

Champaign County Developmental Disabilities Board (CCDDB)

Meeting Agenda

Wednesday, September 18, 2024, 9:00 AM

This meeting will be held in person at the Shields-Carter Room of the Brookens Administrative Building, 1776 East Washington Street, Urbana, IL 61802 Members of the public may attend in person or watch the meeting live through this link: <u>https://us02web.zoom.us/j/81559124557</u> Meeting ID: 815 5912 4557

- I. Call to order
- II. Roll call
- III. Approval of Agenda*
- **IV.** CCDDB and MHB Schedules, updated DDB Timeline (pages 3-8) No action is needed.
- V. CCDDB Acronyms and Glossary (pages 9-20) No action is needed.
- **VI.** Citizen Input/Public Participation All are welcome to attend the Board's meeting to observe and to offer thoughts during this time. The Chair may limit public participation to 5 minutes per person and/or 20 minutes total.
- VII. Chairperson's Comments Ms. Vicki Niswander
- VIII. Executive Director's Comments Lynn Canfield
- **IX.** Approval of CCDDB Board Meeting Minutes (pages 21-28)* Minutes from the 7/17/24 and 7/31/24 CCDDB meetings are included for approval. Action is requested.
- X. Vendor Invoice Lists (pages 29-34)*
 Action is requested to accept the "Vendor Invoice Lists" and place them on file.

XI. Staff Reports (pages 35-51)

Included for information only are reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson.

XII. New Business

a) **DRAFT Strategic Plan for 2025** (pages 52-68)

For information are a briefing memorandum with overview of proposed revisions and a draft of the CCDDB Strategic Plan with Objectives for Fiscal Year 2025.

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b) DRAFT Funding Priorities for PY26 (pages 69-85)
For information only, a briefing memorandum presents a draft of CCDDB funding
priorities and decision support criteria for Program Year 2026. Input from agency
representatives is attached.
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XIII. Old Business

a) Engage Illinois

An oral update will be provided on the statewide system redesign effort.

- b) **Evaluation Capacity Building Project Update** An oral update will be provided by representatives from the Evaluation Team.
- c) **disAbility Resource Expo Update** (pages 86-90) For information only are promotional materials for the October 26, 2024 event.
- d) **PY24 Fourth Quarter Reports and Data** (pages 91-110) For information only are submitted fourth quarter service activity reports for all PY24 funded I/DD programs.
- e) **PY24 Fourth Quarter Claims Data** (pages 111-124) For information only are charts with year-end cumulative individual service claims data for many PY24 funded I/DD programs.
- **XIV.** Successes and Other Agency Information The Chair reserves the authority to limit individual agency representative participation to 5 minutes and/or total time to 20 minutes.
- XV. County Board Input
- XVI. Champaign County Mental Health Board Input
- XVII. Board Announcements and Input
- XVIII. Other Business Review of Closed Session Minutes*

Board staff and attorneys request that the Board continue to maintain as closed the minutes of closed sessions held February 19, 2020, February 26, 2020, July 21, 2021, and February 23, 2022, which have been distributed for review.

For discussion, the Board may "move to executive session, exception 5 ILCS 120/2(c)(11) of the Open Meetings Act, to review status of minutes of prior closed session meetings, and that the following individuals remain present: members of the Champaign County Developmental Disabilities Board, Executive Director Canfield, and Associate Director Kim Bowdry."

If this motion is approved, those authorized will move to **Brookens Meeting Room 3** for roll call and discussion. When the closed session discussion ends, they will move back to the Shields Carter Room, for a motion to return to Open Session and new roll call.

Once the Open Session is re-established, the recommended action is: "to accept the February 19, 2020, February 26, 2020, July 21, 2021, and February 23, 2022 closed session minutes as presented (or revised), to continue maintaining them as closed, and to destroy the recording of the July 21, 2021 meeting."

XIX. Adjournment

* Board action is requested.

For accessible documents or assistance with any portion of this packet, please <u>contact us</u> (kim@ccmhb.org).



CCDDB 2024 Meeting Schedule

9:00AM Wednesday after the third Monday of each month Brookens Administrative Building, 1776 East Washington Street, Urbana, IL <u>https://us02web.zoom.us/j/81559124557</u>

January 17, 2024 – Shields-Carter Room February 21, 2024 – Shields-Carter Room March 20, 2024 – Shields-Carter Room March 27, 2024 5:45PM – Shields-Carter Room – joint study session with the CCMHB April 17, 2024 – Shields-Carter Room May 22, 2024 – Shields-Carter Room June 12, 2024 - Shields-Carter Room (off cycle) CANCELLED July 17, 2024 – Shields-Carter Room July 31, 2024 – Shields-Carter Room (off cycle) August 21, 2024 - Shields-Carter Room - tentative CANCELLED September 18, 2024 – Shields-Carter Room September 25, 2024 5:45PM – Shields-Carter Room – joint study session with the CCMHB October 16, 2024 5:45PM - Shields-Carter Room - joint meeting with the CCMHB-CANCELLED October 23, 2024 – Shields-Carter Room November 20, 2024 – Shields-Carter Room December 18, 2024 – Shields-Carter Room – tentative This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate. All meetings and study sessions include time for members of the public to address the Board. Meetings are posted in advance and recorded and archived at http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php

Public Input: All are welcome to attend the Board's meetings, whether virtually or in person, to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing <u>stephanie@ccmhb.org</u>. If the time of the meeting is not convenient, you may still communicate with the Board by emailing <u>stephanie@ccmhb.org</u> any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.



CCMHB 2024 Meeting Schedule

5:45PM Wednesday after the third Monday of each month Brookens Administrative Building, 1776 East Washington Street, Urbana, IL <u>https://us02web.zoom.us/j/81393675682</u> (*if it is an option*)

January 17, 2024 – Shields-Carter Room January 24, 2024 – Study Session - Shields-Carter Room February 21, 2024 – Shields-Carter Room February 28, 2024 Study Session Shields-Carter Room CANCELLED March 20, 2024 – Shields-Carter Room March 27, 2024 – Joint Study Session w CCDDB - Shields-Carter April 17, 2024 – Shields-Carter Room April 24, 2024 – Study Session - Shields-Carter Room May 15, 2024 – Study Session - Shields-Carter Room May 22, 2024 – Shields-Carter Room June 12, 2024 – Shields-Carter Room (off cycle) July 17, 2024 – Shields-Carter Room August 21, 2024 Shields-Carter Room tentative CANCELLED September 18, 2024 – Shields-Carter Room September 25, 2024 – Joint Study Session w CCDDB - Shields-Carter October 16, 2024 - Study Session - Shields-Carter Room October 23, 2024 – Shields-Carter Room November 20, 2024 – Shields-Carter Room December 18, 2024 – Shields-Carter Room - tentative

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate. Meetings are archived at http://www.co.champaign.il.us/mhbddb/MHBMeetingDocs.php

Public Input: All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend meetings, whether using the Zoom options or in person, to observe and to offer thoughts during "Public Participation". For support to participate, let us know how we might help by emailing <u>stephanie@ccmhb.org</u>. If the time of the meeting is not convenient, you may still communicate with the Board by emailing <u>stephanie@ccmhb.org</u> any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

IMPORTANT DATES

2024-25 Meeting Schedule with Subjects, Agency and Staff Deadlines, and PY26 Allocation Timeline

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Included are tentative dates for steps in the funding process for PY26 and deadlines related to PY24 and PY25 agency contracts. Subjects are not exclusive to any given meeting, as other matters requiring Board attention may be addressed. Study sessions may be scheduled on topics raised at meetings or by staff, or in conjunction with the CCMHB. Regular meetings are held at 9AM; joint study sessions and meetings at 5:45PM; dates and times are subject to change and may be confirmed with Board staff.

6/1/24	For contracts with a PY24-PY25 term, all updated PY25 forms should be completed and submitted by this date.
6/12/24	Regular Board Meeting (off cycle) CANCELLED
6/18/24	Deadline for agency application/contract revisions Deadline for agency letters of engagement w/ CPA firms
6/21/24	PY2025 agency contracts completed.
6/30/24	Agency Independent Audits, Reviews, or Compilations due (only applies to those with calendar FY, check contract)
7/17/24	Regular Board Meeting Election of Officers; Draft FY2025 Budget
7/31/24	Regular Board Meeting (off cycle) Election of Officers; Draft FY2025 Budget
8/21/24	Regular Board Meeting – tentative CANCELLED
8/30/24	Agency PY2024 4 th Quarter reports, CLC progress reports, and Annual Performance Measure Reports due
9/18/24	Regular Board Meeting Community Needs Assessment Report Draft Three Year Plan 2025-27 with 2025 Objectives Approve Draft FY2025 Budgets

9/25/24	Joint Study Session with CCMHB (5:45PM)
10/16/2 4	Joint Meeting with CCMHB (5:45PM) I/DD Special Initiatives CANCELLED
10/23/24	Regular Board Meeting DRAFT Program Year 2026 Allocation Criteria
10/25/24	Agency PY2025 First Quarter Reports due
11/20/24	Regular Board Meeting Approve Three Year Plan with One Year Objectives Approve PY26 Allocation Criteria
11/29/24	Public Notice of Funding Availability to be published by this date, giving at least 21-day notice of application period.
12/18/24	Regular Board Meeting - tentative
12/20/24	Online System opens for Applications for PY2026 Funding.
12/31/24	Agency Independent Audits, Reviews, or Compilations due.
1/22/25	Regular Board Meeting
1/31/25	Agency PY25 2 nd Quarter and CLC progress reports due.
2/10/25	Deadline for submission of applications for PY26 funding. (Online system will not accept any forms after 4:30PM.)
2/19/25	Regular Board Meeting Discuss list of PY26 Applications, Review Process
3/19/25	Regular Board Meeting Discussion of PY26 Funding Requests
3/26/25	Joint Study Session OR Joint Meeting with CCMHB (5:45PM)
4/14/25	Program summaries released to Board, posted online with CCDDB April 23 meeting agenda and packet.

4/23/25	Regular Board Meeting Board Review, Staff Summaries of Funding Requests
4/25/25	Agency PY2025 3 rd Quarter Reports due.
5/12/25	Allocation recommendations released to Board, posted online with CCDDB May 21 board meeting packet.
5/21/25	Regular Board Meeting Allocation Decisions; Authorize Contracts for PY26
6/1/25	For contracts with a PY25-PY26 term, all updated PY26 forms should be completed and submitted by this date.
6/17/25	Deadline for agency application/contract revisions. Deadline for agency letters of engagement w/ CPA firms.
6/18/25	Regular Board Meeting Draft FY2026 Budget
6/20/25	PY2026 agency contracts completed.
6/30/25	Agency Independent Audits, Reviews, or Compilations due. (only applies to those with calendar FY, check contract)
7/16/25	Regular Board Meeting (off cycle)
8/20/25	Regular Board Meeting – <i>tentative</i> Election of Officers
8/29/25	Agency PY2025 4 th Quarter reports, CLC progress reports, and Annual Performance Measure Reports due.
9/17/25	Regular Board Meeting Draft Three Year Plan 2025-27 with 2025 Objectives Approve Draft FY2026 Budgets
9/24/25	Joint Study Session with CCMHB (5:45PM)
10/22/25	Regular Board Meeting

	DRAFT Program Year 2027 Allocation Criteria
10/29/25	Joint Meeting with CCMHB (5:45PM) I/DD Special Initiatives
10/31/25	Agency PY2026 First Quarter Reports due.
11/19/25	Regular Board Meeting Approve Three Year Plan with One Year Objectives Approve PY27 Allocation Criteria
11/28/25	Public Notice of Funding Availability to be published by date, giving at least 21-day notice of application period.
12/17/25	Regular Board Meeting- tentative
12/19/25	Online system opens for applications for PY27 funding.
12/30/25	Agency Independent Audits, Reviews, Compilations due.

Agency and Program acronyms commonly used by the CCDDB

AIR – Alliance for Inclusion and Respect (formerly Anti-Stigma Alliance) CC – Community Choices CCCAC or CAC – (Champaign County) Children's Advocacy Center CCAMR – Champaign County Advocacy and Mentoring Resources CCCHC – Champaign County Christian Health Center CCDDB or DDB - Champaign County Developmental Disabilities Board CCHCC – Champaign County Health Care Consumers CCHS - Champaign County Head Start, a division of the Regional Planning Commission (also CCHS-EHS, for Head Start-Early Head Start) CCMHB or MHB – Champaign County Mental Health Board CCRPC or RPC - Champaign County Regional Planning Commission CN – Crisis Nursery CSCNCC – Community Service Center of Northern Champaign County, also CSC CU Able – a parent support group, previously funded by the CCDDB CUAN – Champaign-Urbana Autism Network CU Early – a Prevention Initiative program, is a long-standing collaboration of Urbana School District #116 and Champaign Unit 4 Schools CU TRI - CU Trauma & Resiliency Initiative, affiliated with the Champaign Community Coalition and CUNC, funded through Don Moyer Boys & Girls Club? Courage Connection – previously The Center for Women in Transition DMBGC – Don Moyer Boys & Girls Club DREAAM - Driven to Reach Excellence and Academic Achievement for Males DSC – Developmental Services Center DSN – Down Syndrome Network ECIRMAC or RAC – East Central Illinois Refugee Mutual Assistance Center or The Refugee Center FS – Family Service of Champaign County GCAP - Greater Community AIDS Project of East Central Illinois IAG – Individual Advocacy Group IDDSI – Intellectual/Developmental Disabilities Special Initiatives (a joint project of the CCDDB and CCMHB) MAYC – Mahomet Area Youth Club NAMI – National Alliance on Mental Illness PATH – regional provider of 211 information/call services PHC – Promise Healthcare RAC or ECIRMAC - East Central Illinois Refugee Mutual Assistance Center RACES – Rape Advocacy, Counseling, and Education Services PACE – Persons Assuming Control of their Environment, Inc. PCMHC - Piatt County Mental Health Center PCSI – Prairieland Service Coordination, Inc. – ISC for Champaign County RCI – Rosecrance Central Illinois UNCC - Urbana Neighborhood Community Connections Center UP Center – Uniting Pride UW or UWCC – United Way of Champaign County WIN Recovery – Women in Need Recovery YFPSA-Youth & Family Peer Support Alliance

Glossary of Other Terms and Acronyms

211 - Similar to 411 or 911. Provides telephone access to information and referral services.

988 - Suicide and Crisis Lifeline

AAC – Augmentative and Alternative Communication

AAIDD - The American Association on Intellectual and Developmental Disabilities

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

ABLE Act – Achieving a Better Life Experience Act. A tax advantage investment program which allows people with blindness or disabilities the option to save for disability related expenses without putting their federal means-tested benefits at risk.

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ALICE – Asset Limited, Income Constrained, Employed

APSE – Association of People Supporting Employment First

ASD – Autism Spectrum Disorder

ASL – American Sign Language

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

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

BCBA – Board Certified Behavior Analyst

BD – Behavior Disorder

BSP – Behavior Support Plan

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

CARF – Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

C-CARTS – Champaign County Area Rural Transit System

CE – Community Employment, a DSC program

CE – Customized Employment, a Community Choices program

CF – Community First, a DSC program

CL - Community Living, formerly Apartment Services, a DSC program

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

CCPS – Consumer Control in Personal Support, a PACE program

CDS – Community Day Services, formerly "Developmental Training"

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children's Global Assessment of Functioning

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

CLC – Cultural and Linguistic Competence

CMS – Center for Medicare and Medicaid Services, the federal agency administering these programs.

CNA - Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CSEFEL - Center on the Social and Emotional Foundations for Early Learning

CQL – Council on Quality and Leadership

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

CUSD - Champaign Community Unit School District 4

CUSR – Champaign Urbana Special Recreation, offered by the park districts.

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

DCFS – (Illinois) Department of Children and Family Services.

DD – Developmental Disability

DDD – Division of Developmental Disabilities

DECA – Devereux Early Childhood Assessment

DEI – Diversity, Equity, and Inclusion

DFI – Donated Funds Initiative, source of matching funds for some CCMHB funded contracts. The Illinois Department of Human Services administers the DFI Program funded with federal Title XX Social Services Block Grant. The DFI is a "match" program meaning community-based agencies must match the DFI funding with locally generated funds. The required local match is 25 percent of the total DFI award.

DHFS – (Illinois) Department of Healthcare and Family Services. Previously known as IDPA (Illinois Department of Public Aid)

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS - (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP - Direct Support Professional

DSPCP – Decision Support Person Centered Planning, a CCRPC program

DT - Developmental Training, now "Community Day Services"

DT – Developmental Therapy, Developmental Therapist

DV – Domestic Violence

Dx – Diagnosis

EBP - Evidence Based Practice

ECMHS – Early Childhood Mental Health Services, a program of CCRPC Head Start

ED – Emergency Department

ED – Emotional Disorder

EF – Employment First, a Community Choices and DSC program

EHR – Electronic Health Record

EI – Early Intervention

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

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

ER – Emergency Room

FAPE – Free and Appropriate Public Education

FD - Family Development, formerly Family Development Center, a DSC program

FFS – Fee For Service. Type of contract that uses performance-based billings as the method of payment.

FOIA – Freedom of Information Act.

FPL – Federal Poverty Level

FQHC - Federally Qualified Health Center

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

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

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

HACC – Housing Authority of Champaign County

HBS - Home Based Services, also referred to as HBSS or HBSP

HBWD - Health Benefits for Workers with Disabilities

HCBS – Home and Community Based Services

HFS or IDHFS - Illinois Department of Healthcare and Family Services

HI - Hearing Impairment or Health Impairment

HIPPA – Health Insurance Portability and Accountability Act

HUD - Housing and Urban Development

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ICS – Inclusive Community Support, formerly Community Living, a Community Choices program

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDHS or DHS – Illinois Department of Human Services

IDOC – Illinois Department of Corrections

IDHFS or HFS - Illinois Department of Healthcare and Family Services

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IECAM – Illinois Early Childhood Asset Map

IEP - Individualized Education Plan

IFS – Individual and Family Support, a DSC program

IFSP - Individualized Family Service Plan

IGA – Intergovernmental Agreement

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

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

I&R – Information and Referral

IRC – Illinois Respite Coalition

ISBE – Illinois State Board of Education

ISC - Independent Service Coordination or Independent Service Coordination Unit

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC - Licensed Clinical Professional Counselor

LCSW - Licensed Clinical Social Worker

LD – Learning Disability

LEAP – Leaders Employing All People

LGTBQIA+ – Lesbian, Gay, Bi-Sexual, Transgender, Queer and/or Questioning, Intersex, Asexual/Aromantic/Agender plus all the gender identities and sexual orientations that letters and words cannot yet fully describe.

LIHEAP – Low Income Home Energy Assistance Program

LPC - Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO - Managed Care Organization

MDC - Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

MHDDAC or CCMHDDAC – Mental Health and Developmental Disabilities Agencies Council

MHFA – Mental Health First Aid

MHP – Mental Health Professional, a bachelors level staff providing services under the supervision of a QMHP.

MI – Mental Illness

MIDD – A dual diagnosis of Mental Illness and Developmental Disability.

