, Sprandel, Straub, Youakim, and McLay voted aye. Arres voted nay. The motion passed.

Rosecrance Central Illinois – Benefits Case Management – requested $181,000

MOTION: Ms. McLay moved to approve CCMHB funding of $181,000 per year for a two-year term, for Rosecrance Central Illinois – Benefits Case Management, subject to the caveats as presented in this memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Palencia seconded. A roll call vote was taken and the motion passed unanimously.

Rosecrance Central Illinois – Recovery Home – requested $200,000

Mx. Arres expressed her concerns regarding how reducing the request would impact services for this program.

MOTION: Ms. Straub moved to approve CCMHB funding of $125,000 per year for a two-year term, for Rosecrance Central Illinois – Recovery Home, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Palencia seconded. A roll call vote was taken and the motion passed unanimously.

Uniting Pride of Champaign County – Children, Youth, & Families Program – requested $225,056

MOTION: Ms. Palencia moved to approve CCMHB funding of $225,056 per year for a two-year term, for Uniting Pride of Champaign County – Children, Youth, & Families Program, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Sprandel seconded the motion. A roll call vote was taken and the motion passed unanimously.

We Never Walk Alone – Trained First Responder Peer Support – NEW – requested $20,330

MOTION: Mx. Arres moved to deny CCMHB funding of $20,330 for We Never Walk Alone – Trained First Responder Peer Support. Ms. Straub seconded the motion. A roll call vote was taken and the motion passed unanimously.

We Never Walk Alone – Vetted MH Professional Network – NEW – requested $19,656

MOTION: Ms. Sprandel moved to deny CCMHB funding of $19,656 for We Never Walk Alone – Vetted Mental Health Professional Network. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

WIN Recovery – Win Resilience Resource Center – NEW – requested $270,000

MOTION: Dr. Youakim moved to approve CCMHB funding of $210,000 for WIN Recovery – Win Resilience Resource Center, subject to the caveats as presented in the memorandum, and to authorize the CCMHB Executive Director and Board Officer to execute the agreement. Ms. Sprandel seconded the motion. A roll call vote was taken and the motion passed unanimously.

TASC Inc.—Outreach and Recovery Support Services – NEW - Requested $90,429

MOTION: Dr. Youakim moved to deny funding of $90,429 for TASC Inc.—Outreach and Recovery Support Services. Ms. McLay seconded. A roll call vote was taken and the motion passed unanimously.

Evaluation Capacity Building Project Update:

Deferred. For more information:
https://www.familyresiliency.illinois.edu/resources/microlearning-videos

Board Officer Elections:

The CCMHB By-Laws were included in the packet for information.

> **MOTION: Dr. Youakim nominated Ms. Sprandel as Board President. Ms. Arres seconded. A voice vote was taken and all members voted aye. The motion passed.**
>
> **MOTION: Dr. Youakim nominated Ms. McLay as Vice President/Secretary. Ms. Palencia seconded. A voice vote was taken and all members voted aye. The motion passed.**
>
> **MOTION: Ms. Straub moved to elect Ms. Jane Sprandel as CCMHB President and Ms. Molly McLay as CCMHB Vice-President/Secretary for the term beginning July 1, 2026 and ending June 30, 2027. Mx. Arres seconded. A voice vote was taken and the motion passed unanimously.**

REPORTS:

Staff Reports:

Staff reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, and Shandra Summerville were included in the packet.

Community Behavioral Needs Assessment:

Minutes from the April meeting were included in the packet. Director Canfield and Ms. Sprandel provided updates.

disAbility Resource Expo and AIR Updates:

Websites are under construction. https://disabilityresourceexpo.org and https://champaigncountyair.com/

Third Quarter Service Activity Reports:

Third quarter service reports were included in the packet.

PUBLIC PARTICIPATION AND AGENCY INPUT:

Kerrie Hacker expressed her appreciation to the CCMHB for making difficult funding decisions this evening.

BOARD TO BOARD REPORTS:

Ms. Palencia attended a Champaign County Community Coalition meeting.

COUNTY BOARD INPUT:

None.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD (CCDDB) INPUT:

None.

BOARD ANNOUNCEMENTS AND INPUT:

Ms. Sprandel thanked Board members for their vote for her presidency.

ADJOURNMENT:

The meeting adjourned at 8:16 p.m.

Respectfully Submitted by:

Stephanie Howard-Gallo

CCMHB/CCDDB Compliance and Operations Coordinator

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

VENDOR INVOICE LIST

Champaign County, IL FUND = I/DDSI MONTH = June 2026

Vendor Number	Vendor Name	Invoice	Invoice Date	Check Run	Invoice Net	Invoice Description
1	CHAMPAIGN COUNTY TREASURER	May'26 IDDSI25-089	5/1/2026	062626A	19,336.00	IDDSI25-089 Community Life Sho
1	CHAMPAIGN COUNTY TREASURER	Jun'26 IDDSI25-089	6/1/2026	062626A	19,337.00	IDDSI25-089 Community Life Sho
10716	FRANK LEE CREIGHTON	Mattress Reim 6/14	6/14/2026	062626A	3,544.93	Reimbursement for Mattress 6/14/26

(This page is intentionally left blank.)

VENDOR INVOICE LIST

Champaign County, IL FUND = MHB MONTH = May 2026

Vendor Number	Vendor Name	Invoice	Invoice Date	Check Run	Invoice Net	Invoice Description
1	CHAMPAIGN COUNTY TREASURER	MHB-005	5/1/2026	050826A	890.00	Apr'26 Information Technology Service
19970	CDS OFFICE SYSTEMS	INV1772714	4/22/2026	050126A	23.53	Copier Maintenance 3/6/26 - 4/5/26
10115	CHAMPAIGN MULTIMEDIA GROUP	01198720	4/28/2026	050826A	33.20	Public Notice - 2025 Annual Report
18323	DIMOND BROS. INSURANCE LLC	1842227	4/28/2026	050826A	4,143.00	Policy #EMN0577839 5/11/26-5/11/29
18323	DIMOND BROS. INSURANCE LLC	1844645	5/6/2026	051526A	4,752.00	Policy #EMN0577834 5/11/26-5/11/29
10183	ALEXANDER F CAMPBELL	806-2621	5/7/2026	051526A	900.00	Website ADA Enhancements
100	EMPLOYEE VENDOR	Howard-Gallo 5/4/26	4/30/2026	050826A	50.40	Travel Log 4/1/26-4/30/26
100	EMPLOYEE VENDOR	Bowdry 5/11/26	5/5/2026	051526A	24.54	Travel Log 3/1/26 - 4/30/26
10214	FIRST FOLLOWERS	Jan'26 MHB25-034	1/1/2026	051526A	5,791.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	Feb'26 MHB25-034	2/1/2026	051526A	5,791.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	Mar'26 MHB25-034	3/1/2026	051526A	5,791.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	Apr'26 MHB25-034	4/1/2026	051526A	5,791.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	Jan'26 MHB25-003	1/1/2026	051526A	7,916.00	MHB25-003 Peer Mentoring for R
10214	FIRST FOLLOWERS	Feb'26 MHB25-003	2/1/2026	051526A	7,916.00	MHB25-003 Peer Mentoring for R
10214	FIRST FOLLOWERS	Mar'26 MHB25-003	3/1/2026	051526A	7,916.00	MHB25-003 Peer Mentoring for R
10214	FIRST FOLLOWERS	Apr'26 MHB25-003	4/1/2026	051526A	7,916.00	MHB25-003 Peer Mentoring for R
20173	GREATER COMMUNITY AIDS PROJE	Mar'26 MHB25-022	3/1/2026	051526A	5,130.00	MHB25-022 Advocacy, Care, and
20173	GREATER COMMUNITY AIDS PROJE	Apr'26 MHB25-022	4/1/2026	051526A	5,130.00	MHB25-022 Advocacy, Care, and
20570	JP MORGAN CHASE BANK	6233 4/30/26	4/30/2026	050826A	971.64	Acct # 4485 9279 0007 6233 4/30/26

10348	MCS OFFICE TECHNOLOGIES INC	01-714042	5/1/2026	050826A	162.00	May'26 MHB/DDB Managed IT Service
10453	QUILL CORPORATION	48875664	5/11/2026	052226A	78.86	Acct # 8197518
21027	FULTON SH UBIL I, LLC	Unit A17 5/1/26	5/18/2026	052226A	1,983.00	Storage Unit A17 Rent 5/1/26-4/30/26
10583	UNIVERSITY OF ILLINOIS	26111	4/8/2026	050826A	117.20	Prep/Presentation: Practicing Servant Leadership
10583	UNIVERSITY OF ILLINOIS	May'26 Award 112237	5/1/2026	051526A	11,488.33	MHB23-039 Building Agency Eval

VENDOR INVOICE LIST

Champaign County, IL FUND = MHB MONTH = June 2026

Vendor Number	Vendor Name	Invoice	Invoice Date	Check Run	Invoice Net	Invoice Description
10003	AAIMEA TRAINING & CONSULTING LLC	00092858	5/26/2026	060526A	1,441.00	AAIM Membership - Entrepreneur - 3 year
10705	JOHN M. BRUSVEEN	2025 Quality Audit	6/15/2026	062626A	3,131.25	MHB26-051 Independent Audit Quality Rpts
18805	C-U AT HOME	May'26 MHB25-021	5/1/2026	062626A	21,391.00	MHB25-021 Shelter Case Management
18805	C-U AT HOME	Jun'26 MHB25-021	6/1/2026	062626A	21,399.00	MHB25-021 Shelter Case Management
1	CHAMPAIGN COUNTY TREASURER	May'26 Office Rent	5/1/2026	060526A	2,327.88	May'26 Office Rent 053
1	CHAMPAIGN COUNTY TREASURER	Jun'26 Office Rent	6/1/2026	060526A	2,327.88	Jun'26 Office Rent 053
1	CHAMPAIGN COUNTY TREASURER	MHB-0066	6/8/2026	061826A	890.00	May'26 Information Technology Service
1	CHAMPAIGN COUNTY TREASURER	May'26 MHB26-006	5/1/2026	062626A	5,325.00	MHB26-006 Champaign County CAC
1	CHAMPAIGN COUNTY TREASURER	May'26 MHB25-026	5/1/2026	062626A	32,371.00	MHB25-026 Early Childhood Mental Hlth
1	CHAMPAIGN COUNTY TREASURER	May'26 MHB25-004	5/1/2026	062626A	4,523.00	MHB25-004 Homeless Services System
1	CHAMPAIGN COUNTY TREASURER	May'26 MHB26-025	5/1/2026	062626A	6,362.00	MHB26-025 Youth Assessment Center
1	CHAMPAIGN COUNTY TREASURER	Jun'26 MHB26-006	6/1/2026	062626A	5,336.00	MHB26-006 Champaign County CAC
1	CHAMPAIGN COUNTY TREASURER	Jun'26 MHB25-026	6/1/2026	062626A	32,382.00	MHB25-026 Early Childhood Mental Hlth
1	CHAMPAIGN COUNTY TREASURER	Jun'26 MHB25-004	6/1/2026	062626A	4,528.00	MHB25-004 Homeless Services System
1	CHAMPAIGN COUNTY TREASURER	Jun'26 MHB26-025	6/1/2026	062626A	6,368.00	MHB26-025 Youth Assessment Center
19970	CDS OFFICE SYSTEMS	INV1779832	5/25/2026	060526A	3.04	053 MHB CDS Contract 14173-01
18254	CHAMPAIGN COUNTY CHRISTIAN HEALTH CENT	May'26 MHB26-029	5/1/2026	062626A	8,333.00	MHB26-029 Mental Heath Care
18254	CHAMPAIGN COUNTY CHRISTIAN HEALTH CENT	Jun'26 MHB26-029	6/1/2026	062626A	8,337.00	MHB26-029 Mental Heath Care
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	May'26 MHB26-044	5/1/2026	062626A	8,094.00	MHB26-044 CHW Outreach & Benefits
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	May'26 MHB25-066	5/1/2026	062626A	8,750.00	MHB25-066 Disability Application Svcs
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	May'26 MHB25-045	5/1/2026	062626A	8,607.00	MHB26-045 Justice Involved CHW
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	Jun'26 MHB26-044	6/1/2026	062626A	8,105.00	MHB26-044 CHW Outreach & Benefits
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	Jun'26 MHB25-066	6/1/2026	062626A	8,750.00	MHB25-066 Disability Application Svcs
18259	CHAMPAIGN COUNTY HEALTH CARE CONSUME	Jun'26 MHB26-045	6/1/2026	062626A	8,607.00	MHB26-045 Justice Involved CHW
10148	COMMUNITY SERVICE CENTER OF NORTHERN	May'26 MHB26-008	5/1/2026	062626A	5,888.00	MHB26-008 Resource Connection
10148	COMMUNITY SERVICE CENTER OF NORTHERN	Jun'26 MHB26-008	6/1/2026	062626A	5,899.00	MHB26-008 Resource Connection
18092	COURAGE CONNECTION	May'26 MHB25-007	5/1/2026	062626A	10,669.00	MHB25-007 Courage Connection
18092	COURAGE CONNECTION	Jun'26 MHB25-007	6/1/2026	062626A	10,679.00	MHB25-007 Courage Connection
10163	CRISIS NURSERY	May'26 MHB26-005	5/1/2026	062626A	7,500.00	MHB26-005 Beyond Blue Champaign
10163	CRISIS NURSERY	Jun'26 MHB26-005	6/1/2026	062626A	7,500.00	MHB26-005 Beyond Blue Champaign
18305	CUNNINGHAM CHILDRENS HOME	May'26 MHB25-018	5/1/2026	062626A	16,975.00	MHB25-018 ECHO Housing & Employment
18305	CUNNINGHAM CHILDRENS HOME	May'26 MHB25-036	5/1/2026	062626A	23,511.00	MHB25-036 Families Stronger Together
18305	CUNNINGHAM CHILDRENS HOME	Jun'26 MHB25-018	6/1/2026	062626A	16,985.00	MHB25-018 ECHO Housing & Employment
18305	CUNNINGHAM CHILDRENS HOME	Jun'26 MHB25-036	6/1/2026	062626A	23,518.00	MHB25-036 Families Stronger Together
10170	DEVELOPMENTAL SERVICES CENTER OF	May'26 MHB26-012	5/1/2026	062626A	58,500.00	MHB26-012 Family Development
10170	DEVELOPMENTAL SERVICES CENTER OF	Jun'26 MHB26-012	6/1/2026	062626A	58,500.00	MHB26-012 Family Development
10175	DON MOYER BOYS & GIRLS CLUB	May'26 MHB25-015	5/1/2026	062626A	7,131.00	MHB25-015 CU Change
10175	DON MOYER BOYS & GIRLS CLUB	Jun'26 MHB25-015	6/1/2026	062626A	7,134.00	MHB25-015 CU Change
10185	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR	May'26 MHB26-001	5/1/2026	062626A	6,286.00	MHB26-001 Family Support & Strengthening
10185	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR	Jun'26 MHB26-001	6/1/2026	062626A	6,295.00	MHB26-001 Family Support & Strengthening

10183	ALEXANDER F CAMPBELL	811-2626	6/1/2026	061226A	2,524.95	Q3 MHB26-038 CCMHB/CCDDB System Suppo
10183	ALEXANDER F CAMPBELL	810-2625	6/1/2026	061226A	1,800.00	Performance Outcome Report
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	May'26 MHB26-014	5/1/2026	062626A	11,985.00	MHB26-014 Counseling
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	May'26 MHB26-016	5/1/2026	062626A	3,182.00	MHB26-016 Self-Help Center
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	May'26 MHB26-017	5/1/2026	062626A	17,863.00	MHB26-017 Senior Counseling & Advocacy
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	Jun'26 MHB26-014	6/1/2026	062626A	11,987.00	MHB26-014 Counseling
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	Jun'26 MHB26-016	6/1/2026	062626A	3,189.00	MHB26-016 Self-Help Center
18343	FAMILY SERVICE OF CHAMPAIGN COUNTY	Jun'26 MHB26-017	6/1/2026	062626A	17,867.00	MHB26-017 Senior Counseling & Advocacy
10214	FIRST FOLLOWERS	May'26 MHB25-034	5/1/2026	062626A	5,791.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	May'26 MHB25-003	5/1/2026	062626A	7,916.00	MHB25-003 Peer Mentoring for Reentry
10214	FIRST FOLLOWERS	Jun'26 MHB25-034	6/1/2026	062626A	5,799.00	MHB25-034 FirstSteps Community
10214	FIRST FOLLOWERS	Jun'26 MHB25-003	6/1/2026	062626A	7,924.00	MHB25-003 Peer Mentoring for Reentry
20173	GREATER COMMUNITY AIDS PROJECT OF EAST	May'26 MHB25-022	5/1/2026	062626A	5,130.00	MHB25-022 Advocacy, Care, and
20173	GREATER COMMUNITY AIDS PROJECT OF EAST	Jun'26 MHB25-022	6/1/2026	062626A	5,136.00	MHB25-022 Advocacy, Care, and
10242	GROW IN ILLINOIS	May'26 MHB25-011	5/1/2026	062626A	13,140.00	MHB25-011 Peer Support
10242	GROW IN ILLINOIS	Jun'26 MHB25-011	6/1/2026	062626A	13,150.00	MHB25-011 Peer Support
19785	IMMIGRANT SERVICES OF CHAMPAIGN-URBAN	May'26 MHB26-010	5/1/2026	062626A	16,688.00	MHB26-010 Immigrant Mental Health
19785	IMMIGRANT SERVICES OF CHAMPAIGN-URBAN	Jun'26 MHB26-010	6/1/2026	062626A	16,688.00	MHB26-010 Immigrant Mental Health
20570	JP MORGAN CHASE BANK	6233 5/29/26	5/29/2026	060526A	2,828.03	Acct # 4485 9279 0007 6233 5/29/26
10348	MCS OFFICE TECHNOLOGIES INC	01-714306	6/1/2026	061226A	162.00	Jun'26 MHB/DDB Managed IT Service
18413	PROMISE HEALTHCARE	May'26 MHB26-013	5/1/2026	062626A	30,000.00	MHB26-013 Mental Health Services
18413	PROMISE HEALTHCARE	May'26 MHB26-041	5/1/2026	062626A	10,416.00	MHB26-041 Wellness
18413	PROMISE HEALTHCARE	Jun'26 MHB26-013	6/1/2026	062626A	30,000.00	MHB26-013 Mental Health Services
18413	PROMISE HEALTHCARE	Jun'26 MHB26-041	6/1/2026	062626A	10,424.00	MHB26-041 Wellness
10453	QUILL CORPORATION	49095715	5/30/2026	060526A	69.99	Rewards annual membership
10453	QUILL CORPORATION	49142282	6/3/2026	061226A	13.10	Acct # 8197518
10453	QUILL CORPORATION	49133874	6/3/2026	061226A	91.48	Acct # 8197518
10464	RAPE, ADVOCACY, COUNSELING & EDUCATION	May'26 MHB26-035	5/1/2026	062626A	16,350.00	MHB26-035 Sexual Trauma Therapy
10464	RAPE, ADVOCACY, COUNSELING & EDUCATION	May'26 MHB26-002	5/1/2026	062626A	9,009.00	MHB26-002 Sexual Violence Prevention
10464	RAPE, ADVOCACY, COUNSELING & EDUCATION	Jun'26 MHB26-035	6/1/2026	062626A	16,355.00	MHB26-035 Sexual Trauma Therapy
10464	RAPE, ADVOCACY, COUNSELING & EDUCATION	Jun'26 MHB26-002	6/1/2026	062626A	9,016.00	MHB26-002 Sexual Violence Prevention
10488	ROSECRANCE, INC.	May'26 MHB25-019	5/1/2026	062626A	7,052.00	MHB25-019 Benefits Case Management
10488	ROSECRANCE, INC.	May'26 MHB25-030	5/1/2026	062626A	20,000.00	MHB25-030 Crisis Co-Response Team
10488	ROSECRANCE, INC.	May'26 MHB25-023	5/1/2026	062626A	8,333.00	MHB25-023 Recovery Home
10488	ROSECRANCE, INC.	Jun'26 MHB25-019	6/1/2026	062626A	7,053.00	MHB25-019 Benefits Case Management
10488	ROSECRANCE, INC.	Jun'26 MHB25-030	6/1/2026	062626A	20,000.00	MHB25-030 Crisis Co-Response Team
10488	ROSECRANCE, INC.	Jun'26 MHB25-023	6/1/2026	062626A	8,337.00	MHB25-023 Recovery Home
10563	TROPHYTIME, INC.	141154	5/21/2026	060526A	291.50	Disability Expo Coordinator Recognition Plaque
10595	UNITING PRIDE	May'26 MHB25-009	5/1/2026	062626A	15,838.00	MHB25-009 Children, Youth, & Families
10595	UNITING PRIDE	Jun'26 MHB25-009	6/1/2026	062626A	15,838.00	MHB25-009 Children, Youth, & Families
10583	UNIVERSITY OF ILLINOIS	Jun'26 Award 112237	6/1/2026	062626A	11,488.33	MHB23-039 Building Agency Eval
10597	URBANA ADULT EDUCATION	May'26 MHB25-042	5/1/2026	062626A	6,726.00	MHB25-042 C-U Early
10597	URBANA ADULT EDUCATION	Jun'26 MHB25-042	6/1/2026	062626A	6,737.00	MHB25-042 C-U Early
10599	URBANA NEIGHBORHOOD CONNECTION CENTE	May'26 MHB26-024	5/1/2026	062626A	31,848.00	MHB26-024 Community Study Center
10599	URBANA NEIGHBORHOOD CONNECTION CENTE	Jun'26 MHB26-024	6/1/2026	062626A	31,852.00	MHB26-024 Community Study Center
10683	WOMEN IN NEED RECOVERY	May'26 MHB26-069	5/1/2026	062626A	15,250.00	MHB26-069 Community Support Reentry
10683	WOMEN IN NEED RECOVERY	Jun'26 MHB26-069	6/1/2026	062626A	15,250.00	MHB26-069 Community Support Reentry

Family Resiliency Center

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Empowerment and Participatory Approaches to Building Agency Evaluation Capacity Project

Year Three Annual Report: Equipping Programs Through In-Person and On-Demand Supports

Champaign County Mental Health and Developmental Disabilities Board Meetings

June 22, 2026 & July 29, 2026

Gratitude and Appreciation

Family Resiliency Center

- Agency staff & leaders
- Working group members
- Board members & staff
- Programs participating in technical assistance
- Funding (PI Dariotis)
    - Champaign County Mental Health and Developmental Disabilities Boards

Overview

Family Resiliency Center

- Context: Revisiting project goals and strategy
- Revisit year 1 needs assessment take-aways
- Summary of year 3 activities
- Next Steps

Family Resiliency Center

Context: Project Goals and Approaches

Capacity Building and Partnering

Project Goals

Family Resiliency Center

- **Overarching goal**: Build the evaluation capacity of CCMHDDB and board-funded agencies using participatory and empowerment approaches.
- **Year 1 goal**: Determine agency and board needs, strengths, and expectations for evaluation team's future activities and begin moving to action.
- **Year 2 goal:** Use year-one needs assessment findings and ongoing feedback to engage in relevant capacity-building activities.
- **Year 3 goal**: Continue successful and relevant initiatives & implement new activities to meet evolving needs in real-time.

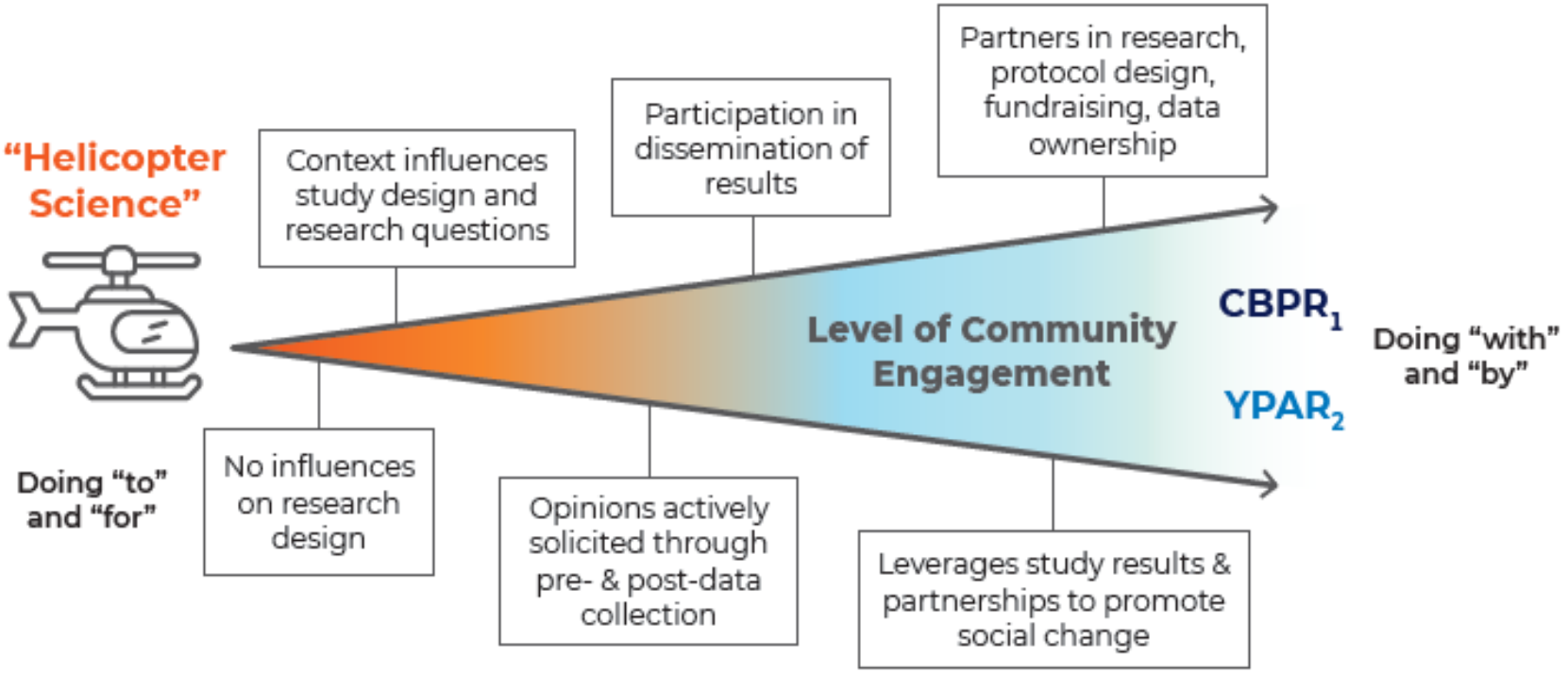
Approaches

Family Resiliency Center

- Participatory = centering staff voices & multiple perspectives
  - ***A more holistic understanding:*** current capacity, what has worked, and what needs remain.

