



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

*PLEASE REMEMBER this meeting is being audio recorded.
Speak clearly into the microphone during the meeting.*

Champaign County Developmental Disabilities Board (CCDDB) AGENDA

Wednesday, April 27, 2016

Brookens Administrative Building, Lyle Shields Room

1776 E. Washington St., Urbana, IL 61802

8:00 AM

(Members of the Champaign County Mental Health Board are invited to sit in as special guests)

1. Call to Order – Dr. Phil Krein, President
2. Roll Call – Stephanie Howard-Gallo
3. Additions to Agenda
4. Citizen Input/Public Participation
The CCDDB reserves the authority to limit individual public participants to five minutes and limit the total time to 30 minutes.
5. CCMHB Input (**pages 3-10**)
Minutes of the CCMHB 2/17/16 and 3/23/16 meetings are included in the packet.
6. Approval of CCDDB 3/16/16 Board Meeting Minutes (**pages 11-15**)*
Minutes are included in the packet. Board action is requested.
7. President's Comments – Dr. Phil Krein
8. Executive Director's Report – Peter Tracy
9. Staff Reports – *deferred (see Program Summaries and CLC Analyses.)*
10. Consultant Report – *deferred.*
11. Agency Information
12. Financial Report
 - A. Approval of Claims* (**pages 16-18**)
Included in the Board packet. Action is requested.

13. New Business

A. Integration Transition Successes

Representatives of funded programs will provide oral reports on transitions to community settings for home, work, and connection.

B. Requests for FY2017 Funding

Discussion of agencies' requests for funding. A Briefing Memorandum (page 19), request spreadsheet (page 20), and draft Program Summaries and Cultural and Linguistic Competence Reviews (pages 21-105) are included in the packet.

14. Old Business

A. Summary of FY2016 ID/DD Contracts (pages 106-109)

A brief summary of each funded program (originally presented in September 25, 2015 board meeting packet) is included for information.

B. Executive Director Search* (pages 110-113)

A planning schedule and criteria to appoint the executive director search is included in the packet. Action is requested on the criteria document.

C. Employment First Update

Representatives of the Champaign County partnership will provide an oral report on progress.

D. CILA Update

An oral report will be provided at the meeting.

E. Alliance/Ebertfest Update

An oral report on activities completed will be provided at the meeting.

F. Meeting Schedules (pages 114-115)

Copies of CCDDDB and CCMHB meeting schedules are included in the packet for information only.

15. Board Announcements

16. Adjournment

**Board action requested*

5

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BOARD MEETING**

Minutes—February 17, 2016

*Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St
Urbana, IL*

4:30 p.m.

MEMBERS PRESENT: Astrid Berkson, Susan Fowler, Thom Moore, Judi O'Connor, Elaine Palencia, Julian Rappaport, Deborah Townsend, Margaret White

MEMBERS EXCUSED: Anne Robin

STAFF PRESENT: Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford, Mark Driscoll, Shandra Summerville

STAFF EXCUSED: Stephanie Howard-Gallo

OTHERS PRESENT: Sheila Ferguson, Linda Culton, Community Elements (CE); Patti Petrie, Champaign County Board; Gail Raney, Prairie Center Health Systems (PCHS); Lisa Benson, Regional Planning Commission (RPC); Darlene Kloeppel, Citizen; Nancy Greenwalt, Promise Healthcare; Beth Chato, League of Women Voters (LWV); Phil Krein, CCDDDB; Dale Morrissey, Danielle Matthews, Developmental Services Center (DSC); Jennifer Knapp, Community Choices; Elaine Shpungin, Psychological Services Center (PSC)

CALL TO ORDER:

Dr. Townsend, President, called the meeting to order at 4:30 p.m. New CCMHB member, Margaret White was introduced.

ROLL CALL:

Roll call was taken and a quorum was present.

3

CITIZEN INPUT / PUBLIC PARTICIPATION:

County Board member, Patsi Petrie expressed concern over the proposed changes to the Intergovernmental Agreement and encouraged the Board to consider agency representation and law enforcement representation on the search committee.

ADDITIONS TO AGENDA:

None.

CCDDB INFORMATION:

The CCDDB met earlier in the day. CCDDB President, Phil Krein gave a brief report on the search process. Dr. Townsend and Dr. Fowler will report on the process later in the meeting.

APPROVAL OF MINUTES:

Minutes from the 1/20/16 Board meeting were included in the Board packet for approval with minor revisions.

MOTION: Dr.. Berkson moved to approve the revised minutes from 1/20/16. Dr. Fowler seconded the motion. A voice vote was taken and the motion passed.

PRESIDENT'S COMMENTS:

Dr. Townsend stated she will speak more about the search process later in the meeting.

EXECUTIVE DIRECTOR'S COMMENTS:

Mr. Tracy distributed a Briefing Memorandum that provided an update on the CILA project for information only.

STAFF REPORTS:

Written staff reports from Mr. Driscoll, Ms. Canfield, and Ms. Summerville were included in the Board packet. Ms. Summerville provided a verbal update on her anti-stigma involvement.

CONSULTANT REPORT:

None.

BOARD TO BOARD:

None.