MSW – Master of Social Work

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

NACO - National Association of Counties

NADSP - National Alliance for Direct Support Professionals

NCI – National Core Indicators

NOS - Not Otherwise Specified

NTPC – NON-Treatment Plan Clients. Persons engaged in a given quarter with case records but no treatment plan. May include: recipients of material assistance, non-responsive outreach cases, cases closed before a plan was written because the client did not want further service beyond first few contacts, or cases assessed for another agency. The actual activity to be performed should also be described in the Program Plan Narrative Form, Utilization section. Similar to TPCs, they may be divided into two groups: New TPCS – first contact within any quarter of the plan year; Continuing NTPCs - those served before the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which Continuing NTPCs are reported.

OCD - Obsessive-Compulsive Disorder

ODD - Oppositional Defiant Disorder

OMA – Open Meetings Act

ODEP - Office of Disability Employment Policy

OMA - Open Meetings Act.

OT - Occupational Therapy, Occupational Therapist

OTR - Registered Occupational Therapist

PA – Personal Assistant

PAS – Pre-Admission Screening

PASS – Plan for Achieving Self Support (Social Security Administration)

PCI – Parent Child Interaction groups.

PCP - Person Centered Planning, Primary Care Physician

PDD – Pervasive Developmental Disorders

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

POM – Performance Outcome Measures

PRN – when necessary, as needed (i.e., medication)

PSH – Permanent Supportive Housing

PT – Physical Therapy, Physical Therapist

PTSD – Post-Traumatic Stress Disorder

PUNS – Prioritization of Urgency of Need for Services. PUNS is a database implemented by the Illinois Department of Human Services to assist with planning and prioritization of services for individuals with disabilities based on level of need. PUNS has 2 categories: Seeking Services (category for people who currently need or desire supports) and Planning for Services (category for people who do not currently want or need supports but may in the future). PUNS selections are based on a person's cumulative length of time in the Seeking Services Category.

PWD – People with Disabilities

PY – Program Year, July 1 to June 30. Also Contract Year (CY), often agency Fiscal Year (FY) QIDP – Qualified Intellectual Disabilities Professional QMHP – Qualified Mental Health Professional, a Master's level clinician with field experience who has been licensed.

RCCSEC - Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RFI - Request for Information

RFP – Request for Proposals

RIN – Recipient Identification Number. A unique identification number assigned to the recipient of IDHS services.

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

SA – Sexual Assault

SA – Substance Abuse

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

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

SC – Service Coordination, a DSC program

SCs – Service Contacts/Screening Contacts. The number of phone and face-to-face contacts with eligible persons who may or may not have open cases in the program. Can include information and referral contacts or initial screenings/assessments or crisis services. May sometimes be referred to as a service encounter (SE).

SDA – Self-Direction Assistance

SDS – Self-Determination Support, a Community Choices program

SEDS - Social Emotional Development Specialist

SEL – Social Emotional Learning

SF – Service Facilitation, now called "Self-Direction Assistance"

SH – Supportive Housing

SIB - Self-Injurious Behavior

SIB-R - Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SNAP – Supplemental Nutrition Assistance Program

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

SODC - State Operated Developmental Center

SPD – Sensory Processing Disorder

SSA - Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

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

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs – Treatment Plan Clients, service participants with case records and treatment plans. Continuing TPCs are those with treatment plans written prior to the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which this data is reported. Essentially it is a case carried from one program year into the next. New TPCs are new clients with treatment plans written in a given quarter of the program year. Each TPC should be reported only once during a program year.

UECS – Urbana Early Childhood School

USD – Urbana School District #116

VI – Visual Impairment

VR - Vocational Rehabilitation

WHODAS – World Health Organization Disability Assessment Schedule. It is a generic assessment instrument for health and disability and can be used across all diseases, including mental and addictive disorders. The instrument covers 6 domains: Cognition, Mobility; Self-care; Getting along; Life activities; and Participation. Replaces the Global Assessment of Functioning in the DSM-V.

WIOA - Workforce Innovation and Opportunity Act

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

CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY (CCDDB) MEETING

Minutes July 17, 2024

This meeting was held at the Brookens Administrative Center 1776 E. Washington St., Urbana, IL 61802 and with remote access via Zoom.

9:00 a.m.

MEMBERS PRESENT:	Kim Fisher, Vicki Niswander (remote), Georgiana Schuster, Susan Fowler (remote)
MEMBERS EXCUSED:	Dr. Anne Robin
STAFF PRESENT:	Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville, Chris Wilson
OTHERS PRESENT:	Annette Becherer, Heather Levingston, Jami Olsen, Danielle Matthews, Patty Walters, DSC; Becca Obuchowski, Community Choices; Angela Yost, Jessica McCann, CCRPC; Brenda Eakins, GROW in Illinois; Leah Taylor, Champaign County Board; Jacinda Dariotis, UIUC; Mel Liong, Jason Chaney, PACE; Jerry McIntire, Citizen

CALL TO ORDER:

Ms. Schuster called the meeting to order at 9:02 a.m.

ROLL CALL:

Roll call was taken, and a quorum was not present.

APPROVAL OF AGENDA:

An agenda was not approved due to the lack of a quorum.

CCDDB and CCMHB SCHEDULES/TIMELINES:

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

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was included for information.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT'S COMMENTS:

Ms. Niswander spoke regarding a recent advocacy movement.

EXECUTIVE DIRECTOR'S COMMENTS:

Ms. Canfield asked about options for a July meeting, which is required per statute.

APPROVAL OF MINUTES:

Minutes from the 5/23/2024 board meeting were included in the packet. Minutes were not approved due to the lack of a quorum.

VENDOR INVOICE LIST:

The Vendor Invoice List was included in the Board packet. The document was not Board approved due to the lack of a quorum.

STAFF REPORTS:

Reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson were included in the packet.

NEW BUSINESS:

Statewide System Redesign:

For information only were materials related to the ENGAGE-IL system redesign effort supported by Board President Niswander and other advocates.

Election of Board Officers:

Per statute and by-laws, the Board annually selects from its membership a President and Secretary. The Board By-Laws were included for information. Elections did not take place due to the lack of a quorum.

Draft Budgets for Fiscal Year 2025:

A Decision Memorandum requested approval of the draft 2025 CCDDB and I/DD Special Initiatives Fund budgets. Additional information was included, along with the Intergovernmental Agreement between the CCDDB and the Champaign County Mental Health Board (CCMHB). There was no Board action due to the lack of a quorum.

MOU with United Way for 211 Services:

A Decision Memorandum requested authorization for renewal of the Memorandum of Understanding to support 211 information services for Champaign County. There was no Board action due to the lack of a quorum.

Setting the Stage for 2025 and PY2026:

A memorandum summarized current funding priorities and strategic plan objectives, to support board discussion of next steps.

Input to the County Board:

A memorandum directed to the Champaign County Board offered community needs assessment support for expansion of paratransit services.

OLD BUSINESS:

PY25 Funded Programs:

A list of funded programs for FY25 was included in the packet for information.

Evaluation Capacity Building Project:

A representative from the team provided an update.

Expo Update:

An update from Allison and Dylan Boot on the 2024 Expo was included in the Board packet.

SUCCESSES AND AGENCY INFORMATION:

Updates were provided by Mel Liong and Jason Chaney from PACE; Annette Becherer and Patty Walters from DSC; and Becca Obuchowski from Community Choices.

COUNTY BOARD INPUT:

None.

CCMHB INPUT:

The CCMHB will meet this evening.

BOARD ANNOUNCEMENTS AND INPUT:

The CCDDB will have a meeting July 31, 2024.

ADJOURNMENT:

The meeting adjourned at 10:01 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo, CCMHB/CCDDB Operations and Compliance Specialist

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

CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY (CCDDB) MEETING

Minutes July 31, 2024

This meeting was held at the Brookens Administrative Center 1776 E. Washington St., Urbana, IL 61802 and with remote access via Zoom.

9:00 a.m.

MEMBERS PRESENT:	Vicki Niswander, Anne Robin, Georgiana Schuster, Susan Fowler
MEMBERS EXCUSED:	Kim Fisher
STAFF PRESENT:	Kim Bowdry, Leon Bryson, Lynn Canfield, Shandra Summerville
OTHERS PRESENT:	Danielle Matthews, Patty Walters, DSC; Hannah Sheets, Community Choices; Mel Liong, Paula Vanier, LaShunda Hall, PACE

CALL TO ORDER:

CCDDB President Vicki Niswander called the meeting to order at 9:01 a.m.

ROLL CALL:

Roll call was taken, and a quorum was present.

APPROVAL OF AGENDA:

An agenda was available for review.

MOTION: Dr. Robin moved to approve the agenda as presented. Ms. Schuster seconded the motion. A voice vote was taken. The motion passed.

CCDDB and CCMHB SCHEDULES/TIMELINES:

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

ACRONYMS and GLOSSARY:

A list of commonly used acronyms was included for information.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT'S COMMENTS:

Ms. Niswander thanked attendees and will provide details on Engage Illinois during new business.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

APPROVAL OF MINUTES:

Minutes from the 5/23/2024 board meeting were included in the packet.

MOTION: Ms. Schuster moved to approve the minutes from the 5/23/2024 meeting. Dr. Robin seconded the motion. A voice vote was taken, and the motion passed.

VENDOR INVOICE LIST:

The Vendor Invoice Lists were included in the Board packet.

MOTION: Dr. Fowler moved to approve the Vendor Invoice Lists. Ms. Schuster seconded the motion. A voice vote was taken. The motion passed.

STAFF REPORTS:

Reports from Kim Bowdry, Leon Bryson, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson were included in the packet.

NEW BUSINESS:

Statewide System Redesign:

For information only were materials related to the ENGAGE-IL system redesign effort supported by Board President Niswander and other advocates.

Election of Board Officers:

Per statute and by-laws, the Board annually selects from its membership a President and Secretary. The Board By-Laws were included for information. President Niswander called for nomination of candidates for President. MOTION: Dr. Robin nominated Vicki Niswander for the office of President. Ms. Schuster seconded the motion. Call for further nominations. None were offered. A voice vote was taken, and Ms. Niswander was elected President.

MOTION: Ms. Niswander nominated Anne Robin for the office of Secretary. Dr. Fowler seconded the motion. Call for further nominations. None were offered. A voice vote was taken, and Dr. Robin was elected Secretary.

Draft Budgets for Fiscal Year 2025:

A Decision Memorandum requested approval of the draft 2025 CCDDB and I/DD Special Initiatives Fund budgets. Additional information was included, along with the Intergovernmental Agreement between the CCDDB and the Champaign County Mental Health Board (CCMHB).

MOTION: Ms. Niswander moved to approve the DRAFT 2025 CCDDB Budget, with anticipated revenues and expenditures of \$5,465,394. Dr. Robin seconded the motion. A roll call vote was taken, and the motion passed unanimously.

MOTION: Ms. Schuster moved to approve the DRAFT 2025 I/DD Special Initiatives Budget, with anticipated expenditures of \$239,063 with equal revenues, including transfer from fund balance. Use of this fund is consistent with the terms of the Intergovernmental Agreement between the CCDDB and CCMHB, and full approval is contentment on CCMHB action. Dr. Fowler seconded the motion. A roll call vote was taken, and the motion passed unanimously.

MOU with United Way for 211 Services:

A Decision Memorandum requested authorization for renewal of the Memorandum of Understanding to support 211 information services for Champaign County.

MOTION: Dr. Fowler moved to approve the Memorandum of Understanding with United Way of Champaign County for 2-1-1 Services at an annual cost of \$11,250, pending similar approval by the CCMHB, and to authorize the Executive Director and Board Officer to enter into the agreement. Dr. Robin seconded the motion. A roll call vote was taken, and the motion passed unanimously.

Setting the Stage for 2025 and PY2026:

A memorandum summarized current funding priorities and strategic plan objectives, to support board discussion of next steps.

Input to the County Board:

A memorandum directed to the Champaign County Board offered community needs assessment support for expansion of paratransit services.

OLD BUSINESS:

PY25 Funded Programs:

A list of funded programs for FY25 was included in the packet for information.

Evaluation Capacity Building Project:

Ms. Canfield provided a summary of legal opinion on including board members in the upcoming storytelling workshop.

Expo Update:

An update from Allison and Dylan Boot on the 2024 Expo was included in the Board packet.

SUCCESSES AND AGENCY INFORMATION:

Updates were provided by Paula Vanier and LaShunda Hall from PACE and Hannah Sheets from Community Choices.

COUNTY BOARD INPUT:

None.

CCMHB INPUT:

The CCMHB met on July 17 and approved budgets and United Way MOU as presented.

BOARD ANNOUNCEMENTS AND INPUT:

None.

ADJOURNMENT:

The meeting adjourned at 9:38 a.m.

Respectfully Submitted by: Lynn Canfield, CCMHB/CCDDB Executive Director

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

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Champaign County, IL



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19 INVOICES

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VENDOR INVOICE LIST

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Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – August & September 2024

CCDDB/CCMHB/IDDSI: PY2024 4th Quarter reports and year-end Performance Measure Outcome reports were due August 31, 2024. Stephanie Howard-Gallo sent agency staff a due date reminder on August 20, 2024. 4th Quarter Program Reports and PY24 Service Data Charts are included in the CCDDB Packet for review. PY2024 Service Data Charts for CCDDB and CCMHB I/DD funded programs were created using the claims data entered in the system by agency staff. I am reviewing and documenting the information provided in the reports. This information was added to the CCDDB and CCMHB I/DD funded program Performance Data Charts. The PY24 Performance Measure Outcome reports will be compiled and posted at https://ccmhddbrds.org.

I am also using data from the PY24 4th Quarter reports, to create the 'Utilization Summaries for PY2024 CCDDB and CCMHB I/DD Programs' document. This document is in progress and will be included in the October 2024 CCDDB Packet.

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

A letter was sent to CU Autism Network regarding their PY24 funding and reports.

<u>Site Visits</u>: Community Choices Site Visits for Customized Employment, Inclusive Community Support, Self-Determination Support, Staff Recruitment and Retention, and Transportation Support were completed during August. Ms. Howard-Gallo accompanied me. No concerns were noted during these site visits.

The CCRPC Site Visits for Decision Support PCP and Community Life Short Term Assistance were also completed in August. No concerns were noted during these site visits. I continue to finalize Site Visit Reports. No concerns were noted.

I have coordinated with Kelli Martin, Director of Program Assurance to schedule DSC Site Visits. DSC Site Visits began on September 10, 2024 and will conclude in October.

I will be contacting representatives from CU Early, Champaign County Head Start/Early Head Start, and PACE to schedule their agency site visits.

Learning Opportunities: I met with Rosa Druker, Programs Manager and Emily Rodriguez, Program Coordinator with Dispute Resolution Institute to discuss a Case Manager Workshop. Ms. Druker and Ms. Rodriguez are scheduled to present on October 4, 2024 at Champaign Public Library.

In scheduling the most recent workshop, I have found it difficult to schedule a room at the Champaign Public Library. This may cause disruption with future workshops. I am actively seeking other community spaces to host these workshops.

Disability Resource Expo: Continued planning of the 2024 Expo is underway. The Expo is scheduled for October 26, 2024, at Market Place Shopping Center. Organizations interested in sponsoring the Expo can register until October 4, 2024. The Early Bird Deadline for Exhibitors was August 30, 2024 and the final deadline for Exhibitor's to register was September 13, 2024.

I placed another order for more Expo branded 'Clip It' hand sanitizers from Martin One Source. These hand sanitizers are a popular item and are passed out at other local resource events as a way of advertising the Expo. They are also included in the attendee bags at the Expo.

MHDDAC: I participated in the August MHDDAC meeting on August 27, 2024. The group takes July off. At the August meeting, the group voted to approve Becca Obuchowski and Angela Yost to serve as the cochairs again during PY25. During the August meeting, Angela Yost, Program Coordinator-CCRPC, presented on the newly funded Community Life Short Term Assistance program that is funded by the CCDDB and CCMHB through the IDDSI fund.

ACMHAI: I attended the 'Let's Learn About Supported Decision-Making' <u>webinar</u> on August 20, 2024. I attended the August Virtual Membership Meetings, scheduled for August 1 and 2, 2024. The August Best Practice Training on Workforce Development was <u>recorded</u>. The September ACMHAI I/DD Committee meeting was held on September 10, 2024. At the September meeting, National, State, and Community updates were shared and discussed.

I also participated in the July and September Executive Committee Meetings. The September meeting did not have a quorum and was canceled.

NACBHDD: I participated in the September I/DD Committee Meeting. The meeting was held as a joint meeting with the Behavioral Health and Justice Committee.

Human Services Council: The August HSC meeting was held on August 1, 2024. Rosa Druker, Programs Manager and Emily Rodriguez, Program Coordinator from Dispute Resolution Institute shared a presentation on the services provided by DRI. At the September meeting, Christine Bruns MS, MBA, Director of Business Development, The Pavilion presented on services offered at The Pavilion. Hannah Velasco, Recruitment and Training Coordinator, Champaign County CASA also presented on Champaign County CASA.

IDHS-DDD: IDHS-DDD announced that Adult PUNS Selection letters were mailed on Monday, July 15, 2024. 1,513 people were sent PUNS selection letters. 45 people from Champaign County received PUNS selection letters and are working with Prairieland ISC to complete the PAS process.

The State of Illinois has moved to terminate the Ligas Consent Decree, arguing that it has complied with the Consent Decree, although the State has been out of compliance with the Consent Decree for the past 7 years. This article published in Capitol News provides details on the Ligas Consent Decree and reasons that the State should not be able to terminate at this time. Oral arguments in the Ligas case began on Wednesday, July 24, 2024. On August 30, 2024, Judge Coleman denied the State's request to terminate the decree. An article in Capitol News details the ruling.

IDHS-DDD announced that the Governor's signed FY25 budget included the reappropriation of the FY24 funding for the Day Program Recruitment and Retention Grant, which includes Community Day Services (CDS), Developmental Training (DT), and Supported Employment (SEP) providers.

<u>Other</u>: I also participated in several webinars and the Engage IL meeting.

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

Staff Report-September 2024

<u>Summary of Activity:</u> The PY24 4th Quarter Program Service Activity, CLC Progress Plan, and Annual Performance Measure Reports were all due on August 30th. After all the Program Activity/Consumer Service reports were submitted, I spent time analyzing and compiling them into a single report. These reports are tracked with Excel data sheets. *See full report in this Board packet*. Ms. Stephanie Howard-Gallo sent an email to agencies reminding them about the deadline and requesting extensions. WIN Recovery requested and received a deadline extension to submit their reports. They finished and submitted all needed reports. Ms. Howard-Gallo also wrote letters suspending funds to the Don Moyer Boys & Girls Club and Courage Connection for failing to request an extension. At the time of writing, neither agency has submitted all its pending 4th quarter reports.

On August 15th, Ms. Canfield and I met with Courage Connection's Executive Director to address staff updates, online log-in credentials, and completing their PY25 application revision to their forms prior to contract issuance. The agency was in the latter stages of updating their CLC Plan. By the time you read this, their contract will have been issued.

I worked on a memo for the Strategic Plan for 2022-2025 with DRAFT Objectives for 2025. The updated Plan will be presented for approval by the Board at the November 20, 2024 CCMHB meeting. The details are in this Board packet.

Ms. Canfield and I are developing the October 16th study session, Resources for Justice Impacted Individuals. We will continue this work till the meeting.