- Empowerment = capacity building
  - Boards and agencies ***implement*** and ***sustain*** practices, becoming continuous learning organizations.

Participatory Approach



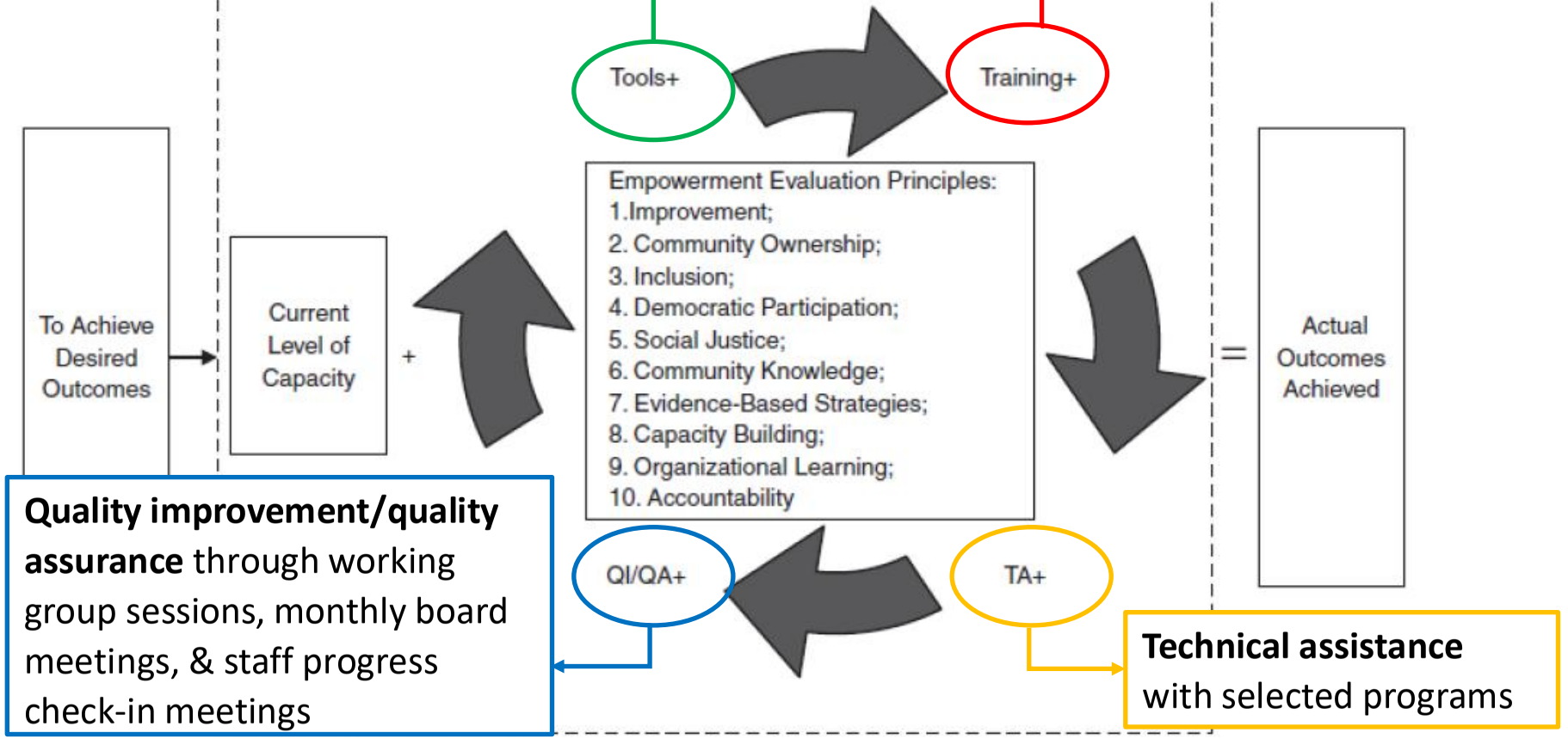
Graphic adapted from the following source: Balazs & Morello-Frosch, 2013

1 Community-Based Participatory Research
2 Youth Participatory Action Research

Family Resiliency Center

Tools like microlearning videos & updated measures repository

Training workshop on outcomes & measures



Quality improvement/quality assurance through working group sessions, monthly board meetings, & staff progress check-in meetings

Technical assistance with selected programs

Note: Figure adopted from Fetterman, D., & Wandersman, A. (2007). Empowerment evaluation: Yesterday, today, and tomorrow. *American Journal of Evaluation, 28*(2), 179-198.

Year 1 Needs Assessment

- Identified agency and board strengths and areas for growth related to program evaluation.

76

The number of perspectives we included from agency staff, agency leaders, and evaluators.

Takeaways

Family Resiliency Center

- **Agencies & boards want:**
  - To be heard – Participatory approaches for needs and action plans
  - Resources – Provide knowledge, improve efficiencies, story-telling proficiency
  - To work together – Communities of practice and open communication

Summary of Year 2 & Year 3 Activities

Family Resiliency Center

Technical assistance: Tailored support for specific program evaluation needs identified by selected programs

Working group: Cross-agency mentoring and rapid feedback on evaluation topics/training directions

Trainings and resources: Capacity-building materials developed based on agency-driven needs

Open communication & informal support: Consistent communication about progress and planned activities and availability for questions

Technical Assistance

Family Resiliency Center

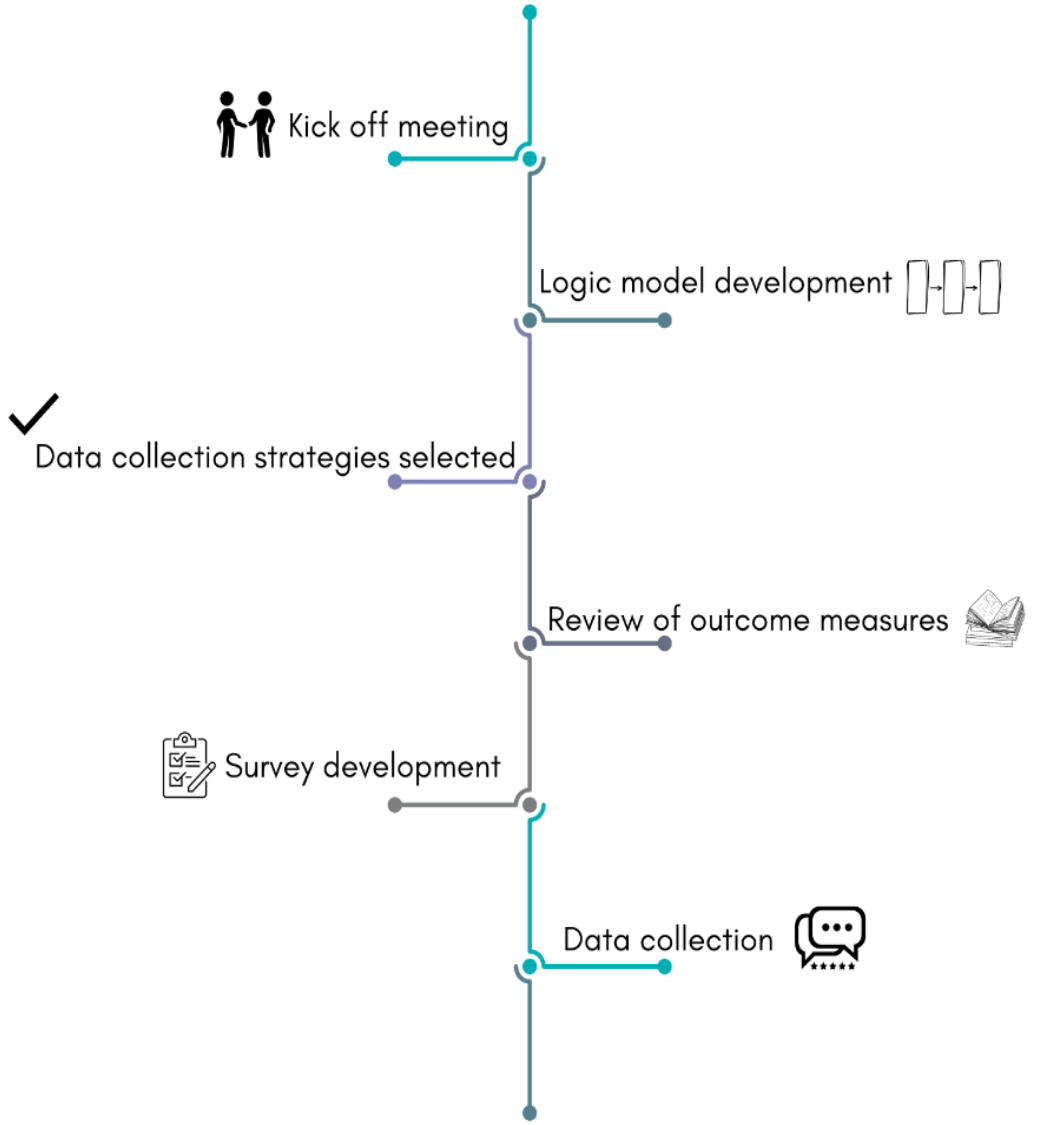
- **Reach & skills:**
  - 3 programs identified evaluation support needs
  - Less experienced in evaluation
  - Improved understanding of logic models, survey development, and survey administration
  - Reached over 5,700 clients

- **Effect**:
  - All evaluation survey respondents (n=3) reported
    - Future skills use would improve services and program quality assessment
    - Would recommend evaluation TA to others

Technical Assistance

"I am very appreciative of RJG and the FRC in general for helping us improve our services. I have nothing but positive things to say, and I will happily recommend you to others. THANK YOU" - Agency Staff member

Figure 2. Year 3 Technical Assistance Process



Cross-Agency Working Group

Family Resiliency Center

- **Reach & skills**:
  - 4 agencies; 3 core members met regularly
  - Feedback on trainings, troubleshooting, and evaluation learning

- **Effect**:
  - Rapid feedback on evaluation products and trainings
  - Shared knowledge
  - Community building
  - Improved confidence and value of evaluation
  - Survey design skills

Working Group

Family Resiliency Center

"I have learned a lot from the working group. I wish I would have had it when I first started! I have worked on some different surveys, and I have learned a lot about how to make them. I'm not a data person; I'm a people person. But I have learned a lot from the data I've collected. They have helped me look at a program and understand what to change or fix. That makes a big difference. You guys have made it easier for me to understand my job." – Working Group Member

Working Group Informed Trainings and Resources

Family Resiliency Center

"The content and resources that have come out of the group work would be very beneficial to the agencies who are willing to use it." – Working Group Member

Trainings & Resources

Family Resiliency Center

Reach & skills:

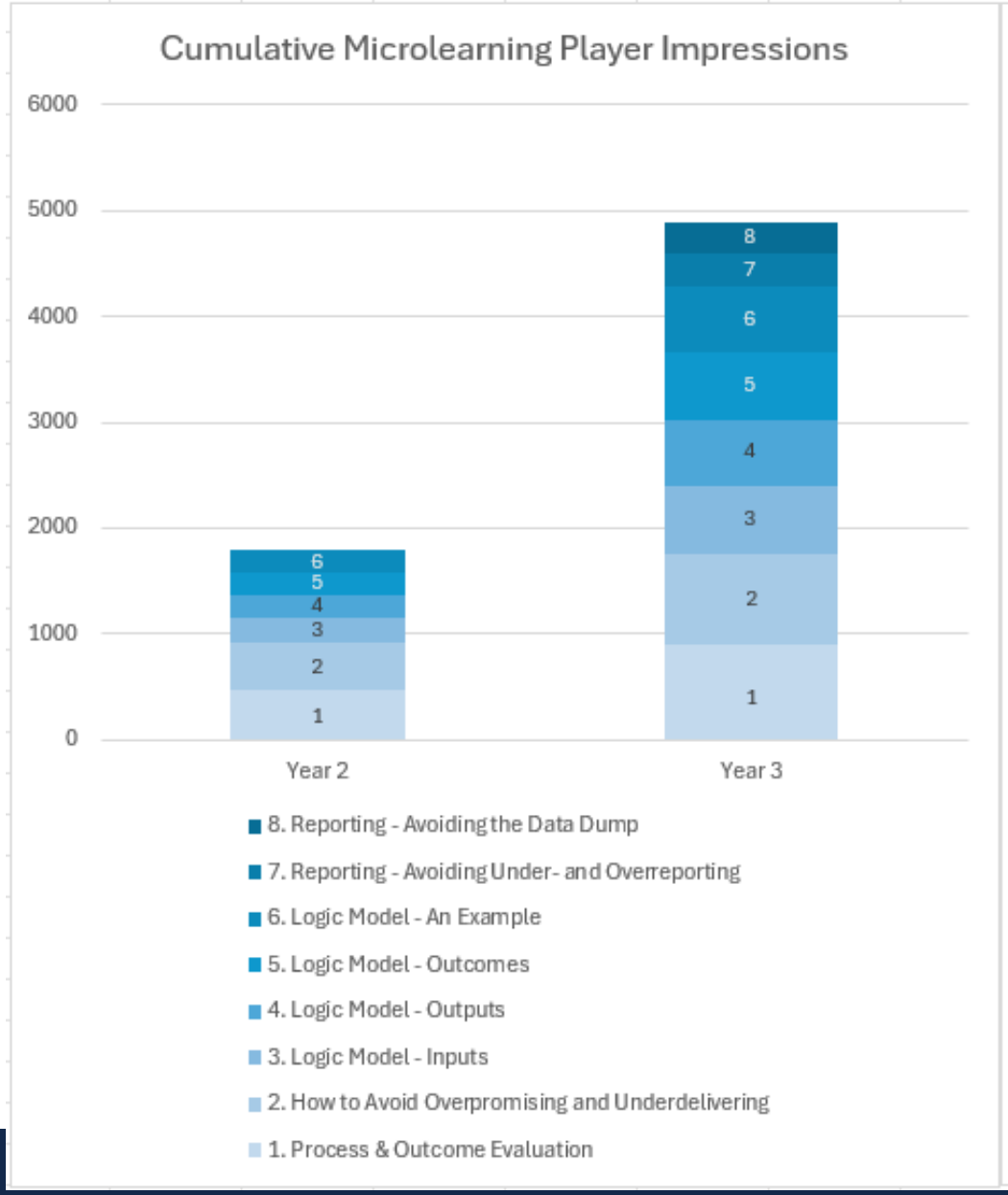
- Storytelling workshop: >12 agencies
- Publicly available microlearnings: 3 new:
  - Avoiding the data dump,
  - Avoiding under and overreporting,
  - How to program a survey using a low-cost platform
- 8 microlearnings to-date: nearly 5,000 player impressions; 300+ plays
- Reference guides: data types; survey programming step-by-step

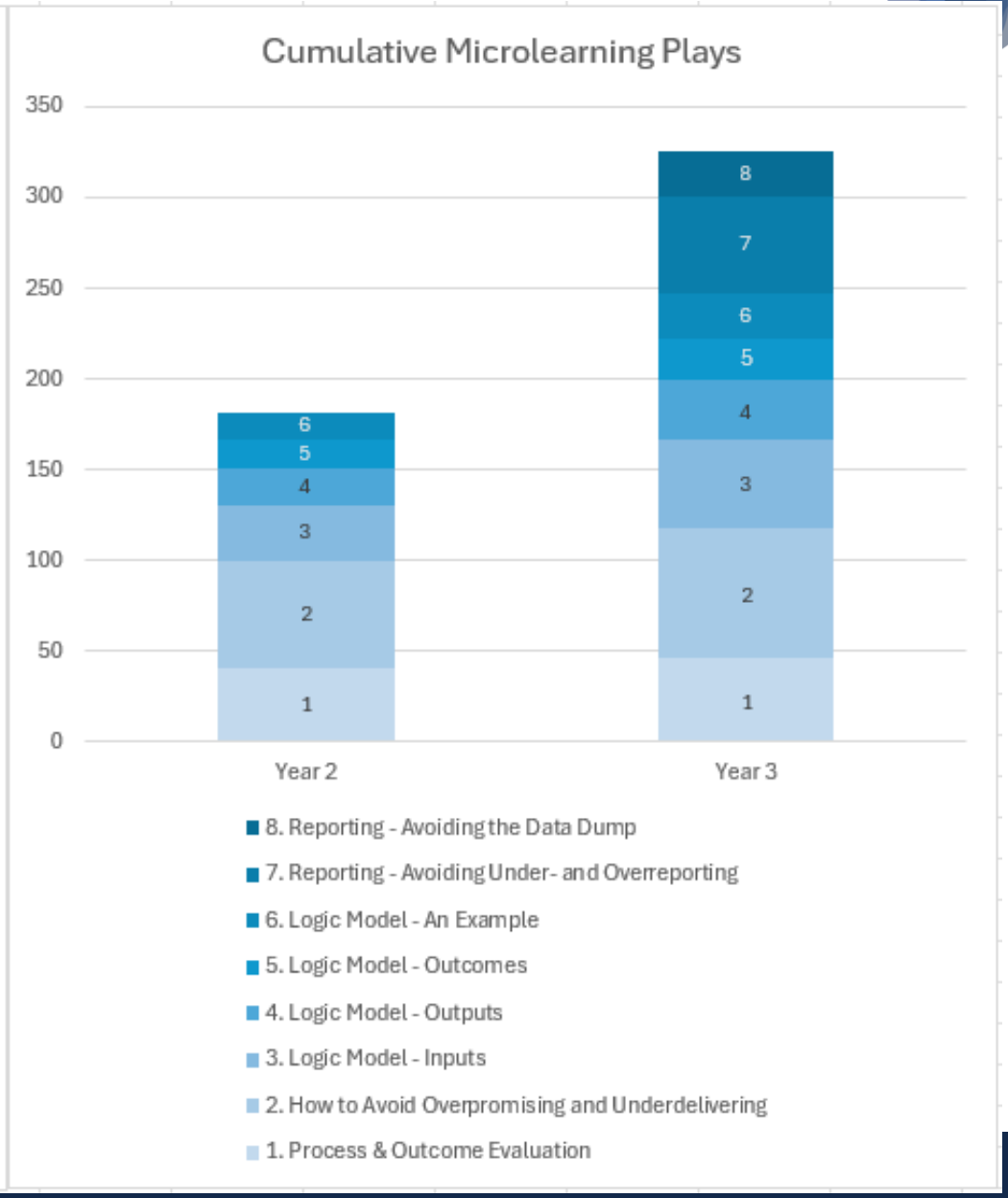
Effect:

- Resources are broadly shared across funded agencies and to other agencies by other funders.

Trainings and Resources

Family Resiliency Center





Microlearnings

Family Resiliency Center

"I just love what you're doing. I taught research methodology for years at the university, and I would have very much benefited from some of these short micro-lessons. People get so distracted by how and what to report, and you have really distilled it into a humorous as well as very cogent summary.."

– Susan Fowler, DD Board Member

Open Communication & Informal Support

Family Resiliency Center

Reach & skills:

- Monthly updates at MH & DD board meetings
- Monthly progress meetings with board staff
- Offered office hours

Effect:

- Increased cross-communication
- Annual report offers public accountability and understanding of evaluation team activities

Next Steps

Family Resiliency Center

Ideas for Year 4 activities include:

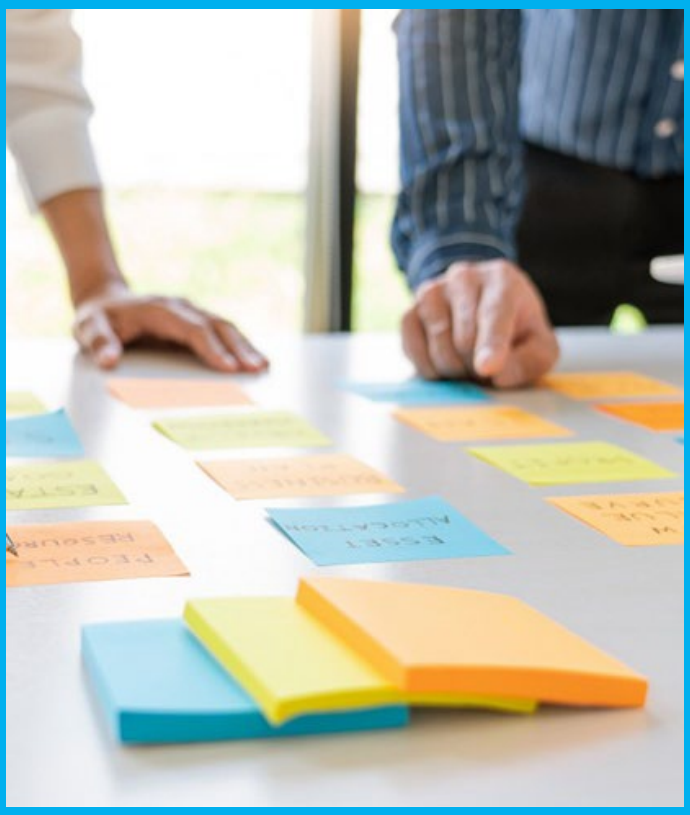
- Identifying funded programs needing in-depth TA
- Developing new trainings
- Evolving the working group into a community of practice
- Assess “office hours” for specific and quick needs

Thank You!

familyresiliency.Illinois.edu

dariotis@illinois.edu

Empowerment and Participatory Approaches to Building Agency Evaluation Capacity Project



Year 3 Annual Report: Equipping Programs Through In-Person and On-Demand Supports

April 30, 2026
Family Resiliency Center
University of Illinois Urbana-Champaign

Year 3 Annual Report prepared for the Champaign County Mental Health and Developmental Disability Boards by the Family Resiliency Center; Department of Human Development and Family Studies; College of Agricultural, Consumer, and Environmental Sciences; University of Illinois Urbana-Champaign

Table of Contents

List of Tables and Figures

Executive Summary

In Year 3 of the *Empowerment and Participatory Approaches to Building Agency Evaluation Capacity Project*, the evaluation team responded to needs identified in Year 1, continued successful and relevant initiatives from Year 2, and implemented new activities to meet evolving needs that emerged in real-time during the year. The evaluation team provided impactful technical assistance; hosted a collaborative working group; developed engaging workshops and trainings (storytelling and evaluation plan fundamentals); created video microlearnings and accompanying one-page resources; and facilitated open communication and an informal support network (Table 1).

Table 1. Summary of Year 3 Evaluation Activities, Descriptions, and Results

Activity	Description	Results: Reach, Skills, & Effect
 **Technical Assistance**	Tailored support for specific program evaluation needs identified by selected programs	• **Reach & skills**: 3 programs with identified evaluation support needs improved their understanding of survey development, logic models, and survey administration. • **Effect**: Evaluation survey respondents (n=3) reported future skills use would improve services and program quality assessment, and they would recommend evaluation TA to others. Given these 3 programs collectively reached over 5,700 treatment and non-treatment clients in program year 2025 (per utilization report results), the evaluation capacity building project has significant potential impact.
 **Working Group**	Cross-agency mentoring and rapid feedback on evaluation topics/training directions	• **Reach & skills**: 4 agency partners joined a cross-agency working group with core members meeting regularly (2x/ mo.) to offer collaborative feedback, troubleshoot, and learn about evaluation concepts (e.g., how to program surveys using low-cost online tools, the difference between quantitative, qualitative, and mixed methods evaluation). Participation reinforced the importance of evaluation. • **Effect**: Members provided rapid feedback on evaluation products and trainings.
 **Trainings & Resources**	Capacity-building materials developed based on agency-driven needs	• **Reach & skills**: 12 agencies (14 attendees) participated in a storytelling workshop. Related microlearnings (e.g., Avoiding the Data Dump and Avoiding Under- and Overreporting) were created as workshop precursors and on-demand trainings. A third video microlearning (Getting Started with Inexpensive Survey Tools) was also launched late April 2026. In total 9 video microlearnings exist and have garnered nearly 5,000 player impressions. • **Effect**: Resources are broadly shared across funded agencies and to other agencies by other funders.

Activity	Description	Results: Reach, Skills, & Effect
 **Open Communication & Informal Support**	Consistent communication about progress and planned activities and availability for questions	• **Reach & skills**: Monthly updates at Mental Health and Developmental Disabilities Board meetings and monthly progress meetings with board staff informed responses to specific agency concerns and questions in real-time. Additional presence at monthly Champaign County Mental Health and Developmental Disabilities Agency Council meetings promoted engagement with agencies and awareness of services and activities offered throughout the county. Participation in Disability Expo planning meetings for future annual offerings provides an independent lens and suggestions. • **Office hours offered**: In Year 3 the evaluation team offered office hours for any funded program or agency to ask specific questions about evaluation topics to meet their needs. This resource is designed to meet agencies and programs where they are at and on their schedule. • **Effect:** Open communication led to increasing sentiment that agencies and boards are moving in the same direction, while the annual report offers public accountability and clear understanding of evaluation team activities.

Introduction – Why This Work Matters

Programs funded by the Champaign County Mental Health and Developmental Disabilities Boards (CCMHDDB) aim to improve mental health, job placements and community integration, ability to advocate for oneself, and many other outcomes that help individuals and families thrive, and ultimately, enrich our community. The ability to conduct high-quality program evaluations and interpret, use, and communicate evaluation findings are crucial for improving or sustaining the work of these programs. Program evaluation helps determine what components of a program are working, for whom, and in what contexts.

The Family Resiliency Center's (FRC) Evaluation Capacity Building Team ("evaluation team" hereafter) is working with the CCMHDDB and local agencies (c.f. Appendix A) to address evaluation capacity needs for answering these questions. This report describes work completed by the evaluation team in Year 3 of the capacity-building project as well as next steps. The evaluation team's work expands upon needs identified in Year 1 (link at right), offers successful and relevant Year 2 and 3 activities, and incorporates feedback throughout the process.