4

AGENCY INFORMATION:

Nancy Greenwalt from Promise Healthcare provided statistics regarding the agency. New patients are being accepted and examples of new patient packets were provided. Molina is accepted at Promise Healthcare.

Sheila Ferguson from Community Elements (CE) discussed the merger scheduled for July 1. A new name for the agency has not been decided.

Mr. Morrissey from Developmental Services Center (DSC) distributed written information and flyers on a movement to raise the wage for direct support professionals. Representative Robyn Gabel has introduced House Bill 5931 which would increase Direct Support Professional's wages to \$15 per hour.

FINANCIAL INFORMATION:

A copy of the claims report was included in the Board packet.

MOTION: Dr. Berkson moved to accept the claims as presented. Dr. Rappaport seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Liaison Assignment Process:

Dr. Townsend reviewed the liaison assignment process. Liaison guidelines were included in the Board packet. Dr. Rappaport requested the Crisis Intervention Team (CIT) be added to the list of assignments.

Application Funding Requests:

A list of funding requests for FY17 and the funding amounts requested was distributed at the meeting for information only. Discussion followed.

Executive Search Committee Report:

Dr. Townsend provided a verbal report on the search process. A Decision Memorandum was included in the Board packet. The Executive Committee of the CCDDDB and CCMHB has determined the need to allocate funding to cover costs associated with the search and selection of a new Executive Director. The preliminary estimate is a total of \$7,500 split equally between the CCDDDB and CCMHB.

5

MOTION: Dr. Berkson moved to authorize and set aside \$3,750 as the CCMHB share of the Executive Director search and selection process. Ms. White seconded the motion. Discussion followed. Dr. Fowler moved to table the motion until more information has been obtained. A voice vote was taken and the motion passed.

OLD BUSINESS:

Revised Intergovernmental Agreement:

A draft of a revised CCDDDB and CCMHB Intergovernmental Agreement was included in the packet for review. The Joint Personnel Committee has met to discuss the search process. The Search Committee for the new Executive Director is seeking a broad representation. The Committee has not yet been finalized. Dr. Berkson stated Board members should be more included in the search process. Board members discussed at length; the search process, the composition of the committee, and a timeline. It was also discussed the Intergovernmental Agreement has areas that need to be discussed and perhaps rewritten.

The Board generally agreed the Intergovernmental Agreement should be rewritten. It was also agreed the search process was trying to move too quickly. Mr. Tracy has indicated he will continue as Executive Director as long as he is needed.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:01 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDDB Staff

**Minutes were approved at the 3/23/16 CCMHB meeting.*

6

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BOARD MEETING**

Minutes—March 23, 2016

*Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St
Urbana, IL*

4:30 p.m.

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MEMBERS PRESENT: Astrid Berkson, Susan Fowler, Thom Moore, Judi O'Connor, Elaine Palencia, Julian Rappaport, Anne Robin, Deborah Townsend, Margaret White

STAFF PRESENT: Mark Driscoll, Stephanie Howard-Gallo, Shandra Summerville

STAFF EXCUSED: Lynn Canfield, Nancy Crawford, Peter Tracy

OTHERS PRESENT: Juli Kartel, Community Elements (CE); Patti Petrie, Champaign County Board; Rebecca Woodard, Regional Planning Commission (RPC); Darlene Kloepfel, Citizen; Mike Smith, Deb Ruesch, CCDDDB; Dale Morrissey, Developmental Services Center (DSC); Charlene Guldbrandsen, GROW in Illinois, Lynn Watson, Head Start

CALL TO ORDER:

Dr. Townsend, President, called the meeting to order at 4:30 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

ADDITIONS TO AGENDA:

None.

7

CCDDB INFORMATION:

The CCDDB met last week. CCDDB members Deb Ruesch and Mike Smith are attending tonight's meeting.

APPROVAL OF MINUTES:

Minutes from the 2/17/16 Board meeting were included in the Board packet for approval.

MOTION: Dr. Moore moved to approve the revised minutes from 2/17/16. Ms. White seconded the motion. A voice vote was taken and the motion passed.

PRESIDENT'S COMMENTS:

Dr. Townsend stated she is working on liaison assignments and Board members will no notified soon of their assigned agency.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

STAFF REPORTS:

Written staff reports from Mr. Driscoll, Ms. Canfield, and Ms. Summerville were included in the Board packet. Mr. Driscoll distributed instructions on how to access the online system in order to review funding applications. Ms. Summerville provided an update on her involvement in Ebertfest activities.

CONSULTANT'S REPORT:

None.

BOARD TO BOARD:

None.

AGENCY INFORMATION:

None.

FINANCIAL INFORMATION:

A copy of the claims report was included in the Board packet.

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8

MOTION: Dr. Fowler moved to accept the claims as presented. Dr. Berkson seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Roger Ebert Film Festival Discussion:

A Briefing Memorandum on the 2016 Film Festival and other relevant documents were included in the Board packet. Dr. Berkson stated she felt that we should consider discontinuing Ebertfest. Dr. Berkson said our Ebertfest activities are not changing minds and we are reaching the same people each year. Dr. Fowler stated Ebertfest is worth evaluating in the near future. Dr. Rappaport praised Ebertfest and anti-stigma activities, although he would not be opposed to an evaluation. The subject will be revisited later in the year.