<u>Site Visits:</u> August 27th, Ms. Howard-Gallo accompanied me on a site visit to Promise Healthcare South Neil St. office. The visit included a tour of the building, a check of client files and a discussion with an agency representative about the programs' performance. The agency had relevant supporting materials on hand for easy reference. No issues observed at the time of this writing.

<u>Contract Amendments</u>: On August 7th, the Board approved a contract amendment for the Champaign County Regional Planning Commission Youth Assessment Center (YAC) program. The YAC requested to modify a few PY24 Plan Narrative revisions to match those of PY25, to more accurately capture program activity.

<u>ACMHAI Committee:</u> On August 2-3rd, I attended the virtual ACMHAI Best Practice Training and virtual Business meeting.

<u>CCMHDDAC Meeting</u>: No July meeting. August 27th, committee members provided updates and heard RPC's presentation on the Community Life Short Term Assistance (CLSTA) program. This program provides direct funds ranging from \$100 to \$3,000 to persons with developmental/intellectual disabilities living in Champaign County.

<u>**CESSA Biweekly Coalition:**</u> August 14th, I attended the meeting as a first-time attendee. Members received an overview of CESSA, planning Regional Advisory Committee (RAC) 11 Event (1 pm to 3 pm, September 16 at Access Living). This will be RAC 11's first meeting in person. They will have a speaker, Mr. Preston Looper, a national expert on mobile crisis teams, who will be discussing issues in the behavioral health field. The coalition also discussed the murder of Ms. Sonya Massey. September 9th is the next CESSA SAC (Statewide Advisory Committee) meeting. September 11th is the next Coalition meeting at 5 pm, via Zoom.

<u>**CIT Steering Committee:</u>** Attended the August 7th CITSC meeting in the Brookens Building. Agency members provided updates.</u>

<u>Continuum of Service Providers to the Homeless (CSPH)</u>: I missed the September 3rd meeting due to taking a vacation day. The next meeting is on October 2nd at 3pm in person, location to be determined.

<u>CSPH Monitoring Committee:</u> Attended the August 8th monitoring meeting. We examined the committee's purpose and goals, monitoring guidelines, and expected schedule. On August 12th, the committee issued CSPH Emergency Solutions Grant (ESG) Entrance Letters to the Cunningham Township Supervisor's Office and the Champaign County Regional Planning Commission. The deadline for ESG Agencies to return relevant documentation for monitoring is September 12th at 5 p.m.

Evaluation Capacity Committee Team: Attended and participated in the monthly meetings with the Evaluation Capacity project staff. The next meeting is scheduled for September 13th.

EXPO Steering Committee: The coordinators and members are working on a news release, volunteer sign-up sheets, and other activities in preparation for the fifteenth annual Disability Resource Expo, which will be held from 11 a.m. to 4 p.m. on October 26th at Market Place Mall.

IPlan Behavioral Health Workgroup: August 5th, I went and participated in a focus group at CUPHD as part of the community health needs assessment (CHNA)and community health improvement planning. The discussion centered on social and community context and how it relates to community health. On August 22nd, committee members met via Zoom to review the CHNA survey update, Map 2.0 (with a focus on health equity and community involvement), and hear a presentation from UIUC Mr. Ryan L Santens. Mr. Santens launched a community mindfulness initiative to provide mindfulness-based interventions to underprivileged individuals in the Urbana-Champaign area. The next meeting is scheduled for September 19th.

<u>Rantoul Service Provider's Meeting</u>: At the August 19th meeting, members heard updates and community events. The next meeting is scheduled for September16th.

Reentry Executive Committee & Council Meetings: The July meeting was cancelled due to the loss of a Rosecrance staff member. The August and September Reentry Council sessions were held in person and via Webex. Members examined reentry figures from the previous months, discussed the Reentry Resource Fair, and identified areas for improvement for the next event. Council meetings are becoming more efficient, and specific discussions are taking place on which council members should serve on the Council.

SOFTT/LANS Meeting: There were no sub-committee meetings in the month of August. The next SOFTT/LANS meeting in person is on September 18th at 1:30pm at Champaign Public Library, Pavilion Room A/B.

Other Activities:

- August 29th, Attended the Rosecrance Reentry Resource Fair at the Illinois Bus Terminal in Champaign. The Resource Fair was a success with 17 Vendors (20 organizations signed up) and 39 attendees.
- August 26th, I gave a brief overview of our three budgets at the County Board Meeting. Ms. Canfield did an excellent job preparing me with our data.
- August 21st, Webinar-SJLA August 2024 Learning Series Event A Solution-oriented Approach for Mental Health and Substance Use Treatment Provision in Rural Communities
- August 20th, Webinar-Workforce Solutions Jam & Payment Reform: The Promise and Potential of Value Based Purchasing for a Thriving Workforce
- August 20th, ACMHAI Webinar: Let's Learn About Supported Decision Making
- Champaign County Training- Introduction to Respectful Workplace. 1-hour, informational seminar on understanding of respect and harassment and know how to promote respect and civility in the workplace.
- On July 15th, attended the Illinois Department of Public Health and the University of Illinois Chicago School of Public Health Webinar: Illinois Homeless Morbidity and Mortality Report.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report –

Sept. 2024 Board Meeting

SUMMARY OF ACTIVITY:

Quarterly Reporting:

Fourth Quarter reporting was due August 30, giving agencies an extra month to report. Performance Outcome Measures and a Cultural and Linguistic Plan progress report were due as well. I sent a reminder to the agencies 10 days before the due date.

WIN Recovery (CCMHB funded) requested an extension, which was approved. Don Moyer Boys and Girls Club and Courage Connection (both CCMHB funded) did not request an extension and received letters of noncompliance.

Other Compliance:

None.

Site Visits:

I assisted Kim Bowdry on a Community Choices (CCDDB funded) site visit and Leon Bryson on a Promise Healthcare (CCMHB funded) site visit. On these site visits, I reviewed client files and submitted my findings to the associate directors to add to their reports.

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

I am contacting interested artists for the Expo to be held October 26, 2024 at Market Place in Champaign. We currently have seven artists interested in participating.

Other:

- Prepared meeting materials for CCMHB/CCDDB regular meetings, special meetings, and study sessions/presentations.
- Attended meetings for the CCMHB/CCDDB.
- Composed minutes for the CCMHB/CCDDB meetings.

July 2024 Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

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

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

- Annual Cultural Competence Training- All training related to building skills around the values of CLC and ways to engage marginalized communities and populations that have experienced historical trauma, systematic barriers to receiving quality care. Each organization is responsible for completing and reporting on the training during PY24/PY25
- 2. **Recruitment of Diverse backgrounds and skills for Board of Director and Workforce** Report activities and strategies used to recruit diverse backgrounds for the board of directors and workforce to address the needs of target population that is explained in the program application.
- 3. **Cultural Competence Organizational or Individual Assessment/Evaluation-** A self-assessment organizational should be conducted to assess the views and attitudes towards the culture of the people that are being served. This also can be an assessment that will identify bias and other implicit attitudes that prevent a person from receiving quality care. This can also include client satisfaction surveys to ensure the services are culturally responsive.
- 4. Implementation of Cultural Competence Values/Trauma Informed Practices- The actions in the CLC Plan will identify actions that show how policies and procedures are responsive to a person culture and the well-being of employees/staff and clients being served. . This can also show how culturally responsive, and trauma informed practices are creating a sense of safety and positive outcomes for clients that are being served by the program.
- 5. Outreach and Engagement of Underrepresented and Marginalized Communities defined in the criteria in the program application.
- 6. Inter-Agency Collaboration- This action is included in the program application about how organizations collaborate with other organizations formally (Written agreements) and informally through activities and programs in partnership with other organizations. Meetings with other organizations without a specific activity or action as an outcome is not considered interagency collaboration.
- 7. Language and Communication Assistance- Actions associated with CLAS Standards 5-8 must be identified and implemented in the Annual CLC Plan. The State of Illinois requires access an accommodation for language and communication access with qualified interpreters or language access lines based on the client's communication needs. This includes print materials as assistive communication devices.

National Enhanced CLAS Standards for Health and Healthcare Reading Materials

Here is the Link to the <u>15 Enhanced National CLAS Standards</u>

Here is the link to the Blueprint on how National CLAS Standards can be implemented at every level in an organization. <u>CLAS Blueprint</u>

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

Agency Support and Technical Assistance:

Status Update for Following Organizations had special provisions to finalize the PY 25 Contract that were required prior to receiving the contract:

- 1. Terrapin Station- Completed
- 2. Champaign County Health Care Consumers- In Progress
- 3. Rosecrance of East Central Illinois- Completed
- 4. Don Moyer Boys and Girls Club- Did not Complete
- 5. Courage Connection- In progress
- 6. Grow In Illinois- Completed

GCAP- Greater Community Aids Project of East Central Illinois-

Board CLC Assessment and Training- September 9, 2024

GCAP Board will review results and incorporate planning for the PY25 Year.

4th Quarter Reports were due August 30, 2024- A full report will be submitted in October about the status of CLC Requirements. All agencies have submitted their 4th Quarter CLC reports.

Webinars and Training Attended

Webinar Series hosted by Rural Partners and the Governor's Rural Affairs Council (GRAC) Here are the recordings and slides available for your review.

Program Materials (September 5 | State Plan on Aging)

Recording: <u>https://youtu.be/vrDT2tVqDak</u>

Slides: https://uofi.box.com/s/avtivnzpd1p1lmlz7r7r8o6onecdt4yh

Resources:

- Older Americans Act: Overview and Funding: <u>https://crsreports.congress.gov/product/pdf/R/R43414</u>
- Executive Order Establishing Long-Term Blueprint to Support Aging Illinoisans: <u>https://gov-pritzker-newsroom.prezly.com/gov-pritzker-signs-executive-order-establishing-long-term-blueprint-to-support-aging-illinoisans#attachment-8c71a166-d379-4fde-b44c-164f96206351</u>
- Aging Action Areas Toolkit (AARP) CASE STUDIES FOR Age Friendly Environments, Combatting Ageism, Integrated Care, Long-term Care: <u>https://www.aarpinternational.org/resources/healthy-aging/toolkit</u>
- OAK PARK Aging in Communities Commission: <u>https://www.oak-park.us/your-government/citizen-commissions-and-members/aging-communities-commission</u>
- <u>2024</u>
- OAK PARK Work Plan (Aging in Communities): <u>https://www.oak-</u> park.us/sites/default/files/commissions/work-plans/2024/aging_in_communities_2024.pdf
- Planning for Aging Societies: An Analysis of Governmental Plans for Healthy Aging https://www.aarpinternational.org/resources/healthy-aging/national-plans
- Center on Health, Aging, and Disability (University of Illinois): <u>https://ahs.illinois.edu/center-on-health-aging-&-disability</u>
- AARP Age Friendly Communities: <u>https://www.aarp.org/livable-communities/network-age-friendly-communities/</u>
- Global Database of Age Friendly Practices: <u>https://extranet.who.int/agefriendlyworld/afp/</u>
- Adult protective services hotline <u>https://ilaging.illinois.gov/protectionadvocacy/abuse.html#:~:text=To%20report%20sus</u> pected%20abuse%2C%20neglect,%2D866%2D800%2D1409 Hotline Number: 1-866-800-1409

August 15 | Be in the Know About Aging Network Services

Recording: <u>https://youtu.be/mKyROjdGhwc</u>

Slides: https://uofi.box.com/s/816esevnoswmqzo49gbpywwq4f8yq98l

August 29 | Department of Human Services Family Community Services Programs

Recording: <u>https://youtu.be/TAFdOOH_nCc</u>

Anti-Stigma Activities/Community Collaborations and Partnerships

ACMHAI:

August 1- Best Practices Training

August 2- Business Meeting-

Children's Behavioral Health Committee: Meeting will be held on September 26, 2024.

Human Services Council – September 5, 2025'

Black Men and Boys Publication Vision for Community- This was presented in 2010 and I wanted to present this as part of seeing our priorites

https://www.opensocietyfoundations.org/publications/we-dream-world-2025-vision-blackmen-and-boys

FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMNTL DISABILITY BOARD



FEBRUARY 20, 1953	ACTUAL 2023	ACTUAL 2024	2024 ANNUAL
	JAN - AUG	JAN - AUG	BUDGET
REVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	2,770,605.56	2,908,680.81	5,179,568.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,415.00
04 PAYMENT IN LIEU OF TAXES	2,396.21	268.59	4,000.00
06 MOBILE HOME TAX	0.00	2,910.73	3,000.00
4001 PROPERTY TAX TOTAL	2,773,001.77	2,911,860.13	5,188,983.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	31,892.28	54,146.61	44,834.00
4008 INVESTMENT EARNINGS TOTAL	31,892.28	54,146.61	44,834.00
4009 MISCELLANEOUS REVENUES			
02 OTHER MISCELLANEOUS REVENUE	1,537.00	0.00	5,000.00
4009 MISCELLANEOUS REVENUES TOTAL	1,537.00	0.00	5,000.00
TOTAL REVENUES	2,806,431.05	2,966,006.74	5,238,817.00
EXPENDITURES			
5020 SERVICES			
01 PROFESSIONAL SERVICES	271,408.00	283,576.00	425,371.00
07 INSURANCE (NON-PAYROLL)	0.00	4,333.00	4,333.00
25 CONTRIBUTIONS & GRANTS	2,802,055.00	2,959,970.00	4,816,113.00
5020 SERVICES TOTAL	3,073,463.00	3,247,879.00	5,245,817.00
TOTAL EXPENDITURES	3,073,463.00	3,247,879.00	5,245,817.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	0.00	0.00	7,000.00
6001 OTHER FINANCING SOURCES TOTAL	0.00	0.00	7,000.00
7001 OTHER FINANCING USES			
01 TRANSFERS OUT	-50,000.00	0.00	0.00

FUND DEPT 2108-050 : DEVLPMNTL DISABILITY FUND - DEVLMNTL DISABILITY BOARD



	ACTUAL	ACTUAL	2024
Franuary 20, 1857	2023	2024	ANNUAL
MUARY 20.	JAN - AUG	JAN - AUG	BUDGET
7001 OTHER FINANCING USES TOTAL	-50,000.00	0.00	0.00
TOTAL OTHER FINANCING SOURCES (USES)	-50,000.00	0.00	7,000.00
NET CHANGE IN FUND BALANCE	317,031.95	281,872.26	0.00

FUND DEPT 2101-054 : I/DD SPECIAL INITIATIVES - CILA PROJECT



FURLARY 20, 1957	ACTUAL	ACTUAL	2024 ANNUAL
	2023 JAN - AUG	2024 JAN - AUG	BUDGET
REVENUES			
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	12,224.51	14,774.24	6,000.00
4008 INVESTMENT EARNINGS TOTAL	12,224.51	14,774.24	6,000.00
TOTAL REVENUES	12,224.51	14,774.24	6,000.00
EXPENDITURES			
5010 COMMODITIES			
17 EQUIPMENT LESS THAN \$5000	0.00	0.00	5,063.00
5010 COMMODITIES TOTAL	0.00	0.00	5,063.00
5020 SERVICES			
01 PROFESSIONAL SERVICES	0.00	0.00	1,000.00
19 ADVERTISING, LEGAL NOTICES	0.00	0.00	200.00
25 CONTRIBUTIONS & GRANTS	47,666.00	181,674.00	399,737.00
5020 SERVICES TOTAL	47,666.00	181,674.00	400,937.00
TOTAL EXPENDITURES	47,666.00	181,674.00	406,000.00
OTHER FINANCING SOURCES (USES)			
6001 OTHER FINANCING SOURCES			
01 TRANSFERS IN	50,000.00	0.00	0.00
6001 OTHER FINANCING SOURCES TOTAL	50,000.00	0.00	0.00
TOTAL OTHER FINANCING SOURCES (USES)	50,000.00	0.00	0.00
NET CHANGE IN FUND BALANCE	-14,558.51	166,899.76	400,000.00

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



FURUARY 20. 187	ACTUAL	ACTUAL 2024	2024 ANNUAL
	2023		
	JAN - AUG	JAN - AUG	BUDGET
EVENUES			
4001 PROPERTY TAX			
01 PROPERTY TAXES - CURRENT	3,371,314.64	3,540,999.47	6,302,595.00
03 PROPERTY TAXES - BACK TAX	0.00	0.00	2,941.00
04 PAYMENT IN LIEU OF TAXES	2,915.74	326.98	1,500.00
06 MOBILE HOME TAX	0.00	3,543.48	4,200.00
4001 PROPERTY TAX TOTAL	3,374,230.38	3,544,869.93	6,311,236.00
4004 INTERGOVERNMENTAL REVENUE			
76 OTHER INTERGOVERNMENTAL	271,408.00	283,576.00	425,371.00
4004 INTERGOVERNMENTAL REVENUE TOTAL	271,408.00	283,576.00	425,371.00
4008 INVESTMENT EARNINGS			
01 INVESTMENT INTEREST	38,598.69	51,161.39	56,268.00
4008 INVESTMENT EARNINGS TOTAL	38,598.69	51,161.39	56,268.00
4009 MISCELLANEOUS REVENUES			
01 GIFTS AND DONATIONS	450.00	575.00	3,000.00
02 OTHER MISCELLANEOUS REVENUE	14,956.00	5,150.00	42,000.00
4009 MISCELLANEOUS REVENUES TOTAL	15,406.00	5,725.00	45,000.00
OTAL REVENUES	3,699,643.07	3,885,332.32	6,837,875.00
XPENDITURES			
5001 SALARIES AND WAGES			
02 APPOINTED OFFICIAL SALARY	69,961.63	72,410.14	110,745.00
03 REGULAR FULL-TIME EMPLOYEES	233,668.07	245,348.48	389,583.00
05 TEMPORARY STAFF	0.00	0.00	1,000.00
08 OVERTIME	0.00	0.00	500.00
5001 SALARIES AND WAGES TOTAL	303,629.70	317,758.62	501,828.00
5003 FRINGE BENEFITS			
01 SOCIAL SECURITY-EMPLOYER	22,186.90	23,208.84	38,275.00
02 IMRF - EMPLOYER COST	7,656.69	8,221.71	13,559.00
04 WORKERS' COMPENSATION INSURANC	1,166.83	1,203.63	2,001.00