Resources Quick Links:

Year 1 and 2 Reports:

https://go.illinois.edu/Evaluation-Capacity-Building-Y1

https://go.illinois.edu/Evaluation-Capacity-Building-Y2

Microlearning Trainings and Supplementary Resources:

https://www.familyresiliency.illinois.edu/resources/microlearning-videos

Evaluation Office Hours:

https://go.illinois.edu/eval-office-hours

In short, Year 1 activities included a needs assessment conducted with agencies, boards, and evaluators (n = 76) showing that (a) agency and board member familiarity with evaluation varies; (b) trainings need to meet agencies where they are; (c) evaluation efficiencies are needed to "give back time"; (d) agencies desire to learn how to use evaluation for storytelling; and (e) alignment across agencies, boards, and the evaluation team is needed.

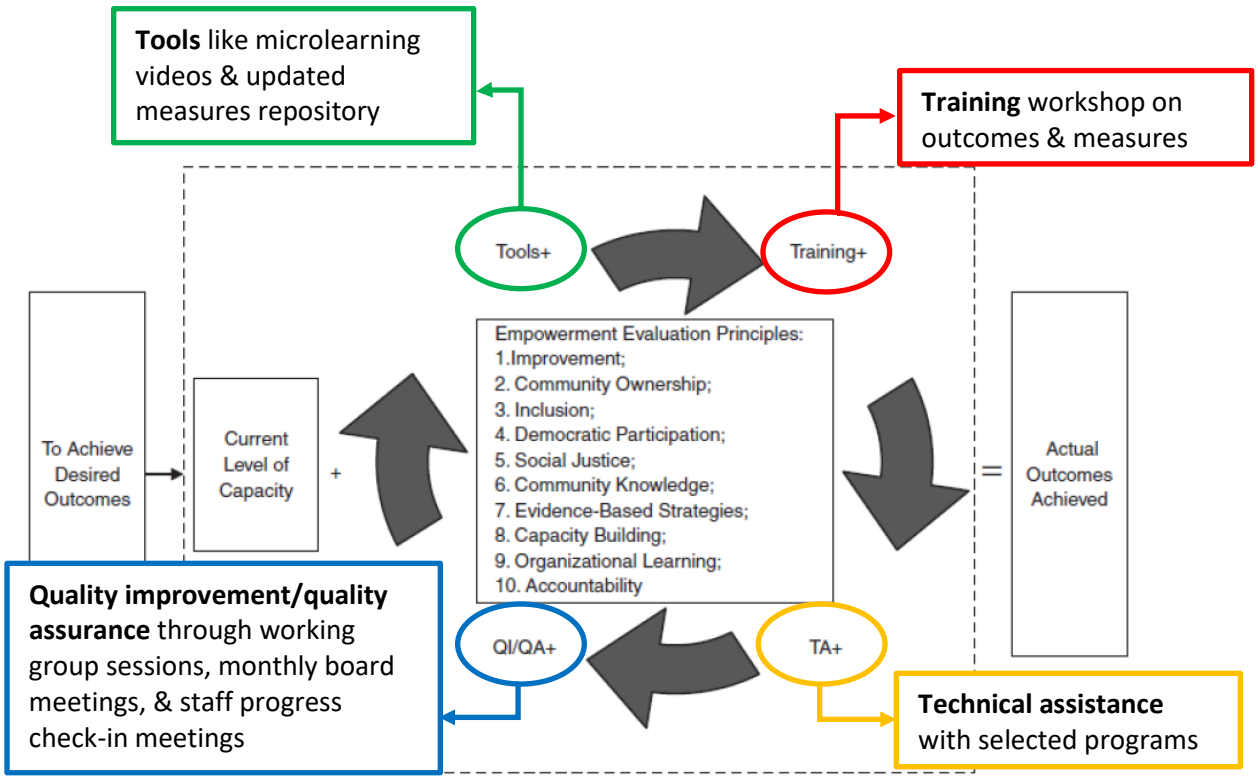
In response to Year 1 findings and as a continuation of successful Year 2 initiatives, in Year 3 the evaluation team (c.f. Appendix B):

- Provided evaluation **technical assistance** to three programs (one developmental disability [DD], two mental health [MH]);
- Facilitated a **working group** of agency representatives to increase the relevance of evaluation capacity-building activities;
- Conducted a **training** related to storytelling in outcomes reporting;
- Developed three video microlearnings and supplemental one-page **resources** freely accessible on the FRC website; and
- Fostered **open communication** through regular availability to agencies and monthly updates on project progress at board meetings and meetings with staff.

Further, the evaluation team engaged in community- and service-based activities to gain additional insights into agencies and programs. This enabled the evaluation team to gain first-hand insights into the great work being conducted. Examples include attending the Disability Expo, agency open-houses (e.g., Crisis Nursery), and art events at the Crow and Boneyard Festival.

As depicted in Figure 1, these evaluation capacity building activities spanned all four components of the empowerment model: tools, training, technical assistance (TA), and quality improvement/quality assurance (Fetterman & Wandersman, 2007). Tools include three microlearning educational videos and related supplemental one-page resources as well as a measures repository where agencies can find possible survey measures. We delivered an in-person training to agencies on how to use storytelling to create compelling narratives about program outcomes and impacts. At the program level, we provided tailored TA to three programs. Finally, in support of the quality improvement/quality assurance component, we facilitated a cross-agency working group and communicated progress updates at monthly board and board staff meetings.

Figure 1. Alignment of Evaluation Capacity Building Activities with the Empowerment Evaluation Model



Note: Figure adopted from Fetterman, D., & Wandersman, A. (2007). Empowerment evaluation: Yesterday, today, and tomorrow. *American Journal of Evaluation, 28*(2), 179-198.

Both boards have positively recognized the value of the evaluation approach and activities. At the October 2025 Champaign County Developmental Disabilities Board (CCDDB) meeting, board member Susan Fowler lauded the evaluation capacity-building project:

> *I just love what you're doing. I taught research methodology for years at the university, and I would have very much benefited from some of these short micro-lessons. People get so distracted by how and what to report, and you have really distilled it into a humorous as well as very cogent summary*.

Supplementing that sentiment was the chairperson of the Champaign County Mental Health Board (CCMHB), Molly McLay, who noted during the January 2026 meeting how much work the evaluation team has performed, even during times of expected lulls, as well as the impact of inclusive resources that can reach people through different learning modalities:

> *That [monthly report] was actually a lot… I was thinking there wouldn't be much update, because it's January. But a lot of cool things [are] happening. I think that how to make your own survey using low-cost tools is really, really important and will be valuable as well as having the handout and video, just different methods of learning for everybody.*

Core Activities in Year 3

Technical Assistance

Goal

Technical assistance (TA) consisted of meeting with agency program staff and working together to identify pathways to improve program evaluation strategies. Capacity building was one goal, and the evaluation team worked with program representatives to improve evaluation practices. The ultimate goal of capacity building is the development of sustainable, high-quality, in-house evaluation practices. Programs for TA are identified by the Champaign County Mental Health and Developmental Disabilities Boards.

Alignment with Year 1 Needs Assessment

This year's TA addressed multiple needs that were identified in the Year 1 needs assessment: building evaluation capacity broadly through tailored support, developing infrastructure through the co-creation of surveys that improve data collection to evaluate programs, and aligning evaluation practices with agency priorities. By co-designing surveys, the TA responds to Year 1 finding that agencies need more time to engage in quality evaluation work.

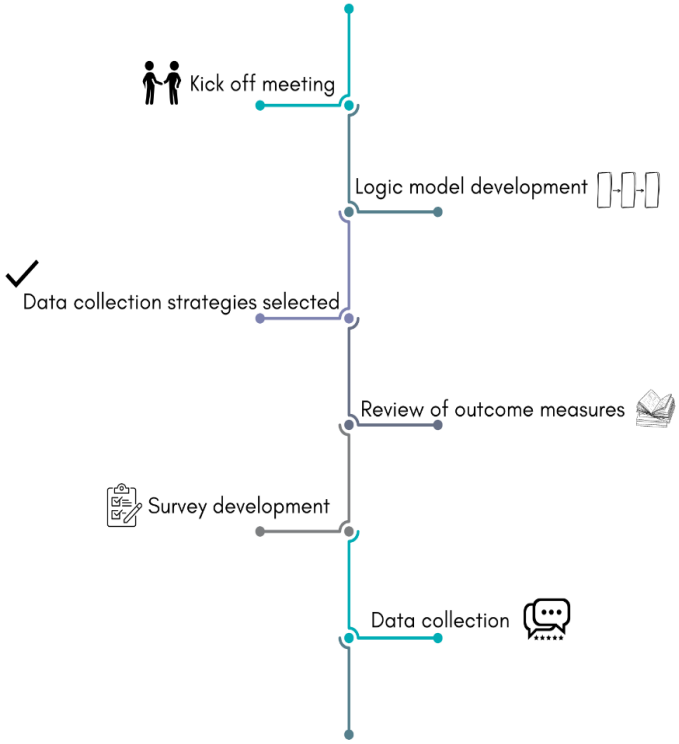
Participating programs demonstrated differing levels of evaluation readiness and existing data practices. Some programs had not yet collected participant-level data for the specific programs. Accordingly, TA this year prioritized foundational capacity building, with a focus on using logic models, considering appropriate outcome measures, and developing effective surveys.

Year 3 Actions

Figure 2 visually displays a typical timeline for the TA process in Year 3. From June 2025 to April 2026, the evaluation team provided evaluation TA to three agency programs: Champaign County Christian Health Center (CCCHC); PACE, Inc. Center for Independent Living; and Promise Healthcare. As of April 30, 2026, TA included formal in-person and virtual meetings as well as numerous informal touchpoints and product sharing (e.g., sharing survey files).

TA topic areas included evaluation conceptualization and logic modeling; survey development; recommendations for data collection training and recruitment; and other related activities.

Figure 2. Year 3 Technical Assistance Process



Technical Assistance Evaluation Results

To evaluate the utility of our TA work, we developed a short survey (7 questions) about outcomes and processes administered to those who participated in the technical assistance process. Survey topics encompassed skills development, long-term usefulness and application of TA, evaluation team responsiveness, and suggestions for improvements. Three participants representing two programs completed the TA post-survey.

Respondents expressed **positive TA experiences**. They used "strongly agree" ratings for the following experiences: the evaluation team was responsive, communicated in a timely manner, demonstrated flexibility in scheduling, and brought strong expertise in program evaluation. They also indicated that the team showed genuine care for their programs and fully met expectations. In the words of one respondent:

> *I am very appreciative of RJG and the FRC in general for helping us improve our services. I have nothing but positive things to say, and I will happily recommend you to others. THANK YOU."*

With respect to **skills development**, TA participants reported a high likelihood of applying the skills and products developed through TA in the future. Specifically, they reported that survey development was the most useful form of assistance and would help enhance future services. As one respondent explained, it involved "drilling down and developing a survey that met our needs." TA participants reported improvements in skills related to developing logic models, identifying program outcomes, survey design, and collecting and analyzing quantitative data

(range: “somewhat agree” to “strongly agree”).

Areas for **future skills development and use** include interpreting and reporting results, as well as qualitative data collection. Overall, TA recipients reported that the skills they gained would be useful when reporting results to funders and for improving services and assessing program quality via ongoing program monitoring. Given the three programs receiving TA collectively reached over 5,700 treatment and non-treatment clients in program year 2025 per utilization report results (260422_Full_Board_Packet.pdf), the evaluation capacity building project has significant potential impact.

One participant described how agency staff often do not perceive evaluation TA as valuable amid competing demands and busy schedules. They acknowledged that the program or agency needs to find ways to increase team member participation. They suggested that agencies could emphasize how TA promotes service quality improvement to increase buy-in for TA among program staff.

This individualized TA represents an important element of participatory and empowerment approaches: showing up for partners and the evaluation team, listening to feedback, and providing knowledge and tools to proceed independently.

Working Group

Goal

The overarching goal of the working group is to facilitate a group of agency representatives that can provide input on evaluation team trainings, tools, and resources and develop evaluation capacity infrastructure that can extend beyond the evaluation team partnership. Ultimately, the intent is to have a cross-agency mentoring program to facilitate knowledge, skills transfer, and sustainability.

Alignment with Year 1 Needs Assessment

The working group provides voice and support as the evaluation team addresses multiple findings from the needs assessment: (a) meeting agencies where they are with trainings and (b) collaboration and shared goal setting. The working group members have varying levels of evaluation experience and bring diverse substantive backgrounds to inform our work and goals.

Year 3 Actions

A working group was developed in Spring 2024 (Year 2). In Year 3, the group typically met 2 times per month and consisted of four interested agency partners: three who consistently attended meetings and one who joined part way through the year, attending several sessions. As of April 2026, the working group includes one developmental disabilities- and three mental health-funded agency representatives, each from different agencies. Working group members provided

feedback on all trainings and related materials developed by the evaluation team in Year 3 before launching those resources. One member, Brenda Eakens of GROW in Illinois, noted:

> *I have learned a lot from the working group. I wish I would have had it when I first started! I have worked on some different surveys, and I have learned a lot about how to make them. I'm not a data person; I'm a people person. But I have learned a lot from the data I've collected. They have helped me look at a program and understand what to change or fix. That makes a big difference. You guys have made it easier for me to understand my job.*

During Year 3, working group members also began to share their own work and form networks related to evaluation and service delivery. The group is currently working to co-design the next workshop, planned for June 2026.

Working Group Evaluation Results

The working group consisted of four members, three of whom attended regularly, nearly every other week. All regular attendees completed a survey of five open-ended items: what worked well, what was most beneficial, future growth areas, future topics or formats, and anything else to share. When asked **what worked well**, respondents noted that reviewing and providing feedback on surveys, as well as having a diverse group of agencies, produced valuable resources that will benefit agencies.

Respondents also reported their participation in the working group **benefited their agency** and improved their confidence in program evaluation, their understanding of its value, and their facility with survey design. As described by one respondent:

> *I feel much more adept in my approaches to program evaluation with all of the departments I oversee and feel more confident in my reporting abilities.*

The working group helped to inform trainings and resources, and participants noted that these resources will serve as assets to other programs and agencies if they choose to use them. In the words of one working group member "The content and resources that have come out of the group work would be very beneficial to the agencies who are willing to use it." Another member noted "it [the working group] has helped me understand why evaluation is important."

Regarding **future areas for growth**, several respondents suggested that having more agencies or programs represented would benefit the working group and the content/resources created, while acknowledging the importance of smaller, more intimate groups. Future topics mentioned included having more agencies sharing what they are doing, allowing for cross-program comparisons and how to utilize information gained. This suggestion is in keeping with the intent of the working group evolving into a community of practice over time. The working group's hands-on and experiential format was well received by participants. One respondent expressed appreciation for the evaluation team's patience, perspective, knowledge, and overall helpfulness, noting, "I enjoy the feedback and knowledge base of the team. It is very helpful for me with seeing it rather than saying it."

Given sentiments about increasing the working group size and the benefits participation has had on members, we **recommend the boards and board staff** strongly encourage or include in future contracts for select programs and agencies to participate in the working group.

Trainings and Resources

Goal

Training and resource development was a substantial component of Year 3 activities. The goals of these activities were to provide user-friendly opportunities for agencies to develop in-house evaluation skillsets. Topics were informed by needs identified in Year 1 and ongoing feedback from the working group, board staff, and other board-funded agencies who offered feedback and questions.

Alignment with Year 1 Needs Assessment

Trainings and resources developed addressed the need for user-friendly evaluation training in addition to promoting familiarity with evaluation knowledge and building capacity. Each product was reviewed and revised iteratively with feedback from the working group and board staff to ensure relevance, utility, and acceptability.

Year 3 Actions

The evaluation team hosted one in-person workshop about storytelling related to program outcomes reporting. Pre-work for this event included viewing newly developed microlearning video trainings about two evaluation concepts: the importance of not overwhelming your reader with uncontextualized data and the significance of candid reporting (i.e. telling it like it is). A third microlearning on how to use Microsoft and Google forms for improved data collection and management was also created. These microlearnings are publicly available educational videos (see Resources Quick Links on page 3), and details about the training and microlearnings are provided in the following sections.

Workshop: Storytelling in Outcomes Reporting

On October 8, 2025, the evaluation team held an in-person workshop on Storytelling in Outcomes Reporting at the United Way of Champaign County. Participants included staff from over a dozen agencies funded by the boards.

The workshop was a response to findings first published in the Year 1 report. First, there was a desire to learn how to use evaluation methods to share programs' stories and improve reporting. Second, trainings should be user-friendly and meet everyone where they are. To the latter end, before the training, interested participants were asked about their current associations with "good storytelling." From those responses, the evaluation team drafted an agenda that included:

- A group-level assessment-style analysis of response data;
- A demonstration of developing exigence ("a problem marked by a sense of urgency that demands communicative action") for various audiences depending on audience knowledge and expectations; and
- An exercise showing how information can be ordered differently depending on communication goal.

Workshop participants entered with stated motivations "to improve [their] report + outcome writing," "to better communicate the value of our programs," "to share more relevant and interesting info with the DDB/MHB," and "to write reports that the CCDDB finds valuable" (among other similar comments). By this standard, the workshop offered effective tools for improved reporting. In a post-workshop survey, 11 participants gave high marks to the afternoon's activities in all categories. On a scale of 1-5, where "1" denoted "very effective," 2 denoted "effective," and 3, 4, and 5 denoted "neutral," "not very effective," and "not at all effective" respectively, participants on average gave the workshop a 1.22, including a 1.09 for the presentation of content that was relevant and relatable to agency work.

Finally, workshop participants valued the opportunity to step back from their busy schedules and reflect on the practices involved in reporting with other agency staff. When asked, "What did you learn today that you will take back to your agency?" one participant wrote:

> *It was helpful to hear how others conceptualize the prompts in outcome reports and tools/frameworks for how to think about those.*

Other participants offered related remarks about the very occasion of gathering. When asked, "What was the most valuable component of this workshop?" participants replied:

> *The communication with others doing this work and the puzzle activity.*
> *Discussions with presenters and other staff.*
> *Learning with others.*

Hosting this workshop in-person offered real value to participants. An in-person workshop not only provides new information and skills development but also generates opportunities for agencies and programs to meaningfully learn from each other, network, and collaborate on shared concerns.

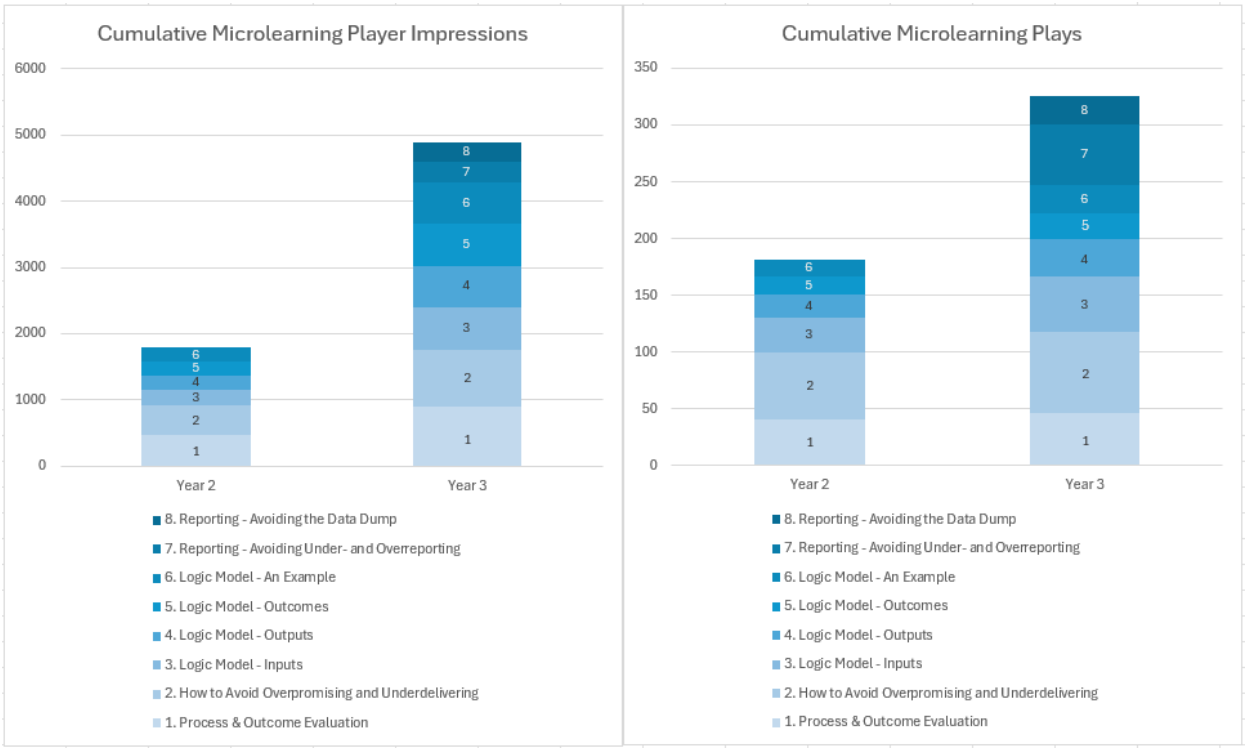
Microlearning Videos

Microlearnings are short trainings (approximately 5 minutes) that distill complex concepts into discrete, easy-to-digest individual units for improved learning.

To date, nine video microlearnings have been produced on behalf of the boards for agency staff. These have garnered hundreds of plays and thousands of video impressions (an impression is when a video is loaded in a viewer's web browser). These videos exhibit a good click-through rate of 5.8% (according to one online marketing training firm, the click-through rate across industries for videos that are displayed on a website—rather than found algorithmically or through search—

is under 1%). Whereas microlearnings in Year 2 centered around the topic of logic models, Year 3 microlearnings focused on outcomes reporting. Prior to the Storytelling in Outcomes Reporting workshop, participants were asked to view the two microlearnings pertaining to that topic. Results are shown in Figure 3.

Figure 3. The Growing Reach of Video Microlearnings



Outcomes Reporting – Avoiding the Data Dump

A data dump is a large volume of facts offered without context or analysis. This microlearning discusses the importance of avoiding a data dump in reporting. The video uses a mock on-air exchange between a television weather reporter out in the field and an in-studio producer to illustrate the take-home message: individuals who report on outcomes should select data relevant to their intended message while accounting for both audience and purpose.

Outcomes Reporting – Avoiding Under- and Overreporting

Figure 4. Still from video microlearning: A weather reporter out in the field

This video encourages individuals who write outcomes reports to "tell it like it is." Relaying null or unexpected outcomes might seem scary for reporters, but these outcomes actually represent an important opportunity for evaluation. Telling the full story of a program can provide important context and offer insights into programmatic changes, leading to continuous quality improvement. The video employs the same reporter-producer back-and-forth as the microlearning above to outline the different forms that avoiding under- and overreporting might take, including omissions of important information, inclusion of unnecessary information, promotion of overinflated results, and avoiding important context that might explain why outcomes differ from their projections.

Diving into Data – Using Microsoft and Google Forms

Data management can be tricky, especially when it comes to surveys. This microlearning helps viewers practice good data management hygiene by introducing user-friendly survey tools in Microsoft or Google. One of these tools is likely available to the viewer and their organization in some form, and they can help answer questions such as: are people satisfied with the quality of services, to what extent is a program achieving its target goals, and how do people describe their experiences with a program?

Complementary Resources

As a complement to the video microlearnings, the evaluation team developed evergreen reference guide resources to help agency staff evaluate their programs. The first is a decision tree about the kinds of data a user might manage—numbers, stories, or a combination of the two—and how to handle it—through quantitative, qualitative, or mixed-methods approaches. Additional resources accompany the microlearning on survey design, breaking down the processes of Microsoft and Google tools into discrete steps.

Open Communication and Informal Support and Engagement

Goal

Ensure agencies and boards have access to hearing updates from the evaluation team and maintain accessibility.

Alignment with Year 1 Needs Assessment

Communication efforts respond to the Year 1 report finding that a mindset of "we're all in this together" is important for the success of capacity building.

Year 3 Actions

The evaluation team worked to engage in ongoing communication with agencies and boards. In Year 3, the evaluation team

- Provided monthly updates at CCMHDDB meetings.
- Met monthly with board staff to provide updates, learn about emerging program and board needs, and gain feedback on evaluation activities like trainings and microlearning resources.
- Attended monthly meetings of the Champaign County Mental Health and Developmental Disabilities Agency Council.
- Met with additional agencies to respond to questions and feedback.
- Launched on-demand office hours to meet the emerging evaluation needs of programs and agencies. The team offered 30-minute virtual sessions to speak with a member of the evaluation team about quick evaluation questions. Agencies sign up for a time slot at https://go.illinois.edu/eval-office-hours.

Next Steps and Conclusion

In Year 3, the evaluation team provided impactful technical assistance, fostered a collaborative working group, developed engaging workshops and trainings, and facilitated open communication about progress. We increased accessibility of knowledge and resources, and agencies see the value of this work. In their own words, participants said they would recommend the evaluation TA experience to others.

In Year 4, the evaluation team will continue to build evaluation capacity to improve the quality of care and service in Champaign County. In collaboration with board staff, we will identify funded programs that need in-depth technical assistance, develop new trainings, continue convening and growing the working group, and assess whether office hours are needed for agencies or programs to meet with a member of the evaluation team to discuss specific, quick evaluation questions.

In consultation with the working group and in alignment with the Year 1 needs assessment, we identified a need for a training series (in various formats) spanning topics in data collection, basic data analysis, and data visualization that will be part of Year 4 planning and implementation.

The evaluation team's future directions are directly informed by feedback from agency and board representatives, and as such, we continue to welcome feedback and suggestions as we work together to build sustainable evaluation capacity across CCMHDDB-funded agencies and beyond. We are excited and hopeful that we can collectively promote the "health and well-being of residents who live with behavioral health issues or developmental disabilities."