OLD BUSINESS:

Revised Intergovernmental Agreement:

A draft of a revised CCDDDB and CCMHB Intergovernmental Agreement was included in the packet for review. Dr. Fowler provided the details on the proposed changes in the document. Board members discussed the details of the document at length.

MOTION: Dr. Fowler moved to approve the draft Intergovernmental Agreement dated March 16, 2016. Dr. Rappaport seconded the motion. A voice vote was taken. White, Fowler, Palencia, Moore, O'Connor, Rappaport, Robin and Townsend voted aye. Berkson voted nay. The motion passed.

Funding for Executive Director Search:

A Decision Memorandum to allocate funds to support the executive director search process was included in the Board packet. The CCDDDB has already authorized to set aside \$3,750 as the CCDDDB share in the search and selection process.

MOTION: Dr. Berkson moved to authorize and set aside \$3,750 as the CCMHB share of the Executive Director Search and selection process. Ms. White seconded the motion. A roll call vote was taken and all members voted aye. The motion passed.

CILA Update:

The second CILA home is ready to open. Occupants have been identified; however, staffing for the home continues to be an issue.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 5:21 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

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

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10

6

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

Minutes – March 16, 2016

*Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St.
Urbana, IL*

8 a.m.

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- MEMBERS PRESENT:** Joyce Dill, Phil Krein, Deb Ruesch, Mike Smith
- MEMBERS EXCUSED:** Sue Suter
- STAFF PRESENT:** Peter Tracy, Lynn Canfield, Mark Driscoll, Stephanie Howard-Gallo, Shandra Summerville
- STAFF EXCUSED:** Nancy Crawford
- OTHERS PRESENT:** Felicia Gooler, Janice McAteer, Danielle Matthews, Laura Bennett, Patty Walters, Annette Becherer, Developmental Services Center (DSC); Gary Maxwell, Patti Petrie, Sam Shore, Champaign County Board; Susan Fowler, Champaign County Mental Health Board (CCMHB); Jennifer Knapp, Community Choices; Dylan Boot, Jermaine Raymer, Persons Assuming Control of their Environment (PACE); Lisa Benson, Regional Planning Commission (RPC); Vicki Niswander, IAMC; Kathy Kessler, Community Elements (CE); Melissa McDaniel, CTF Illinois; Mark Scott, Down Syndrome Network (DSN); Barb Jewett, Parent; Sally Mustered, Parent

CALL TO ORDER:

Dr. Phil Krein called the meeting to order at 8 a.m.

11

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None.

CCMHB INPUT:

None.

APPROVAL OF CCDDDB MINUTES:

Minutes from the February 17, 2016 CCDDDB meeting were included in the Board packet.

MOTION: Ms. Ruesch moved to approve the minutes from the February 17, 2016 CCDDDB meeting. Mr. Smith seconded the motion. A voice vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

Dr. Krein announced a new draft of the Intergovernmental Agreement between the two Boards is being distributed this morning. The dire state of the Illinois budget continues to shut down agencies and programs. He also provided an update on the search process for a new executive director.

EXECUTIVE DIRECTOR'S REPORT:

Mr. Tracy spoke regarding the importance of the Intergovernmental Agreement between the two Boards.

STAFF REPORTS:

Ms. Canfield's and Ms. Summerville's written reports were included in the Board packet.

CONSULTANT'S REPORT:

None.

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12

AGENCY INFORMATION:

Lisa Benson from the Regional Planning Commission (RPC) reported 14 people from Champaign County are being pulled from the PUNS list.

Dylan Boot from Persons Assuming Control from their Environment (PACE) reported that PACE will be cutting staffing and hours due to the state of Illinois budget cuts. Jermaine Rayner from PACE announced the agency will be closed 2 days per month.

FINANCIAL REPORT:

A copy of the claims report was included in the Board packet.

MOTION: Mr. Smith moved to accept the claims report as presented. Ms. Dill seconded the motion. A voice vote was taken and the motion passed unanimously.

NEW BUSINESS:

Integration Transition Successes:

Jennifer Knapp from Community Choices announced a client has been hired at the Walmart in Rantoul. She also announced that Community Choices recently held a community event with the UP Center.

Requests for FY17 Funding:

A list of requests for FY17 funding was included in the Board packet.

OLD BUSINESS:

Intergovernmental Agreement with the CCMHB:

The Champaign County Developmental Disabilities Board (CCDDB) and Champaign County Mental Health Board (CCMHB) have a longstanding agreement by which the two Boards share administrative costs and work cooperatively on matters pertaining to the allocation of Intellectual and Developmental Disabilities funding.

The agreement was initiated in 2005 and has been modified as necessary over the years. The Executive Committee of the CCDDB/CCMHB is comprised of the officers of the Boards and has the responsibility of monitoring the partnership and making recommendations for changes in the agreement. The status of the Agreement is a permanent agenda item for Executive Committee meetings.

In October of 2015, the Executive Committee discussed the provisions of the Intergovernmental Agreement (IGA) and made recommendations for changes to the document. The result was a draft revised agreement presented at the February 17, 2016 meetings of each board. The CCDDB voted to approve the proposed modifications. The CCMHB did not approve the document and discussion resulted in additional revisions.