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



	ACTUAL	ACTUAL	2024	
A A A A A A A A A A A A A A A A A A A	2023	2024	ANNUAL	
0RUARY 20.10	JAN - AUG	JAN - AUG	BUDGET	
05 UNEMPLOYMENT INSURANCE	1,655.53	1,899.88	1,899.88	
06 EE HEALTH/LIFE	37,271.20	30,957.72	88,820.12	
5003 FRINGE BENEFITS TOTAL	69,937.15	65,491.78	144,555.00	
5010 COMMODITIES				
01 STATIONERY AND PRINTING	331.03	696.91	1,000.00	
02 OFFICE SUPPLIES	3,072.20	1,438.55	3,700.00	
03 BOOKS, PERIODICALS, AND MANUAL	0.00	0.00	300.00	
04 POSTAGE, UPS, FEDEX	931.31	410.56	2,000.00	
05 FOOD NON-TRAVEL	652.11	941.52	1,500.00	
13 DIETARY NON-FOOD SUPPLIES	102.56	98.05	200.00	
17 EQUIPMENT LESS THAN \$5000	2,736.54	2,177.25	7,000.00	
19 OPERATIONAL SUPPLIES	142.99	2,109.40	2,500.00	
21 EMPLOYEE DEVELOP/RECOGNITION	0.00	0.00	285.00	
5010 COMMODITIES TOTAL	7,968.74	7,872.24	18,485.00	
5020 SERVICES				
01 PROFESSIONAL SERVICES	108,446.13	126,987.20	180,000.00	
02 OUTSIDE SERVICES	4,765.50	5,554.93	28,000.00	
03 TRAVEL COSTS	6,807.06	2,383.43	7,000.00	
04 CONFERENCES AND TRAINING	1,848.18	0.00	4,000.00	
05 TRAINING PROGRAMS	3,504.00	0.00	12,000.00	
07 INSURANCE (non-payroll)	9,618.00	5,285.00	15,000.00	
12 REPAIRS AND MAINTENANCE	0.00	0.00	300.00	
13 RENT	18,732.89	19,145.55	40,000.00	
14 FINANCE CHARGES AND BANK FEES	0.00	2.17	30.00	
19 ADVERTISING, LEGAL NOTICES	1,558.00	15.20	9,500.00	
21 DUES, LICENSE & MEMBERSHIP	17,239.99	16,069.99	20,000.00	
22 OPERATIONAL SERVICES	2,448.19	1,987.02	7,000.00	
24 PUBLIC RELATIONS	16,631.20	15,100.00	20,000.00	
25 CONTRIBUTIONS & GRANTS	3,500,619.00	4,027,523.00	5,801,407.00	
37 REPAIR & MAINT - BUILDING	0.00	0.00	300.00	
45 ATTORNEY/LEGAL SERVICES	1,675.00	0.00	2,000.00	
46 EQUIP LEASE/EQUIP RENT	1,393.42	1,393.42	3,000.00	
47 SOFTWARE LICENSE & SAAS	9,243.67	10,640.80	14,000.00	
48 PHONE/INTERNET	1,615.55	1,870.91	2,470.00	
5020 SERVICES TOTAL	3,706,145.78	4,233,958.62	6,166,007.00	

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



ACTUAL	ACTUAL	2024
2023	2024	ANNUAL
JAN - AUG	JAN - AUG	BUDGET
4,087,681.37	4,625,081.26	6,830,875.00
-127,535.00	0.00	-7,000.00
-127,535.00	0.00	-7,000.00
-127,535.00	0.00	-7,000.00
515,573.30	739,748.94	0.00
	2023 JAN - AUG 4,087,681.37 -127,535.00 -127,535.00	Normal Normal 2023 2024 JAN - AUG JAN - AUG 4,087,681.37 4,625,081.26 -127,535.00 0.00 -127,535.00 0.00 -127,535.00 0.00



BRIEFING MEMORANDUM

DATE: September 18, 2024
TO: Champaign County Developmental Disabilities Board (CCDDB)
FROM: Kim Bowdry, Associate Director for I/DD
SUBJECT: Strategic Plan for 2022-2025 with DRAFT Objectives for 2025

Background:

In 2021, the CCDDB adopted a new three-year plan for 2022-2024. A community needs assessment survey was developed and distributed throughout Champaign County, online and in paper format, in English and Spanish. A provider survey was also used to gather information related to I/DD and MI/SUD service systems in Champaign County. A Logic Model was developed, linking action steps to outcomes. Each of these tasks informed the Plan. Board input on consumer outcomes also influenced the Plan. At their May 22, 2024 meeting, the CCDDB approved the extension of the current Plan to allow for alignment with the shared community health plan timeline.

Staff continue to partner with the Regional Vermilion-Champaign Executive Committee on shared health needs assessments, priorities-setting, and community health plans. While this community health plan does not replace the CCDDB Three Year Plan, there are overlapping issues of interest and opportunities for us to advocate on behalf of people with I/DD.

The Plan with DRAFT Objectives for Fiscal Year 2025 continues the commitment to existing goals while being responsive to emerging issues. The Plan is attached. Proposed changes *italicized* and highlighted, and language to be removed is lined out. This document will be disseminated to interested parties for comment. CCDDB staff have reviewed the draft and will hold further discussions with consideration of comments received from stakeholders and other interested parties.

The updated Plan will be presented for approval at the November 20, 2024 CCDDB meeting.

CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY

STRATEGIC PLAN

FOR

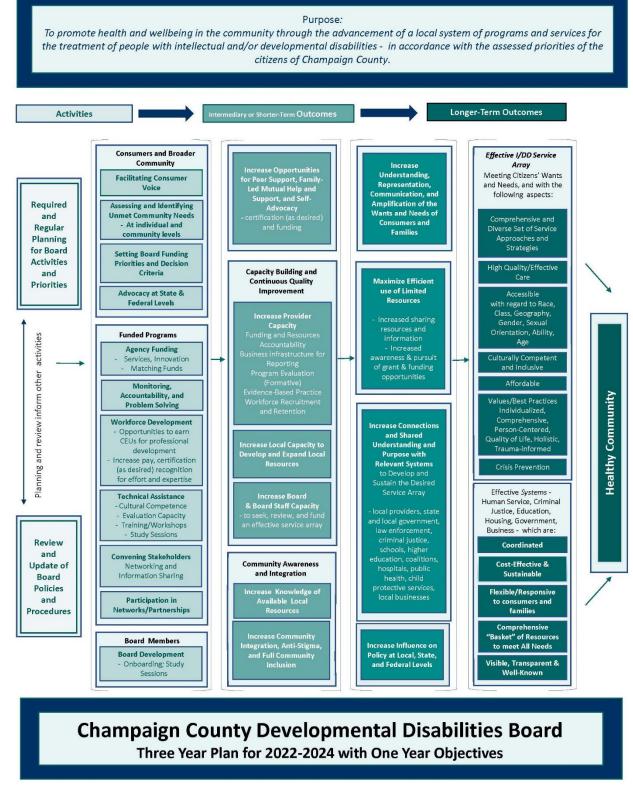
FISCAL YEARS 2022-2025 (1/1/22 – 12/31/25)

WITH

ONE YEAR OBJECTIVES

FOR

FISCAL YEAR 2025 (1/1/25-12/31/25)



Logic Model Developed by Board and Staff with the UIUC Evaluation Capacity Building Project Team during Spring 2021

<u>CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF</u> <u>PERSONS WITH A DEVELOPMENTAL DISABILITY</u> (CHAMPAIGN COUNTY DEVELOPMENTAL DISABILITIES BOARD)

WHEREAS, the Champaign County Developmental Disabilities Board was established under the Illinois County Care for Persons with Developmental Disabilities Act, now revised as the Community Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 50, Sections 835/0.05 to 835/14 inclusive) in order to "provide facilities or services for the benefit of its residents who are persons with intellectual or developmental disabilities and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county."

WHEREAS, while the Champaign County Developmental Disabilities Board is not required by state statute or other authority to prepare a one- and three-year plan for a program of supports and services for people with intellectual and developmental disabilities, open strategic planning with input from stakeholders and constituents is highly valued.

THEREFORE, the Champaign County Developmental Disabilities Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the intellectual and developmental disabilities supports and services plan for Champaign County:

MISSION STATEMENT

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

STATEMENT OF PURPOSES

- 1. Planning for the intellectual and developmental disability service and support system to assure accomplishment of the CCDDB goals.
- 2. Allocation of local funds to assure the provision of a comprehensive system of community based intellectual and developmental disability services and supports anchored in high-quality person-centered planning.
- 3. Coordination of affiliated providers of intellectual and developmental disability services and supports to assure an interrelated, accessible system of care.
- 4. Evaluation of the system of care to assure that services and supports are provided as planned and that services are aligned with the needs and values of the community.

To accomplish these purposes, the Champaign County Developmental Disabilities Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the intellectual and developmental disability service and support system. The CCDDB shall perform those duties and responsibilities as specified in Sections 835/0.05 to 835/14 inclusive of the Community Care for Persons with Developmental Disabilities Act.

A COORDINATED AND ACCESSIBLE CONTINUUM OF SERVICES AND SUPPORTS

Comprehensive and Diverse Set of Service Approaches and Strategies

High Quality/Effective Care

Goal #1:

Support a continuum of services to meet the needs of people with intellectual and/or developmental disabilities (I/DD), along with their families, residing in Champaign County.

Objective #1: Under established policies and procedures, *and acknowledging that the "continuum" of services should only include least restrictive environments,* solicit proposals from community based providers in response to Board defined priorities and associated criteria using a competitive application process.

Objective #2: With clear connection between the model and best outcomes for people served, based on input from the people who are

served, encourage use of appropriate evidence-based, evidence-informed, recommended, innovative, or promising practice models.

Objective #3: Promote wellness for people with I/DD, through supports and services which are based on their input and may include enrollment in benefit plans, linkage and advocacy, and coordinated access to primary care. Support access to physical and behavioral health treatments for persons regardless of ability/disability.

Objective #4: To identify outcomes of value to those who use services and supports, Partner with ask people with I/DD and key stakeholders for their ideas and preferences. toward improved outcomes for people.

Objective #5: Pursue, as feasible, development or expansion of residential and/or employment supports for persons with I/DD not supported with state/federal funding.

Objective #6: In response to changes in Medicaid and Medicaid-waiver services, realign CCDDB investments to fund services and supports outside the realm of Medicaid, including pilot projects and creative solutions to persistent problems, such as workforce recruitment and *flexible services. retention, including, but not limited to, Direct Support Professional* (DSP) retention efforts and payments. Use input from people with I/DD to shape these solutions.

Objective #7: Support initiatives providing housing and employment supports for Encourage consideration of the housing and employment needs of persons with intellectual and developmental disabilities through the Champaign County Continuum of Service Providers to the Homeless, Transition Planning Committee, or other local collaboration.

Objective #8: Enable providers to implement Support flexible service options, such as telehealth, virtual, and related training or other virtual means,

to maintain access and engagement with clients and community. Flexible options should be matched to the preferences of people with I/DD.



Goal #2:

Sustain the commitment to improving outcomes for members of underrepresented and underserved populations.

Objective #1: Support an inclusive network of culturally and linguistically responsive and family and self-advocate support groups.

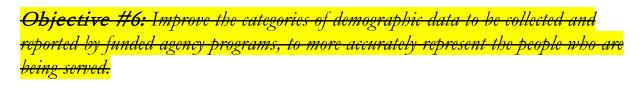
Objective #2: Provide technical assistance for *continuous improvement of funded agency providers*? *funded agencies*? cultural and linguistic competence plans, to meet the needs of all people served *and to engage with those seeking services*.

Objective #3: Encourage providers and other community-based organizations to allocate resources for training, technical assistance, and professional development activities for direct support staff and

governing and/or advisory boards, to advance cultural and linguistic competence.

Objective #4: Promote trauma-informed practices in program delivery, board and agency staff development, policies, and procedures.

Objective #5: With assistance from the Regional Health Plan Collaboration, assess the impact of public health threats on Champaign County residents with I/DD, particularly those who are also members of racial or ethnic minority groups. Encourage providers to support best health outcomes for all.





Goal #3:

Improve access to and engagement in services through increased coordination among providers, community

stakeholders, people with I/DD, their families, and other key supporters.

Objective #1: Sponsor or co-sponsor educational and networking opportunities for service providers and others supporting people with I/DD, offering in-person events as public health guidance allows.

Objective #2: Engage other *local* funders and stakeholders *and participate in coordinating bodies and intergovernmental councils as appropriate,* to develop new initiatives, strengthen services, and maximize opportunities for people who have I/DD.

Objective #3: In collaboration with the CCMHB and other community partners, ensure that the needs of justice-involved persons with I/DD are considered in the development of an effective diversion/deflection system, including with input from people who have I/DD.

Objective #4: With public, family, self-advocate, provider, and stakeholder input, increase advocacy for planning and policy changes at the state and federal levels and shape future funding priorities for the CCDDB.

Objective #5: Track Illinois Department of Human Services Division of Developmental Disabilities' Prioritization for Urgency of Need for Services (PUNS) database for state and local trends and to ensure full representation of the service preferences of Champaign County residents. Communicate with the Independent Service Coordination team, representatives of IDHS, and stakeholders, regarding PUNS and system changes. Through interviews and focus groups, learn about the service and support needs and preferences of Champaign County residents receiving services.

> Values/Best Practices Individualized, Comprehensive, Person-Centered, Quality of Life, Holistic, Trauma-informed

Goal #4:

Encourage high-quality person-centered planning and follow-through for people served by funding from the CCDDB and, through the Intergovernmental Agreement, from the CCMHB.

Objective #1: Continue emphasis on self-determination and Person Centered Planning (PCP) training and implementation for all treatment plan clients. Support conflict free case management for all treatment plan clients.

Objective #2: Encourage focus on achievement of the outcomes people with *I/DD have identified people's identified personal outcomes* in their person-centered plans and among their services and supports.

Objective #3: Collaborate with self-advocates, family advocates, and agency providers on the identification of performance measures consistent with valued outcomes such as connection to friends, community, meaningful work and non-work activities, clearer resource and event information, etc.

Objective #4: Track the Use data on the utilization of funded services, driven by self-directed service plans and tracked through an integrated online data collection and tracking system, for future planning and priorities.

Objective #5: Assess the feasibility of using individual Person-Centered Plans to learn more about the preferences of people with I/DD, especially those who are not actively expressing these in public forums.



Goal #5:

Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).

Objective #1: Coordinate integration, alignment, and allocation of resources with the CCMHB to ensure the efficacious use of resources for people with I/DD.

Objective #2: Increase the reach and variety of strategies that empower people who have I/DD and improve their access to integrated settings.

Objective #3: Collaborate with the CCMHB on promoting inclusion and respect for people with I/DD.

Objective #4: Using input from people who have I/DD, collaborate with the CCMHB for use of the funds from the sale of the CIL_A homes I/DD Special Initiatives Fund to meet the needs of Champaign County residents with who have I/DD with and significant support needs.

CHILDREN AND FAMILY-FOCUSED PROGRAMS

High Quality/Effective Care

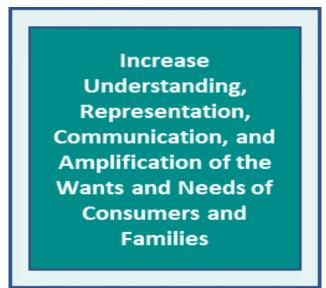
Accessible with regard to Race, Class, Geography, Gender, Sexual Orientation, Ability, Age

Goal #6:

Identify children at-risk of developmental delay or disability, and support early intervention services and family supports.

Objective #1: Support the use of evidence-based/informed models by programs serving families with young children not eligible for Early Intervention or under the School Code, and require collaboration and coordination by providers to avoid duplication of effort and to reach all children who have a service/support need.

Objective #2: Emphasize cultural and linguistic competence in services and supports for young children and early identification of disabilities, including among members of racial, ethnic, or gender minority groups and rural residents. Reduce disparities in the age of identification and intervention to remediate delays. Promote culturally responsive and family driven support networks for all residents.



Goal #7:

Support access to services and programs for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.

Objective #1: To improve the transition from school to adult services, foster collaborations among schools, adult service providers, young people with I/DD, and other stakeholders.

Objective #2: Fund and advocate for other funding for flexible support for people with I/DD and their families to enhance their ability to live together, to transition to greater independence when and if they choose, and to be as connected to their communities as *fully and positively as* possible.

COMMUNITY ENGAGEMENT & ADVOCACY



Goal #8:

Promote inclusion and respect of people with I/DD, through broad based community education efforts.

Objective #1: Continue efforts to Promote inclusion and challenge stigma and discrimination through collaborations such as the Alliance for Inclusion and Respect and disABILITY Resource Expo. Whenever possible, include student groups or interns in these efforts. Continue to engage with student groups and interns on related research projects and discussions, such as through UIUC School of Social Work Learning Lab.

Objective #2: Participate in and promote other community education initiatives, such as walks, forums, and presentations to raise awareness, improve cultural competence, and cultivate acceptance, inclusion, and respect.

Objective #3: Improve awareness and understanding of developmental disabilities through sustainable self-advocacy and family support organizations, especially those led by people with I/DD and their family members and other supporters. Promote their efforts to reduce stigma/promote inclusion and to work with Cultural and Linguistic Competence Coordinator on outreach and engagement strategies.

Objective #4: To integrate people with I/DD more fully into community life in Champaign County, seek out and share their direct input with other collaborations and leadership. Emphasize inclusion as a benefit to all members of the community, regardless of ability.

Objective #5: Encourage efforts to support people with I/DD in meaningful work and non-work experiences in their community, driven by their own interests. Investigate and develop strategies for engaging employers and other community partners.

Objective #6: With input from people who have I/DD, *support development of web-based resources to*-make information on community services and resources more accessible and user-friendly.

Objective #7: Increase community awareness of available local resources to broaden support and advocacy for local provider agencies by the community at large.



Goal #9:

Stay abreast of emerging issues affecting service and support systems and access to services and be proactive through concerted advocacy efforts.

Objective #1: Advocate for workforce development and stability, in coordination with people with I/DD and their families and supporters.

Objective #2: Track relevant class action cases, such as the Ligas Consent Decree. Advocate for the allocation of state resources sufficient to meet needs of people returning to home communities from state DD facilities. Encourage development of least restrictive residential options for people with I/DD. For people who have not yet been selected for Medicaid-waiver funding, and for those who were selected but chose an option not meeting their needs and preferences, advocate for the state to create flexible options.

Objective #3: Follow state and federal Olmstead cases, implementation of rules such as the Workforce Innovation and Opportunity Act, and state response to Home and Community Based Services guidance, with attention to local impact. **Objective #4:** Monitor changes in the Medicaid waivers and Medicaid/Managed Care, and advocate with other organizations whenever appropriate for increased service capacity *and service options* sufficient to meet demand in Champaign County.

Objective #4: Participate in the development of recommendations for the redesign of Illinois' I/DD service system, through Engage Illinois and similar collaborations.

Objective #5: With other organizations whenever appropriate, advocate for increased state funding, improved and improvements in service delivery, expanded workforce, adequate reimbursement rates, including for transportation, and timely payments for local community-based intellectual and developmental disability services and supports. and to the broader human services network under contract with the State of Illinois. As opportunities arise, p Participate in planning and policy development with state agencies such as IDHS, and use these opportunities to advocate advocating for the needs and choices of Champaign County residents, based on direct and indirect input from people with I/DD.

Objective #6: In addition to the monitoring and evaluation of funded programs, encourage strategies which result in the highest quality personal outcomes for people with I/DD, their families, and those most closely involved in their lives.

Objective #7: Monitor the transition to a new Independent Service Coordination provider, as well as the system of I/DD services funded by the state of Illinois.

Advocate on behalf of and with those residents of Champaign County who receive Home Based Support, who have been selected from PUNS, or who are eligible and enrolled and waiting for PUNS selection.