Acknowledgements

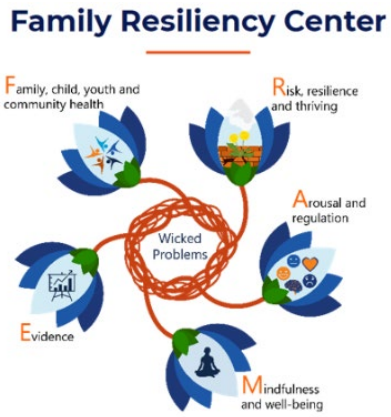
We recognize and express gratitude to those who have partnered with us and will continue to do so through this process.

- **Agency staff and leaders** for their active engagement and thoughtful insights. We thank them for taking time to participate in technical assistance and the workshop on storytelling in outcomes reporting. We appreciate agencies making the time and space for staff to participate in evaluation capacity building activities past, present, and future.
- **Working group members** for agreeing to continue to collaborate on action planning and cross-program and cross-agency mentoring and support. This learning community is transitioning into a community of practice.
- **Board members and board staff** who highlighted the need for and value of centering staff voice in evaluation capacity building processes. We thank all board members for recognizing the importance of this work and their role in supporting evaluation capacity building.
- **Programs participating in intensive technical assistance** for being willing to work one-on-one with the FRC evaluation team to answer our questions, inform us about your programs, and for being receptive to feedback and working together to improve processes and outcomes.

Suggested report citation

Dariotis, J.K., Underland, N.J., Jackson-Gordon, R., and Eldreth, D.A. (2026, April). *Empowerment and Participatory Approaches to Building Agency Evaluation Capacity Project - Year 3 Annual Report: Equipping Programs Through In-Person and On-Demand Supports*. Family Resiliency Center at the University of Illinois Urbana-Champaign, Urbana, Illinois.

Jacinda K. Dariotis, Professor & Director, FRC
Nathaniel J. Underland, Associate Director, FRC
Rachel Jackson-Gordon, Postdoctoral Research Associate, FRC
Dana A. Eldreth, Senior Research Scientist, FRC



Appendix A. Participating Agencies

Thank you to the agencies that participated in workshops, working group meetings, or technical assistance: Champaign County Christian Health Center, Champaign County Regional Planning Commission, Community Choices, Cunningham Children's Home, Crisis Nursery, CU Early (a collaboration of Urbana School District #116 and Champaign Unit 4 School District), Developmental Services Center, Don Moyer Boys & Girls Club, GROW in Illinois, PACE, Promise Healthcare, Rosecrance, Uniting Pride, and WIN Recovery.

Appendix B. Summary of Findings and Action Steps

Year 1 Theme	Year 2 and 3 Actions	Future
1. "We Don't Know What We Don't Know" – Familiarity with Evaluation Varies	• Created and compiled evaluation resources for all agencies to access. • Obtained feedback regarding resources from the working group and workshop. • Provided technical assistance (TA) for four programs (Year 2) and three programs (Year 3). • Continued to work with the boards to encourage ongoing engagement with evaluation team. • Encouraged the boards to communicate with agencies about why evaluation capacity is important. • Recommended agencies to make time and space to participate in capacity building opportunities and utilize resources.	• Continue creating evaluation resources with guidance from the working group. • Provide TA for new programs (identified with help from board staff). • Continue encouraging agencies and programs to work with the evaluation team, including working group and office hours utilization.
2. User-Friendly Evaluation Training is Needed and Staff and Boards are Receptive to Learning	• Developed video microlearnings and continued adding to the library of offerings based on identified needs. New offerings in Year 3 include storytelling, survey development using low-cost tools, and reporting accuracy. • Acquired feedback from the working group on all trainings and materials. • Hosted workshops about storytelling and evaluation best practices.	• Continue developing microlearnings and trainings about evaluation plans, data management and analysis, data visualization, and other emergent topics. • Continue offering workshops on evaluation best practices.
3. "Giving Back" Time via Evaluation Tools and Efficiencies	• Created institutionalized knowledge and procedures within agencies through TA. • Provided training in best practices in data reporting, survey data collection, and storytelling through TA and workshops. • Developed shared evaluation strategies and metrics. • Created a decision tree to help evaluators determine when to use quantitative, qualitative, or mixed methods approaches to demonstrate the effectiveness of their program. • Created additional, complementary documents for microlearnings that offer different modalities for different types of learners. • Offered "office hours" for funded agencies.	• Continue to offer "office hours" for funded agencies • Create institutionalized knowledge and procedures within agencies

Year 1 Theme	Year 2 and 3 Actions	Future
4. Developing Capacity for Storytelling and Effective Reporting	• Based on Year 1 needs assessment, offered TA for effective storytelling strategies and evaluation-specific storytelling elements. • Created and delivered an in-person training on best practices in storytelling. • Developed microlearnings on how to effectively report outcomes. • Provided strategies on when and how to present quantitative and qualitative data and how to integrate these to tell impactful stories. • Obtained feedback from working group on these resources.	• Develop microlearnings on effective data management, data visualization, and data analyses to tailor outcome reporting to different audiences. • Continue to provide this through TA and potentially workshops.
5. Adopting a Mindset of "We are All in This Together": Collaboration, Shared Goal Setting, and Alignment as Community Building Opportunities to Advance Program Evaluation Work	• Continued to present regular progress updates at the monthly MHDD board meetings and at monthly meetings with board staff. • Improved communication channels for shared goal- and expectation-setting. • Met monthly with board members to discuss progress and obtain feedback.	• Continue regular progress reporting. • Pilot brief agency overview videos about what boards and other audiences need to know about the agencies.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

DECISION MEMORANDUM – 2027 BUDGETS

DATE: July 22, 2026
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Fiscal Year 2027 CCMHB and Special Initiatives Fund Budgets

Overview:

This memorandum presents draft budgets for the CCMHB, Champaign County Developmental Disabilities Board (CCDDB), and I/DD Special Initiatives Funds for County Fiscal Year 2027 (January 1 - December 31, 2027). Approval is requested for the CCMHB and I/DD Special Initiatives Fund budgets and an amendment to the 2026 I/DD Special Initiatives Fund and CCMHB Fund budgets. The CCDDB budget is for information only.

These drafts form the basis for planning and may be revised later in 2026 based on updates from the County Executive Office, as revenue and expense estimates change. Initial approved drafts are submitted to the County's online system for the Champaign County Board's August budget hearings. Final budgets will be presented during their appropriations process in November. Because the CCDDB and CCMHB each have authority over their budgets, subsequent approvals will be requested prior to submission of any revised budgets to the County Board.

Attached are proposed 2027 CCMHB, CCDDB, and I/DD Special Initiative Fund Budgets, with background details on proposed 2027, projected 2026, and actual amounts for 2014 through 2025. An Intergovernmental Agreement between the Boards defines cost sharing and other arrangements. The I/DD Special Initiatives Fund Budget is under joint authority of the Boards.

Highlights of All Draft Versions:

- Projected 2027 property tax revenue assumes 2.7% growth over 2026 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 event revenue, refunds, and 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 (CCDDB and CCMHB budgets).
- Changes to expense categories, per the County's revised "Chart of Accounts", appear as recent fluctuations, especially across Professional Services, Operational Services, and Outside Services (CCMHB budget).
- Non-payroll insurance includes a new cost, estimated $40,000 for Health Reimbursement Arrangement billings for 2026 to be paid in 2027. The County covered these costs in 2025.

This amount might be lowered to reflect CCMHB staff costs as compared to total County, but for now the larger amount is included (CCMHB budget).

- Per the Intergovernmental Agreement Addendum, the Boards may transfer equal amounts out of the I/DD Special Initiatives Fund and use these funds (currently estimated as $155,393 each) to improve their fund balance positions in anticipation of May and June 2027 agency payments. There is a motion below to approve 'zeroing out' this fund at the end of 2026, by transferring what remains (all funds, 2026 and 2027 budgets.)
- Some CCMHB expenses are not shared by the CCDDB (MHB Contributions & Grants and MHB-specific insurance, for example).

Anticipated Revisions for Later Approval:

- If the Board makes later changes to allocations or another expense category, they will be reflected in subsequent versions of 2027 budgets.
- County staff will provide updates on the costs of staff benefits and may offer other suggestions for improvement. Revenue projections may also be updated later in the year.
- Personnel costs may be revised with results of the compensation review completed in July 2025, performance evaluations, and affordability. Salaries are the basis for FICA and IMRF.
- The County Board will discuss all 2027 budgets at hearings in late August.
- With each set of revisions, projections will be updated and approval sought.

Decision Section:

Motion to approve the attached DRAFT 2027 CCMHB Budget, with anticipated revenues and expenditures of $7,607,177.

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Motion to approve the attached DRAFT 2027 I/DD Special Initiatives Fund Budget, with anticipated revenues and expenditures of $0. Use of this fund is consistent with the terms of the Intergovernmental Agreement between the CCDDB and CCMHB, and full approval is contingent on CCDDB action.

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Motion to approve amending the 2026 I/DD Special Initiatives and CCMHB Fund Budgets, to transfer the remaining I/DD SI fund balance in equal amounts to the CCMHB and CCDDB Funds at the end of 2026. Use of this fund is consistent with the terms of the Intergovernmental Agreement between CCDDB and CCMHB, and full approval is contingent on CCDDB action.

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Draft 2027 CCMHB Budget

LINE ITEM	BUDGETED REVENUE	
400101	Property Taxes, Current	$7,034,293
400103	Back Property Taxes	$2,000
400106	Mobile Home Tax	$3,000
400104	Payment in Lieu of Taxes	$2,000
400476	CCDDB Revenue	$500,884
400801	Investment Interest	$40,000
400901	Gifts & Donations	$1,000
400902	Misc & Expo Revenue	$24,000
	TOTAL REVENUE	$7,607,177

LINE ITEM	BUDGETED EXPENDITURES	
500102	**Appointed Official**	$122,167
500103	**Regular FTE**	$429,761
500105	**Temporary Salaries & Wages**	$500
500108	**Overtime Wages**	$500
500301	**Social Security/FICA**	$42,300
500302	**IMRF Employer Cost**	$17,251
500304	**Workers' Comp Insurance**	$2,544
500305	**Unemployment Insurance**	$3,010
500306	**Health/Life Insurance**	$142,062
	Personnel Total	$760,095
501001	**Stationery & Printing (Printing & Copier Suppl)**	$4,000
501002	**Office Supplies**	$3,000
501003	**Books, Periodicals, and Manuals**	$200
501004	**Postage, UPS, Fed Ex**	$1,200
501005	**Food, Non-Travel**	$1,800
501012	**Uniforms (Expo T-shirts)**	$500
501013	**Non-Food Supplies**	$200
501017	**Equipment Less Than $5000**	$8,400
501019	**Operational Supplies**	$2,500
501021	**Employee Development/Recognition**	$200
	Commodities Total	$22,000
502001	**Professional Services**	$190,000
502002	**Outside Services (Computer Services)**	$1,000
502003	**Travel Costs**	$6,000
502004	**Conferences and Training (Employee only)**	$2,000
502005	**Training Programs (Non-Employee)**	$3,000
502007	**Insurance (Non-Payroll)**	$60,000
502013	**Rent (Office, Storage, Booths, Event Venue)**	$43,500
502014	**Finance Charges/Bank Fees**	$30
502019	**Advertising, Legal Notices (adds Expo Marketing & Promotion)**	$7,000
502021	**Dues, License, & Membership**	$20,000
502022	**Operational Services (accounting, IT, and payroll admin, plus Zoom, domain names, web hosting, surveys)**	$45,000
502024	**Public Relations (Anti-Stigma)**	$15,000
502025	**Contributions & Grants**	$6,409,552
502035	**Repairs and Maintenance (Equip, Auto)**	$1,000
502045	**Attorney/Legal Services**	$1,000
502046	**Equipment Lease/Rental (Copier)**	$1,500
502047	**Software License & SAAS (user license, software cloud & installed)**	$14,000
502048	**Phone/Internet**	$2,500
	Services Total	$6,822,082
700101	**Interfund Transfer, CCDDB** (Share of Expo and some of Other Misc Rev)	$3,000
	Interfund Transfers TOTAL	$3,000
	TOTAL EXPENSES*	$7,607,177

Draft 2027 CCDDB Budget

LINE ITEM	BUDGETED REVENUE	
400101	**Property Taxes, Current**	$5,776,835
400103	**Back Property Taxes**	$2,000
400106	**Mobile Home Tax**	$3,000
400104	**Payment in Lieu of Taxes**	$2,000
400801	**Investment Interest**	$40,000
600101	**Transfers In (Portions of Rev Shared by MHB)**	$3,000
400902	**Other Miscellaneous Revenue**	$3,000
	TOTAL REVENUE	$5,829,835

LINE ITEM	BUDGETED EXPENDITURES	
5002001	**Professional Services** *(42.15% of an adjusted set of CCMHB Admin Expenses)*	$500,884
502007	**Insurance**	$5,157
502025	**Contributions & Grants**	$5,323,794
	TOTAL EXPENSES	$5,829,835

Draft 2027 I/DD Special Initiatives

Fund Budget

LINE ITEM	BUDGETED REVENUE	
400801	**Investment Interest**	$0
-	**From Fund Balance**	$0
	TOTAL REVENUE	$0

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 $1518 as of July 1, 2026, expected to be paid out during 2026.)*	$0
502001	**Professional Services** *(legal, accounting, if needed)*	$0
502025	**Contributions and Grants**	$0
700101	**Transfers out, to MHB and DDB funds**	$0
	TOTAL EXPENSES	$0

Background for 2027 CCMHB Budget, with 2026 Projections and Earlier Actuals

2027 BUDGETED REVENUE		2026 PROJECTED	2025 ACTUAL	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	$7,034,293	$6,849,360	$6,586,669	$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	$0	$8,824	$0	$3,382	$6,489	$494	$2,731	$2,486	$2,861	$1,612
Mobile Home Tax	$3,000	$3,000	$0	$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	$451	$327	$2,916	$1,474	$3,679	$1,088	$2,604	$3,406	$3,201	$2,970	$2,869	$2,859
CCDDB Revenue	$500,884	$453,761	$407,429	$386,077	$389,194	$358,450	$366,344	$346,706	$409,175	$310,783	$287,697	$377,695	$330,637	$337,536
Investment Interest	$40,000	$40,000	$94,783	$88,142	$99,693	$47,855	$1,343	$7,627	$45,950	$41,818	$18,473	$3,493	$1,385	$1,015
Gift & Donations	$1,000	$600	$1,070	$575	$450	$0	$100	$2,900	$4,706					
Expo Revenue (combined with Other Misc Rev)	$0	$0	$0	$0	$0	$0	$100	$13,805	$14,275	$21,613	$5,225	$18,822	$26,221	$28,192
Other Misc Revenue	$24,000	$22,000	$60,522	$19,667	$22,057	$55,161	$2,205	$80	$129,028	$29,955	$117,195	$21,340	$67,599	$85,719
Transfers In	$0	$155,393	$0	$0	$0	$0	$770,436							
TOTAL REVENUE	**$7,607,177**	**$7,528,114**	**$7,150,924**	**$6,802,809**	**$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.*

2027 BUDGETED EXPENDITURES (SEE PAGE 5 FOR DETAILS)		2026 PROJECTED	2025 ACTUAL	2024 ACTUAL	2023 ACTUAL	2022 ACTUAL	2021 ACTUAL	2020 ACTUAL	2019 ACTUAL	2018 ACTUAL	2017 ACTUAL	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Personnel	$760,095	$685,697	$641,884	$607,029	$581,916	$564,444	$564,542	$544,001	$517,053	$522,073	$449,220	$577,548	$502,890	$532,909
Commodities	$22,000	$21,600	$18,282	$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)	$412,530	$375,530	$311,683	$321,874	$342,829	$283,066	$268,512	$286,912	$286,376	$404,059	$432,828	$410,157	$382,870	$375,735
***Contributions & Grants**	$6,409,552	$6,246,827	$5,482,613	$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
Transfers Out	$3,000	$1,400	$5,855	$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	$0	$1,648						
TOTAL EXPENSES	**$7,607,177**	**$7,331,054**	**$6,460,317**	**$6,809,009**	**$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 2027 versus Projected 2026)

Personnel Costs

PERSONNEL	2027	2026
Appointed Official	$122,167	$119,771
Regular FTE	$429,761	$421,334
Temporary Wage/Sal	$500	$500
Overtime Wages	$500	$500
FICA	$42,300	$41,513
IMRF	$17,251	$19,265
W-Comp	$2,544	$2,556
Unemployment	$3,010	$2,258
Health/Life Insurance	$142,062	$78,000
	$760,095	**$685,697**

Commodities

COMMODITIES	2027	2026
Printing	$4,000	$4,000
Office Supplies	$3,000	$3,000
Books/Periodicals	$200	$200
Postage/UPS/Fed Ex	$1,200	$1,200
Food Non-Travel	$1,800	$1,500
Uniforms (Expo shirts)	$500	$400
Non Food Supplies	$200	$200
Equipment Under $5000	$8,400	$8,400
Operational Sup (Expo)	$2,500	$2,500
Employee Dev/Rec	$200	$200
	$22,000	**$21,600**

Services (not Contributions and Grants)

SERVICES	2027	2026
Professional Services*	$190,000	$190,000
Attorney/Legal Services*	$1,000	$1,000
Outside Services (e.g., Computer)	$1,000	$4,000
Travel Costs	$6,000	$6,000
Conferences and Training (employee only)**	$2,000	$2,000
Training Programs (Non-Employee)	$3,000	$3,000
Insurance (Non-Payroll)	$60,000	$20,000
Repairs (Equip/Auto)	$1,000	$1,000
Rental (Office and Expo)***	$43,500	$43,500
Rental (Equipment)	$1,500	$1,500
Finance Charges/Bank Fees	$30	$30
Advertising, Legal Notices***	$7,000	$7,000
Public Relations***	$15,000	$15,000
Dues/Licenses	$20,000	$20,000
Operational Svs	$45,000	$45,000
Software License	$14,000	$14,000
Phone/Internet	$2,500	$2,500
	$412,530	**$375,530**

Interfund Expenditures

INTERFUND TRANSFERS	2027	2026
CCDDB Share of Expo and some of MHB Misc Revenue	$3,000	$1,400
	$3,000	**$1,400**

***Professional Services:**
Includes special event (e.g., Expo and AIR) coordinators, Audit Services, website development and maintenance, HR, language access, accessibility review, CPA consultation, 211, Evaluation Capacity Building project. Computer Services are in Outside Services, and Attorney/Legal is a unique line.

****Conferences and Training:**
Registration and conference fees.
Food and travel are tracked separately. Non-Employee trainings are also separated and include costs of presenters and supplies for trainings we host, such as Mental Health First Aid and monthly provider-focused learning opportunities. Board member costs for conferences and trainings are also charged to Non-Employee Training.

*****Public Relations and disAbility Resource Expo:**
Public Relations included Ebertfest in 2026 and other community education/awareness. Expo expenses have been distributed across several appropriate categories and will be again, if implemented.

Additional Information about Services

SERVICES	2027		2026	
Professional Services*	$190,000	Includes cost determined by the County for External Audit. Also includes the cost of independent contractors, as those who have coordinated events and social media, assisted MHFA trainings, and supported agencies through Evaluation Capacity Building, Expo and AIR website maintenance and updates, maintaining and improving the online application system, improving language access and accessibility, reviewing agency audits and reviews, provided 211 information services, and offered human resources services through AAIM.	$190,000	Includes cost determined by the County foe External Audit. Also includes the cost of independent contractors, as those who have coordinated events and social media, assisted MHFA trainings, and supported agencies through Evaluation Capacity Building, Expo and AIR website maintenance and updates, maintaining and improving the online application system, improving language access and accessibility, reviewing agency audits and reviews, provided 211 information services, and offered human resources services through AAIM.
Operational Services*	$45,000	Includes costs determined by the County, such as for Accounting Services and Payroll Administration, and by Intergovernmental Agreement for County IT services. Also covers departmental operating, zoom, domain names, web hosting, survey tools, and similar.	$45,000	Includes costs determined by the County, such as for Accounting Services and Payroll Administration, and by Intergovernmental Agreement for County IT services. Also covers departmental operating, zoom, domain names, web hosting, survey tools, and similar.
Public Relations***	$15,000	Estimated for community events, anti-stigma art show(s) and film sponsorships and promotion, sponsorships of other events, in which Expo, AIR, or the Boards are promoted.	$15,000	$15,000 Ebertfest film sponsorship, cost split with CCDDB. Other expenses were covered by AIR members' in kind contributions and donations.
CCMHB Contributions & Grants	$6,409,552	Estimated CCMHB payments to agencies from January 1 to June 30, 2027, as authorized in May 2026, plus 1/2 of estimated PY28 annual allocation amount, with agency contract maximums to be authorized by July 1, 2027.	$6,246,827	Actual CCMHB payments to agencies from January 1 to June 30, 2026, as authorized in May 2025, plus payments authorized in May 2026 to be made from July through December 2026.
CCDDB Contributions & Grants	$5,323,794	Estimated CCDDB payments to agencies from January 1 to June 30, 2027, as authorized in May 2026, plus 1/2 of estimated PY28 annual allocation amount, with agency contract maximums to be authorized by July 1, 2027.	$5,068,949	Actual CCDDB payments to agencies from January 1 to June 30, 2026, as authorized in May 2025, plus payments authorized in May 2026 to be made from July through December 2026.
Dues/ Licenses	$20,000	$1,200 national trade association (NACBHDD), $2,000 AAIM, $16,000 state trade association (ACMHAI), small amounts for other, such as Arc of Illinois,CBHA, IPHA, NADD,NCBH, NADSP, etc.	$20,000	$1000 national trade association (NACBHDD), $1,500 AAIM, $16,000 state trade association (ACMHAI), small amounts for other, such as Arc of Illinois,CBHA, IPHA, NADD,NCBH, NADSP, etc.
Conferences /Training	$2,000	$1000 registration for NACo and NACBHDD Legislative and Policy Conferences (likely offset by ACMHAI). $500 for NACo Annual Meeting. 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. *Costs of travel and meal per diems for staff for any of these conferences are included in different lines.*	$2,000	$500 registration for NACo and NACBHDD Legislative and Policy Conferences (offset by ACMHAI). 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. *Costs of travel and meal per diems for staff for any of these conferences are included in different lines.*
Non-Employee Conferences / Trainings**	$3,000	Registration, costs of travel, lodging, and food for board members to attend trade association meetings or 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, materials, promotion. Some virtual trainings.	$3,000	Registration, costs of travel, lodging, and food for board members to attend trade association meetings or 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, materials, promotion. Some virtual trainings.
Unexpected		Changes in supports to agencies, non-employee trainings, Public Relations, Expo or AIR costs. Public health barrier to large gatherings. Any unresolved tax liability. 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 and early June, at which point there should be enough for 6 months operating + share (57.85%/ 42.15%) of accrued staff benefits. If first tax distribution does not occur by mid-June, fund balance may be used.		Changes in supports to agencies, non-employee trainings, Public Relations, Expo or AIR costs. Public health barrier to large gatherings. Any unresolved tax liability. 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 and early June, at which point there should be enough for 6 months operating + 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 CCDDB Administrative Share ("Professional Services")

Adjustments:	**2027**	**2026**
CCMHB Contributions & Grants	$6,409,552	$6,246,827
MHB-specific insurance cost	$6289	6289
CCDDB Share of Donations & Misc Rev	$3,000	$1,400
		-
Adjustments Total:	$6,418,841	$6,254,516
CCMHB Total Expenditures:	$7,607,177	$7,331,054
Total Expenditures less Adjustments:	$1,188,336	$1,076,538

	2027 CCDDB Share	**2026*** CCDDB Share
Total Expenditures less Adjustments	$1,188,336	$1,076,538
Adjusted Expenditures x 42.15%	$500,884	$453,761
Monthly Total for CCDDB Admin	$41,740	$37,813

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

Background for 2027 CCDDB Budget, with 2026 Projections and Earlier Actuals

2027 BUDGETED REVENUES		2026 PROJECTED	2025 ACTUAL	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	$5,776,835	$5,624,961	$5,409,229	$5,178,683	$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	$0	$0	$7,246	$0	$2,773	$5,369	$412	$2,278	$2,105	$2,437	$1,398
Mobile Home Tax	$3,000	$3,000	$0	$2,911	$3,222	$3,039	$0	$3,066	$3,361	$3,261	$3,142	$3,305	$3,404	$3,348
Payment in Lieu of Taxes	$2,000	$2,000	$370	$269	$2,396	$1,210	$3,021	$0	$2,154	$2,841	$2,671	$2,515	$2,445	$2,479
Investment Interest	$40,000	$40,000	$92,864	$93,333	$84,072	$35,285	$791	$4,054	$23,508	$24,062	$10,883	$2,318	$1,488	$812
Transfers In (MHB and IDDSI)	$3,000	$156,793	$5,855	$5,907	$5,064	$6,908	$0	$5,819	$106,505	$6,779	$7,288	$10,673	$0	$0
Other Misc Revenue	$3,000	$3,000	$0	$0	$50,550	$0	$971	$9,524	$8,955	$6,408	$14,432	$0	$0	$11,825
TOTAL REVENUE	**$5,829,835**	**$5,831,754**	$5,508,318	$5,281,103	$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

2027 BUDGETED EXPENDITURES		2026 PROJECTED	2025 ACTUAL	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)*	$500,884	$453,761	$407,429	$386,077	$389,194	$358,450	$366,344	$330,445	$309,175	$310,783	$287,697	$379,405	$330,637	$337,536
Contributions & Grants	$5,323,794	$5,264,402	$4,908,976	$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	$5,157	$5,157	$4,333	$4,333										
Interfund Transfer, CILA Fund	$0	$0	$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	**$5,829,835**	**$5,723,320**	$5,320,738	$4,947,671	$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

INTERGOVERNMENTAL AGREEMENT

THIS INTERGOVERNMENTAL AGREEMENT is entered into this 16th day of March, 2016 by and between the Champaign County Mental Health Board (hereinafter the "Mental Health Board") and the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability (hereinafter the "Developmental Disabilities Board"). The parties hereby enter into this INTERGOVERNMENTAL AGREEMENT to delineate respective roles, responsibilities, and financial obligations associated with the shared administrative structure that shall be responsible for the staffing and operation of the Mental Health Board and the Developmental Disabilities Board. Both parties understand and agree as follows:

WITNESSETH

WHEREAS, the Mental Health Board has a statutory responsibility (Illinois Community Mental Health Act, 405 ILCS 20 / Section 0.1 et.seq.) to plan, fund, monitor, and evaluate mental health, substance abuse, and developmental disability services in Champaign County;

WHEREAS, the Developmental Disabilities Board has a statutory authority (County Care for Persons with Developmental Disabilities Act, 55 ILCS 105 / Section 0.01 et. seq.) to fund services and facilities for the care and treatment of persons with a developmental disability;

WHEREAS, the Mental Health Board and Developmental Disabilities Board have overlapping responsibilities pertaining to planning, funding, monitoring, and evaluating developmental disability programs and services in Champaign County;

WHEREAS, the members of the Mental Health Board and the Developmental Disabilities Board are appointed by the Chair of the Champaign County Board with consent of the Champaign County Board and as such have committed to share the same administrative structure to maximize the funding available for direct mental health and developmental disabilities programs and services;

WHEREAS, the Parties agree sharing an administrative structure will reduce administrative costs, maximize available funding for direct services, and assure an integrated planning process for developmental disabilities and behavioral health programs and services;

NOW, THEREFORE, it is the agreement of the parties that this INTERGOVERNMENTAL AGREEMENT is entered into in order to assure an efficient, ongoing, cooperative effort that will benefit people with disabilities in Champaign County.