A draft CCDDDB/CCMHB Intergovernmental Agreement incorporating subsequent input, has been approved by the Executive Committee, and is presented today (March 16) for approval by the CCDDDB.

Dr. Krein announced the Agreement had been revised since the packet was distributed and he distributed an updated draft of the Intergovernmental Agreement. Dr. Krein provided background information on the document and described the proposed changes.

MOTION: Mr. Smith moved to approve the Draft Intergovernmental Agreement dated March 16, 2016. Ms. Ruesch seconded the motion.

County Board member, Gary Maxwell shared an email he sent to Board members on March 15, 2016 of changes to the document that he suggests. He also encouraged the Board to have open meetings during the search process to allow for transparency. Dr. Krein asked if there was a Board member that wanted to offer Mr. Maxwell's changes to the document as an amendment. There were none.

CCDDDB members discussed the details of the proposed Intergovernmental Agreement at length. It was agreed simplicity of the Agreement was important. Dr Fowler, Vice-President of the CCMHB stated the proposed document contained suggestions from several MHB members. The discussion resulted in several minor wording edits in the document.

Mr. Smith moved to amend the document as discussed. Ms. Dill seconded. A roll call vote was taken and all members voted aye. A roll call vote was taken on the overall Draft Intergovernmental Agreement as amended. A roll call vote was taken and all members voted aye. The motion passed unanimously.

The document will be presented to the CCMHB for their approval at their March 23rd board meeting.

Employment First Update:

Annette Becherer reported nine businesses had been certified. LEAP continues to get media attention and the attention community of businesses.

CILA Update:

Mr. Tracy reported the second home is getting ready to open. Staffing issues continue to be a challenge. More information will be forthcoming.

Alliance/Ebertfest Update:

A Briefing Memorandum, Dr. Rappaport's 2014 PsycCRITIQUES article "Better Than a Documentary: A Review of Short Term 12", February 2016 Briefing for UIUC Advertising/Computer Science students, and three ads for the 2016 festival program book were included in the packet for information only.

14

Expo Update:

The Expo will be held October 15, 2016. A wine tasting fundraiser will take place June 9, 2016 at the Art Mart in Champaign.

Meeting Schedules:

Copies of CCDDDB and CCMHB meeting schedules and allocation timelines were included in the packet for information only.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 9:00 a.m.
Respectfully Submitted by: Stephanie Howard-Gallo

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

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15

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/07/16

PAGE 7

VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND											
*** DEPT NO. 050 DEVLPMNTL DISABILITY BOARD											
90	CHAMPAIGN COUNTY TREASURER	4/01/16	02 VR 108-	40		540277	4/07/16	108-050-533.07-00	MENT HLTH BD FND 090 PROFESSIONAL SERVICES	APR ADMIN FEE VENDOR TOTAL	31,487.45 31,487.45 *
104	CHAMPAIGN COUNTY TREASURER	4/01/16	02 VR 108-	32		540278	4/07/16	108-050-533.92-00	HEAD START FUND 104 CONTRIBUTIONS & GRANTS	APR SOC/EMOT SVCS VENDOR TOTAL	4,569.00 4,569.00 *
161	CHAMPAIGN COUNTY TREASURER	4/01/16	02 VR 108-	33		540282	4/07/16	108-050-533.92-00	REG PLAN COMM FND075 CONTRIBUTIONS & GRANTS	APR DECISION SUPPOR VENDOR TOTAL	4,000.00 4,000.00 *
5352	AUTISM SOCIETY OF ILLINOIS	4/01/16	02 VR 108-	31		540298	4/07/16	108-050-533.92-00	GRANTS CONTRIBUTIONS & GRANTS	APR AUTISM NETWORK VENDOR TOTAL	833.00 833.00 *
18209	COMMUNITY ELEMENTS	4/01/16	02 VR 108-	36		540314	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COORD OF SVCS VENDOR TOTAL	2,662.00 2,662.00 *
19900	CTF ILLINOIS	4/01/16	02 VR 108-	34		540320	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR NURSING VENDOR TOTAL	715.00 715.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF	4/01/16	02 VR 108-	37		540324	4/07/16	108-050-533.92-00	CHAMPAIGN COUNTY INC CONTRIBUTIONS & GRANTS	APR APARTMENT SVCS APR CLINICAL SVCS APR COMMUNITY EMPLO APR CONNECTIONS APR EMPLOYMENT 1ST	33,765.00 14,481.00 18,567.00 7,083.00 6,667.00

161

12

CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/07/16

PAGE 8

VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND											
		4/01/16	02 VR 108-	37		540324	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR FAM DEV CENTER	45,492.00
		4/01/16	02 VR 108-	37		540324	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR INT SITE SVCS	75,453.00
										VENDOR TOTAL	201,508.00 *
22816	DOWN SYNDROME NETWORK										
		4/01/16	02 VR 108-	35		540327	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR DOWN SYNDROME	1,250.00
										VENDOR TOTAL	1,250.00 *
54930	PERSONS ASSUMING CONTROL OF THEIR ENVIROMENT, INC										
		4/01/16	02 VR 108-	38		540367	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR OP FOR INDEPEND	2,500.00
										VENDOR TOTAL	2,500.00 *
76107	UNITED CEREBRAL PALSY LAND OF LINCOLN										
		4/01/16	02 VR 108-	39		540400	4/07/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR VOCATIONAL SVCS	7,206.00
										VENDOR TOTAL	7,206.00 *
										DEVLMTL DISABILITY BOARD	DEPARTMENT TOTAL 256,730.45 *
										DEVLPMNTL DISABILITY FUND	FUND TOTAL 256,730.45 *