BRIEFING MEMORANDUM

DATE: September 18, 2024
TO: Members, Champaign County Developmental Disabilities Board
FROM: Lynn Canfield, Executive Director, Kim Bowdry, Associate Director
SUBJECT: DRAFT PY2026 Allocation Priorities and Decision Support Criteria

Statutory Authority:

The <u>Community Care for Persons with Developmental Disabilities Act</u> (50 ILCS 835/ Sections 0.05 to14) is the basis for Champaign County Developmental Disabilities Board (CCDDB) policies. Funds shall be allocated within the intent of the controlling act, per the laws of the State of Illinois. <u>CCDDB Funding Requirements and Guidelines</u> require that the Board annually review decision support criteria and priorities to be used in the process which results in contracts for services. Upon approval, this memorandum becomes an addendum to the Funding Guidelines.

Purpose:

The CCDDB may allocate funds for the Program Year 2026, July 1, 2025 to June 30, 2026, using a timeline which begins with review and approval of allocation priorities and decision support criteria. These describe how the Board will contract with eligible human service providers for programs furthering the Board's goals and fulfilling their responsibilities to the public. This memorandum offers:

- Assessed needs and preferences of people who have Intellectual/Developmental Disabilities (I/DD).
- Impact of state and federal systems and other context.
- Broad priority categories to be addressed by proposals for funding.
- Best Value Criteria, Minimal Expectations, and Process Considerations to support the Board in evaluating applications and making allocation decisions.

Staff recommendations are based on input from board members and interested parties, along with our understanding of the larger context. This draft is presented to the Board for review and discussion and will be shared with stakeholders for further input. An updated version will be presented at the November 2024 meeting. If a final draft can be approved by the Board prior to December, a Notice of Funding Availability will be published, and the application period will start December 20.

Assessed Needs of Champaign County Residents:

The Boards' <u>2021 community needs assessment</u> includes survey and qualitative data from Champaign County residents with I/DD and their supporters. Many people commented on barriers not just to services but also to resources enjoyed by others. The 2021 results contributed to allocation priorities for the past three years. A community health needs assessment and a survey specific to funded programs are in process, with results to be used in future planning and priorities.

Each year, people with I/DD report unmet service needs through the Illinois Department of Human Services – Division of Developmental Disabilities (IDHS-DDD) "Prioritization of Urgency of Need for Services" (PUNS) database. In the August 2, 2024 PUNS report, sorted by County and Selection Detail:

- The most frequently identified support needs are (in order): Transportation, Personal Support, Behavioral Supports, Speech Therapy, Other Individual Supports, Occupational Therapy, Physical Therapy, Assistive Technology, Adaptations to Home or Vehicle, Respite, and Intermittent Nursing Services.
- 238 people are waiting for Vocational or Other Structured Activities, with the highest interest in community settings.
- 75 are waiting for (out of home) residential services with less than 24-hour support, and 39 are seeking 24-hour residential support.

Also annually, through a CCDDB contract, the Champaign County Regional Planning Commission (CCRPC) asks people with I/DD about their preferences and satisfaction. Highlights of the PY2024 preference assessment, to which 103 people responded, 40% of them parents or guardians of the person, show:

- 45% had been on the PUNS list over five years, 30% three to five years.
- 94% of respondents have been on the PUNS list longer than one year.
- 59% need services within one year.
- 62% lived with family and 33% in their own home with occasional support.
- 62% preferred living with family and 42% living alone.
- 60% would choose to live in Champaign, 24% Urbana, 8% Mahomet, 8% outside of Illinois, 6% in Savoy, and 5% Rantoul.
- Despite interest in competitive employment (47%) or volunteer opportunities (37%), only 44% were doing so.
- From most to least frequently indicated, employment and volunteer interests were Other, Retail, Working with Animals, Restaurant/Food Services, Recreation and Outdoors, Office, and (a four-way tie) Factory and Public Service and the Arts and Trade Work.
- Half of respondents participated in a community group or organization. They identified Central Illinois Parrotheads, Special Olympics, CU Special Recreation, Penguin Project, CU Theater Company, Best Buddies, Church, Fast Track, Tae Kwon Do, Night to Shine, Parkland, The Singing Men of

GNN Choir, Challenger League, Stephen's YMCA/Larkin's Place, Audubon Society, Dance Club, The Autism Program, Community Choices, and DSC.

- In order of most frequently indicated, recreation preferences included CU Special Rec (47%), Special Olympics, (three-way tie) YMCA and Church and Other, Groups/Clubs, Health and Wellness, Best Buddies, Continuing Education, and Gardening.
- Current leisure activities, in the order most often indicated: Eating Out, (tie) Shopping and Movies, Parks, Zoos/Aquariums, Sporting Events, (tie) Recreation/Sports and Festivals, Swimming, Concerts, and Other.
- Areas of support sought, in the order more often indicated: Financial, Medical, Independent/Daily Living, Transportation, (tie) Socialization and Competitive Employment Services, (tie) Behavioral Therapy/Counseling and Physical or Occupational Therapy, (tie) Community Day Services and Respite, Assistive Technology, Other, and None.
- 52% identified the need for Transportation Support.
- 36% were on a provider agency's waiting list for the service or support indicated, with 17% waiting for longer than five years, 37% between three and five years, and 29% between one and three years.
- 83% had waited longer than one year for a service or support indicated.
- The provider agencies identified were Community Choices, DSC, Envision, Familia Dental, and unknown. The majority were on PUNS.
- 82% were receiving case management services.
- As to navigating the system and advocating for themselves, 31 were "somewhat comfortable," 37 more comfortable, and 29 less comfortable. This is an improvement over last year's survey results.

157 people engage in CCDDB funded programs while waiting for PUNS selection. In 2023, 41 adults and 8 children in Champaign County were issued selection letters. In 2024, 45 were selected. We do not have information from the Independent Service Coordination (ISC) unit regarding completed awards in either year.

Due to the long history of identified need for Transportation, data were presented to the Champaign County Board in July 2024 (see pages 106-111 of the CCDDB packet). In addition to expansion of current transportation options, coordination of rides and training for participants and staff would help bridge the gap.

CCDDB staff have received feedback from providers and board members:

- Some people with I/DD say they do not feel safe accessing the community. As we seek greater access for them, we need to be sure they want that and then work with them to become ready and comfortable.
- When asked what they think when someone gets off at the same bus stop as them, an individual shared that they fear that the person is stalking them. Others have shared that they fear they will be shot in the community or robbed or even get random unwanted text messages. Obviously, this does not

apply to all people with I/DD, but if planning is not truly informed by the individual, we will miss important issues.

- Our hopes and dreams for people with I/DD may be bigger than what people want or are ready for. Some may not be thinking about vacation, classes, and hobbies if they don't feel their basic needs are being met.
- On the other hand...
- Despite priority categories and qualified local providers, there continue to be service gaps for those who are nearly independent. Young adults could use assistance to access community, social, hobby, and leisure opportunities. Some have transportation and the desire to try new things but rely only on family support to engage. The Champaign Public Library's new studio provides a great opportunity to learn about 3D printing and crafts using equipment provided there. Small groups or pairs who share an interest could explore such community options that are geared toward more independent involvement.

Self-advocates will share observations and answer Board member questions during a study session on September 25. Their input will be incorporated in a subsequent draft of these PY2026 Allocation Priorities and Decision Support Criteria.

Operating Environment:

The State of Illinois has been out of compliance with the **Ligas Consent Decree**, an Americans with Disabilities Act-Olmstead case concerning community-integrated residential settings. An overview of the class action case is provided by the American Civil Liberties Union of Illinois, and annual court monitor and data reports are available on IDHS website. Inadequate reimbursement rates have been a major cause not only for the state's failure to meet the terms of the settlement but also for its loss of community-based service capacity. Champaign County has identified specific concerns regarding the rate structure's inadequacy to meet transportation needs and whether such rate adjustments as have been made for Chicago and Springfield area providers should not also apply to Champaign County.

This year, the State moved to terminate the Decree, arguing that it has complied with the terms, despite non-compliance findings for the past 7 years. This article published in Capitol News describes the decree and why the State should not terminate. The request was denied on August 30, 2024, when Judge Coleman agreed with legal advocates who argued that the state still hasn't met its decade-old promises to help people with I/DD live outside large institutions. The judge acknowledged that the state has made progress but has not yet met the mandates of the consent decree. Another <u>article</u> in Capitol News details the ruling.

Direct Support Professional (DSP) pay remains below what workers earn in State Operated Developmental Centers (SODCs), which have been plagued by findings of serious harm and neglect and inadequate corrective actions. Last year, Equip for Equality issued a report on their monitoring of one SODC, "<u>Choate Developmental</u> <u>Center Repurposing Plan: Why No One Should be Left Behind.</u>" Recommendations were to end new placements, develop step-down and forensic units, transition people to less restrictive environments, improve programming, surveillance, and monitoring, and more. Recently, self-advocates, family members, and even the Director of the Division of DD have become more engaged toward solutions.

The Illinois General Assembly and Governor have again increased wages for DSPs, to bolster community-based service capacity. While historically unprecedented, the recent investments and wage increases might still be too little or too late to foster the level of direct support people seek. The state's reliance on institutional care and the slow growth of home and community-based services (HCBS), those waiver programs which are eligible for federal funding match and which require DSPs, are well-known. Community-based service capacity lost in the last decade will take time to restore. The transition to less restrictive environments will require expansion of home and community-based services (HCBS) and its key workforce, DSPs.

As many have advocated, the shift away from institutional care should offer people flexibility in service options and engagement with their communities. The global pandemic demonstrated how institutionalization and isolation multiply health risks.

"Our Epidemic of Loneliness and Isolation: The U.S. Surgeon General's Advisory on the Healing Effects of Social Connection and Community" acknowledges the devastating impacts of increased isolation on all and identifies ways to advance social connection. Social isolation is not a new concern for those with I/DD and their paid and unpaid providers and loved ones, who experience its toll more than others. It has a role in the progression of 'diseases of despair' (e.g., depression and substance use disorder), other health conditions, and resulting deaths. In "Capturing the Truth Behind Causes of Death," the Coalition to End Social Isolation & Loneliness calls for investigation and mitigation. People who have I/DD and their supporters deserve trauma-informed services as well as solutions to barriers to all resources, whether particular to their needs or enjoyed by other community members.

Because services and supports available to individuals through other pay sources cannot be funded by the CCDDB, we are mindful of changes in the **state and federal systems**, particularly the <u>"Medicaid waiver" programs available through IDHS-DDD</u>, and of whether eligible individuals have access to these pay sources. If a service or support responsive to preferences and needs cannot be funded directly, whether due to constraints of the Community Care for Persons with Developmental Disabilities Act or other statutes, state and federal systems, or workforce shortage, it may be an important area for legislative and policy advocacy efforts of the Board and staff, with self-advocates and family members and with other organizations.

A statewide coalition emerged during 2024, propelled by family advocates and providing an opportunity for unified advocacy. **Engage Illinois**' North Star Plan was envisioned by self-advocates, family advocates, advocate groups, allies, and government partners, who offered their expertise and energy in a number of areas, celebrated progress and strengths, and identified issues with Illinois' DD system:

- No person-centered focus/principles
- Service gaps for those with complex needs
- Inflexible waiver options
- Limited support services
- Limited community-based service capacity
- Complex and insufficient funding resources
- Missed opportunities to use other resources and best practices
- Slow compliance and non-compliance with laws

Acknowledging that some important issues could not be addressed at this time, workgroups have been formed to take on the following:

- Sustainable structure/advocacy coalition
- Shared/universal vision for the system
- Waiver amendment for supported living
- Education to navigate the system

Finally, this new project celebrates accomplishments which can now be built on:

- Unprecedented investment in the service system, adding 2-3 billion dollars over five years, increasing DSP wages and number of people to be served
- Improvements in public policy
- IDHS housing navigator program permanent
- More involvement by counties and municipalities
- Increased engagement of legislators in I/DD issues
- Providers exploring mixed-use building supported housing to increase capacity
- Division of DD leaders listening, collaborating with respect on new initiatives
- Supported decision making for self-advocates
- People residing at SODCs participating in education, transition events, and voting sessions
- Increased participation of parents and self-advocates through various collaboratives, with stronger sense of community
- Peer empowerment and advocacy successes by groups and self-advocates
- Increased training, education, and outreach to people, families, and other supporters through advocacy organizations.

Inspired by their example, let's raise expectations and watch them be met!

Program Year 2026 CCDDB Priorities:

PRIORITY: Advocacy and Linkage

In the spirit of "nothing about us without us," PY25 categories merge which should be as closely related as possible: "Self-Advocacy" and "Linkage and Coordination." The former had pointed to family support and self-advocacy groups, but in recent years these groups have relied on unpaid members, making contract requirements more challenging. Meanwhile other self-advocacy and family support groups have been hosted by provider agencies through contracts aligned with the "Community Life" priority category. By merging Self-Advocacy and Linkage and Coordination, we continue to value smaller organizations while encouraging professionals to include self-advocates and their supporters in all service planning, referral, linkage, coordination, and monitoring activities.

People with I/DD and their families have long been the best champions of formal service system redesign. People who have I/DD or their supporters can inform and lead self-advocacy and peer support groups, which are very effective at:

- community awareness about I/DD and the rights of people with I/DD
- peer mentoring and networking,
- developing and sharing information on resources, and
- advocating and directing advocacy at the local, state, and federal levels.

They are also the experts on themselves and what will bring them success.

People who are eligible for but not receiving state Medicaid "DD waiver" funding should have access to benefits and resources, including those benefits and resources which are available to people who do not have I/DD. Of interest are:

- Conflict-free Case Management and Person-Centered Planning aligned with federal standards for Home and Community Based Services, to help identify, understand, and secure benefits, resources, and services a person chooses,
- Case management or coordination, guided by a self-directed plan, including for people who have complex support needs such as those related to aging, physical or behavioral health issue, loss of family member or caregiver, or other traumatic experience, and
- To ensure that individuals with I/DD who have almost become independent can maintain their trajectory to independence and have a long-term plan beyond the lives of aging family members, assistance with setting up special needs trust, rep payeeship, banking supports, guardianship or power of attorney, etc., and with appropriately documenting these efforts.

For these and similar planning and coordination supports, input from the person, their family, and their other supporters will improve the plan and the results. While it should be central here, it is true for all other priority categories, as services under each would be indicated in a person-centered plan.

PRIORITY: Home Life

People who have I/DD should have housing and home life matched to their needs and preferences. Individualized supports may include:

- assistance for finding, securing, and maintaining a home,
- preparing to live more independently or with different people, and
- given the limitations of community living options through the Medicaid waiver programs, creative approaches for those who qualify for but have not yet been 'selected' to receive these services.

PRIORITY: Personal Life

People who have I/DD can choose supports which lead them to personal success and resilience, in the least segregated environment. These might include:

- assistive equipment, accessibility supports, and training in how to use technology, including electronic devices, apps, virtual meeting platforms, social media, and the internet, and how to ensure online privacy and security,
- speech or occupational therapy,
- respite or personal support in the individual's home or setting of their choice,
- training toward increased self-sufficiency in personal care, and
- strategies to improve physical and mental wellness.

PRIORITY: Work Life

People with I/DD who are interested in working or volunteering in the community may find opportunities through individualized support. Well-matched community employment should help people feel less isolated and safer, due to relationships formed at work or even on the way to work, and should allow them to hone and contribute their talents. Focused on aspirations and abilities, the most integrated settings, people may benefit from:

- job development, matching, and coaching in the actual work setting,
- technology to enhance work performance and reduce on-site coaching,
- community employment internships, paid by the program rather than the employer, especially for people who would have used traditional day program,
- support for a path to self-employment or business ownership,
- transportation assistance, and
- education of employers about the benefits of working with people who have I/DD which then results in work for people with I/DD.

PRIORITY: Community Life

People with I/DD deserve the fullest social and community life they choose. Personcentered, family-driven, and culturally responsive support might offer:

- development of social or mentoring opportunities,
- transportation assistance,
- social and communication skill building, including through technology,

- connection to resources which are available to community members who do not have I/DD, both in-person and in digital spaces, and
- access to recreation, hobbies, leisure, or worship activities, matched to the person's preferences, both in-person and in digital spaces.

PRIORITY: Strengthening the I/DD Workforce

Insufficient community-based service capacity remains a barrier to success and wellness for many people with I/DD and their supporters. Although the endangered direct support workforce and turnover in other roles could trap us in survival mode, advocates and providers hold modest goals to be innovative, culturally responsive, and focused fully on 'the person.' Agencies may propose strategies to improve staff knowledge of access to and use of technology for the benefit of the people they serve, attract new workers to the field, preserve current service capacity, and strengthen and diversify the workforce to meet the needs of all eligible residents of Champaign County. Solutions might include:

- social media and traditional media campaign informing middle school and high school students of the I/DD professions and opportunities,
- regular retention payments with a performance standard,
- intermittent payments for exceptional work,
- group and individual staff membership in trade associations which respect the I/DD workforce and offer networking and advocacy opportunities,
- trainings, including on technology use/access, which add to direct staff skills and promote greater independence for people with I/DD, and
- high quality trainings and certifications specific to staff roles, with recognition and payment at completion.

PRIORITY: Collaboration with the CCMHB: Young Children and their Families

Following the global pandemic, providers of services to young children have seen increases in developmental and social-emotional needs. Early identification and treatment can lead to great gains later in life. Services and supports not covered by Early Intervention or under the School Code may be pivotal for young children and their families and might include:

- coordinated, home-based services addressing all areas of development and taking into consideration the qualities and preferences of the family,
- early identification of delays through consultation with childcare providers, pre-school educators, medical professionals, and other service providers,
- coaching to strengthen personal and family support networks, and
- maximization of individual and family gifts and capacities, to access community associations, resources, and learning spaces.

Through the Boards' intergovernmental agreement, the Champaign County Mental Health Board (CCMHB) has funded programs which complement those addressing the behavioral health of very young children and their families, and for which service providers collaborate as a System of Care for children and families. For PY2026, the CCMHB may continue this priority area in their commitment to people with I/DD.

Another collaboration of the Boards is the I/DD Special Initiatives Fund, supporting short-term special projects to improve the quality of life for people with complex service needs. During or resulting from the allocation process, the CCMHB may transfer a portion of their dedicated I/DD amount to the CCDDB or to the IDD Special Initiatives fund, to support contracts for DD services through either fund.

Criteria for Best Value:

An application's alignment with a priority category and its treatment of the overarching considerations described in this section will be used as discriminating factors toward final allocation decision recommendations. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD. Some of these 'best value' considerations relate directly to priority categories and may be the focus of a proposal.

Budget and Program Connectedness – What is the Board Buying?

Detail on what the Board would purchase is critical to determining **best value**. Because these are public funds administered by a public trust fund board, this consideration is at the heart of our work. Each program proposal requires a Budget Narrative with text sections for describing: all sources of revenue for the organization and those related to the proposed program; the relationship between each anticipated expense and the program, clarifying their relevance; the relationship of direct and indirect staff positions to the proposed program; and additional comments. Budget and Program Connectedness includes and builds on two Minimal Expectations.