The Parties Agree to the Following Arrangements for a Shared Executive Director and Joint Programs:

1. The chief administrative employee shall serve in a dual (i.e., shared) capacity as Executive Director of the Mental Health Board as well as Executive Director of the Developmental Disabilities Board.

2. The terms and conditions of the Executive Director's employment shall be delineated in an employment contract with both the Developmental Disabilities Board and the Mental Health Board as Parties to the agreement.

3. Each Board shall complete a separate annual performance evaluation of the Executive Director. If either Board rates the Executive Director as "less than satisfactory," a Joint Personnel Committee comprising two (2) officers of the Mental Health Board and two (2) officers of the Developmental Disabilities Board shall be convened to assess the situation and formulate recommendations. A recommendation of termination by the Joint Personnel Committee, or any other action proposed, shall require ratification by each Board by majority vote. The Joint Personnel Committee shall have no other function.

4. An annual performance review conference with the Executive Director shall be convened by the Presidents of the two Boards. This conference shall be used to provide feedback about performance and discuss goals and objectives for the coming year.

   Process for selection of a new shared Executive Director: At such time as it becomes necessary to fill the shared position of Executive Director for the Mental Health Board and the Developmental Disabilities Board, the search and decision process shall include the following steps and processes.

   a. The Mental Health Board and the Developmental Disabilities Board shall develop and agree upon selection criteria and job description for the shared Executive Director position. If necessary, a separate document delineating the search process shall be developed and agreed upon by each Board.

   b. The Presidents of the two Boards, with the advice and consent of the two Boards, shall appoint a Search Committee to manage the search and selection process for the shared Executive Director using the job description and selection criteria.

   c. The Search Committee shall report, in advance, a general schedule for the search process, any advertising content to be used, shall request budget support for the search process, and shall keep the two Boards informed about activities and progress associated with the search with regular reports at each Board meeting during the search schedule.

   d. Ultimately, finalists for the shared Executive Director posrtion will be determined by majority vote of the Search Committee and forwarded to the two Boards.

e. If within 45 days of the planned time of completion of the search, from the schedule in part (c) above, the Search Committee is unable to come to a decision about finalists, then the two Boards may elect to extend the search time to a specific later date or to start the search again from the beginning. If the two Boards do not so elect, this shall be considered to imply that a shared Executive Director is no longer viable and the process of termination or amendment of this agreement shall commence.

f. The Executive Director shall be chosen from among the final candidates by majority vote of each Board. If the two Boards do not reach mutual agreement, then the two Boards may elect to start the search again from the beginning. If the two Boards do not so elect, this shall be considered to imply that a shared Executive Director is no longer viable and the process of termination or amendment of this agreement shall commence.

The Parties Agree to the Following Financial Commitments:

5. There shall be ongoing communication between the Mental Health Board and the Developmental Disabilities Board. On at least a quarterly basis, the shared Executive Director shall meet with the Presidents of the Mental Health Board and the Developmental Disabilities Board to review the status of the provision of administrative services, to discuss coordination of funding for developmental disabilities seNices, to coordinate regarding joint projects and activities, and to address any other items pertinent to the operations of either Board. The Presidents shall report on the discussion and any actions taken at regular meetings of each Board.

6. The Mental Health Board shall provide funding for developmental disabilities services using the FY12 amount of $529,852 as a base with annual increases or decreases predicated on the percentage of increase or decrease in the levy fund in subsequent years.

7. The organization of Champaign County Government makes it cumbersome for administrative costs to be paid by both the Mental Health Board and the Developmental Disabilities Board. To simplify matters, all administrative costs shall be paid through the Mental Health Board fund/account. The Developmental Disabilities Board will transfer their share of administrative costs to the Mental Health Board for this purpose.

8. The split for administrative costs on the date of execution of this agreement is 42.15% for the Developmental Disabilities Board share with the remainder paid by the Mental Health Board. This percentage is based on a time study of staff effort to determine the salary cost split between the Boards. Subsequent appropriate cost sharing adjustments, based on time studies, pro rata allocation, or other mutually agreed approach shall be determined through the regular meetings between the Presidents of the Mental Health Board and the Developmental Disabilities Board with the advice and consent of the two Boards.

9. In preparation for the annual budget process, the Executive Committee shall review the proposed administrative costs of the Mental Health Board budget to assure the share in paragraph (8) above is applied only to expenditures which are common for both boards. Administrative costs which are specific to the Mental Health Board or to the Developmental Disabilities Board shall be excluded from (i.e., backed out of) the shared cost pool.

10. All current and future "jointly sponsored programs and activities" shall be shared equally between the Boards unless each Board agrees to some other allocation. These include, but are not limited to, various Acceptance, Inclusion, and Respect programs intended to address discrimination, violations of civil rights, and other stigma directed to people with disabilities.

Miscellaneous Provisions:

11. Nothing contained herein serves to limit, alter, or amend either party's duties, rights, or responsibilities as set out in applicable State statutes, laws, or regulations.

12. This agreement can be amended at any time based on needs identified at the quarterly Presidents Meeting or by either of the two Boards.

13. This agreement may be terminated by first providing notification of intent to terminate the agreement at the President's Meeting, followed by majority vote of either Board, or in the event of disagreement about candidates for the Executive Director position as described in Paragraph 4 above. In the event of a decision to terminate the Intergovernmental Agreement, full implementation of the termination and separation shall be coordinated and concurrent with the Champaign County Budget and fiscal year (January 1).

Governing Law:

14. This Agreement shall be interpreted, construed, and governed by the laws of the State of Illinois.

Entirety of Agreement:

15. This Agreement embodies all representations, obligations, agreements, and conditions in relation to the subject matters hereof, and no representations, obligations, understandings, or agreements, oral or otherwise, in relation thereto exist between the parties except as expressly set forth herein and incorporated herein by reference. This Agreement constitutes the entire agreement between the Mental Health Board and the Developmental Disabilities Board on the subject matters hereof and supersedes and replaces any and all other understandings, obligations, representations, and agreements, whether written or oral, express or implied, between or by the Mental Health Board and the Developmental Disabilities Board. This Agreement may be amended or terminated only by an instrument in writing duly executed by the parties hereto.

IN WITNESS WHEREOF, the Parties have caused this INTERGOVERNMENTAL AGREEMENT to be executed by their authorized representatives on the 16th day of March, 2016.

For the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability:

Philip T. Krein, President (signed original) March 16, 2016

For the Champaign County Mental Health Board:

Deborah Townsend, President (signed original)

ADDENDUM TO INTERGOVERNMENTAL AGREEMENT

This Addendum to the Intergovernmental Agreement is entered into this 27th of November, 2020, by and between the Champaign County Mental Health Board ("MHB") and the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability ("DDB").

Whereas, MHB and DDB entered into an Intergovernmental Agreement dated June 30, 2012 ("Agreement"), revised March 16, 2016 ("Agreement"), and amended September 17, 2014 and February 20, 2019,

Whereas, MHB and DDB desire to amend the Agreement by providing for the sharing of costs related to the acquisition, maintenance, and disposition of residences to be used to provide Community Integrated Living Arrangement ("CILA") Services,

Whereas, with financing provided by one or more local banks, MHB acquired residences in Champaign County to be leased to a CILA provider to provide housing to residents in Champaign County who qualify for CILA services,

Whereas, MHB paid the remaining mortgage balance (interest and principal) which has allowed for acquisition of two residences and provision of services to eligible persons, so that as of May 2019, the MHB had contributed a total of $500,000, and the DDB $300,000 to the project,

Whereas, per October 2020 resolution, the titles for each property were transferred from the MHB to the DDB,

Now, therefore, MHB and DDB hereby agree as follows:

1. MHB and DDB have agreed that for so long as a residence is owned by DDB and used to provide CILA services to residents of Champaign County, each party shall be responsible for one-half of all costs associated with the acquisition of such residences, the debt payments associated with such residences, the maintenance costs of such residences and the costs associated with any disposition of a residence.

2. Prior to the contributions of the DDB becoming equal to those of the MHB, if expenses related to the CILA fund exceed the amount available in the annual budget, the DDB will transfer the additional amount to the CILA fund, reducing the remaining DDB obligation.

3. After the contributions of each Board have become equal, the CILA fund will continue to receive equal contributions from each board, by annual interfund transfers, for ongoing expenses associated with the properties. This annual amount will be based on most recently completed fiscal year actual expenses plus 10%.

4. If expenses related to the properties exceed the amount available in annual GILA fund budget, a request to transfer from GILA fund balance may be made. If fund balance is insufficient or transfer not possible, the Boards may agree to contribute equally to the fund as needed.

5. MHB and DDB agree that once a residence is no longer to be used to provide GILA services, DDB shall enter into a listing agreement with a realtor in an attempt to sell such residence.

    A. If the homes are sold prior to such time as the total DDB contribution has become equal to that of the MHB, net proceeds from sale of the homes shall first be paid to MHB in an amount equal to the MHB's contribution that is greater than the then DDB's contribution. Any fund balance or net proceeds remaining will be split equally between the two Boards, as interfund transfers from the GILA fund to each of the MHB fund and DDB fund.

    B. If the homes are sold after the contributions have become equal, the current balance of the CILA fund and proceeds from the sale of the homes will be split equally between the two boards, per the original agreement.

In witness whereof, the parties have executed this Addendum as of the date first written above.

As this Addendum contains the entire agreement between the Champaign County Mental Health Board ("MHB") and the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability ("DDB") concerning the operations, finances and disposition of any matter related to the CILA (formal) homes, by mutual agreement, the Addendums of Feb, 20, 2019 and Sept. 17, 2014 are null and void.

For the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability:

Anne Robin, President (signed original)

For the Champaign County Mental Health Board:

Joseph Omo-Osagie, President (signed original)

DECISION MEMORANDUM – Request for Proposals to Support Evaluation Capacity

Date: July 22, 2026

To: Members, Champaign County Mental Health Board (CCMHB) and
Champaign County Developmental Disabilities Board (CCDDB)

From: Lynn Canfield, Executive Director

Subject: Request for Proposals for Evaluation Capacity Building Project

Statutory Authority:

The Community Care for Persons with Developmental Disabilities Act (50 ILCS 835/ Sections 0.05 to14) is the basis for CCDDB funding policies. The Illinois Community Mental Health Act (405 ILCS 20/ Section 0.1 et. seq.) is the basis for CCMHB funding policies. All funds shall be allocated within the intent of the controlling acts, per the laws of the State of Illinois.

The Boards have entered into an Intergovernmental Agreement which defines shared authorities and cost-sharing. The supports sought through this proposed Request for Proposals (RFP) would be available to both Boards, their staff, and organizations funded by either Board. The cost of the project would be split between the Boards as are other administrative costs and program supports.

Overview:

The purpose of this memorandum is to present the attached DRAFT of Request for Proposals for Evaluation Capacity Building. If this draft is approved by both Boards, as presented or with Board revisions, a Notification of Bid Process will be published, the RFP posted, and the process implemented.

The project would continue and/or expand on the work done for the last few years years by the UIUC Family Resiliency Center team and for several years before that by researchers from UIUC Department of Psychology. A next phase project would have the primary goal of supporting funded agencies in the identification of program and consumer outcomes and the collection and reporting of data related to these outcomes. Also of interest are supports to the Boards and their staff, including for public-facing final reports.

Staff Suggestion:

Both Evaluation Capacity Building projects were well-received by funded agencies. Agency applications for funding and year-end outcome reports have improved through engagement with the project, as have our own materials. Training materials are posted and shared publicly and have been referenced by other local funders working with social service agencies on similar goals. Board members have praised the training materials and support activities and expressed continued interest in improvement of our own materials and reports. Research teams have helped us to align reporting requirements with values shared by agencies and Boards and to improve communication of programs' impact.

Each Board is asked to consider the attached draft RFP. If both Boards approve the draft as presented, or with agreed revisions, it will be posted on the County's bid notice page and our application and reporting website, and a bid notice will be published in the News-Gazette (and other local newspaper, if possible) and distributed through trade associations and professional networks.

Decision Section:

Motion to approve the attached "Request for Proposals, Evaluation Capacity Building Project for the County of Champaign."

_____ Approved

_____ Denied

_____ Modified

_____ Additional Information Needed

Notification of Bid Process: The Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB) and the Champaign County Mental Health Board (CCMHB) are seeking bid proposals from academic and/or professional research teams for an "Evaluation Capacity Building" Project. For details, see https://champaigncountyil.gov/CountyExecutive/bids.php.

The proposal should identify researchers' qualifications and experience, a plan to support social service providers in the measurement and reporting of outcomes, annual costs, and an implementation timeline. The Boards will select the proposal which offers the best value and will negotiate a two-year contract with renewal option. The Boards reserve the right to reject any and all proposals. Proposals are due to the CCDDB/CCMHB Executive Director no later than Noon on Wednesday, December 9, 2026. Email stephanie@ccmhb.org and lynn@ccmhb.org.

Champaign County Mental Health Board (CCMHB) and Champaign County Board for Care and Treatment of Persons with a Developmental Disability, as Champaign County Developmental Disabilities Board (CCDDB)

Draft REQUEST FOR PROPOSALS

"EVALUATION CAPACITY BUILDING" PROJECT

For the County of Champaign

ISSUE DATE: August 21, 2026

CLOSING DATE AND TIME: December 9, 2026 at Noon

CLOSING LOCATION:

CCDDB/CCMHB Offices, Bennett Administrative Center, 102 East Main Street, Urbana, IL 61801

ATTN: Stephanie Howard-Gallo, Operations and Compliance Coordinator, and Lynn Canfield, Executive Director

- One (1) unbound paper copy of the full proposal must be presented to the CCDDB/CCMHB office on or before Noon on Wednesday, December 9, 2026. At 5:30 p.m. that day, at the beginning of a properly noticed public meeting, the names of respondents will be read aloud by the Executive Director or designee and recorded. Please show "RFP: Evaluation Capacity Building Project for the County of Champaign" on the lower left corner of package.
- An electronic version of the proposal shall also be emailed to the Executive Director and Operations and Compliance Coordinator at lynn@ccmhb.org and stephanie@ccmhb.org.
- If downloading this solicitation from https://champaigncountyil.gov/CountyExecutive/bids.php or http://ccmhddbrds.org, it is the responsibility of the respondent to e-mail our office at stephanie@ccmhb.org and lynn@ccmhb.org to be registered as a potential respondent in order to receive any clarifications or addenda.

Contents

Section 1 – General Information

1-1 Purpose of the Request for Proposals

The purpose of the Request for Proposals (RFP) is to improve the evaluation capacity of organizations providing services to Champaign County residents who have mental health or substance use disorders or intellectual/developmental disabilities. Priority for training, coaching, and other supports offered through this project is given to organizations funded by either the Champaign County Mental Health Board (CCMHB) or the Champaign County Developmental Disabilities Board (CCDDB), but the benefit of these supports will extend further.

The Champaign County Developmental Disabilities Board is a five-member body appointed by the County Executive and County Board. The CCDDB has statutory authority through the Community Care for Persons with Developmental Disabilities Act, ILCS 50/835, Section 0.1 et seq. to fund services and supports for people with intellectual/developmental disabilities (I/DD). The Champaign County Mental Health Board is a nine-member body appointed by the County Executive and County Board. It has statutory responsibility through the Community Mental Health Act, ILCS 405/20, Section 0.1 et. seq. to plan, fund, monitor, and evaluate mental health, substance use disorder, and developmental disabilities services in Champaign County.

The CCDDB and CCMHB are seeking proposals from individuals or organizations with expertise in instruction on evaluation methods, identification and measurement of quality outcomes related to behavioral health and or I/DD services, strategies for improved data collection and reporting, utilization of results for program improvement, and presentation of summary results. Through this project, the Respondent will offer supports to agencies as well as to the CCDDB and CCMHB and administrative staff they employ, to improve evaluation, reporting, communication with the public and stakeholders, planning, and future decisions.

1-2 Internet Access to this RFP

All materials related to the RFP will be available online at www.champaigncountyil.gov/CountyExecutive/bids.php and https://ccmhddbrds.org. In the event that a potential Respondent does not have download capability, materials may be obtained from the Champaign County Developmental Disabilities Board/Champaign County Mental Health Board office at 102 East Main Street, Urbana, IL 61801, and can be requested by mail, attention Stephanie Howard-Gallo, or by email to stephanie@ccmhb.org. Prior to submittal, Respondents shall be responsible for ensuring they have obtained all RFP materials.

All Respondents who download an RFP solicitation from www.champaigncountyil.gov/CountyExecutive/bids.php or https://ccmhddbrds.org have the responsibility to email our office at stephanie@ccmhb.org and referencing "RFP: Evaluation

Capacity Building Project for the County of Champaign", to be registered as a potential Respondent so that they may be notified of any clarifications or addenda. Failure to register to receive clarifications and/or addenda shall not relieve the Respondent from being bound by any additional terms and conditions in the clarifications and/or addenda or from the responsibility of considering additional information contained therein in preparing the proposal. Any harm to the Respondent resulting from the failure to register and/or ensuring they have obtained all RFP materials shall not be valid grounds for a protest against award(s) made under this solicitation.

1-3 Inquiries and Lobbying Restrictions

Respondents will examine all sections of this RFP and may make a written request to the CCDDB and CCMHB for interpretation or correction of any ambiguity, inconsistency, or error herein. Any written interpretation or correction will be issued as an Addendum by the CCDDB/CCMHB. Only a written interpretation or correction by Addendum shall be binding. Respondents are cautioned against relying upon any interpretation or correction given by any other method. All Requests for Interpretation (RFI), correction, or other inquiries concerning the RFP process and/or the subject of this RFP must be directed to:

> Executive Director and Operations and Compliance Coordinator
> CCDDB/CCMHB Offices, Bennett Administrative Center
> 102 East Main Street, Urbana, Illinois 61801
> e-mail: lynn@ccmhb.org and stephanie@ccmhb.org

Except for contact with the designated County official(s) for this RFP, all interested individuals, firms, and their agents who intend to submit or have submitted a proposal or other response are hereby notified that no Champaign County Board Members, CCMHB or CCDDB Board Members or staff, or RFP Committee Members are to be lobbied, either individually or collectively, concerning this RFP. Lobbying consists of providing introductions to Board members, discussions related to the evaluation and selection process, or any other discussions or actions that may be interpreted as attempting to influence the outcome of the selection process. This includes holding meetings or otherwise engaging in the aforementioned prohibited lobbying and/or prohibited contact, which actions may immediately disqualify Respondent from further consideration by the CCDDB/CCMHB for this RFP.

By submitting a proposal, qualifications, or other response for this RFP, the Respondent certifies that it and all of its affiliates and agents have not lobbied or attempted to lobby Champaign County Board Members, CCMHB or CCDDB Board Members or Staff, or RFP Evaluation Committee Members.

1-4 Addenda

If revisions or clarifications to the RFP become necessary, the CCDDB/CCMHB will post written Addenda on the webpages noted. All Addenda issued by the CCDDB/CCMHB will include a receipt form, which must be signed and included with any proposals submitted for consideration. If multiple Addenda are issued, a separate receipt for each Addendum must be included with the proposal at the time it is submitted. It is the responsibility of Respondents to closely monitor postings at www.champaigncountyil.gov/CountyExecutive/bids.php or https://ccmhddbrds.org.

The CCDDB/CCMHB will not issue Addenda later than November 9, 2026, 30 days prior to the scheduled deadline date and time for receiving proposals, unless said date is to be postponed.

1-5 Proposal Submission and Opening

A proposal shall be made in the official name of the organization under which business is conducted (showing the official organization address) and must be signed by a person duly authorized to bind the corporation, not-for-profit entity, sole proprietor, or other legal entity submitting the proposal.

The CCDDB/CCMHB shall not be responsible for proposals from unidentified Respondents. Respondents should include all requested information and should expand on the scope of services requested by incorporating their expertise and proposed methods or approaches. Respondents should clearly identify the expanded scope of services being offered and the value and cost of those services.

To be considered, proposals shall include one (1) unbound original proposal (clearly marked as such) and one (1) electronic version in pdf format or Microsoft Word of the RFP Proposal (which must be identical to the original Proposal, including any supplemental information), which clearly identifies the RFP number/title as well as the Respondent's name and return address. Proposals may be hand delivered or mailed to:

> CCDDB/CCMHB Offices, Bennett Center, 102 East Main Street, Urbana, IL 61801
> RFP for Evaluation Capacity Building Project
> ATTN: Executive Director and Operations and Compliance Coordinator

The CCDDB/CCMHB will not accept nor consider proposals submitted by facsimile or by email transmission alone. Respondents mailing their proposals must allow a sufficient mail delivery period to ensure timely receipt of their proposal. The CCDDB/CCMHB is not responsible for proposals delayed by mail and/or delivery services of any nature.

Proposals and proposal amendments shall be accepted until Noon local time on December 9, 2026. Proposals received after Noon on December 9, 2026 will not be considered and will be returned to the Respondent unopened. At 5:30 p.m. on that date, directly before a regular meeting of the CCMHB, the proposals will be opened in the Shields-Carter Meeting Room of the Scott Bennett Administrative Center, 102 East Main Street, Urbana, Illinois, read aloud by Executive Director or designee, and recorded.

1-6 Proposal Withdrawal

Respondents may withdraw their proposals by notifying the CCDDB/CCMHB, in writing, at any time prior to the proposal response time deadline. Respondents may withdraw their proposals in person or through an authorized representative. Respondents and authorized representatives must disclose their identity and provide receipt for the proposal. Any proposal not so withdrawn shall constitute an irrevocable offer for a period of ninety (90) days. Proposals, once opened, become the property of the CCDDB/CCMHB and will not be returned to the Respondents.

1-7 Proposal Disclosure

All proposals submitted to the CCDDB/CCMHB are subject to the Illinois Compiled Statutes Chapter 5, Section 140 (5 ILCS 140/Freedom of Information Act). With regard to any information submitted in a proposal which the Respondent considers to be proprietary or otherwise exempt from disclosure, the Respondent must invoke, in writing, the exemption(s) to disclosure provided by 5 ILCS 140/Freedom of Information Act in its proposal by providing the specific statutory authority for claimed exemptions, identifying the data or other materials to be protected, and stating the reasons why such exclusion from public disclosure is necessary. Furthermore, to designate portions of the bid as confidential, the Respondent must:

1. On the cover page, indicate: “This proposal includes trade secrets or other proprietary data.”
2. Mark each sheet or data to be restricted with the following legend: “Confidential: Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this proposal.”
3. Provide an electronic version of the proposal with a redacted copy of the entire bid or submission in pdf or word format for posting on the County's website for public inspection. Respondent is responsible for properly and adequately redacting any proprietary information or data which Respondent desires to keep confidential. If entire pages or sections are removed, they must be represented by a page indicating that the page or section has been redacted. Failure to provide an electronic version with redactions may result in the posting of an un-redacted copy.

Indiscriminate labeling of material as "Confidential" may be grounds for deeming a bid as non-responsive.

The CCDDB and CCMHB will make the final determination as to whether information, even if marked “confidential,” will be disclosed pursuant to a request under the Freedom of Information Act or valid subpoena. Respondent agrees not to pursue any cause of action against Champaign County, the CCMHB, the CCDDB, or their agents for their determination in this regard and disclosure of information. If the disclosure is deemed necessary, the Respondent will be informed beforehand.

At some point after proposal opening, all opened proposals will be made available for public inspection consistent with 5 ILCS 140/Freedom of Information Act.

If a contract is awarded as a result of this RFP, the awarded contract will also become a public record consistent with 5 ILCS 140/Freedom of Information Act. The CCDDB and CCMHB have the right to use any or all information/material submitted, excluding any portion appropriately deemed to be confidential.

The CCDDB and CCMHB reserve the right to make an award to the Respondent offering a proposal in the best interests of Champaign County and meeting all the requirements of this RFP.

1-8 Oral Presentations and/or Interviews

The CCDDB and CCMHB reserve the right to interview any, all, or none of the respondents and to select one or more to go forward in the process. At their sole discretion, the CCDDB and CCMHB may invite short-listed Respondents to conduct oral presentations or interviews. Presentations or interviews provide an opportunity for Respondents to clarify their proposals. Any such presentations or interviews will be scheduled as indicated in the timetable below.

1-9 Proposal Timetable

The CCDDB and CCMHB will use the timetable below, which is expected to result in selection of a provider on February 24, 2027 and a contract issued on or before March 31, 2027.

August 21, 2026	RFP posted online; classified ad orders placed with News Gazette (and other local newspaper, if possible.)
November 9, 2026	Final Date to Issue Addenda
December 9, 2026 – Noon	Proposals Due
December 9, 2026 – 5:30 p.m.	Proposals Opened, directly before a CCMHB meeting, on https://us02web.zoom.us/j/81393675682 and in

	person at the Shields-Carter Meeting Room, Bennett Center, 102 East Main Street, Urbana, IL 61801.
February 24, 2027 – 5:45 p.m.	Evaluation Committee's Recommendation of Top-Ranked Respondents and authorization to contract with the Selected Provider, at a meeting held at https://us02web.zoom.us/j/81393675682 and in person at the Shields-Carter Room.
March 31, 2027	Contract(s) issued.