17

CHAMPAIGN COUNTY
EXPENDITURE APPROVAL LIST

4/07/16

PAGE 9

VENDOR NO	VENDOR NAME	TRN B DTE	TR N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 685 SPECIALTY COURTS FUND											
*** DEPT NO. 031 CIRCUIT COURT											
41	CHAMPAIGN COUNTY TREASURER							HEALTH INSUR FND 620			
		3/28/16	08 VR 620-	45		539385	3/31/16	685-031-513.06-00	EMPLOYEE HEALTH/LIFE INS	MAR HI, LI, & HRA	690.90
										VENDOR TOTAL	690.90 *
88	CHAMPAIGN COUNTY TREASURER							I.M.R.F. FUND 088			
		3/09/16	01 VR 88-	13		538359	3/10/16	685-031-513.02-00	IMRF - EMPLOYER COST	IMRF 3/4 P/R	129.18
		3/28/16	08 VR 88-	16		539389	3/31/16	685-031-513.02-00	IMRF - EMPLOYER COST	IMRF 3/18 P/R	129.18
										VENDOR TOTAL	258.36 *
176	CHAMPAIGN COUNTY TREASURER							SELF-FUND INS FND476			
		3/15/16	04 VR 119-	8		538616	3/18/16	685-031-513.04-00	WORKERS' COMPENSATION	INSWKMP 1/8,22 PR FY1	10.01
		3/22/16	08 VR 119-	16		539022	3/24/16	685-031-513.04-00	WORKERS' COMPENSATION	INWORK COMP 2/5,19 P/	18.20
										VENDOR TOTAL	28.21 *
188	CHAMPAIGN COUNTY TREASURER							SOCIAL SECUR FUND188			
		3/09/16	01 VR 188-	20		538364	3/10/16	685-031-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 3/4 P/R	114.65
		3/28/16	08 VR 188-	24		539395	3/31/16	685-031-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 3/18 P/R	114.64
										VENDOR TOTAL	229.29 *
78877	VISA CARDMEMBER SERVICE - CIRCUIT COURT							AC#4798510049574003			
		3/30/16	03 VR 685-	5		539583	3/31/16	685-031-533.53-00	SPECIALTY COURTS EXPENSES4003	CUMTD 2/9	84.00
		3/30/16	03 VR 685-	5		539583	3/31/16	685-031-533.53-00	SPECIALTY COURTS EXPENSES4003	CUMTD 2/17	84.00
		3/30/16	03 VR 685-	5		539583	3/31/16	685-031-533.53-00	SPECIALTY COURTS EXPENSES4003	WALMART 3/9	400.00
										VENDOR TOTAL	568.00 *
									CIRCUIT COURT	DEPARTMENT TOTAL	1,774.76 *
									SPECIALTY COURTS FUND	FUND TOTAL	1,774.76 *
										REPORT TOTAL *****	621,711.73 *



B.B.

BRIEFING MEMORANDUM

DATE: April 27, 2016
TO: Members, Champaign County Developmental Disabilities Board
FROM: Peter Tracy
SUBJECT: Program Summaries – FY17 Allocation Cycle

Traditionally, our April meeting is used to vet all applications for funding, with final decisions made at our May meeting. To facilitate this process, staff have completed Program Summaries on all applications. The summaries glean salient information and provide opinions concerning alignment with our stated priorities and defined decision support criteria.

All applicants for Champaign County Developmental Disabilities Board or Champaign County Mental Health Board funding, for programs related to Intellectual and/or Developmental Disabilities (ID/DD) supports and services, have received a letter with instructions on where to access a copy of their program summary and have been invited to notify us in writing if there are factual errors which should be corrected prior to completion of the FY17 award process. Written comments from providers will be shared with CCDDDB members, and errors will be corrected. Differences of opinion concerning alignment with decision support criteria and ratings will not result in changes unless directly related to a corrected factual error.

In addition, all applicant agencies are invited to attend the April meeting for the twofold purposes of (1) providing additional information directly to the Champaign County Developmental Disabilities Board (CCDDDB) during the “Agency Information” portion of the agenda, and (2) answering direct questions from CCDDDB members or staff concerning their application. CCDDDB members have full and direct access to all applications through our online application system, and may at their discretion raise questions not addressed in the summaries.