The first is financial clarity, demonstrated by a recent independent CPA firm audit, financial review, or compilation report, or audited balance sheet. These reports, and the resolution of any negative findings, will support the Board's application review and allocation decision processes. Another Minimal Expectation is evidence that other funding is not available or has been maximized. The Budget Narrative submitted with each program proposal is an excellent place to describe efforts to secure other funding. The program's relationship to larger systems may be better understood, including how this program will leverage or serve as match for other resources. Programs with services billable to Medicaid or other insurance should attest that they will not use CCDDB funds to supplement those. They may identify activities not billable to other payers which can be charged to the proposed contract. While CCDDB funds should not supplant other public systems, programs should maximize resources for long-term sustainability. The program will leverage or serve as match for other systems may be better understood, including how this program sustainability. The program's relationship to larger systems may be better understood, including how this program should maximize resources for long-term sustainability. The program will leverage or serve as match for other resources, also described with Unique Features, below.

Participant Outcomes

A proposal should clarify how the program will benefit the people it serves, especially building on their gifts and preferences. In what ways are people's lives improved and how will we know? Simple, measurable outcomes are ideal. For each defined outcome, the application will identify a measurable target, timeframe, assessment tool, and assessment process. Applicants may view <u>short videos or 'microlearnings'</u> related to outcomes. A previously compiled <u>'measurement bank'</u> is also available, compiling information on outcome measures appropriate to various services and populations.

In a separate section, a proposal will describe how people learn about and access the program and will define measures of the program's performance: numbers of people served, service contacts, community service events, and other. While not Participant Outcomes, these are important and are required with every proposal.

Self-Determination and Self-Direction in Service Planning

The most meaningful participant outcomes will be developed through a person's involvement in their own service plan. Centering people's communication styles and networks of support, self-directed or person-centered planning can be done even if the person has been referred to the program by a third party. Every person should have the opportunity to inform and lead their service plan. The plan should balance what is important FOR the person with what is important TO the person, be responsive to their preferences, needs, values, and aspirations, and help them recognize and leverage their strengths and talents. CCDDB funding should focus on people rather than programs, so that people control their day, build connections to their community for work, play, learning, and more, create and use networks of support, and advocate for themselves.

Proposals should describe the individual's role in service planning and should connect the program activities to what people have indicated they want and need. Consistent with federal regulations for community-based services, person centered planning models are available for programs serving people who have I/DD.

Eliminating Disparities in Access and Care

Programs should move the local service systems toward equitable care, for the sake of optimal health and quality of life for all community members. Barriers specific to some groups should be identified and minimized. Programs should improve access and offer appropriate care for people from historically under-resourced populations, as identified in the <u>2001 Surgeon General's Report on Mental Health: Culture, Race,</u> and Ethnicity. These groups, as well as people living in rural areas and those with limited English language proficiency, should have access to supports and services. Applications should identify strategies to engage people and eliminate barriers to care.

The application forms include a Cultural and Linguistic Competence Plan (CLCP) template consistent with the National Standards for Culturally and Linguistically

Appropriate Services in Health and Health Care (CLAS Standards.) <u>A toolkit for</u> <u>these standards</u> may be helpful. One CLCP is completed for each organization. The program plan narrative for each of an organization's proposals should include strategies specific to the proposed program. CCDDB staff offer technical assistance.

Promoting Inclusion and Reducing Stigma

Stigma inhibits individual participation, economic self-sufficiency, safety, and confidence, and may even be a driver of insufficient State and Federal support for community-based services. Stigma limits communities' potential and isolates people, especially those who have been excluded due to sexuality, gender, race, ethnicity, disability, immigrant/refugee/asylee status, or preferred or first language. Programs should increase community inclusion, including in digital spaces. People thrive when they have a sense of belonging and purpose, and they are also safer through routine contacts with co-workers, neighbors, and acquaintances through a faith community, recreation center, or social networks. Positive community involvement builds empathy and group identity, reduces stress, and even helps to reduce stigma.

The CCDDB has an interest in inclusion and community awareness, as well as challenging negative attitudes and discriminatory practices. Full inclusion aligns with the values of other Champaign County authorities and with the standards established by federal Home and Community Based Services, the Workforce Innovation and Opportunity, and the Americans with Disabilities Act. Proposed programs should describe activities and strategies that expand community inclusion and social connectedness of the people to be served.

Continuation of Services

Applications should describe how people will be served in the event of a public health emergency which limits in-person contact, now that the negative impacts of social isolation are understood. While in-person services may be preferred over virtual options, some capacity should be maintained. Telehealth and remote services connect more people to virtual care, overcoming transportation and other barriers, and they can also enhance people's access to other resources. Access to and training in the use of technology and virtual platforms, not only for people who participate in services but also for the direct staff involved in their care, will build on the existing successes and might also decrease the need for some in person staff supports.

Unique Features

A **best value** is also demonstrated through characteristics of the service approach, staff qualifications, or a funding mix unique to a proposed program. Proposals will describe other program resources, skills specific to the program's staff, and any recommended or innovative service models which will effectively meet the needs and preferences of program participants.

- Approach/Methods/Innovation: cite the recommended, promising, evidencebased, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an established model, describe an innovative approach and how it will be evaluated.

- Staff Credentials: highlight credentials and trainings related to the program.
- Resource Leveraging: describe how the program maximizes other resources, including state, federal, or local funding, volunteer or student support, and community collaborations. If CCDDB funds are to meet a match requirement, reference the funder requiring this local match and identify the match amount in the application Budget Narrative.

Expectations for Minimal Responsiveness:

Applications not meeting the following expectations are "non-responsive" and will not be considered. Applicants must be registered at <u>http://ccmhddbrds.org</u>. Instructions on how to register and how to apply are posted there. Accessible documents and technical assistance on using the online tools, are available upon request through the CCDDB staff.

- 1. Applicant is an **eligible organization**, demonstrated by responses to the Organization Eligibility Questionnaire, completed during initial registration. For applicants previously registered, continued eligibility is determined by compliance with contract terms and Funding Requirements.
- 2. Applicant is prepared to demonstrate their **capacity for financial clarity**, especially if they answered 'no' to any question in the Organization Eligibility Questionnaire or do not have a recent independent audit, financial review, or compilation report with no findings of concern.

NEW FOR PY2026: Unless already provided under prior contract with the CCDDB, applicant should submit their most recent audit, review, or compilation. If one has not been conducted, an audited balance sheet should be submitted.

- 3. All application forms must be complete and **submitted by the deadline**.
- 4. Proposed services and supports must relate to I/DD. How will they improve the quality of life for persons with I/DD?
- 5. Application must include evidence that **other funding sources are not available** to support the program or have been maximized. Other potential sources of support should be identified and explored. Payer of Last Resort principle is described in CCDDB Funding Requirements and Guidelines.
- 6. Application must demonstrate **coordination with providers** of similar or related services, with interagency agreements referenced. Evidence of interagency referral process is preferred, to expand the service system's reach, respect client choice, and reduce risk of overservice to a few. For an inclusive, efficient system, application should acknowledge collaborative efforts and other resources.

Process Considerations:

The CCDDB uses an online system for organizations applying for funding. Downloadable documents on the Board' goals, objectives, operating principles, and public policy positions are also posted on the application website, at <u>https://ccmhddbrds.org</u>. Applicants complete a one-time registration process, including an eligibility questionnaire, before receiving access to the online forms. Funding guidelines and instructions on how to use the system are also posted there.

Criteria described in this memorandum are guidance for the Board in assessing proposals for funding but are not the sole considerations in final funding decisions. Other considerations include the judgment of the Board and staff, evidence of the provider's ability to implement the services, soundness of the methodology, and administrative and fiscal capacity of the applicant organization. Final decisions rest with the CCDDB regarding the most effective uses of the fund. Cost and non-cost factors are used to assess the merits of applications. The CCDDB may also choose to set aside funding to support RFPs with prescriptive specifications to address the priorities.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDB to award a contract or to pay any costs incurred in preparing an application or to pay for any other costs incurred prior to the execution of a formal contract.
- During the application period and pending staff availability, technical assistance will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDB Funding Guidelines. Support is also available for CLC planning.
- Applications with excessive information beyond the scope of the application format will not be reviewed and may be disqualified from consideration.
- Letters of support are not considered in the allocation and selection process. Written working agreements with other agencies providing similar services should be referenced in the application and available for review upon request.
- The CCDDB retains the right to accept or reject any application, or to refrain from making an award, when such action is deemed to be in the best interest of the CCDDB and residents of Champaign County.
- The CCDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDB deems such variances to be in the best interest of the CCDDB and residents of Champaign County.
- Submitted applications become the property of the CCDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made and contracts executed. Submitted materials will not be returned.
- The CCDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years, with or without an increased procurement.

- If selected for contract negotiation, an applicant may be required to prepare and submit additional information prior to contract execution, to reach terms for the provision of services agreeable to both parties. Failure to submit such information may result in disallowance or cancellation of contract award.
- The execution of final contracts resulting from this application process is dependent upon the availability of adequate funds and the needs of the CCDDB.
- The CCDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of the application process will be given equal opportunity to update proposals for the newly identified components.
- To be considered, proposals must be complete, received on time, and responsive to application instructions. Late or incomplete applications will be rejected.
- If selected for funding, the contents of a successful application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract.
- The CCDDB reserves the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.
- The CCDDB reserves the right to negotiate the final terms of any or all contracts with the selected applicant, and any such terms negotiated through this process may be renegotiated or amended to meet the needs of Champaign County. The CCDDB reserves the right to require the submission of any revision to the application which results from negotiations.
- The CCDDB reserves the right to contact any individual, agency, or employee listed in the application or who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

 From:
 Mel Liong

 To:
 Leon Bryson; Kim Bowdry; Lynn Canfield

 Cc:
 sherry@pacecil.org; Michelle Ingram; Jason Chaney

 Subject:
 CCMHDDAC Agenda

 Date:
 Friday, July 12, 2024 3:48:13 PM

 Attachments:
 Outlook-Blue Logo .png Outlook-g5iukuil.png

Good afternoon

I hope you are doing well upon receiving my email. Thank you, Mr. Bryson, for reaching out and allowing PACE to provide input on possible services that could improve our services for Champaign County residents with MI, SUD, or I/DD.

I am happy to share with everyone that for FY25, PACE was allocated funds to do home modification projects from INCIL (Illinois Network for Independent Living) in our community. As we start assisting consumers, we have discovered a few barriers that prevent consumers from going through the home modification programs. I am proposing a possible partnership/collaboration of services to assist consumers in Champaign County. Currently, the home modification project only covers the cost for the home to be modified to increase the physical accessibility of the home. The program does not cover the costs/services that are related to the project or temporary relocation.

For example, a consumer who needs a ramp for their home and is found eligible for a home modification project has struggled to initiate the home modification project due to several barriers. PACE has recently encountered the following barriers :

- Cost of relocation
- food cost
- transportation
- additional medical and equipment cost
- additional temporary assistance during the relocation

These are just a few barriers that we have encountered. Potentially, we could encounter other barriers as we assist consumers based on their

situation.

Ultimately, PACE's goal is to assist consumers to continue to live independently in the community. We are very thankful that we received funding for the home modification program that will improve the physical accessibility of the consumer's home. Unfortunately, there are other services that the program does not cover to assist the consumer in living independently. There is also assistive technology which could help consumers with MI, SUD, or I/DD with in their home. My proposal is for CCMHDDAC to assist in helping the consumer connect to services needed when going through the home modification project and services to assist the consumer when returning to their home upon completion of the project.

Thank you for taking the time in considering my proposal. If you have any further questions about this proposal, please do not hesitate to contact me.

Thanks, Mel



Mel Liong, QIDP Program Director Program PACE, Inc. Center for Independent Living

301 S. Vine Street, Suite 211 Urbana, Illinois 61801

217-344-5433 Voice 217-689-0289 Video Phone 217-344-2414 Fax



Local DISABILITY Resource Expo proudly announces Thrivent Financial East Central Illinois Group as Featured Sponsor of the 15th annual event

Annual DISABILITY Resource Expo partners with local financial institution to provide a better quality of life for people with disabilities in Champaign County and surrounding communities

September 8, 2024-(Urbana, IL)—The 15th Annual DIS**ABILITY Resource Expo:** *Reaching Out for Answers* is scheduled for Saturday, October 26th from 11:00 a.m. to 4:00 p.m. at Market Place Mall, 2000 N. Neil Street, Champaign, IL 61820. It is FREE to attend.

"We could not be prouder to announce Thrivent Financial East Central Illinois Group as the featured sponsor of our 15th annual Expo. Thrivent has been a strong and loyal supporter of the Expo since 2015. The financial institution provides guidance on estate planning and establishing special needs trusts for those with disabilities. By highlighting Thrivent as our featured sponsor, we hope to not only thank the organization for its years of loyalty, but to also show the community how thinking ahead and planning for the future can lead to a great quality of life for people with disabilities," said Allison Boot, DISABILITY Resource Expo Co-Coordinator.

As always, the Expo is free and open to the public; all residents of East Central Illinois are encouraged and welcome to attend. Up to 80 exhibitors will share information and answer questions regarding resources available to enhance the lives of people with disabilities. Exhibitors will be able to give attendees guidance on everything from educational options to legal support. A face painter and children's activity bags with fidgets and bookmarks will make this year's event family friendly and fun for all ages.

"My Co-Coordinator and I would like to express our sincere gratitude to Thrivent East Central Illinois Group for supporting the Expo and more importantly for the services Thrivent provides to local communities. Thinking about and planning for the future can be scary for anyone. It can be especially scary for those with disabilities and their families because of how expensive it is to live with a disability. Thrivent is well-versed in the cost of living with a disability and can provide people with disabilities and their families guidance as to how to prepare for and ensure that they are financially secure in the future," said Boot.

Each year steps are taken to ensure that any resident of Champaign County or surrounding communities can enjoy a worry-free day at the Expo. Market Place Mall will serve as the Expo venue for the third year in a row because the location is very accessible. A limited number of wheelchairs and walkers will be available for those who need them at the event to rent at no cost. Alternative formats for exhibitor's written materials such as large print, various digital media and Braille will also be available upon request. Lastly, additional wheelchair accessible parking will be added to the mall parking lot on the day of the Expo.

This year is the 15th annual Expo, so those behind the Expo wanted to do a couple of things to make the event extra special for members of the community as well as exhibitors. To that end, an adaptive fashion show featuring residents of East Central Illinois communities with different types of disabilities and conditions wearing various types of fashions adapted with things like Velcro or snaps will be held outside of Macy's from 1:00 p.m. to 2:00 p.m. the day of the Expo. Furthermore, a networking hour for exhibitors will be held at Market Place Mall the day of the Expo prior to the mall opening for attendees.

The Expo has the generous support of Thrivent East Central Illinois Group and various other sponsors this year but could always benefit from additional support. If you are interested in supporting the 2024 DISABILITY Resource Expo, please email Allison Boot at allisonmbootauthor@gmail.com. You can also schedule an interview or photo opportunity for the day of the Expo by sending an email or calling 217-722-5281. For more information, visit <u>http://www.disabilityresourceexpo.org</u>.

--end--



COME SEE US!!! Saturday, October 26 11:00am - 4:00pm

www.disabilityresourceexpo.com

A FAMILY FRIENDLY EVENT!

Market Place Mall 2000 N Neil St, Champaign

Proudly Introducing this Year's Featured Sponsor thrivent



Coming Soon!

Saturday, October 26 11am - 4pm

Market Place Mall 2000 N Neil St, Champaign, IL

Volunteers Needed! Sign up at: disabilityresourceexpo.org





PY2024 4th Quarter Program Service Reports

for I/DD programs funded by

the Champaign County Developmental Disabilities Board

and Champaign County Mental Health Board



Quarterly Program Activity / Consumer Service Report Agency: CCRPC - Community Services Program: Decision Support PCP Period Fourth Quarter PY24 Submitted 08/20/2024 by AYOST

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	25	100	30	165	
Quarterly Data (NEW Clients)	9	89	6	6	
Continuing from Last Year (Q1 Only)					

Comments:

CCRPC opened five new individuals to the Person-Centered Planning Case Management program in FY24 Quarter 4, and 1 person to Transition Consulting. RPC's Dual Diagnosis began services with one new individual in FY24 Q4 and attempted to make contact with 2 additional individuals to gage interest in program participation/schedule initial visit. Dual Diagnosis Case Manager actively engaged in visits with or attempted to connect with 15 individuals this quarter. These individuals are already accounted for in TPC numbers.

CCRPC's TPC numbers for FY24 were lower than projected. One factor that contributed to this is that RPC closed several individuals that were FY24 Preselection's at the end of FY23. These individuals were closed to RPC during the ISC transition to Prairieland in anticipation of them moving into the PAS process with Prairieland. CCRPC also took Dual Diagnosis program TPC numbers into account, which cannot be counted since they are already involved in PCP program. Dual Diagnosis Case Manager reached out to or was actively engaged with 17 individuals over the course of FY24.



Quarterly Program Activity / Consumer Service Report Agency: Champaign County Head Start/Early Head Start MHB Program: Early Childhood Mental Health Svs Period Fourth Quarter PY24 Submitted 08/29/2024 by JSPAINMHB

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	5	3000	380	80	12
Quarterly Data (NEW Clients)	0	605	24	45	3
Continuing from Last Year (Q1 Only)					

Comments:

1 of 1



Quarterly Program Activity / Consumer Service Report

Agency: CU Early Program: CU Early Period Fourth Quarter PY24 Submitted 08/23/2024 by KRUSSELL

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	5	506	5	23	
Quarterly Data (NEW Clients)	3	111	3	2	
Continuing from Last Year (Q1 Only)					

Comments:

For the fourth quarter, CU Early staff attended Soccer planet community screenings events and the Autism Walk and Resource Fair.

Two children aged out of the program and started at Prek. Because of this, the Spanish speaking bilingual home visitor added to more 2 new children to her caseload.

The bilingual home visitor completed 111service contacts this quarter. She referred 3 children to Early Intervention for developmental concerns.

1 of 1



Quarterly Program Activity / Consumer Service Report Agency: Community Choices, Inc. DDB Program: Customized Employment Period Fourth Quarter PY24 Submitted 08/30/2024 by CCCOOP

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target					
Quarterly Data (NEW Clients)	3	450	0	6	639
Continuing from Last Year (Q1 Only)					

Comments:

CSE in Q4: 3 - Ready for the Real World - TPC Student Conference 4/18, Thrivent Financial 4/24, Jettie Rhodes Neighborhood Day 6/22

SC = 450 Claims in Q4: these are reported via the online reporting system

NTPCs: 0

New TPCs in Q4: 6

Other = Direct Hours in Q4: 639 (also reported via online claims)



Quarterly Program Activity / Consumer Service Report

Agency: Community Choices, Inc. DDB Program: Inclusive Community Support (Com Living) Period Fourth Quarter PY24 Submitted 08/30/2024 by CCCOOP

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target					
Quarterly Data (NEW Clients)	3	535	4	1	714
Continuing from Last Year (Q1 Only)					

Comments:

3 CSEs in Q4: Ready for the Real World - TPC Student Conference 4/18, Thrivent Financial 4/24, Jettie Rhodes Neighborhood Day 6/22

SCs: 535 (includes 480 recorded for TPCs as claims in the online reporting system, and 55 for NTPCs in personal development classes)

New NTPCs in Q4: 4 (these are individuals who participate in our Personal Development Classes)

New TPCs in Q4: 1

Other: Direct Hours in Q4: 714 (includes 663 recorded for TPCs as direct hours, and 51 for NTPCs in personal development classes)



Quarterly Program Activity / Consumer Service Report Agency: Community Choices, Inc. DDB Program: Self-Determination Support Period Fourth Quarter PY24

Submitted 08/30/2024 by CCCOOP

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target					
Quarterly Data (NEW Clients)	6	529	8	0	605
Continuing from Last Year (Q1 Only)					

Comments:

6 CSEs in Q4: Ready for the World - TPC Student Conference on 4/18, U of I Intro to DD Class on 4/9, Community Coaching @ ARC of Illinois Conference on 5/1, Thrivent Financial on 4/24, Jettie Rhodes Neighborhood Day on 6/22, Community Foundation - Collaboration Presentation on 5/9

529 Service Contacts in Q4

8 new NTPCs in Q4

0 TPCs

Other: 605 direct hours in Q4



Quarterly Program Activity / Consumer Service Report

Agency: Community Choices, Inc. DDB Program: Staff Recruitment and Retention Period Fourth Quarter PY24 Submitted 08/30/2024 by CCCOOP

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target					
Quarterly Data (NEW Clients)	4				16
Continuing from Last Year (Q1 Only)					

Comments:

No SCs or TPCs for this program.