The CCDDB and CCMHB may delay or modify scheduled event dates if it is to the advantage of the CCDDB and CCMHB to do so. The CCDDB/CCMHB will notify Respondents of all changes in scheduled due dates by posting any change in the form of an Addendum at www.champaigncountyil.gov/CountyExecutive/bids.php or https://ccmhddbrds.org.

1-10 Acceptance or Rejection of Proposals

Each qualified Respondent's proposal will be evaluated on its overall strategy, methodology, experience, qualifications, timetable, cost proposal, and approach to building the evaluation capacity of The Boards and of agencies funded by the Boards.

Qualified Respondent means a person or group with experience and knowledge of evaluation methods, outcome identification and measurement, and the behavioral health and I/DD systems.

1-11 Development Costs

Neither the County, CCDDB, CCMHB, nor their representatives shall be liable for any expenses incurred in connection with the preparation, submission, or presentation of a proposal in response to this RFP.

1-12 Conflicts of Interest

All Respondents must disclose, with their proposal, the name of any officer, director, or agent who is an elected official, appointed official, or employee of the County. Furthermore, all Respondents must disclose the name of any elected official, appointed official, or employee of the County who owns directly, or indirectly, any interest in the Respondent's firm or any of its affiliates or branches.

1-13 Non-Collusion

By submitting and signing a proposal response, the Respondent certifies that its proposal is made without prior understanding, agreement, or connection with any corporation, firm, or person submitting a proposal for the same materials, services, supplies, or equipment and is in all

respects fair and without collusion or fraud. No premiums, rebates, or gratuities are permitted, either with, prior to, or after any delivery of material or provision of service. A violation of this provision may result in contract cancellation, return of materials, or discontinuation of services.

1-14 Notice of Award

Notice of Award is expected to be posted at www.champaigncountyil.gov/CountyExecutive/bids.php on or before March 31, 2027.

Section 2 – Scope of Services

2-1 Description of Services

The scope of services and specifications that the CCDDB and CCMHB seek to acquire is described in Exhibit 1 of this RFP. The respondent is expected to expand on this scope in the submitted proposal by incorporating their expertise and proposed methods and approaches.

2-2 Term of Contract

Any contract awarded pursuant to this RFP solicitation is expected to commence on or by March 31, 2027 and shall be for a base contract period of two (2) years with an option to renew for a second two (2) year period, by mutual written agreement of the parties.

2-3 Non-Appropriation

The contract for the Evaluation Capacity Building Project will include a provision that allows cancellation if funds are not appropriated or otherwise available to support continuation of performance in any fiscal year. Any contract approved by the CCDDB/CCMHB shall be conditioned by a "non-appropriation" clause containing the following or similar language:

> *This contract is approved and funded contingent upon annual appropriations being established by the local governing body of Champaign County to provide funding necessary to meet the requirements of the contract. Such funding is approved on a fiscal year basis with the fiscal year commencing January 1st and terminating December 31st of that year. In order for the contract to remain in effect, such appropriation must be approved on an annual basis throughout the term of the contract scheme. In the event that an annual appropriation is not approved, the CCDDB and CCMHB shall not be held responsible for any liabilities beyond the remaining annual term prior to the new budget year.*

Section 3 – Preparing Proposals: Required Information

Each Proposal must contain the following documents and conform to these requirements.

3-1 Format of Proposals

Proposals must be prepared on 8 ½" x 11" letter size paper, printed double-sided, and unbound. The County encourages using reusable, recycled, recyclable, and/or chlorine free printed materials for proposals, reports, and other documents prepared in connection with this solicitation. Expensive papers and bindings are discouraged, as no materials will be returned. Submit one (1) unbound original proposal (clearly marked as such) and one (1) electronic version in pdf format or Microsoft Word (which must be identical to the original Proposal, including any supplemental information).

Sections should be organized in accordance with subject matter sequence as set forth below. Each page of the Proposal must be numbered in a manner so as to be uniquely identified. Proposals must be clear, concise, and well organized.

3-2 Required Content of Proposals

Respondents are advised to adhere to the submittal requirements of the RFP. Failure to comply with the instructions of this RFP may be cause for rejection of the non-compliant Proposal. Respondent must provide information in the appropriate areas throughout the RFP. By submitting a response to this RFP, you are acknowledging that if your Proposal is accepted by the CCDDB/CCMHB, Respondent's Proposal and related submittals may become the Program Plan component of the contract.

The Proposal should include the following items:

1. Cover Letter

Respondent(s) must submit a cover letter signed by an authorized representative of the entity committing Respondent to provide the Services as described in this RFP in accordance with the terms and conditions of any contract awarded pursuant to the RFP process. Include:

A. Number of years the entity has been in business and overview of the experience and background of the entity and its key personnel committed to this project.
B. Legal name of the entity, headquarters' address, principal place of business, legal form (i.e., corporation, joint venture, limited partnership, not-for-profit, etc.), and the names of its principals or partners and authority to do business in Illinois.
C. Name, preferred email address, and telephone number(s) of the principal contact for oral presentation or negotiations.
D. Acknowledgement of receipt of Addendum issued by the CCDDB/CCMHB, if any.

2. Executive Summary

An executive summary will explain the Respondent's understanding of the CCDDB and CCMHB's intent and objectives and how their Proposal would achieve those objectives. The summary must discuss Respondent's strategy and methodology for assisting the Boards and funded organizations to build their capacity for identification and evaluation of valued outcomes; and any additional factors for the CCDDB and CCMHB's consideration.

3. Professional Qualifications and Specialized Experience of Respondent and Key Personnel Committed to the Champaign County Account

Respondent must supply the information as described below. If Respondent proposes that major portions of the work will be performed by subcontractors, Respondent must provide the required information as described below for each such subcontractor.

A. **Respondent Profile Information (see Exhibit 2)**
Submit a Respondent Profile Information sheet for each subcontractor, as applicable. If Respondent has a prime consultant/subcontractor relationship, the information regarding role, involvement, and experience is also required for any subcontractor that is proposed to provide a significant portion of the work.

B. **Business License/Authority to do Business in Illinois**
Respondent must provide copies of appropriate licenses or certifications required of any entity performing the Services described in this RFP in Champaign County and the State of Illinois, for itself, its partners, and its subcontractors.

C. **Profiles of and Local Availability of Committed Key Personnel**
Respondent must provide a summary identifying who will be dedicated to the Evaluation Capacity Building Project described in this RFP. If individuals are to be hired, describe the position. For each person or position identified, describe and/or provide the following information:

- Title and responsibility,
- Proposed role in this program, including the functions and tasks for which they will have prime responsibility (indicate areas of secondary responsibility, if appropriate),
- Pertinent areas of expertise and past experience, and
- Copies of any licenses required by law for the positions to be filled.

4. Capacity to Perform

Respondent must provide a summary of current and future projects and commitments and include projected completion dates. Describe how any pending and/or ongoing contractual commitments to other clients will affect your ability to deliver Evaluation Capacity Building services, capacity to perform within the CCDDB/CCMHB timeline, and affect dedicated resources committed to the Project. Identify what percentage of the Services will be performed utilizing your own workforce, equipment, and facilities. Identify the percentage of the work to be subcontracted, if any.

5. Implementation Plan

Respondent must provide a comprehensive and detailed plan for implementing Services as outlined in Exhibit 1, Scope of Services in this RFP.

The implementation plan must include, but not be limited to, the following:

A. Approach to Implementing Services
Respondent should address implementing and managing the Services described in this RFP, any related policies and procedures, quality control checks, adherence to compliance programs, project management, approach to overcoming obstacles, and troubleshooting to resolve problems.

B. Organization Chart
An organization chart should identify all individuals and subcontractors, relationship to proposed Services, and key personnel, with the following information:

- A chart which identifies not only the proposed organizational structure, but also key personnel by title and name, unless 'to be hired'.
- The specific role of each subcontractor (if any) for each task/work activity.

C. Dedicated Resources
Describe facilities, service locations, equipment, personnel, communication technologies, and other resources available for implementing the proposed Services.

6. Cost Proposal for Capacity Building Activities

The CCDDB and CCMHB are requesting information regarding the cost of developing and providing various supports which will enhance the capacity for evaluation and reporting of outcomes by specific organizations and by the Boards and their administrative staff. These may include data systems, web or webform design, training, and technical assistance. Proposals should include cost information, to be considered complete and responsive.

7. Financial Statements

Respondent must provide a copy of the most recent completed year's audited financial statements (i.e., income statement, balance sheet, and annual report). Respondents comprised of more than one entity must include financial statements for each entity. The CCDDB and CCMHB reserve the right to accept or reject any financial documentation other than the financial statements requested by this section.

8. Legal Actions

Respondent must provide a listing and a brief description of all material legal actions, together with any fines and penalties (i) Respondent or any division, subsidiary, or parent entity of Respondent, or (ii) any member, partner, etc., of Respondent if Respondent is a business entity other than a corporation, has been:

A. A debtor in bankruptcy; or

B. A plaintiff or defendant in a legal action for deficient performance under a contract or violation of a statute or related to service reliability; or

C. A respondent in an administrative action for deficient performance on a project or in violation of a statute or related to service reliability; or

D. A defendant in any criminal action; or

E. A named insured of an insurance policy for which the insured has paid a claim related to deficient performance under a contract or in violation of a statute or related to service reliability; or

F. A principal of a bond for which a surety has provided contract performance or compensation to an obligee of the bond due to deficient performance under a contract or in violation of a statute or related to service reliability; or

G. A defendant or respondent in a governmental inquiry or action regarding accuracy of preparation of financial statements or disclosure documents.

The CCDDB and CCMHB reserve the right to request similar legal action information from Respondent's key personnel members during the evaluation process.

9. Insurance

The Respondent shall describe the types and limits of insurance coverage needed for this project and submit evidence of relevant insurance coverage prior to award of the contract.

Section 4 – Evaluation of Proposals

The members of the CCDDB/CCMHB's Evaluation Committee (EC) for this RFP will include:

1. A member of the Champaign County Developmental Disabilities Board
2. A member of the Champaign County Mental Health Board
3. Associate Director for Intellectual/Developmental Disabilities
4. Associate Director for Mental Health and Substance Use Disorders
5. An Agency representative who has participated in current or previous Evaluation Capacity Building Project activities.

The EC will evaluate proposals and prepare a recommendation to the CCDDB and CCMHB for award of contract(s). The CCDDB and the CCMHB, in their sole discretion, reserve the right to waive all technicalities or irregularities, to reject any or all proposals, including any portion thereof, to award to a single Respondent or to divide the award between Respondents, and to reject all proposals and/or re-solicit in whole or in part. The CCDDB and CCMHB further reserve the right, in their sole discretion, to award a contract to the Respondent (or Respondents) whose proposal best serves the interests of Champaign County.

When an offer appears to contain an error or otherwise where an error is suspected, the circumstances may be investigated, considered, and acted upon. Any action taken shall not prejudice the rights of the public or other offering entities. Where offers are submitted substantially in accordance with the procurement document but are not entirely clear as to intent or to some particular fact or where there are other ambiguities, clarification may be sought and accepted. The purpose of seeking clarification is to better understand the information provided in this document, not to allow additional information to be added.

4-1 Phase I - Preliminary Proposal Assessment

Phase I will involve an assessment of the Respondent's compliance with, and adherence to, all submittal requirements requested in Section 3-2: Required Content of Proposals. Proposals which are incomplete and missing key components necessary to fully evaluate the Proposal will be rejected from further consideration due to "non-responsiveness" and rated Non-Responsive. Proposals providing responses to all sections will be eligible for detailed analysis in Phase II, Proposal Evaluation.

4-2 Phase II - Proposal Evaluation

In Phase II, the EC will evaluate the extent to which a Respondent's Proposal meets the program objectives set forth in the RFP. Phase II will include a detailed analysis of the Respondent's qualifications, experience, proposed implementation plan, cost proposal, and other factors based on the evaluation criteria outlined in Section V - Evaluating Proposals.

As part of the evaluation process, the EC will review the information required by Section 3, for each Proposal received. The EC may also review other information gained by checking references and by investigating the Respondent's financial condition.

The CCDDB and CCMHB reserve the right to seek clarification of any information that is submitted by any Respondent in any portion of its Proposal or to request additional information at any time during the evaluation process. Any material misrepresentation made by a Respondent may void the Proposal and eliminate the Respondent from further consideration.

The CCDDB and CCMHB reserve the right to enlist independent consulting services to assist with the evaluation of all or any portion of the Proposal responses as it deems necessary.

In addition, the EC will review the Respondent's Proposal to determine overall responsiveness and completeness of the Proposal with respect to the components outlined in the RFP using the following criteria (not necessarily listed in order of importance):

A. Professional Competence: Ability to provide the Services described in the RFP, including capacity to achieve the project goals, objectives, and scope of services.
B. Professional Qualifications and Specialized Experience of Respondent and Team with emphasis on specific experience on projects of similar scope and magnitude as outlined in Exhibit 1 - Scope of Services.
C. Past and Current Performance of the Respondent on similar or related projects; any available sources of relevant information concerning the Respondent's record of performance.
D. Professional Qualifications and Specialized Experience of Respondent's Key Personnel and Local Availability of Key Personnel with emphasis on specific experience on Evaluation Capacity Building projects of similar scope and magnitude as outlined in Exhibit 1 - Scope of Services.
E. Quality, Comprehensiveness, and Adequacy of the proposed Implementation Plan including its responsiveness and understanding of the needs of organizations providing services through contracts with the CCMHB or CCDDB. The EC will review each Proposal for the Respondent's understanding of the objectives of the Services and how these may be best accomplished. Each Respondent will be

evaluated on their overall strategy, methodology, and approach to meeting the CCDDB and CCMHB objectives.

F. Schedule of Professional Fees and Expenses relative to details in Exhibit 2.
G. Legal Actions - The EC will consider legal actions, if any, against Respondent and/or any division, subsidiary, or parent company of Respondent, or against any member, partner, etc., of Respondent which is a business entity other than a corporation.
H. Financial Stability – The EC will consider the financial condition of Respondent, which must be financially stable to ensure performance for the contract's duration.
I. Compliance with Laws, Ordinances, and Statutes. The EC will consider Respondent's compliance with all laws, ordinances, and statutes governing the contract.
J. Conflict of Interest – The EC will consider any information regarding Respondent, including information contained in Respondent's Proposal, that may indicate any conflicts, or potential conflicts, of interest which might compromise Respondent's ability to perform the proposed Services or undermine the integrity of the competitive procurement process. If any Respondent has assisted the CCMHB or CCDDB in researching, consulting, advising, drafting, or reviewing this RFP, such Respondent may be disqualified from further consideration.

If there are multiple proposals from fully qualified candidates, the EC will use a simple scoring matrix to identify those which are most thorough and well-aligned.

Section 5 – Selection Process

After the Evaluation Committee (EC) completes its review of Proposals in Phase II, it may identify a recommended short list of Respondents (Phase III) or forego Phase III and submit a recommendation to select one Respondent or make a recommendation to reject all Proposals.

5-1 Phase III - Oral Presentations

If the EC identifies a short list of Respondents for further review, then those Respondents will be invited to appear before the CCDDB and CCMHB and EC for an oral presentation. The purpose of the oral presentation is to clarify in more detail the Respondent's Proposal and to allow the CCDDB and CCMHB and EC to ask Respondent additional questions. Afterwards, the EC will make a final evaluation, including a final ranking of the Respondents, and will submit a recommendation for one Respondent to the CCDDB and CCMHB.

If the CCDDB and CCMHB make a selection, the selection will be forwarded to the Executive Director as authorization to enter into contract negotiations with the selected Respondent.

The CCDDB and CCMHB will require the selected Respondent to participate in contract negotiations. The requirement that the selected Respondent negotiate is not a commitment to award a contract. If the Executive Director determines that it is unable to reach an acceptable contract with the selected Respondent, including failure to agree on a fair and reasonable cost proposal for the Services or any other terms or conditions, the Executive Director is authorized to terminate negotiations with the selected Respondent.

The CCDDB and CCMHB reserve the right to terminate this RFP solicitation at any stage if the EC determines this action to be in the best interest of Champaign County. The receipt of

Proposals or other documents will in no way obligate the CCDDB and CCMHB to enter into any contract of any kind with any party.

Termination of the current RFP will not on its own be the cause for any qualified organization which has submitted an application to be excluded from consideration in a subsequent RFP process.

Section 6 - Additional Details of the Process

6-1 Addenda

If it becomes necessary to revise or expand upon any part of this RFP, an addendum will be sent to all of the prospective Respondents registered with the CCDDB/CCMHB prior to the Proposal due date. Prospective Respondents are automatically listed when they email CCDDB/CCMHB staff, as described in Section 1-2. Each addendum is incorporated as part of the RFP documents, and the prospective Respondent must acknowledge receipt.

The addendum may include, but will not be limited to, responses to questions and requests for clarification sent to the CCDDB/CCMHB Executive Director according to the provisions of Section 1-3 herein.

6-2 CCDDB and CCMHB Rights to Reject Proposals

If no Respondent is selected through this RFP process, the Executive Director may utilize another procurement method which is in the best interests of the County and available to the CCDDB and CCMHB to obtain the Services described herein.

In soliciting proposals, any and all proposals received may be rejected in whole or in part. Basis for rejections shall include, but not be limited to, the following:

- The proposal being deemed unsatisfactory as to quantity, quality, delivery, price, or service offered.
- The proposal not complying with conditions of the solicitation document or with the intent of the proposed contract.
- Lack of competitiveness by reason of collusion or knowledge that reasonably available competition was not received.
- Error in specifications or indication that revision would be to the County's advantage.
- Cancellation or changes in the intended project or other determination that the proposed requirement is no longer needed.
- Regulatory changes.
- Circumstances which prevent determination of the most advantageous proposal.
- Any determination that rejection would be in the best interest of the County.

The CCDDB and CCMHB reserve the right to reject any and all proposals. The CCDDB and CCMHB also reserve the right to cancel this RFP at any time and/or to solicit and re-advertise for other proposals.

6-3 No Liability for Costs

Champaign County, the CCDDB, and the CCMHB are not responsible for costs or damages incurred by Respondents, member(s), partners, subcontractors, or other interested parties in connection with the RFP process, including but not limited to costs associated with preparing the Proposal and/or participating in any conferences, site visits, product/system demonstrations, oral presentations, or negotiations.

Section 7 - Exhibits

7-1 Exhibit 1 – Scope of Services

E1-1 DESCRIPTION OF THE CHAMPAIGN COUNTY "EVALUATION CAPACITY BUILDING" PROJECT

The purpose and goal of this Request for Proposals is to build evaluation capacity of programs funded by the Champaign County Mental Health Board (CCMHB) and the Champaign County Developmental Disabilities Board (CCDDB) and of the Boards themselves. The Boards share a mission to improve the health and well-being of certain Champaign County residents. The mission is primarily accomplished by funding programs aligned with approved goals and priorities. To account for the impact of these efforts, desired outcomes should be identified which align with the benefit sought by the people who are to participate in services, which may be related to behavioral health conditions or intellectual/developmental disability. Measuring this impact, collecting relevant data, data-driven program improvement, and clear reporting can be complicated tasks, particularly for non-profit social service agencies with limited or unpredictable resources. Also of interest are measures of a program's performance and of the larger system's impact. These (and related) should improve our understanding of the most effective service approaches, future funding priorities, and the policies driving them. Clarity about program outcomes allows those involved to build on success and improve the reporting and service systems.

Previous CCMHB/CCDDB-supported Evaluation Capacity Building projects offered activities popular with agencies and resulting in improved outcome reporting to the Boards, increased confidence in use of tools, and greater sense of 'investment' in the results of services. A proposal for Evaluation Capacity Building could describe similar supports, add to agency and Board capacities through new approaches, and include reports to the Boards and agencies. Historical information is described in EXHIBIT 3.

Along with support for identifying and using appropriate models and tools for collecting, measuring, and reporting outcome data, the presentation of data can aid communication with the public regarding the impacts of the Boards' funds. To improve that presentation, tools may be developed and training on their use offered to agency and Board representatives.

Describe how the approach(es) featured in this proposal relate to best practices in the identification of outcomes and the measurement and evaluation of program performance, particularly of services and supports for people with mental health or substance use disorders services or intellectual/developmental disabilities. Indicate whether the results of this project will

likely add to the body of research regarding outcome evaluation and/or improve our understanding of effective services in the treatment of the relevant conditions.

E1-2 SPECIFICATIONS FOR SELECTION OF TARGET PROGRAMS AND OUTREACH

The Respondent shall include a plan for the process of engaging with funded programs.

Intensive support: If the proposal is to include targeted one-on-one support, which can be very effective, the process for selection of target programs should be clear, e.g., it may involve polling of all eligible programs regarding their interest and availability, applying some selection criteria, and seeking input from CCDDB/CCMHB members and staff on final selection. Targeted programs will be expected to assist with year-end presentations related to this engagement. A balance of targeted support is desired, related to the funding sources, ideally such that near 40% of targeted programs are funded by the CCDDB and 60% by the CCMHB.

Support available to all: It may be useful to seek specific information from funded program representatives and/or CCDDB/CCMHB staff to structure activities, identify most useful topics, or refine an approach. If workshops are to be held which are open to all funded programs, address outreach and scheduling for maximum participation along with posting for access to the materials on demand. Another important result of this project may be recommendations to Board staff regarding their requirements and online application and reporting systems.

E1-3 IMPLEMENTATION TIMELINE

The Respondent shall include a specific, detailed timeline which includes all milestones from award to implementation of Evaluation Capacity Building activities.

7-2 Exhibit 2 – Respondent Profile Information

Submit a completed profile information sheet for the Respondent and subcontractors, if applicable, which includes:

1. Legal Name of Business Entity:
2. Name of Chief Executive Officer, Executive Director, Agency Director, or Owner:
3. Doing Business under Other Name(s)?
   If Yes, Name(s):
4. Headquarters Address:
5. City, State, Zip Code:
6. Website:
7. Email Address for Primary Contact:
8. Years of Relevant Experience:
9. List of Related Projects and When Completed:
10. Total Number of Personnel to Implement the Project:
11. License(s) and Services offered:

7-3 Exhibit 3 – Background Information

For more information on the CCDDB and CCMHB, their priorities, policies, and awards, see https://ccmhddbrds.org and https://www.champaigncountyil.gov/mhbddb/mhbddb.php. Meetings are announced and archived at https://www.champaigncountyil.gov/mhbddb/MeetingInfo.php.

Evaluation Capacity Building teams have engaged with funded agencies at their Mental Health and Developmental Disabilities Agencies Council (MHDDAC) meetings as well as in smaller workgroups, seeking input directly. Support activities have included:

- targeted intensive support to a small number of programs;
- quarterly follow-up with previous target programs;
- brief trainings as 'microlearnings' in presentation or video form;
- a "consultation bank" from which any program could request technical assistance;
- an online "measurement bank" or resource repository of evaluation materials; and
- data collection and analysis workshops open to all, in response to agency requests.

Evaluation Capacity Building teams have also met regularly with CCDDB/CCMHB members and staff and offered insights on strategic plans, revisions to application and report forms, standards for reviewing outcomes proposed in agencies' requests for funding, and more.

Evaluation Capacity Building teams have presented annual reports, available for review:

- 2026: Pages 31-50 of the full board meeting packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2026/260527_Meeting/260527_Full_Board_Packet.pdf)
- 2025: Pages 104-120 of the full board meeting packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2025/250521_Meeting/250521_Full_Board_Packet.pdf)
- 2024: Pages 146-210 of the full board meeting packet posted here (https://www.champaigncountyil.gov/MHBDDB/agendas/mhb/2024/240612_Meeting/240612_Full_Board_Packet.pdf)
- 2022: Pages 15-51 of the full board meeting packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2022/220921_Meeting/220921_Agenda.pdf) and addendum posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2022/220921_Meeting/220921_Addendum.pdf)
- 2021: Full report posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2021/210922_Meeting/210922_Year6%20Final%20Report%20Building%20Evaluation%20Capacity%20for%20Programs_FY_21_8_11_21%20with%20Appendices_FINAL.pdf)

- 2020: Full report posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2020/200923_Meeting/200923_Evaluation_Capacity_Building_Board_Update.pdf)
- 2019: Pages 4-77 of the full board meeting packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2019/190918_Meeting/190918_agendafull.pdf)
- 2018: Full report posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2018/180912_Study_Session/180912_Building%20Evaluation%20Capacity_Yr%203%20report_091418%20.pdf)
- 2017: Pages 4-90 of the full board meeting packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2017/170920_Meeting/170920_Agendafull.pdf)
- 2016: Full report posted here (https://www.champaigncountyil.gov/mhbddb/agendas/mhb/2016/160622_Meeting/160622mhbhandout.pdf)

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

BRIEFING MEMORANDUM

DATE: July 22, 2026
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Three Year Plan, Funding Priorities, and Application Process

Background

This memorandum sets the stage for evaluating and planning Champaign County's supports and services for residents who have Mental Illness (MI), Substance Use Disorders (SUD), or Intellectual and Developmental Disabilities (I/DD). During the fall, the Board establishes priorities and decision support criteria for Program Year 2028 (July 1, 2027 to June 30, 2028) and updates its Three-Year Plan Objectives and Tactics for Fiscal Year 2027 (January 1 to December 31, 2027). Current and recent results of funded programs and understanding of the changing larger context will contribute to this process.

From 2018 to 2025, CCMHB staff collaborated formally with organizations with similar responsibilities to complete community health needs assessments and plans, every three years for some and five years for others. Combined efforts continue less formally, with partners from Champaign-Urbana Public Health District, Champaign County Community Coalition, United Way of Champaign County, and others, to improve our understanding of the needs of residents, as well as of the resources available to them.

The community health needs assessment survey, focus groups, and public hearings were completed in 2024, and results compiled. In 2025, community members reviewed the findings and selected priorities for workgroups: Healthy Behaviors and Wellness; Violence Prevention: Behavioral Health; and Access to Healthcare. Workgroups are open to the public, initially identifying strategies and now addressing them. Our staff attend these as possible, since many efforts align with CCMHB mission. The full shared community health plan is posted here (https://www.c-uphd.org/images/admin/iplan/Champaign-County-IPLAN-2026-2031.pdf).