19

DRAFT - ID/DD Program Funding Requests for FY2017

July 1, 2016 thru June 30, 2017

Agency	Program Name	PY16 DDB Award	PY16 MHB Award	PY17 Request
Autism Society of Illinois	CU Autism Network	\$10,000		\$12,000
CCRPC - Community Services	Decision Support Person for CCDDDB	\$48,000		\$48,622
CTF Illinois	CTF Illinois Nursing	\$8,580		\$6,000
	N CTF Illinois Advocacy Center	\$0		\$87,000
Champaign County Down Syndrome Network	CC Down Syndrome Network	\$15,000		\$15,000
Champaign County Head Start/Early Head Start	Social Emotional Disabilities Svcs	\$54,823		\$55,645
Community Choices, Inc.	Community Living		\$60,000	\$63,000
	Customized Employment		\$55,000	\$70,000
	Self-Determination Support		\$55,000	\$70,000
Community Elements, Inc.	Coordination of Services: DD/MI	\$31,945		\$32,903
Developmental Services Center	Apartment Services	\$405,185		\$417,341
	Clinical Services	\$173,773		\$178,986
	Community Employment	\$222,800		\$229,484
	Connections	\$85,000		\$87,550
	M Employment First	\$80,000		\$80,000
	Family Development Center	\$545,903		\$562,280
	Individual & Fam Support		\$376,144	\$387,428
	M Integrated/Site Based Services - Community 1st	\$905,441		\$905,441
Illinois Association of Microboards and Cooperative	N Champaign County Advocacy Training			\$83,000
	N IAMC Building Inclusive Communities			\$64,278
PACE	Opportunities for Independence	\$30,000		\$54,546
United Cerebral Palsy Land of Lincoln	Vocational Services	\$86,475		\$91,895
CILA		\$50,000	\$50,000	\$100,000
TOTAL		\$3,151,797	\$596,144	\$4,113,237
N= New, M = Multi-year		Total ID/DD \$ FY2016 =		
		\$3,747,941.00		

20

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
C-U Autism Network

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment-
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure- Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria- See Comments
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments-

The CLCP Template was in the correct format stated in the application instructions. There are actions that are scheduled for PY17 and it is recommended that you add specific timeframes to ensure accountability. The C-U Autism network is operated by large group of volunteers and one part-time person.

Cultural Competence Training

- *Allocate funding/resources for annual cultural competency training for board of directors. The training will take place during the program year.*

Comments:

Recruitment of a diverse Board and Staff

- *Seek out culturally and linguistically diverse individuals to join Governing Advisory Committee.*

Comments: It is recommended that your actions are specific about ways that you will seek out diverse backgrounds.

Cultural Competence Organizational Assessment/Evaluation

Use surveys Facebook and Survey Monkey to gage interests and need for cultural and linguistically diverse speakers/events.

Comments: It is recommended that you report the diverse speakers and events that were identified during the assessment.

Policies and procedures/practices which reflect Cultural Competence values

21

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
C-U Autism Network

- *Research resources to have more autism materials translated into various languages.*
- *Read and sign an agreement that the CLC plan has been read and practices will be implemented throughout the 2017 physical year.*
- *Develop a directory of local providers, organizations, and other community supports.*
-

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- *Allocate resources for rural mailing in Champaign County for an annual mailing.*
- *Explore the feasibility of utilizing Skype to link rural families into the C-U Autism Network meetings and trainings.*
- *Families who are culturally and linguistically diverse will be connected with other members in our community with similar diversity.*

Comments: It is recommended that no member is made to feel isolated or segregated as a result of a different cultural background. Consider additional specific outreach and engagement activities that will raise awareness about the resources of the network.

Inter-Agency Collaboration

- *A recent collaborative event was the 2015 Mom's Retreat that was co-sponsored by CUAN with Down Syndrome Network, The Autism Program, STARnet, and Stephen's Family YMCA.*
- *The Autism Society of Illinois: Champaign-Urbana Autism Network (CUAN) frequently works in collaboration with other disability groups (i.e. Down syndrome Network, CU Able/Lorkins Place)*

Comments:

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: The Autism Society of Illinois

Program Name: CU Autism Network

Contract Format Requested: Grant

Funding Requested: \$12,000

Staff Assessment: Request is for \$2,000 more than FY16 level.

Target Population: Individuals with Autism Spectrum Disorders (ASD) family members, professionals and students from the University of Illinois and Parkland College.

Staff Assessment: The application indicates they reach out to families with a recent diagnosis and families new to our area. The application also indicates they reach out to rural areas and those from culturally diverse backgrounds.

Service Description/Type: Community resource information, support through meetings, email/phone consults, networking and educational opportunities. Eight regular meetings are held each year. Free child care is provided at meetings, and a swimming program is available to children 9 and older. Three free family events are held each year: Family Swim Night, Mini-golf/pizza party, and an open bowling/pizza party. CUAN hosts or co-hosts workshops each year on ASD topics and ASD awareness.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? NO.
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? N/A
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? N/A
- Incorporate Employment First principles? N/A
- Acknowledge support and encouragement of self-advocacy? YES – a focus.
- Address cultural competence and outreach to underserved populations? *See agency Cultural and Linguistic Competence review attached and summaries of current and previous years’ demographic and residency data.*

Alignment with Other ID/DD Priority: Self-Advocacy and Family Support Organizations.