CSEs = Jettie Rhodes Neighborhood Day 6/22, Thrivent Financial Meeting 4/24, and two separate job advertisements that ran during the quarter.

Other = Number of Bonuses Provided, total for Q4 is 16: 3 Sign-On Bonuses, 13 Retention Bonuses



Quarterly Program Activity / Consumer Service Report Agency: Community Choices, Inc. DDB Program: Transportation Support Period Fourth Quarter PY24

Submitted 08/30/2024 by CCCOOP

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target					
Quarterly Data (NEW Clients)	3	1037	3	0	456
Continuing from Last Year (Q1 Only)					

Comments:

CSEs in Q4: Ready for the World - TPC Student Conference on 4/18, Thrivent Financial on 4/24, Jettie Rhodes Neighborhood Day on 6/22

SCs: 1037

New NTPCs in Q4: 3 new participants used rides

TPCS: 0

Other: Direct Hours in Q4: 456

450 Total Rides provided in Q4. Below is the breakdown of what rides were used for: Work 191 Leisure 98 Family 6 Medical/Health 12 CC Event 109 Errands 26 Does not wish to say 0 No Show 8



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Clinical Services Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	10	5	59	
Quarterly Data (NEW Clients)	1	3	3	0	
Continuing from Last Year (Q1 Only)					

Comments:

Community Service Events: Once community service event occurred this quarter.

Individual Info: Eight individuals received two types of clinical services. Three people (NTPCs) were opened for a psychological assessment this quarter. Two individuals were closed from clinical services upon completion of their psychological assessment.

Service/Screening Contacts: There were three screening contacts this quarter and all three were opened.

Update on Clinical Wellbeing Assessment: The Clinical Wellbeing assessment was sent to all individuals currently receiving counseling and/or psychiatry. 32% returned with 83% of those returned marked as a 4 or 5 on a 5-point scale indicating an overall improved sense of wellbeing. For future surveys will look into utilizing electronic means as well as mailed option in an effort to get a higher rate of return.

Extra Reporting Time: 4 hours this quarter was spent on tasks related to billing and reporting.

Update on DSP Support Specialist: The DSP Support Specialist supported 30 staff in regards to 37 individuals across 4 different sites during the quarter. Intense supports have been provided this quarter to 3 individuals and their teams as they transitioned into a new living arrangement.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Community Employment Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	10		88	
Quarterly Data (NEW Clients)	1	5		2	
Continuing from Last Year (Q1 Only)					

Comments:

This quarter, the Community Employment (CE) program focused on Job Development with notable success. Three individuals, each with specific employment goals outlined in their Employment Plans, achieved their objectives during this period.

One participant, who had faced challenges in food service due to a degenerative eye condition, found a more suitable role with the Illinois Heartland Library Systems. This job offers a quieter environment with fewer visual demands, aligning well with his needs and allowing him to utilize his skills in a supportive setting.

Another individual, initially non-committal to his employment goals, took the initiative to pursue a job lead independently. Although he required considerable CE support during the onboarding and training phases, his determination and clear sense of what he wanted played a crucial role in his success.

The third participant, who had been employed for nearly 30 years, decided to explore new career opportunities. With the guidance of his Employment Specialist and several interviews, he successfully secured a new position. He enthusiastically shared the news of his new job with family, friends, and community supporters.

The use of the Discovery tool to tailor Employment Plans to individual needs and desired outcomes is a vital component of the CE program. This approach has contributed to a high success rate, with approximately 90% of individuals in the program maintaining their employment throughout the fiscal year.

The Supported Employment Program (SEP) has continued its successful collaboration with community partners, including the Champaign Park District (CPD), Advanced Medical Transport East (AMT), Hessel Park Church, and The Urbana-Champaign Independent Media Center (IMC). However, Habitat for Humanity has experienced a significant decline in donations, which has impacted its capacity to serve as a viable skill-building site at this time.

In response to these changes, many individuals in SEP will now have the opportunity to contribute to the Carle Dish Room. For one individual, this development marks a return to the Carle job site, where he had previously been employed before losing his position due to COVID-19. He is extremely happy to be able to work there again with support.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Community First Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	6	45	45	
Quarterly Data (NEW Clients)	1	9	7	6	
Continuing from Last Year (Q1 Only)					

Comments:

Over 40 weekly group offerings were launched this quarter. These were aimed at fostering connections, advocacy, and educational and cultural experiences.

Some highlights include:

Summer Sports: Quickly gained popularity by navigating community disc golf courses.

Sholem Swim: Participants enjoyed the lazy river and water slides at Sholem.

MTD Picnic: Each week, members explored new picnic spots with friends and learned bus routes to get to their picnic spot.

Forest Friends, Illinois Nature, and Container Gardening: Utilized the beautiful summer weather. The Container Gardeners focused on growing peppers and tomatoes, while Forest Friends explored natural areas, and Illinois Nature participants engaged in hikes and swims.

Horror Fans: Delved into new horror fandoms weekly, bringing together enthusiasts of horror movies and related content.

Exercise Opportunities: In addition to disc golf and summer sports, exercise options included the return of Health Matters, swim classes at YMCA, and visits to Leonhard and Martens Centers.

Advocacy and Volunteering: Women's Group, volunteering at Salt and Light, and food bank preparation at the Hope Center in Urbana.

Cultural and Recreational Activities: Attended movies at Savoy 16 Theater, a Lightwire Theater performance at the Krannert Center for the Performing Arts, and a musical at Theater 102. Participants also toured Scovill Zoo, enjoyed various activities during a picnic at Lake of the Woods, and learned about emergency services at a Touch-a-Truck event. Morning Coffee Groups: Explored new local coffee and bakery options, receiving rave reviews.

Volunteering: Continued engagement with Salt & Light and the Eastern Illinois Food Bank.

Overall, the fourth quarter was marked by successful new offerings and continued engagement in a variety of activities.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Community Living Period Fourth Quarter PY24 Submitted 08/05/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target		6		78	
Quarterly Data (NEW Clients)		3		3	
Continuing from Last Year (Q1 Only)					

Comments:

Community Living staff continue to support individuals with budgeting using an online portal to access their bank account, electronic register, and budgeting forms. Staff assist individuals in using shopping apps such as Walmart/ Meijer to place grocery orders. Transportation is provided for individuals who would rather do their shopping in store. Assistance in scheduling, transport, and attending medical appointments continues with 144 medical appointments occurring this past quarter. Some individuals utilize pharmacy apps with staff assistance for medication orders. Individuals in the program continue to receive support from staff in homemaking and organization on site at their home. Monthly Community Experiences continued this quarter with individuals going to Old Orchard Lanes, Virginia Theater for the movie "FAME", CUSR Summer Bash, and Neighborhood Nights, which was a concert put on by the park district in celebration of Juneteenth. CLP staff assisted individuals in arranging transportation, learning the bus route, and scheduling Uber, Lyft or DSC transportation. Each event was a success according to those who participated!



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Connections Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	5		12	25	
Quarterly Data (NEW Clients)	3		3	3	
Continuing from Last Year (Q1 Only)					

Comments:

The Crow recently concluded its fourth season of selling products at Urbana's Market at the Square. Our offerings included a variety of handmade items and art pieces, which have become familiar to many community members. Additionally, similar items were showcased at the annual Ebertfest Art Show in April, alongside several other AIR artists.

This year marks The Crow's third year as a venue for the Boneyard Arts Festival. Themed "The Heart of it All!" the festival featured a collection of heartfelt works. Over 30 artists participated, including community members, Crow artists, and other artists identifying as having a disability. The festival saw steady traffic throughout the weekend, and many artists were delighted to sell pieces created at The Crow.

This quarter, we welcomed two visiting artists who conducted workshops for our Crow artists. One artist co-led a sixteen-week course focusing on creating art with materials typically found in building and construction. Another class centered on watercolor art, providing participants with techniques they can apply in future projects.

The Crow also offered various classes this quarter, including Art Expression, designed to explore diverse ways of expressing oneself through art. Other popular classes included Recycled Art and Art Construction, which utilized unconventional materials to create beautiful pieces. We continued to offer photography groups, Zines, and the well-loved sewing group. A new addition to our fiber arts offerings was embroidery, where participants learned the basics of sewing and how to plan their designs before putting thread to the fabric.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center

Program: Employment First Period Fourth Quarter PY24

Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	25				
Quarterly Data (NEW Clients)	5				
Continuing from Last Year (Q1 Only)					

Comments:

There were four LEAP/FLS trainings during fourth quarter: The Activities and Recreation Center, U of I, 61820 LEAP training Urbana Park District Summer Nature, Sports and Arts Camps, 61802 FLS training Urbana Park District Aquatics, 61802 FLS training The Scratching Post, 61820 LEAP training The Scratching Post, 61820 FLS training

LEAP-trained businesses who hired applicants: Urbana Park District – two individuals



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Family Development Period Fourth Quarter PY24 Submitted 08/05/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	15	200		655	
Quarterly Data (NEW Clients)	1	75		103	
Continuing from Last Year (Q1 Only)					

Comments:

Five developmental groups were ran throughout the summer: two groups led by speech-language pathologists that focused on communication development; two groups led by developmental therapists that focused on motor development and peer socialization; and a fifth group led by PLAY Project consultant in conjunction with TAP at UIUC that focused on parent coaching of play-based engagement for children with autism. Family Development also participated in a Developmental Play Group event for children with autism hosted by The Baby Fold. This quarter, Family Development had one staff on medical leave and another on maternity leave.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Individual and Family Support Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	3	8	20	30	
Quarterly Data (NEW Clients)	1	1	8	0	
Continuing from Last Year (Q1 Only)					

Comments:

There was one community service event this quarter. Respite and advocacy was discussed at the DSC booth with interested participants during the TPC event.

Throughout the quarter, families who received respite provider support expressed their need for these hours for various reasons. These included obtaining relief from caregiving duties, attending events for other family members, traveling for work, receiving assistance with recreational activities, and securing support when their loved one preferred to stay home with family.

Three respite recipients utilized specific assistance funding to attend specialized camps through the University of Illinois and Champaign Urbana Special Recreation.

Advocacy activities at DSC were reignited with enthusiasm during the fourth quarter. Training sessions were conducted with several advocates using materials provided by The Illinois Self-Advocacy Alliance. Additionally, two advocates participated in "Advocacy Day" in Springfield. They met with a representative in Senator Faraci's office, observed part of the legislative session, and engaged with other state advocacy groups.



Quarterly Program Activity / Consumer Service Report Agency: Developmental Services Center Program: Service Coordination Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	20	10	275	
Quarterly Data (NEW Clients)	1	8	0	8	
Continuing from Last Year (Q1 Only)					

Comments:

Case Management continues to use a team approach to ensure that people are safe, have access to food and medical support, and receive any additional resources they may need.

The team has been actively working to secure unemployment benefits for individuals who have lost their jobs while simultaneously helping them find new employment opportunities. Additionally, Case Management and other team members are advocating and collaborating with medical providers to gain a clear understanding of clients' conditions, determining whether these are purely medical or have a mental health component, to ensure the best possible treatment.

The Case Management team is dedicated to advocating for additional supports and programs for individuals encountering legal issues, striving to provide comprehensive assistance and resources.



Quarterly Program Activity / Consumer Service Report

Agency: Developmental Services Center Program: Workforce Development and Retention Period Fourth Quarter PY24 Submitted 08/13/2024 by KELLI2019

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target				160	
Quarterly Data (NEW Clients)				82	
Continuing from Last Year (Q1 Only)					

Comments:

6 DSP staff received training bonuses this quarter. 76 eligible staff received a retention bonus in June 2024.

1 of 1



Quarterly Program Activity / Consumer Service Report

Agency: PACE, Inc. Program: Consumer Control in Personal Support Period Fourth Quarter PY24 Submitted 07/31/2024 by MICHELLE

	Community Service Events (CSE)	Service / Screening Contacts (CS)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	20	250	30	0	9
Quarterly Data (NEW Clients)	6	71	7	0	0
Continuing from Last Year (Q1 Only)					

Comments:

PACE offered orientations in person and via Zoom, as well as 1:1 appointments at PACE's office during this quarter to recruit PSWs. Due to the decrease in inquiries for potential PSWs, PACE continues to do outreach activities, job postings, and community events to attempt to recruit PSWs. PACE staff was part of the Champaign library job fair event in February.

No TPCs due to people being served through this funding are people seeking employment as PSWs and no-vocational program to consumers with I/DD. Continued collaboration is taking place with DRS, IRC, DSC, Community Choices, and the DRS-vocational program in that they are referring individuals with I/DD and their family to PACE to hire a PSW that was oriented and put onto a registry through this funding.

PACE continues to reach out and attempt to collaborate with the Illinois School of Social Work, Arc of Illinois, parent groups at Community Choices, IRC, NAMI, and DSC. We attended the following events this quarter:

Booth at the CU Autism Walk

- Booth at the Illinois Marathon Health and Fitness Expo

- Booth at Marten Civic Center -Family Day

PACE continues our quarterly PSW advisories to provide an extra opportunity for consumers and PSWs to connect and discuss PSW program topics. The PSW advisory also allows discussing issues to improve the employer/employee relationship. The Hybrid meeting (Zoom and In-Person) for the PSW advisory occurred on, Friday, June 21, 2024

This quarter one (1) PSW attended the orientation but was not successfully added to the registry due to not passing the background checks and (1) PSW chose not to complete the paperwork to proceed.

PACE has sent 7 sets of referrals this quarter.

PY2024 Program Claims Data

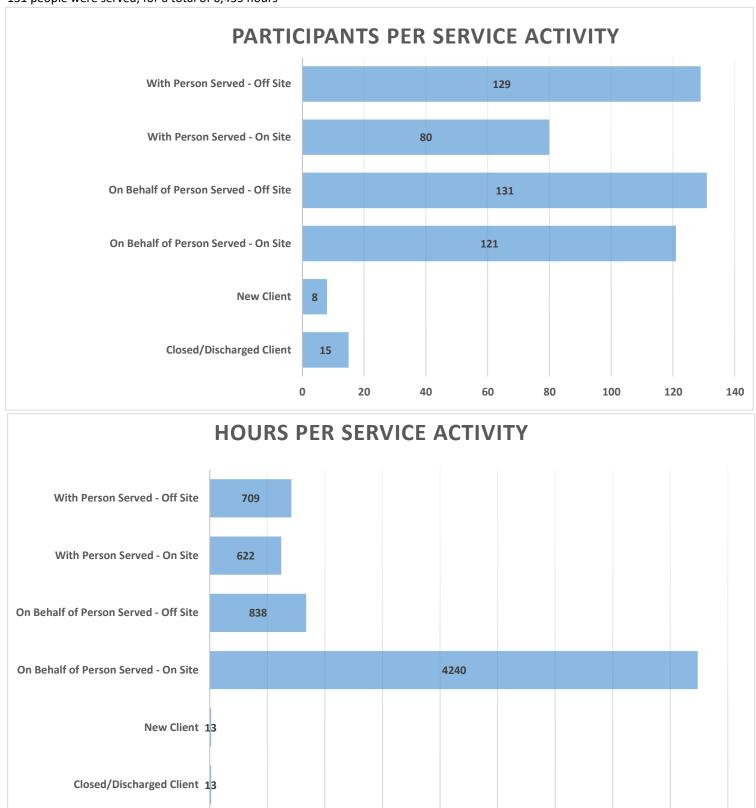
for I/DD programs funded by

the Champaign County Developmental Disabilities Board

and Champaign County Mental Health Board

CCRPC - Community Services

Decision Support Person \$433,777 PY24 131 people were served, for a total of 6,435 hours



CCRPC - Head Start/Early Head Start

New Client

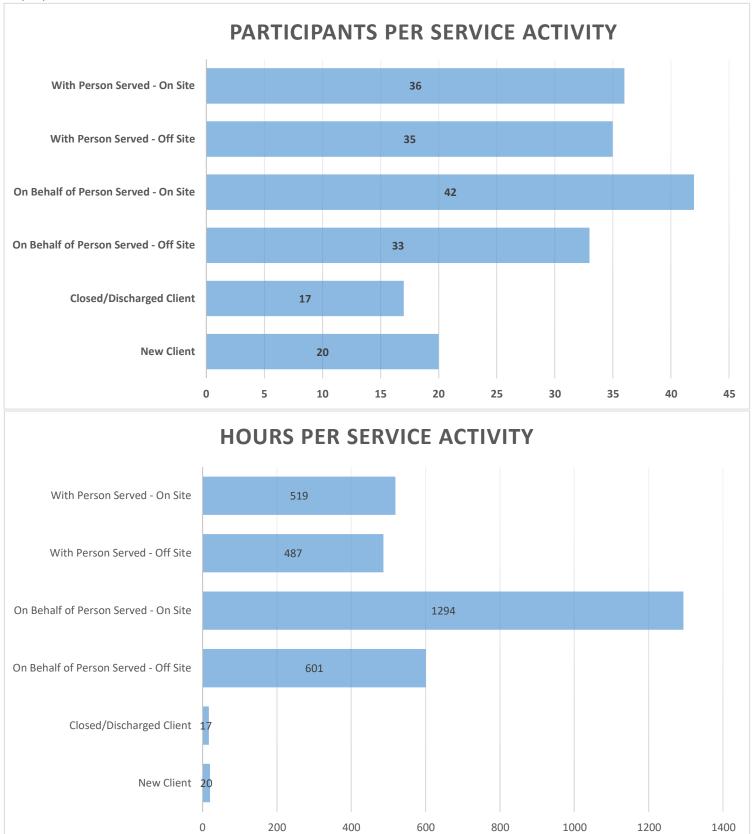
Early Childhood Mental Health Svs \$149,666PY2499 people were served, for a total of 752 hours