In 2023, 2024, and 2025, the CCMHB and Champaign County Developmental Disabilities Board (CCDDB) held study sessions to learn from I/DD advocates about their experience with resources, access, and areas for improvement. Their comments and survey results were incorporated into annual funding priorities for both Boards. Additional study sessions in the last two years, along with brief survey results, added perspectives of people with justice involvement or housing instability, immigrants and

refugees, and members of LGBTQIA+ communities, all of whom may be impacted by planning and funding decisions.

Board and staff members participate in various community-wide planning efforts. During 2026, there is increased focus on housing instability, youth mental health, crisis response, and the impacts of violence, all of which relate to longstanding priority categories of the CCMHB. Through the highly competitive funding allocation process of this spring, applicants provided information about the needs they see and how they would use funding to meet those needs. Many applications not funded due to affordability contributed key insights.

CCMHB Three-Year Plan Goals, 2026-2028

The full Three-Year Plan with 2026 objectives and tactics is posted here (https://www.champaigncountyil.gov/mhbddb/PDFS/MHB_3YR_Plan_2026-2028_w_FY26.pdf).

PURPOSE #1: PLANNING

Strategy: The people most directly affected by our work should influence it.

This strategy is advanced by four goals and several tactics and objectives, many of which are met and may continue to be relevant. Some will be completed during the priorities-setting process this fall.

The first goal, to understand needs and preferences of adults, has objectives for inviting direct input from people with MI, SUD, I/DD, at each meeting, reaching out to people for such input prior to each meeting, hosting a presentation by people with MI, SUD, or I/DD, and summarizing state-level or other data.

The second goal is to understand needs and preferences of youth by: participating in the Transition Planning Committee, direct information from students, families, school districts, and providers, and reviewing data reported by funded programs, the Illinois Youth Survey, and local collaborations.

Third, to understand needs of young children, seek input from: Early Childhood Home Visiting Consortium partners; Region 9 Birth to Five Council or similar collaboration; United Way and other local funders; and the Local Interagency Council.

The fourth goal is engagement with family support and advocacy organizations. Objectives include: input from local family support organizations and networks; feedback about family support organization activities to understand services and who is reached; and participation in statewide networks which include families and other supporters.

STRATEGY: Clarify current challenges and opportunities.

This strategy includes a goal for identifying service gaps or barriers and one for understanding best practices and promising practices.

Each goal has objectives/tactics likely to be met and to remain relevant in 2027, including:

- Comparing County Health Rankings data for our county with State and US.
- Discussions of the Transition Planning Committee and Health Plan Priority workgroups and presentations they each host.
- Understanding state and federal policies, best practices, and possible pay sources, through trade associations, funders, state officials, and other experts.
- Tracking class action cases, such as the Ligas Consent Decree, and changes in Medicaid waivers and Managed Care.
- Identifying appropriate practice models for implementation.

STRATEGY: Learn from the most recently completed allocation cycle.

The single goal is to use funded program results to determine whether service capacity and delivery will meet future needs and preferences. One objective is staff summaries of the data reported by funded programs. The other is to invite related public input.

Purpose #2: Allocation

STRATEGY: Fund a range of community-based supports and services to meet the needs and preferences of people with MI, SUD, other behavioral health issues, and/or I/DD.

This strategy has two goals and a total of nine objectives/tactics related to the allocation process, content, and timeline. These identify staff and board responsibilities for the complete allocation process and occupy a majority of time and attention. All are likely to be met and to remain relevant for 2027.

STRATEGY: Through existing collaborations, increase the impact of funding.

This strategy has three goals, with a total of eleven objectives/tactics.

The first goal encourages high-quality, person-centered, culturally responsive services. The tactics relate to personal agency, conflict-free case management, cultural and linguistic competence planning, and outcomes chosen by the people served.

The second goal calls for coordination between the CCMHB and CCDDB. Objectives relate to the approved funding priorities as well as the I/DD Special Initiatives Fund. If the latter fund is discontinued, the objective for its use will also be.

Third is a goal for participating in other collaborations across public and private entities. Objectives will be met and likely continue, as they relate to groups concerned with justice system deflection, reentry from incarceration, child-serving system of care principles, and comparison of priorities with other local funders.

Purpose #3: Access to Resources

STRATEGY: Increase community awareness of available local resources.

This strategy is advanced by two goals, with seven total objectives.

The first is to improve resource visibility through accessible, user-friendly information about community supports, services, and other resources. Three objectives include:

- learning more about plain language best practice;
- working with other government units on accessibility, which we have done a great deal of and might continue; and
- promoting information services such as 211, BEACON, and the Expo guide.

All of these objectives could be continued, as people are still not easily finding the information they want.

A second goal is to increase the community's support for people with lived experience and those closest to them. This is supported by four objectives/tactics, all met or likely to be met and continued:

- promotion of anti-stigma events and messages;
- 'storytelling' support;
- publicly posted details on funded programs; and
- publicly posted year end reports on programs funded during Program Year 2026 or earlier.

STRATEGY: Ensure that community-based supports/services are coordinated and accessible.

Two goals support this strategy, each with several objectives and tactics.

The first is to identify opportunities for providers of similar services to coordinate their efforts and partner for best value to Champaign County residents. Funded agencies are required to participate in certain collaborations, depending on their focus, such as:

- Mental Health and Developmental Disabilities Agency Council (MHDDAC),
- Transition Planning Committee,
- SOFFT/LAN,
- Rantoul Service Providers,
- Continuum of Providers of Services to the Homeless,
- Champaign County Community Coalition Goal meetings,
- Youth Assessment Center Steering Committee,
- Crisis Intervention Team Steering Committee, and
- Community resource and awareness events.

The second is to develop and encourage cross-system and other partnerships which will reduce barriers experienced by people who have behavioral health conditions and/or I/DD. This is pursued through Board and staff participation in Metropolitan Intergovernmental Council, Champaign County Community Coalition Executive Committee, Crisis Intervention Team and Problem Solving Courts Steering Committees, and Community Health Plan workgroups for the priorities of Access to Healthcare, Behavioral Health, Preventing Violence, and Healthy Behaviors.

Purpose #4: System Advocacy

STRATEGY: Promote improved quality of life for people with MI, SUD, and/or I/DD.

There are three goals for this strategy, each with several objectives and tactics which are likely to remain relevant.

The first goal is to advocate for flexible, person-centered, healing-focused, high-quality support/service options for people who have behavioral health and/or developmental disability support needs. Objectives to support this include Board and staff involvement in state and national trade association committees and similar. Focus areas are:

- People eligible for but not receiving care through Medicaid or other state programs, as well as those who are eligible and covered but receiving care that does not meet their needs, advocate for the state to offer flexible options.
- Coordination with people who have behavioral health conditions or I/DD, along with their families and supporters, advocate for workforce development and stabilization.
- Statewide system redesign efforts, including Engage Illinois (I/DD), CESSA Regional Advisory Council (crisis response), and support the Illinois Children's Behavioral Health Transformation Initiative (children).
- Greater inclusion of people with MI, SUD, or I/DD in all systems.

A second goal is to improve understanding of MI, SUD, and/or I/DD through family or peer support organizations, especially those led by people with lived experience. Objectives are to promote or cosponsor group's efforts and to offer trainings on improving outreach and engagement.

The third goal calls for involvement with state agencies and other organizations with an interest in behavioral health or developmental disabilities. This might be accomplished through meetings or other communications with:

- Illinois Department of Human Services - Division of Developmental Disabilities,
- Illinois Department of Human Services - Division of Behavioral Health and Recovery,
- Illinois Criminal Justice Information Authority, and
- Illinois Department of Healthcare and Family Services.

STRATEGY: Promote inclusion and respect of people with MI, SUD, or I/DD.

Three goals support this strategy.

The first is to use broad community education efforts to promote inclusion and challenge stigma by:

- Hosting an Expo or similar event (likely not met during 2026);
- Hosting an event through Alliance for Inclusion and Respect, sharing partners' anti-stigma messages and supporting entrepreneurs who have disabilities (already completed); and
- Partnering on a student project with inclusion focus (an appropriate match has not presented this year).

The second goal is to support other community education initiatives (completed):

- Participate in other local resource fairs and similar community events. Share the disAbility Resource Expo comprehensive resource directory.
- Offer educational opportunities for service providers and interested parties, to enhance their work and meet continuing education requirements.
- Promote/advertise other organizations' similar efforts.

The third goal regards people with lived experience participating fully in the community. Objectives/tactics are to emphasize inclusion as a benefit to all members of the community (through documents and in meetings of the Board or collaborators) and to support people in meaningful work and non-work experiences in their community (through allocation priorities and funded services).

Purpose #5: Evaluation

STRATEGY: Learn from utilization and outcome reports from funded programs.

Three goals advance this strategy. The first is to review submitted agency reports for current and prior periods to understand utilization, impacts, and areas for improvement; three objectives relate to specific types of report, for comparison of outcomes, outreach, and cultural and linguistic competence.

The second relates to transparency in process and accountability for results, encouraging public input and making information accessible to the public. One objective is for a publicly posted aggregate funded program performance outcome report, and the other is for a summary of program utilization and related results.

The third goal is to use these prior year results for planning the next year of objectives and priorities, tying back to Purpose #1: Planning. Objectives and tactics will likely be met this fall:

- Use Board and public input regarding program results to update allocation priorities and Three-Year Plan objectives/tactics.

- Compare funded program results with results of planning activities and propose changes which will strengthen results of PY2028 allocations.
- Where advocacy, community awareness, or collaborations outside of the scope of agency allocations will strengthen results, propose relevant Three-Year Plan one-year objectives and tactics for 2027.

STRATEGY: Contribute to the community's evaluation capacity.

This strategy has one goal related to Evaluation Capacity, with four objectives which have been or will be met. Given that the contract for evaluation support from UIUC Family Resiliency Center ends April 30, 2027, with a Request for Proposals set to determine the next phase, new objectives will be appropriate.

STRATEGY: Assessment of the Organization

This strategy has one goal, to ensure that internal operations support fulfillment of the Board's mission and vision.

An objective for completing an organizational assessment will be met, and a final report on this project will be presented to the Board in the fall.

A second objective, for Board member topics to explore as 'strategic questions' is met but should continue. Many of these topics lead to useful student projects or longer-term staff activities, as time and budget permit.

A third objective relates to provisions of the Community Mental Health Act, as we continue to have conversations with Mental Health Boards around the state regarding how provisions impact them.

Program Year 2027 CCMHB Priorities

The approved Program Year 2027 Funding Priorities document is posted here (https://www.champaigncountyil.gov/mhbddb/PDFS/MHB%20Funding%20Priorities%20for%20PY2027.pdf).

The current priority categories are similar to those used in prior years, intending to cover a range from prevention to crisis response and postvention, to improve access to other services, and to fill gaps in the larger publicly funded care systems. Some of the particular needs of Champaign County residents have been consistent over several years but others are emerging as the operating environment shifts. Best practice models and stability across the system are also emphasized.

Allocation decisions for Program Year 2027 are summarized in the document posted here (https://www.champaigncountyil.gov/mhbddb/PDFS/CCMHB_DMemo_PY27_Allocations.pdf).

Information about all programs funded for Program Year 2027 is posted on this webpage (https://ccmhddbrds.org/ords/f?p=189:10::::::).

PRIORITY: Strengthening the Behavioral Health Workforce

While no proposal selected this as the sole priority, some addressed it by increasing certain professional staff salaries to more competitive levels.

PRIORITY: Safety and Crisis Stabilization

Nine programs through six agencies, totaling $1,341,141.

CC Health Care Consumers – Justice Involved CHW - $103,284
CCRPC – Homeless Services System Coord - $189,007
CCRPC – Youth Assessment Center - $76,350
CU at Home – Shelter Case Management - $295,000
FirstFollowers – FirstSteps Reentry House - $69,500
FirstFollowers – Peer Mentoring for Re-entry - $90,000
Rosecrance Central Illinois – Recovery Home - $125,000
WIN Recovery – Community Support ReEntry - $183,000
WIN Recovery – Resource Center (NEW) - $210,000

PRIORITY: Healing from Violence and Trauma

Four programs through three agencies, totaling $544,707.

CC Children's Advocacy Center – CCCAC - $63,911
Courage Connection – Courage Connection - $176,476
RACES – Sexual Trauma Therapy - $196,205
RACES – Sexual Violence Prevention - $108,115

PRIORITY: Access and Care

Thirteen programs through nine agencies, totaling $1,944,618.

CCCHC – Mental Health Care at CCCHC - $100,000
CC Health Care Consumers – CHW Outreach and Benefit - $97,139
CC Health Care Consumers – Disability Application Services - $121,000
CSCNCC – Resource Connection - $70,667
Family Service of Champaign County – Counseling - $143,322
Family Service of Champaign County – Self-Help Center - $38,191
Family Service of Champaign County – Sr Counseling & Advocacy - $214,360
GCAP – Advocacy, Care, and Education - $113,878
GROW in Illinois – Peer-Support - $179,805
Immigrant Services of CU – Immigrant Mental Health - $200,256
Promise Healthcare – Mental Health Services - $360,000
Promise Healthcare – PHC Wellness - $125,000

Rosecrance Central Illinois – Benefits Case Management - $181,000

PRIORITY: Thriving Children, Youth, and Families

Ten programs through seven agencies, totaling $1,764,595.

CC Head Start – Early Childhood Mental Health – MH portion is $165,699
CU Early – CU Early – MH portion is $69,201
Crisis Nursery – Beyond Blue - $90,000
Cunningham Children's Home – ECHO Housing & Employment - $264,351
Cunningham Children's Home – Families Stronger Together - $298,532
Don Moyer Boys & Girls Club – CU Change - $94,135
Don Moyer Boys & Girls Club – Coalition Summer Initiatives - $100,000
ECIRMAC/The Refugee Center – Family Support and Strengthening - $75,441
Uniting Pride – Children, Youth, & Families - $225,056
Urbana Neighborhood Connections – Community Study Center - $382,180

PRIORITY: Collaboration with CCDDB: Young Children and their Families

Three programs through three agencies, totaling $964,863. This amount is adjusted to remove the cost of non-DD services covered in two of the three contracts.

CC Head Start – Early Childhood Mental Health – DD portion is $245,363
CU Early – CU Early – DD portion is $17,500
DSC Family Development (all DD) - $702,000

Application Process

A timeline is posted on this webpage and includes meeting dates and broad topics related to developing priorities, inviting applications for funding, reviewing submitted applications, and considering recommendations for awards. This timeline has been developed to allow for adequate public notice, clarity on when agencies apply for funding (and when related reports are due), time for staff review and board consideration, and development of contracts for services. Adjustments are made to forms and instructions.

For the last three program year applications, the system was opened earlier than usual, giving agencies additional time to complete requirements. For Program Year 2027, to improve the review processes which follow submission of proposals for, the open application period ended a few days earlier. We suspect this will be helpful for the next cycle as well. The Board meeting schedule itself may shift for practical reasons, impacting some activities on the timeline.

Next Steps

This fall, the Board will review draft 2027 objectives and tactics updating the Three Year Plan for 2026-2028. This initial draft will be distributed to providers and stakeholders for input, and a final draft presented in November for board consideration. No change is suggested to this process.

The Board will also review a draft document of priorities for funding for Program Year 2028. Feedback from stakeholders and Board members will contribute to the final draft and subsequent planning activities. If a final draft is approved in November, the application process can begin in late December. If discussion or substantial revisions are needed beyond November, the Board may call a special meeting or study session. CCDDB and CCMHB members are welcome to join each other's meetings and may be especially interested in discussions of the other's funding priorities. No change is suggested to this process.

Some modifications of the online registration and application system require assistance from the system's developer, and others are completed by staff. Many are completed after the priorities have been finalized and before the system 'goes live' for applicants to use. For example, we will update application forms and instructions to match Program Year 2028 timelines and to capture any improvements or content revisions to forms. Some modifications have already been made, such as the annual Performance Outcomes Report, now built into the system, making it more compliant with accessibility standards and incorporating suggestions from agencies and the evaluation capacity building team. Following testing, instructions were updated, and agencies will be able to use the new form this year.

The Board might modify its process for reviewing applications. If a new process were defined in advance, staff could support it with a different timeline or materials. Advance notice helps applicants understand what will be expected and how decisions will be made. For example, early in the process, applicants might briefly introduce their requests and if the Board had questions about specific agencies or proposed programs early in the process, these could be asked and answered prior to the April full reviews. Board members could use early information to develop questions for their formal reviews or advise improvements to the CCMHB staff review. Other changes have been suggested which would not alter the timeline but might require different support from staff.

Members of the public or agency representatives may suggest changes in the application or review processes. Opportunities to do so include during agency or public input at Board meetings or study sessoins or through the Evaluation team or CCMHB staff.

Kim Bowdry,

Associate Director for Intellectual & Developmental Disabilities

Staff Report – June & July 2026

CCDDB/CCMHB/IDDSI:

Program Year 2027 Special Provisions were finalized in late May for each Program Year 2027 contract. I also reviewed and worked with other staff to finalize the 'Pre-Contract Checklist' for Program Year 2027.

After the completion of May Board meetings, emails were sent to each agency that applied for Program Year 2027 funding. These emails informed agencies of the Boards' decisions and any revisions and/or pre-contract requirements that needed to be completed before issuing contracts. Program Year 2027 application forms which required revisions were opened in the CCDDB/CCMHB Online Application and Reporting System. Draft Program Year 2027 contracts were developed and attached to the agency award emails with the Pre-Contract Checklist. Application revisions were reviewed upon completion to confirm that requirements were met.

Contracts were sent for signature, via Adobe Sign, in June. Completed contracts were printed and saved for contract files. Pre-Contracts checklists, Letters of Engagement, for agency audits, and Certificates of Liability Insurance were also printed and saved.

I created electronic contract files for each CCDDB funded agency. Many of the items listed above were also uploaded into the Compliance Section of the Online Reporting System. I updated the Compliance Dashboard requirements for Program Year 2027 prior to uploading agency documents.

Program Year 2026 4th Quarter programs were cloned in preparation for Program Year 2027 reporting. The cloning of Program Year 2026 4th Quarter Programs creates the Program Year 2027 1st Quarter programs for data entry into the Online Claims system. This requires creating each program for Program Year 2027 and then setting up the claims options and associating them for each program.

I participated in monthly meetings with CCDDB/CCMHB staff and staff from the Family Resiliency Center, related to the Evaluation Capacity project. I also participated in Meet & Greets with three candidates for an employment opportunity with the Family Resiliency Center.

A new Annual Performance Outcome Report was created for Program Year 2026 reporting with input from the Family Resiliency Center team. I worked with the Online Application and Reporting System Developer to create two templates in the Online Application and Reporting System for the Annual Performance Outcome Report. I also developed written instructions for agency users to use when completing the reports. I emailed the instructions to agency staff and posted the document as a Downloadable File for agency users to access in the Online Application and Reporting System.

I added captions to the June CCDDB meeting and uploaded the recording to the CCDDB/CCMHB YouTube Channel. Please visit the CCDDB/CCMHB YouTube Channel to view the recordings (http://www.youtube.com/@champaigncountymhbandddb).

I created the CCDDB/CCMHB Newsletters for June and July. The August Newsletter is in progress and will be sent out in early August. You can sign up for the CCDDB/CCMHB newsletter here.

I met with representatives from CCRPC – Community Services Division and Chris Wilson, Financial Manager, regarding clarifications related to the completion of financial forms in the CCDDB/CCMHB Online Application and Reporting System.

I participated in two Organizational Assessment meetings.

Illinois Department of Human Services - Division of Developmental Disabilities IDHS-DDD:

The final Fiscal Year 27 budget included a $.60/hour Direct Support Professional (DSP) wage increase, raising the state reimbursement for wages to $21.90/hour (146% of Illinois' minimum wage).

Contract Amendments:

N/A

Learning Opportunities:

Leading with Compassion and Empathy was held on July 15, 2026, from 9:30-10:30 AM at the Champaign Public Library.

Making Strategic Decisions is scheduled for September 16, 2026, from 9:30-10:30 at the Champaign Public Library. This Leadership Training Series is a collaboration of CCDDB/CCMHB, the Illinois Leadership Center, UIUC School of Social Work, Community Foundation of East Central Illinois, and United Way of Champaign County.

Please register here to join (https://socialwork.illinois.edu/2026/02/03/foundations-of-effective-leadership-training-series/).

DISABILITY Resource Expo:

In late May, I mailed the acrylic awards and a letter to Allison and Dylan Boot. An Annual Award in Barb Bressner's memory is being planned, please see the "Update on 2026 Anti-Stigma Activities and Requests for 2027" Decision Memorandum included in July Board packets for more details.

In early June, I went to the Expo Storage Facility to get more Expo Resource Books. The Expo Resource Books were delivered to CCRPC (Developmental Disabilities Program) and Community Choices. CCRPC and Community Choices shared Expo Resource Books at their tables at the Well Experience's Juneteenth Celebration and Community Choices also shared Expo Resource Books at the MLK Jettie Rhodes Day Celebration in late June.

Mental Health and Developmental Disabilities Agencies Council (MHDDAC):

I participated in the May MHDDAC meeting. There were no presentations during the May meeting, however agency representatives were given time to share agency updates. The June MHDDAC meeting was held in person at the Champaign Public Library. Rachel Jackson from the Family Resiliency Center provided an Evaluation Plan workshop. Several agency representatives were in attendance for the presentation. The MHDDAC does not meet during July. The next MHDDAC meeting is scheduled for August 25, 2026.

Association of Community Mental Health Authorities of Illinois (ACMHAI):

I participated in the June and July ACMHAI Executive Committee meetings. The I/DD Committee hosted a presentation on the I/DD Navigator Program at its July meeting. I also provided an I/DD Committee update for the ACMHAI Membership and Business Meeting scheduled for early August. I plan to attend the Membership and Business Meetings.

National Association for County Behavioral Health and Developmental Disability Directors (NACBHDD):

I participated in the I/DD Committee meeting on July 14, 2026.

Human Services Council (HSC):

N/A

Champaign County Transition Planning Committee (TPC):

The TPC will resume meetings in September. The TPC has an Ice Cream Social planned for August.

Champaign County Community Coalition Race Relations Subcommittee:

The 4th Annual Black Mental Health and Wellness Conference is scheduled for September 26, 2026. More information will be shared as it becomes available.

Other:

I participated in webinars related to Office of Management and Budget's proposed changes to Uniform Guidance and Department of Justice threats to Olmstead and community living.

Leon Bryson, Associate Director for Mental Health & Substance Use Disorders, Staff Report-July 2026

Following the May Board meetings, each agency that was approved for PY27 funding was notified by email. These emails communicated the Boards' decisions, as well as any revisions or pre-contract conditions that needed to be performed prior to contract issuance. The deadline for agency applications and contract revisions was June 16th. A few agencies needed reminders to amend their PY27 forms before getting their contract. At the time of writing, there are two outstanding contracts to be issued due to the agency's necessity to update their financial forms. Emails were also addressed to agencies that were not approved for funding, encouraging them to attend the CCMHDDAC meetings to learn more about the system of care alongside our funded agencies. Agency Independent Audits, Reviews, or Compilations were due on June 30th and only applied to those with a calendar fiscal year.

Contract Amendment: The Board President and Executive Director approved Champaign County Christian Health Center's contract amendment, which reduced the PY2026 total contract amount and increased the PY2027 total contract amount. This approval is to fund a mental health practitioner from July 1, 2026 to June 30, 2027.

ACMHAI Committee Meetings: The next I/DD committee is scheduled for July 14th via zoom.

CCMHDDAC Meeting: The meeting was held at the Champaign Public Library where committee members provided updates.

CIT Steering Committee: The next committee meeting is scheduled for August 5th at the Bennett Building.

Continuum of Service Providers to the Homeless (CSPH): Committee members heard presentations from the Habitat Director on their services, as well as one from the LGBTQ+ Committee, which was led by Nathan and Danielle. We received updates on the CoC NOFO from CCRPC's Mikayla Miller and Lisa Benson. The local competition began on July 1, 2026, and agencies can apply. The committee still requires 2-4 members for the R&R Panel to review the applications. The next meeting is scheduled on August 4th from 3-430pm at the Martens Center in Champaign.

Evaluation Capacity Committee Team: In June, the Evaluation Capacity Team hosted a session titled "What's the Plan? After the CCMHDDAC meeting, there was a hands-on evaluation plan training for local agencies at the Champaign Public Library. The turnout was outstanding, with several of our agencies actively participating. Drs. Jacinda and Rachel did an excellent job of organizing the workshop, which illustrated the usage of the program logic model as well as a series of evaluation questions for assessing agency programs. Office hours are offered for agencies who want technical support.

Rantoul Service Provider's Meeting: An email was sent to agencies outlining the purpose of the group: to discuss agency updates on services as well as any gaps in services, service barriers, or

problems. The committee is currently undergoing changes, with Tasha Brasher from the Rantoul Police Department 4U Rantoul and Cindy Crawford from CSCNCC taking on co-leadership. The committee would like each agency (even if they have done it before) to provide an agency presentation, as we now have numerous new agencies in the group. Cindy will start off our July 20th meeting with a presentation about the Community Service Center, followed by a regular meeting. Tasha will give a presentation on 4U Rantoul in August.

SOFTT/LANS Meeting: The committee will not meet in July but will reconvene as a group in August.

Other Activities: In late June, Chris Wilson and I met with GROW staff and assisted them with the revision of their financial forms.

Executive Director's Report

Lynn Canfield, July 2026

Activities of Staff and Board Members:

(Supporting each Board's Three Year Plan Purposes 1-5)

Much attention has been on the allocation of funds through contracts with agencies providing services and supports. Using allocation priorities approved in late 2025 by each Board, we updated application forms and opened the online application system from late December through early February. Then through May, staff and board members reviewed each request for funding and weighed the many options presented. While each board has not denied so much funding in many years, neither has ever approved so much funding either. Although the decision process was very difficult, it was heartening to read so many offers to do great things for other people. Since May, we have developed and finalized contracts as awarded by the Boards.