Program Performance Measures:

Consumer Access:

Meetings and all events are free to anyone interested and childcare is provided for free as well. All events are held at fully accessible public facilities. CUAN supplies local doctors and social workers

ASI-CUAN

23

with New Parent Information packets for those newly diagnosed with an ASD and to those with an existing diagnosis who are new to the area.

Staff Assessment: this section presents utilization targets as measure of access.

Consumer Outcomes:

18 Community Service Events; 85 Regular Treatment Plan Clients; 2000 Non-Treatment Plan Clients; 100 New Parent Packets; 3 Family Events; Annual Walk; increasing access to info in Spanish.

Staff Assessment: some of these measures are utilization targets.

Utilization/Production Data:

FY 17 Targets: 95 continuing and 30 new TPCs; 2200 continuing and 100 new NTPCs; 20 Community Service Events.

FY16 Mid-Year: 7 CSEs against target 12; 16 TPCs against target 50; 1520 NTPCs against target 1775. FY16 is the first year that CSEs are defined as discrete events, TPCs as 'members' attending 6 or more meetings, and NTPCs those attending less frequently.

FY 15 (\$10,000): 2493 CSEs against target 1200; 71 TPCs against target 95; 139 NTPCs against target 1925.

COUNTY WIDENESS

FY16 (\$10,000) Mid-Year: 19% Urbana, 69% Champaign, 13% Other CC, of 16.

FY15 (\$10,000): 12% Urbana; 37% Champaign; 6% Mahomet; 8% Other CC; 37% data unavailable.

DEMOGRAPHICS

FY16 Mid-Year: 100% are 19 to 59; 6% are Black/AA and 94% White; 0% were of Hispanic or Latino origin and 100% not; 88% are female and 13% male.

FY15: 7% were 6yo and younger, 1% 7 to 12, 68% 19 to 59, and 24% data unavailable; 7% Black/AA, 3% Other, 58% White, and 32% data unavailable; 3% were of Hispanic or Latino origin, 63% not, and 34% data unavailable; 56% were female, 11% male, and 33% data unavailable.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$12,000

PY17 Total Program Expenses: \$12,262

Program Staff – CCDDDB/CCMHB Funds: 0 FTE 0 FTE

Total Program Staff: 0 FTE 0 FTE

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? NO.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Budget Narrative:

Professional Fees \$1600; Swimming fees (\$5 per child); Bookkeeping; Consumables \$1500; Office Supplies \$700; Food and Supplies for events \$800; General Operating \$3000; Cell Phone \$675; Printing \$1200; Postage \$250; disability Expo Resource book ad \$300; Website \$75; Liability Insurance \$500. Total agency pays a part-time coordinator, but none of her salary is charged to this contract. Budget Narrative also includes comments on prevalence of Autism Spectrum Disorders.

ASI-CUAN

24

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit Requirement Waived ___x___

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Regional Planning Commission- Community Services

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training-Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure- Yes
5. Outreach and Engagement of Underrepresented Populations defined in the criteria- Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLC Plan followed the template format. The component that was missing was the Inter-Agency callaboration. It is recommended that a Cultural Competence Training/Workshop be offered to board members. The Actions that were listed in your plan seem very broad. It is recommended that you simplify your actions in order to have additional clear benchmarks and timeframes for completing the benchmarks.

Comments:

Recruitment of a diverse Board and Staff

Board Members are recruited from the client base and staff members hired for the Youth Assessment Center speak Spanish Fluently.

Comments: It is recommended that you ensure that there is a balanced board. One client on the Community Action Board is not the only step to ensure cultural competence and is reflective of diverse make-up of the Board and Staff.

Cultural Competence Organizational Assessment/Evaluation

Conduct Community Needs Assessment Community Stakeholders provided survey to provide information on community needs. Staff and Community porticipoted.

Comments: *A community needs assessment is different than an organizational cultural competence assessment. There is a recommendation that you assess how you measure culturally responsive practices/policies as an organization.*

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Regional Planning Commission- Community Services

Policies and procedures which reflect Cultural Competence values

- *List of County Translators is updated and distributed*
- *Universal Assessment tools are used that identify both strengths and challenges that is used to develop service plans/*
- *CCRPC is open M-F, 8:00 am-4:30 pm, however the ISC team responds to emergency situations via live onswering service 24 hours/7 days per week. The activities proposed for this project would likely occur during regular work hours, however staff will schedule appointments outside of regular business hour to accomodate individuals' schedules.*
- *Wellness at Wark Program incentive that provides o paid leave day by random drawing*

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- *Scheduled events to attempt to engoge underserved populations who are nat in school, focusing on increasing the registration of minarity populations*
- *Outreach to high schools throughout Chompaign County to caordinate staff participation in IEP meetings for DD students'*
- *Services are offered in Champaign, Urbano, and Rantoul Only*
- *Quarterly outreach events provided by each team*

Comments: It is recommended that you have a clear time-frame for conducting your community engagement. Please consider other rural areas in Champaign County to ensure additional accessibility.

Inter-Agency Collaboration-

No Inter-Agency Collaboration mentioned in CLC Plan

Comments:

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: CCRPC – Community Services

Program Name: Decision Support Person for CCDDDB

Contract Format Requested: Grant

Funding Requested: \$48,622

Staff Assessment: increase of \$662 over FY2016 level.