МНВ

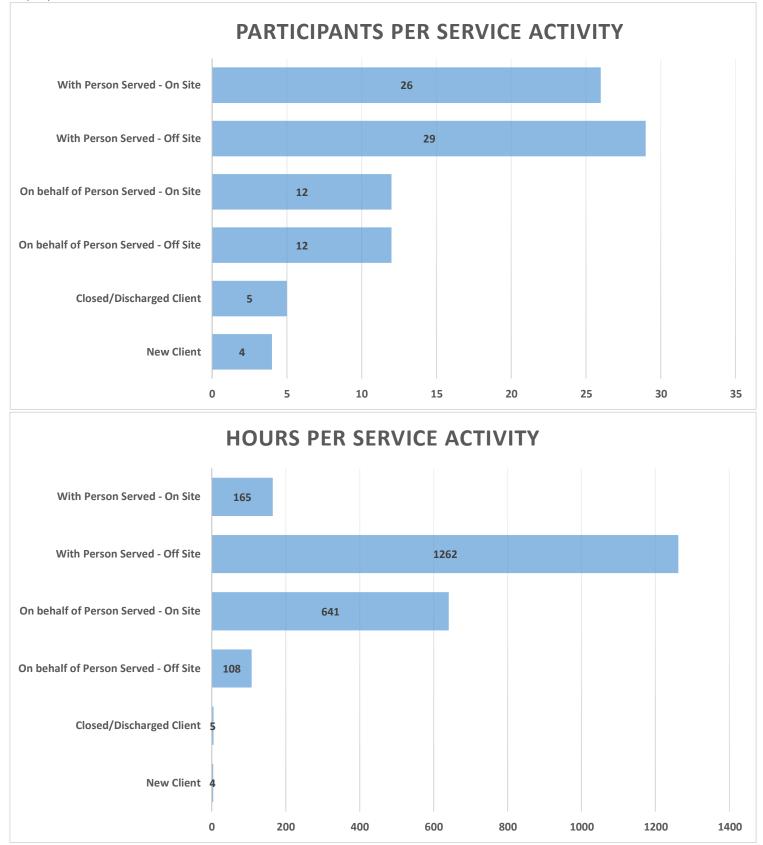
Community Choices

Customized Employment \$226,500 PY24 52 people were served for a total of 2,938 hours



Community Choices

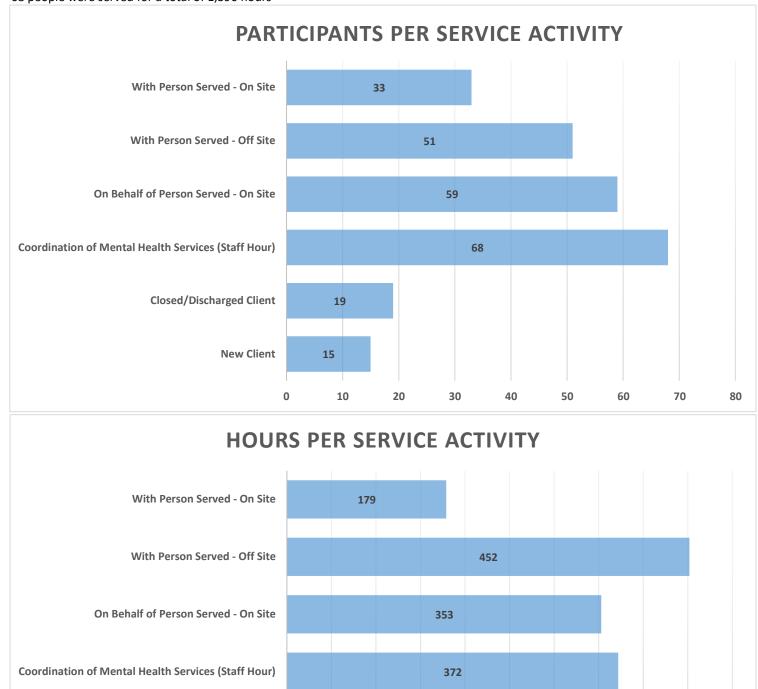
Inclusive Community Support \$198,000PY2436 people were served for a total of 2,185 hours



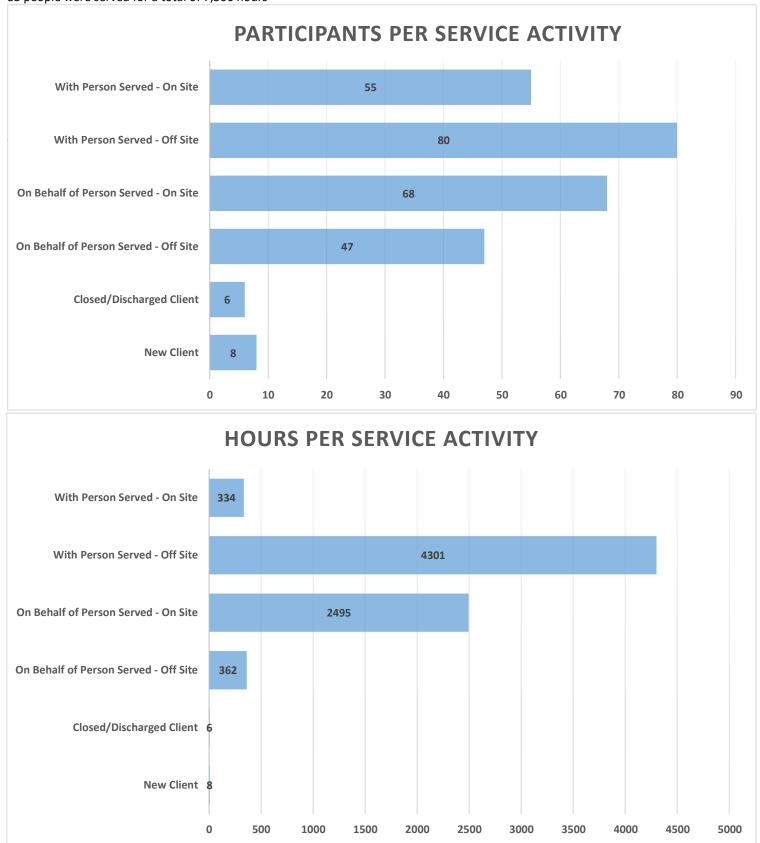
DSC Clinical Services \$241,000 PY24 68 people were served for a total of 1,390 hours

Closed/Discharged Client

New Client



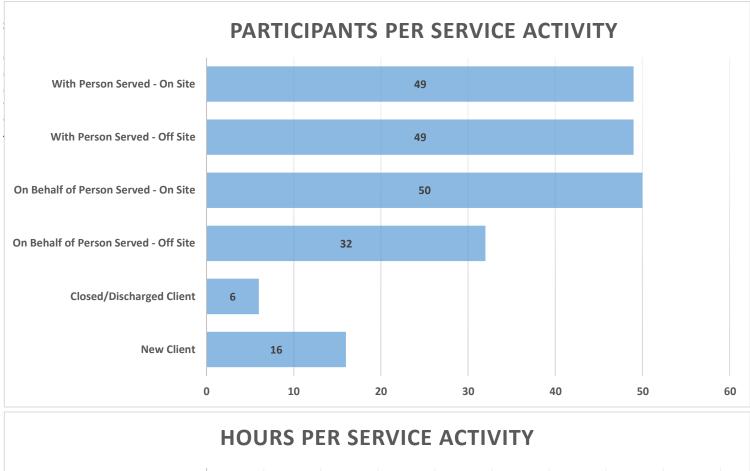
Community Employment \$450,606	PY24
83 people were served for a total of 7,506 hours	

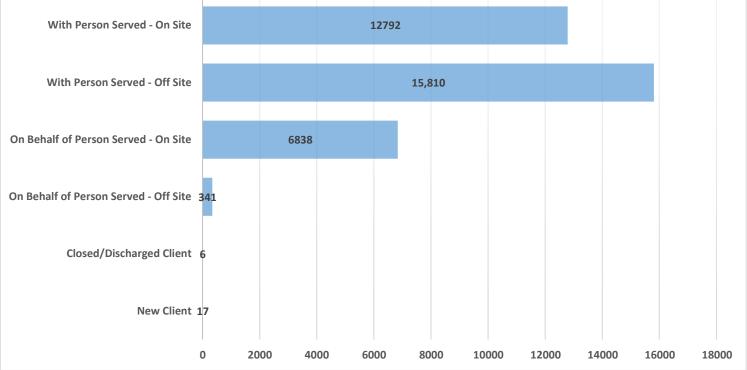


Community First \$890,042

50 people were served, for a total of 35,804 hours

PY24

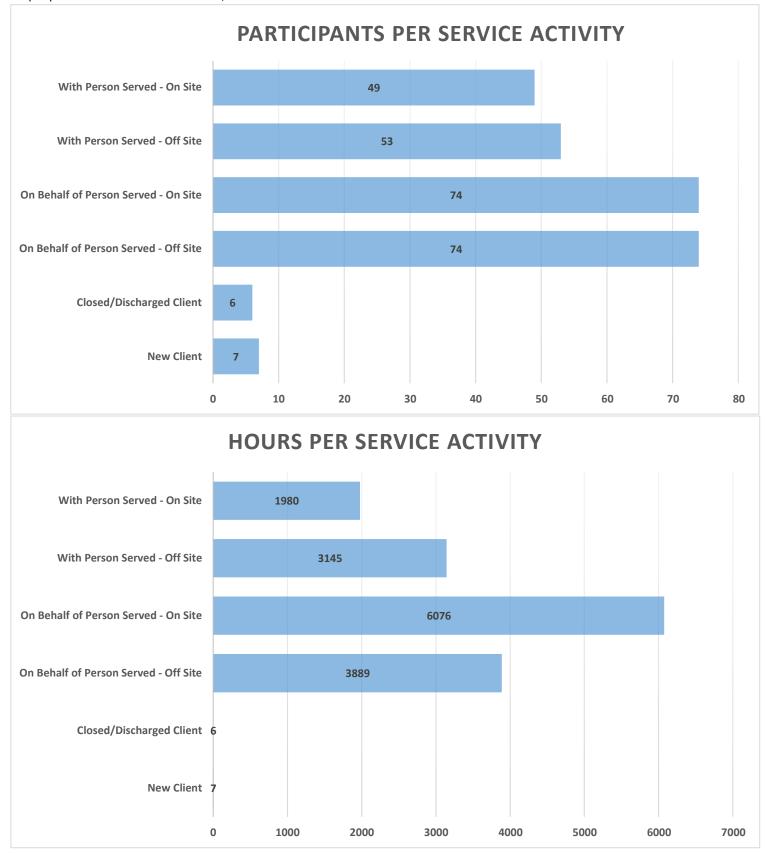




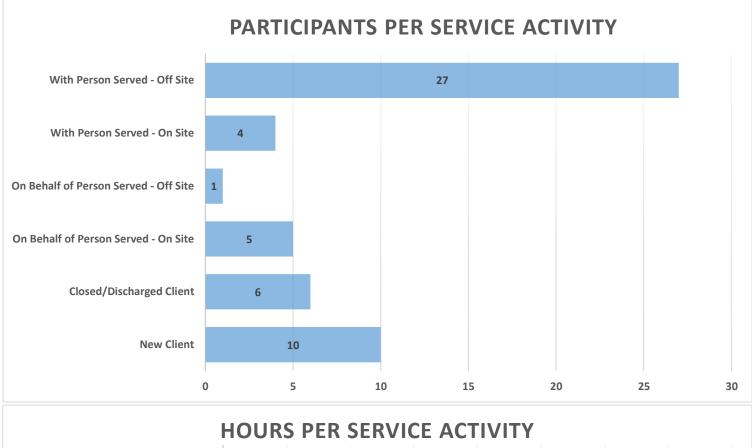
Community Living \$565,480

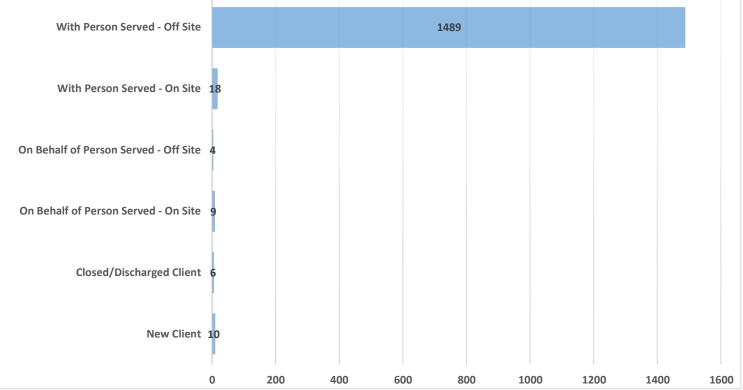
78 people were served for a total of 15,103 hours

PY24



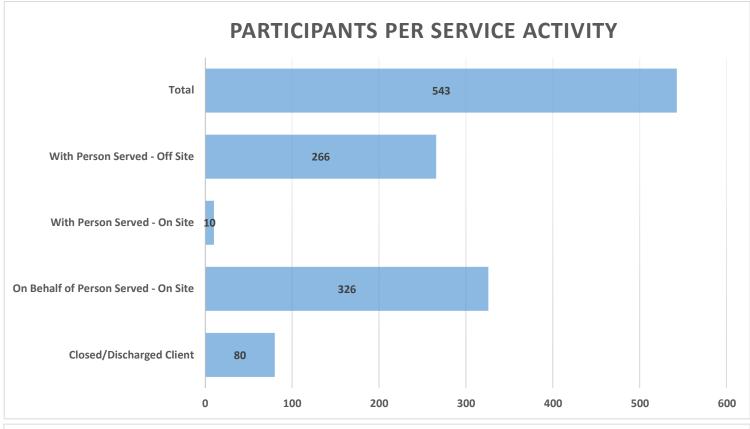
DSC Connections \$106,400 PY24 30 people were served, for a total of 1,536 hours



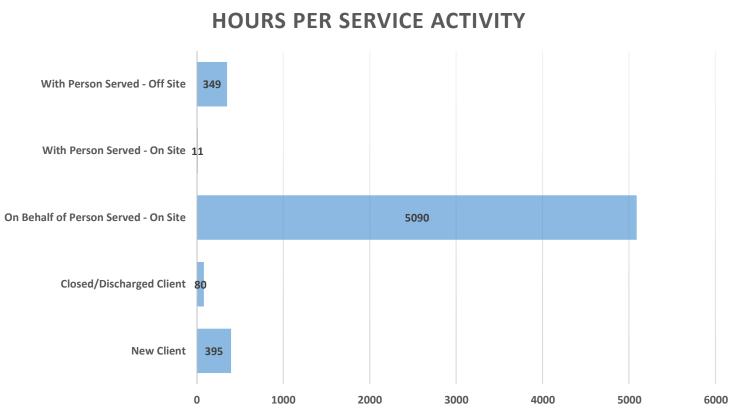


Family Development \$656,174	PY24

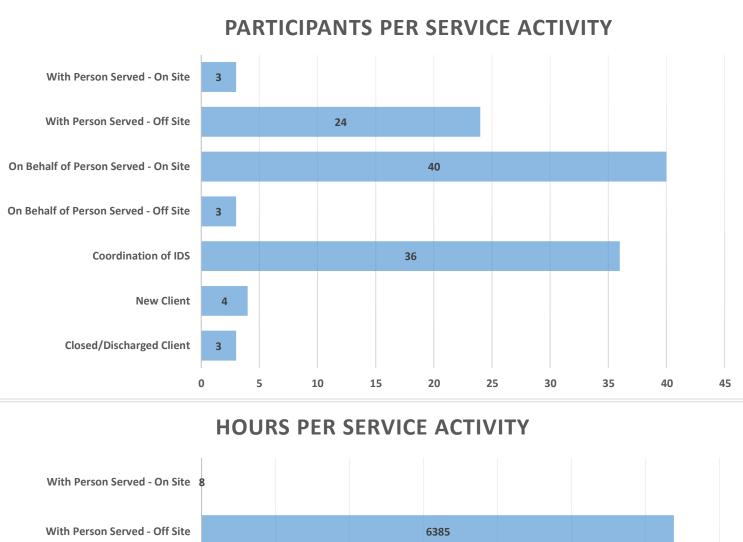
624 people were served for a total of 5,925 hours



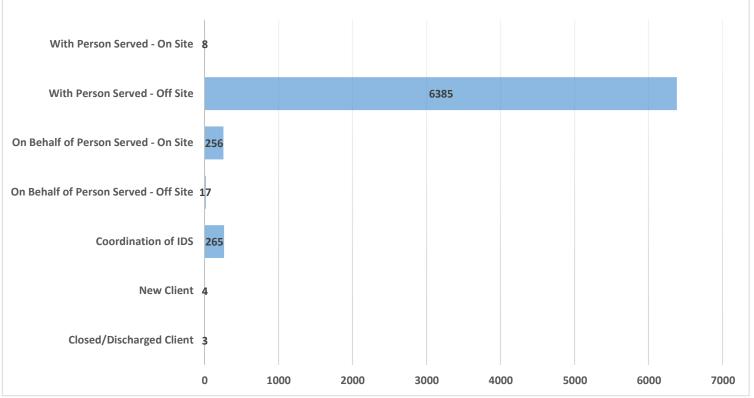
MHB



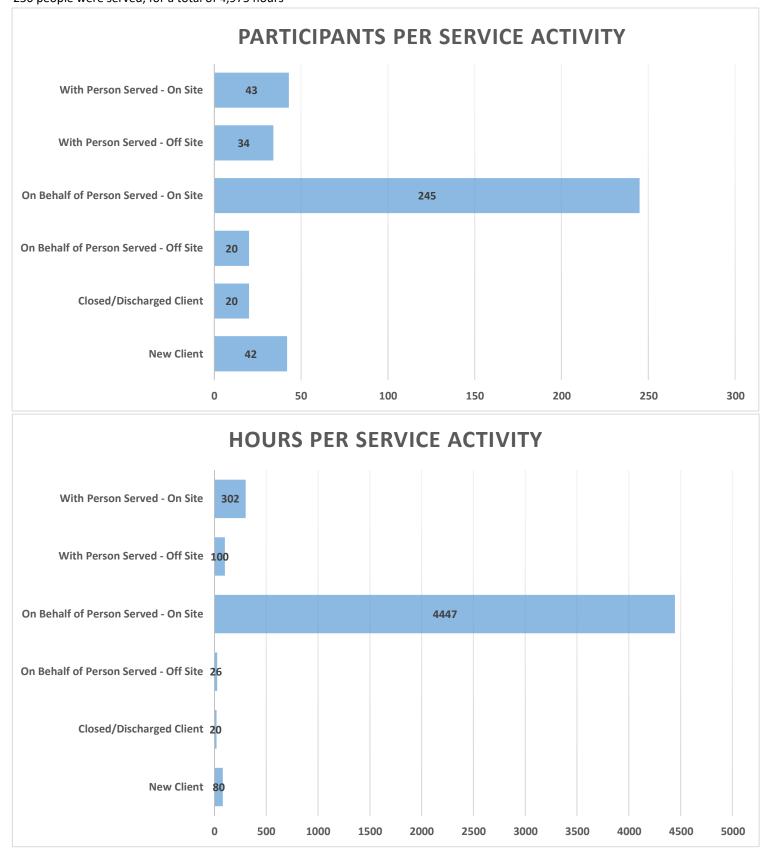
Individual & Family Support \$250,000	PY24
42 people were served for a total of 6,938 hours	



IDDSI



Service Coordination \$496,080 PY24 256 people were served, for a total of 4,975 hours



PACE

Consumer Control in Personal Support \$36,000PY24IDDSI20 PSWs registered, 8 Successful PSW Matches, & 533 total program hours