These agency allocations appear in each Board's budget as Contributions & Grants, the largest expense category and the clearest expression of each Board's mission. Some smaller costs for non-agency activities also support individuals, families, agencies, and community. These have included our annual disability Resource Expo, anti-stigma film and art sponsorship, educational opportunities, evaluation support, and training activities, with costs rolled into Personnel, Professional Services, Public Relations, Advertising, Books, Printing, Rental, Non-Employee Training, Food, and non-Food Supply expense lines. Determining what will be affordable for 2027 depends on projections of property tax revenues and operational costs. Input from stakeholders, staff, and board members will shape future community awareness efforts. In July, the Boards will be asked to review and approve initial 2027 budgets, based on the information available at that time. Initial approved 2027 budgets will be shared during the County's review of all funds. If there are updated projections or items related to our organizational assessment, each Board will be asked to consider subsequent budget revisions.

Although we haven't done so yet, this can be a great season for discussing any aspects of the application-to-award process which could and should be improved for the next time around. Time permitting, it could be a topic for July Board meeting discussions.

Anti-Stigma and Community Awareness:

(Supporting each Board's Three Year Plan Purposes 3 and 4)

Alliance for Inclusion and Respect (AIR):

AIR social media and website feature anti-stigma messaging and promotion of organizational members and local artists/entrepreneurs with lived experience. AIR sponsored an 'anti-stigma' film, "Charliebird" and art shows during Roger Ebert's final Film Festival. Since the festival, we have focused on updating the website for ADA compliance, and I've gotten feedback that some AIR members would like us to continue supporting art shows and film screenings. I will talk with the organizers of newer festivals about possibilities.

Resource Information:

211 offers call-based information services. United Way, CCMHB, and CCDDB co-fund this service. The Boards pay $2,000 (total) annually from 2026 - 2029. This service aspires to be comprehensive, which depends on reliable information from providers, who can become overwhelmed with such updates. The state has launched BEACON, web-based resource information specific to children's services. We maintain the Expo online searchable directory and paper resource book. Many agencies develop resource lists specific to the needs and experiences of the people they serve.

disABILITY Resource Expo:

A large in person event will not be held during 2026. For now, we are participating in other community resource fairs and distributing the resource book as opportunities arise. Allison and Dylan Boot, who coordinated the annual events for several years, were sent formal recognitions. We are planning a similar acknowledgement for the family of Barbara Bressner, the original coordinator. After her passing, our planning group lost momentum despite several initial ideas.

I/DD Special Initiatives Fund:

(Supports each Board's Three Year Plan Goals 2.3 and 2.4)

This fund has focused on individuals with I/DD and complex support needs. In recent years, its only revenue has come from interest income and fund balance. A small amount is held in trust for one person who lives in a CILA home so that his parents may purchase items to help him stabilize and thrive there. For 2027, the remaining fund balance could be split and transferred back to each Board, as they continue to prioritize funding for services for people with I/DD.

Support for Agency Programs:

(Supports each Board's Three Year Plan Goals 2.3, 3.1, 3.3, 4.2, 4.5, 5.3, and 5.4)

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, Problem Solving Court Steering Committee, Local Funders Group, Local Interagency Council, MH and DD Agencies Council, SOFFT/LANS, Transition Planning Committee, Youth Assessment Center Advisory Committee (Kim Bowdry, Leon Bryson, Shandra Summerville, or myself).
- Provider Learning Opportunities, free of charge and offering CEUs, for case managers and other interested parties. Several of the 2026 opportunities are co-sponsored by UIUC School of Social Work and Leadership Center (Kim Bowdry).
- Meetings with Family Resiliency Center team monthly for updates and planning on the Evaluation Capacity Project. Researchers offered suggestions for how we might improve the Performance Outcome Report (Kim Bowdry, Leon Bryson, and myself).

Independent Contractors:

- EMK maintains the online application and reporting system, developing enhancements upon request, and offering technical support for users.
- ChrispMedia maintains our Expo and AIR websites. Updates are still in progress.
- Falling Leaf Productions reviews our public-facing sites for accessibility. All of these contractors have provided additional services during 2026 to improve ADA compliance and ease of use. New webpages have been added to the EMK system (https://ccmhddbrds.org) to replace various PDFs. One of these is the year-end agency Performance Outcome Report, which was also revised with input from the Evaluation Capacity Building research team.
- John Brusveen, CPA, reviews agency annual audits, compilations, and financial reviews, summarizing any findings and supporting our understanding of processes.

Executive Director Activities:

It is easy to lose track of the many meetings and activities we engage with or convene. In addition to collaborations described above and below, many of my own activities lead to Board packet materials. Others are day to day such as reviewing and directing reports and other information, maintaining systems, considering unique questions raised by agencies and partners, preparing and posting information for public access, planning meetings, reevaluating processes, following up on audits, etc. These regular activities typically involve other team members as well. As noted during Board meetings, we have been determined to improve the accessibility of

documents and websites. I attend many webinars and discussions about ADA compliance and try to apply what I am learning, even though there seems to be so much more to learn.

Intergovernmental/Interagency Collaborations:

(Supports each Board's Three Year Plan Goals 1.2, 1.3, 1.5, 2.5, 3.4, and 5.3)

Beyond Borders: Global Mental Health Research and Services Conference:

Under the direction of Dr. Flora Cohen, university and community partners are planning the second annual conference for early October. This year's event will be virtual. Eight proposals for sessions have been submitted, and the deadline extended to June 30. In July, the group will select presentations for up to six sessions, most of which will offer CEUs. (Shandra Summerville has joined this planning effort.)

Metropolitan Intergovernmental Council:

Local government representatives meet on topics of interest. In October, I presented to the group on the 988 Crisis and Suicide Lifeline; another member of the group offered important cautions about these and other crisis response services, which I have shared with other planning groups since then. In February, the Cunningham Township Supervisor and City of Champaign Township Supervisor presented data on emergency shelter needs, housing instability, and the launch of county-wide assessment activities toward a new strategic plan to end homelessness. Our July meeting will include the new Chancellor, to discuss the work of various partners in relation to the University.

Student Mental Health Community of Practice at the University of Illinois:

MHB President McLay and I attend monthly meetings. We are taking a break for the season.

Illinois Leads Strategic Plan Development:

On April 7, I attended a planning session of the Chancellor's Illinois Leads Strategic Plan. Roundtable discussions among familiar stakeholders actually did lead to some new insights. Many of us raised concerns about persistent or urgent community threats such as violence, limited housing options, funding for safety net systems, the unmet needs of young residents, prevalence of mental health and substance use, and barriers to access.

UIUC Student Projects:

Through Family Resiliency Center and Community Learning Lab meetings and emails, I have heard and shared ideas for student projects which could be meaningful to both the students and

the community. Although the summer is a fine time for us to host a project directly, ours were not chosen. I am hopeful for support during the fall, especially on work related to non-profit accounting and audits and on planning for new anti-stigma activities.

Partnerships Related to Underrepresented Populations or Justice System:

(Suppports each Board's Three Year Plan Goals 1.2, 2.5, and 3.4)

Alternative Response Task Force:

I have attended all scheduled discussions of this stakeholder group, to support the City of Urbana's co-response system. These tend to be monthly meetings and occasional listening sessions. The comments of others have helped me understand what people are looking for as well as what's working and not working. A majority of the City's crisis calls are for conflict resolution or lift assist, both important but not necessarily requiring immediate police or mental health professional responses.

Champaign County Community Coalition:

The Executive Committee convened in April to discuss summer programming for children and youth, in light of rising gun violence. The group maintains its interest in improving housing stability across the community as well. Goal Teams meetings are held monthly, with broad public participation, but I am often unable to attend.

Community Emergency Supports and Services Act (CESSA) Region 6 Advisory Committee:

At these monthly public meetings, the focus has been on learning from the pilot communities, developing subregional advisory groups, implementing a dispatch protocol, and clarifying the roles of first responders from law enforcement and behavioral health in advance of full implementation of CESSA by July 1, 2027. Our region's committee has only one co-chair and often struggles to achieve quorum. During the spring, Urbana Police Deputy Chief Mikalik presented to the group, impressing the State's consultant, Dr. Brenda Hampton, so much that he was then asked to present at the Statewide Advisory Committee Conference. I am certain Dr. Hampton will also appreciate behavioral health crisis response efforts of the City of Champaign, which we are scheduled to learn about at our August meeting, from Dr. Regina Parnell.

Continuum of Care:

The Champaign County Continuum of Care, also known as the Continuum of Providers of Services to the Homeless, has been conducting a new strategic planning process. I have attended many related meetings, including the large public launch, LGBTQIA+ subcommittee, and

steering committee. People with behavioral health or disability related support needs are heavily overrepresented among those with housing instability, and many agencies funded by the DDB or MHB are present in these discussions.

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. Other useful information is shared before and after the meetings. Most recently, with encouragement to look into the state's work on fitness and related standards, and thanks to guidance from the Mental Health Summit's Chair, I have attended another statewide public meeting (see below).

Problem Solving Court Steering Committee:

The group meets (infrequently) for collaboration across services and funders. The County has a Redeploy Illinois grant and continues to pursue other funding for Problem Solving Courts. I have been involved with planning conversations with this group as well as with state officials aware of our community's needs and assets. We recently restarted discussion of viability of a Mental Health Court. I attend Drug Court Graduation ceremonies, though sometimes virtually.

State and National Associations and Advocacy:

(Supports each Board's Three Year Plan Purpose 4)

Various Statewide Groups:

I attend monthly meetings of the They Deserve More Coalition (I/DD), Mental Health Summit, and the Department of Behavioral Health and Recovery and Trade Associations. Some content overlaps, and all of it is relevant to our work. Legislators have praised They Deserve More Coalition for their sustained advocacy to increase the wages of Direct Support Professionals, which legislation passed. Despite significant budget concerns of the state, behavioral health legislative accomplishments include improved reimbursement for Assertive Community Treatment and Community Support Team services and greater transparency in managed care payment practices. Some promising bills which did not pass may be taken up again during the veto session. The Chair of our Mental Health Summit meetings also serves on the State of Illinois' Fitness to Stand Trial Task Force, so I am now tuning in to their monthly meetings; the June meeting was chaired by Representative LaPointe and featured a presentation from Elgin Mental Health Center's Dr. James Corcoran, echoing many familiar concerns.

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. Despite numerous introduced bills of benefit to people with behavioral health or developmental disability related needs, our focus was once again pulled to protecting the Community Mental Health Act (CMHA); happily no similar threats have presented to the Act governing DD Boards. For several years, revisions are proposed to the CMHA which would have mixed effects on Mental Health Boards operating across the state. Balancing the needs of various members has dominated our committee work enough to warrant significant changes to ACMHAI's by-laws, along with the introduction of a Code of Conduct for Legislative Committee participants.

Our April Membership meeting was held in person and virtually. I was able to be in Springfield for both days, for presentations by legislative lobbyists and legislators and for regular association business. I also attend meetings and webinars of the I/DD Committee and webinars hosted by the Membership and Children's Behavioral Health Committees. We are restarting the Medicaid Committee soon and have wrapped up the work of another ad hoc ByLaws Committee.

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 to plan upcoming events. I attended the February Legislative and Policy Conference in DC and shared lengthy notes which can be found on pages 19-66 of the DDB packet posted here (https://www.champaigncountyil.gov/mhbddb/agendas/ddb/2026/260325_Meeting/260325_Full_Board_Packet.pdf). I plan to attend our summer board meeting virtually.

Regular meetings of the Directors of State Associations, I/DD, Behavioral Health and Justice, Membership, and (brand new) Rural Committees focus on actual and proposed changes to federal policies, such as the recently released interim final rule Medicaid Work and Community Engagement Requirements, with fact sheet linked here (https://www.cms.gov/newsroom/fact-sheets/medicaid-community-engagement-requirement-certain-individuals-interim-final-rule-comment-period-cms), Housing and Urban Development's Continuum of Care Notification of Funding Opportunity, with National Alliance to End Homelessness' analysis linked here (https://endhomelessness.org/wp-content/uploads/2026/06/FY2026-Continuum-of-Care-Competition-NOFO-Analysis.pdf), and the proposed Regulation for Federal Financial Assistance (https://www.federalregister.gov/documents/2026/05/29/2026-10817/regulation-for-federal-

financial-assistance#addresses). Each of these is expected to have profound impacts on service systems and communities across the country.

On June 17, a small group of NACBHDD members met with US Senators to discuss long-term care. We are specifically concerned with community based care for people with developmental disabilities and will learn the current positions of the Senate Finance Committee.

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. Some proposed policy resolutions supported by the larger committee run counter to the aspirations of community-based care, so I am working with colleagues to push back. We have re-introduced the proposed policy resolution for supporting the work of DSPs (who provide a majority of paid direct care to people with I/DD across the country). With approval from the County Executive, I co-sponsored a proposed resolution related to public safety, youth mental health, and mitigating the impacts of gun violence. These will be considered during the upcoming annual NACO Board meeting, and if I am able to participate fully (as a voting member), I will support resolutions which align with the missions of the CCMHB and CCDDB. 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 (notes are along with the NACBHDD conference notes, linked above). I do join virtual meetings during which positions are determined and plans finalized. Last year the membership was fairly divided regarding policy changes, but there is growing shared concern over the cost shift caused by newer federal policy positions and budget reductions. Many members are expected to offer comment on proposed regulation changes this month.

Stephanie Howard-Gallo
Operations and Compliance Coordinator
Staff Report – July 2026 Board Meeting

SUMMARY OF ACTIVITY:

4th Quarter Reporting 2026:

4th quarter financial and program reporting will be due at the end of August, giving the agencies an extra month to submit their reports.

Audits:

Promise Healthcare submitted their audit on June 30, 2026.

Other Compliance:

I sent the agencies a reminder to submit their approved Board minutes to us.

Records and Data Retention:

I set up master files for the new contract year beginning July 1. Paper files are kept on contracts, funding applications, etc. Generally, we keep 10 years of paper files in the master files.

Other:

- Prepared meeting materials for CCMHB/CCDDB regular meetings and study sessions/presentations.
- Attended meetings for the CCMHB/CCDDB.
- Wrote minutes for the CCMHB/CCDDB meetings.
- Participating in our Organization Health Assessment, which will begin in mid July.

Champaign County Behavioral Health Work Group

Wednesday, May 27, 2026, 1:00pm-2:00pm

Hybrid Meeting: CUPHD Planning & Research Conference Room & Zoom

I. Introductions

II. Partner Updates

a. Family First Advocacy's Sensory Museum is available to schedule for community events! Email Becky Beck: becky@familyfirst-community.org

b. Birth to 5 Region 9

   i. Council Membership Applications are Open!

   ii. Learn about Birth to Five on June 24: Flyer

   iii. Champaign Ford Resource Guides

c. Shea with Champaign County Healthcare Consumers shared the Wee CU Food Pantry for Kids will be at 1 Fountain Valley Rantoul, IL on Friday, June 19 from 5:00-8:30pm.

   i. Connect with Jerell Anthoni Leeks to support this initiative: IamJerell1@gmail.com

d. NAMI Champaign County has Education Sessions on the third Monday of each month at the Champaign Public Library. CUPHD will be sharing a presentation focused on Harm Reduction on Monday, June 15 from 7-9pm.

e. Pathways to Success is a program for Medicaid enrolled children under the age of 21 in Illinois who have complex behavioral health needs and require intensive home and community based services.

III. **OSF** Behavioral Health Updates & Discussion

a. July 1st Inpatient Geriatric Floor; 16 beds; 55+ years old
b. September 1st Inpatient Young Adult Floor; 16 beds; 18-26 yrs old
c. Intensive Out Patient & Partial Hospitalization Program for 18+ yrs old
d. Referral Process: Psychiatrist referral; For ER, intake & assessment
e. Referrals are accepted from outside of Champaign County
f. Next steps following in-patient includes an Inpatient Case Manager to support decisions related to continued care.

IV. Additional Behavioral Health Updates

a. Rosecrance Behavioral Health Urgent Care: Open House May 29
    i. WCIA Article
b. Promise Healthcare Pharmacy, Saturday Appts, & Same Day Telehealth
    i. WCIA CiLiving Segment

V. Objective 3: Social Connectedness Needs Assessment

a. 2023 Surgeon General's One Pager: Link

VI. Survey Review and Feedback

a. Broaden connectedness within the community
b. Lacking family
c. Missing a clear outcome (measuring loneliness, maintaining health outcome)
d. Missing community event accessibility, not measuring behavioral health and developmental disability factors.
    i. Healthy Champaign County –Community Groups List

ii. Family Service Self-Help Center Support Groups List

e. Spreading the survey: Would we replicate the IPLAN process?

VII. Future Topics to Learn More About

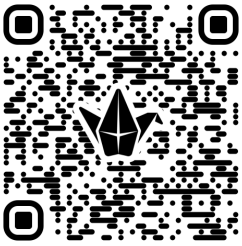
a. 988 + Crisis Response

i. How are calls to 988 being directed to local resources and crisis response?

ii. How does the new Behavioral Health Urgent Care Center fit into this model?

Next Meeting: Wednesday, June 24

CC Behavioral Health Goals and Objectives

a. IPLAN BH Goals and Objectives
b. Padlet Collaboration: Link
c. 

CUPHD CredibleMind Tutorial

a. https://c-uphd.crediblemind.com/
b. 

Behavioral Health

Overall Goal: Improve behavioral health outcomes for Champaign County residents by enhancing social connectedness and expanding access to prevention, intervention, and treatment services.

Outcome Objective 1: By December 31, 2031, decrease the amount of mental health related visits to emergency departments.

- Impact Objective 1.1: By December 31, 2026, establish a baseline of mental health visits to emergency departments using syndromic data.
- Impact Objective 1.2: By December 2028, increase awareness and utilization of behavioral health resources outside of emergency department for families and professionals.
- Impact Objective 1.3: By December 2029, redirect community members seeking mental health support as a primary concern from emergency departments to community-based prevention, intervention and treatment services.

Outcome Objective 2: By December 2031, increase mental health support access for adolescents and youth in champaign county schools.

Impact Objective 2.1: By December 2028, assess current school-based mental health support access, including availability of services, referral pathways and service delivery models in Champaign County Schools.

Outcome Objective 3: By December 31, 2031, increase social connectedness among residents of Champaign County.

Impact Objective 3.1: By December 31, 2031, collect qualitative data from Champaign County residents to document lived experiences of social connectedness and social isolation, with attention to populations at higher risk of disconnection.

Impact Objective 3.2: By December 31, 2028, partner with local researchers to establish baseline measures of social connectedness, loneliness, and social isolation for Champaign County, IL.

Impact Objective 3.3: By December 2029, Identify existing community programs that support social connectedness across all sectors.

CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

DECISION MEMORANDUM

DATE: July 22, 2026
TO: Members, Champaign County Mental Health Board (CCMHB) and Champaign County Developmental Disabilities Board (CCDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Update on 2026 Anti-Stigma Activities and Requests for 2027

Background

The purpose of this memorandum is to offer an update on anti-stigma and community awareness activities, which during 2026 have consisted mainly of discussions on what might replace our two annual large in-person activities.

Since 2008, the Roger Ebert's Film Festival offered a convenient and high-profile opportunity for sponsorship of films challenging the stigma related to behavioral health issues or developmental disabilities, as well as for concurrent community events such as art shows, free film screenings, school screenings, panel discussions, and more.

Since 2007, the Boards hosted in-person DisAbility Resource Expos (and virtual events during the COVID pandemic). These outgrew various venues and achieved a sense of community. Initially focused on developmental disability support needs, the family friendly Saturday events came to include resources to meet many other needs. People with disabilities led the planning and implementation, with a large steering committee consisting of advocates, CCDDB-CCMHB staff and board members, and volunteers. The October 2025 Expo faced substantial new safety challenges. While the coordinators and steering committee had a long history of overcoming unexpected barriers, this one further reduced the options for an event venue large enough to keep the momentum. For unrelated reasons, the primary coordinators, Allison and Dylan Boot, were unable to continue offering their services into 2026.

2026 Activities and Events

The last of the Roger Ebert's Film Festivals was held in April of 2026. Alliance for Inclusion and Respect (AIR) partners have expressed an interest in continuing to host art shows and to sponsor films. AIR artists and supporters discussed partnering with The Crow for an event, and some artists have offered input for improving the website. I have had an initial discussion with the promoter of one of the newer local film festivals and with the owner of an emerging venue.

A small Expo advisory group convened early in 2026 to address the surprise barriers and agreed to take a year to reflect and plan. They identified Expo-related activities of value and have continued them: updating the online resource directory; distributing the paper resource book; attending and promoting community awareness and resource information events and meetings. Kim Bowdry developed recognitions for Allison and Dylan Boot. Central to our plans was Barbara Bressner, the original coordinator who had continued to do so much. She passed away in March. We propose an annual award in her honor.

If one or both Boards chose to include a large in-person Expo event among Program Year 2028 funding priority categories or to develop a separate RFP for this purpose, an agency might apply to host something similar to the traditional annual Expo.

Many other opportunities for community awareness and resource information can be amplified. For the fall of 2026, CCDDB-CCMHB staff are involved in:

Scott Bennett Family Resources Day, August 28

- To be held at Lincoln Square, 10AM-3PM.
- Signed up for a table for our projects, Expo, AIR, and 211.
- Announced the event at various collaborative meetings.
- Distributed an email with their flyer to all Expo exhibitors, sponsors, and stakeholders on how to sign up for a table for this event (Kim Bowdry).
- Included details in the monthly DDB-MHB newsletter (Kim Bowdry).

Black Mental Health and Wellness Conference, September 26

- Fourth Annual Event, to be held at Parkland College.
- "… addressing the challenges of mental health in the Black community and assisting those affected and their families on a path to wellness. Sessions included in-depth conversations about Navigating Difficult Conversations, Trauma Informed Approach to Personal and Professional Well-Being, Mental Health and the Black Church, Supporting and Strengthening Black Youth Mental Health, Impact of Domestic Violence, Emotional Intelligence: Building Resilience and Positive mental Health, Addictive Behaviors and Mental Health, and Beyond Black and White: Healing Racialized Trauma Reimagining Equity."
- Planned by the Champaign County Community Coalition's Race Relations Workgroup (Kim Bowdry).
- Included details in the monthly DDB-MHB newsletter (Kim Bowdry).

Beyond Borders: Global Collaborations for Mental Health Research and Services Conference, October 8 and 9

- Virtual sessions over two days, with a keynote address and six presentations.
- Second annual international MH conference; last year a hybrid event.
- Theme: Building Resiliency.
- Currently reviewing proposals for presentations (Shandra Summerville).
- Will promote the event through our networks.
- Proposed registration fees are $30 for professionals and $10 for students. A fee waiver might be offered.

Plans for 2027

- Continue to participate in planning and promotion of other community events which offer resource information or improve awareness and inclusion.
- Continue website updates to improve accessibility and broaden the reach of resource information and anti-stigma messaging. A revised paper version of the Resource Book may be designed and printed within amounts already budgeted.
- Continue and improve Expo and AIR social media, currently limited to Instagram and Facebook pages. This is dependent on availability of people to create content and manage the pages, within budget.
- Establish an annual award in Barbara Bressner's memory, to recognize outstanding contributions toward improving the lives of people who have disabilities. Details of this award and process will evolve through input from Board and staff, others close to the Expo, and her family.
- With advice and support from Advisory and Steering Committee members, host a 'mini' Expo event emphasizing sense of community. Some recommend spring, but timing depends on availability of people to execute the event and of venues such as the iHotel Conference Center, the Yard, Lincoln Square Mall, Park District facility, The Crow, or a new venue.
- With advice and support from AIR members, sponsor an anti-stigma film and an art show/sale, not necessarily concurrent. Again, details will emerge through input from others as well as what is possible within budget.

Decision Section

Motion to approve establishing an annual recognition award in memory of Barbara Bressner, with any associated costs not to exceed budgeted amounts.

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

Motion to authorize the CCDDB-CCMHB Executive Director and staff to plan and implement anti-stigma events during 2027, not to exceed budgeted amounts.

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information Needed

(This page is intentionally left blank.)

Board to Board Liaison Options

The Champaign County Mental Health Board (CCMHB) has a tradition of liaison relationships with the agencies they currently fund. Other community collaborations have been added to the list. Board members are welcome to visit any agency board meeting, which can be arranged by contacting Stephanie Howard-Gallo (stephanie@ccmhb.org).

Agency Board Meetings:

Champaign County Children's Advocacy Center – 4th Thursdays at 9:00 a.m.

Champaign County Christian Health Center – last Saturdays at 10 a.m.

Champaign County Health Care Consumers – 4th Thursdays at 6 p.m.

Champaign County Regional Planning Commission – Community Services and Head Start – last Fridays.

Community Service Center of Northern Champaign County – 3rd Thursdays at 4:30 p.m.

Courage Connection – 4th Mondays at 5:30 p.m.

Crisis Nursery – 2nd Wednesdays at 5:30 p.m.

CU at Home – 4th Wednesdays at 8:00 a.m.

CU Early – Unit 116 meetings.

Cunningham Children's Home – quarterly.

Don Moyer Boys and Girls Club – 3rd Tuesdays at 7 a.m.

DSC – 4th Thursdays at 5:30 p.m.

ECIRMAC (The Refugee Center) – 2nd Tuesdays at 4 p.m.

Family Service of Champaign County – 2nd Mondays at Noon.

FirstFollowers – 3rd Fridays at 5 p.m.

Greater Community AIDS Project – 2nd Tuesdays at 5:30 p.m.

GROW in Illinois – last Mondays at 7 p.m.

Immigrant Services of CU – 4th Thursdays at 6 p.m.

Promise Healthcare – 4th Tuesdays at 6 p.m.

RACES – 3rd Thursdays at 6 p.m.

Rosecrance Central Illinois – last Tuesdays at 4:30 p.m.

Uniting Pride – 2nd Wednesdays at 6:30 p.m.

Urbana Neighborhood Connections Center - ?

WIN Recovery – 2nd Mondays at 5:30 p.m.

Collaborations:

Champaign County Community Coalition – 2nd Wednesdays at 3:30 p.m.

Community Health Plan Steering Committee and Priority Workgroups – various.

Disability Resource Expo Steering Committee and Workgroups – to be determined.

Student Mental Health Collaboration – 1st Mondays at 11 a.m.