Target Population: people with developmental disabilities who are eligible for Illinois Department of Human Services – Division of Developmental Disabilities (IDHS-DDD) waiver-funded services but not receiving them; includes students transitioning from high school to adulthood, students aging out of Illinois State Board of Education (ISBE) funding, adults not currently registered with the Prioritization of Urgency of Need for Services (PUNS) database, and adults returning from other communities but whose service preferences are not yet documented by the Independent Service Coordination unit.

Service Description/Type: Total program is responsible, through contract with IDHS, for Individual Service Coordination (PUNS enrollment, Pre-Admission Screening, and Individual Supports and Services Advocacy) to a region which includes Champaign County. As the single point of intake for IDHS-DDD funding/services, the CCDDDB/CCMHB-funded program adds services of outreach, assessment, and connection to those not served under the state contract. It also includes services not covered: pre-admission screenings upon PUNS enrollment and prior to services through CCDDDB/CCMHB funded programs offered by other agencies; collection of details on individuals' preferences for services, whether available or not, to use for future system-planning; and for those in "critical priority" on PUNS, the development of individual (person-centered) service plans, crisis management plans, and linkage (of those who are eligible) to DD services and other local resources.

Staff Assessment: the state contract does not currently cover determination of disability prior to PUNS enrollment, person-centered service planning, or collection of data on service preferences of those not yet receiving state funding, although that may change.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? Indirectly, through service planning.
- Support a person building connections to the broader community? YES – through determinations of eligibility for and referral to community-based services and supports.
- Support a person participating in community settings of their choice and in ways they desire? YES – through service planning, eligibility determination, and referrals.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? NO.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? NO.
- Incorporate Employment First principles? NO.

- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and current contract year demographic and residency data below.* Outreach to rural residents is done through multiple service locations, home visits, relationships with all school districts and providers, IEP meetings, outreach events (underserved populations) advertised by PSA, flyers, etc.

Alignment with Other ID/DD Priority: Planning for People with Challenging and Complex Service Needs.

Program Performance Measures:

Consumer Access: includes description of outreach efforts, office hours and emergency response via 24 hour call line, use of satisfaction surveys (individuals, guardians, referring agencies,) collection and analysis of demographic and other personal data, electronic client records (for those enrolling in PUNS and completing a preference assessment,) pre-admission screening for those receiving CCDDDB/CCMB funded ID/DD services, and expected timeframes for some activities. Includes current mid-year performance (eligibility support for 32 people and preference assessments for 183) and an FY17 measure – to complete preference assessments for 80% of PUNS enrollees (NTPCs).

Consumer Outcomes: program seeks to make families and people with DD aware of IDHS-DDD waiver funding, PUNS, and resources available to those waiting to be selected from PUN. Includes three measures: 100% of PUNS enrollees have expressed their choices of services (per data from service preference assessments;) crisis management and service planning and linkage for 32 people (a utilization target); and 100% of people receiving ID/DD services funded by CCDDDB/CCMHB will be screening for IDHS-DDD waiver funding eligibility and prepare the related, required documentation, allowing easily generated report on numbers of individuals waiting/served.

Staff Assessment: *the first of three measures is similar to the Access measure, and the second a utilization target.*

Utilization/Production Data:

FY 17 Targets: 8 Continuing and 32 New TPCs; 60 New Non-TPCs; 60 Service/Screening Contacts; and 50 Community Service Events.

FY16 (\$48,000) Mid-Year: 4 CSFs against target 10; 4 SCs against target 20; 3 new TPCs against target 32; 182 new NTPCs against target 300; hours not reported.

COUNTY WIDENESS

FY16 Mid-Year: 27% Urbana, 50% Champaign, 5% Mahomet, 2% Other CC, of 22

DEMOGRAPHICS (186 vs. 185 TPC and NTPC reported)

FY16 Mid-Year: 2% are 7 to 12, 3% are 13 to 18, 89% are 19 to 59, and 7% are 60 and up; 2% are Asian/PI, 18% Black/AA, 4% Other, and 77% White; 2% are of Hispanic or Latino origin, 98% not; 45% are female, and 55% male.

Staff Assessment: *a report of hours in "Other" is a helpful measure for these service activities.*

Financial Information:

CCRPC-DSP

29

PY17 CCDDDB/CCMHB Funding Request: \$ 48,622
PY17 Total Program Expenses: \$ 48,622

Program Staff – CCDDDB/CCMHB Funds: 1.13 FTE direct staff
Total Program Staff: 1.13 FTE direct staff

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *no indirect staff are charged to this contract; personnel form associates 60% of one case manager, 30% of another, and 23% of a program manager to this contract.*

Budget Narrative: CCDDDB/CCMHB request is 100% of program **revenue**. Staff costs comprise 78% of **expenses**, along with Occupancy (11%), Local Transportation (8.7%), and small amounts for General Operating and Consumables. The **Budget Narrative** explains each expense item; although it references professional fees/consultants, no amount is charged to that line in the Expense form.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable X

Staff Comments: *This program, as a unit within the CCRPC, is included in Champaign County's audit.*

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
2. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
3. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

CCRPC DSP

30

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
CTF Illinois

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- No
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-(See Comments)
6. Inter-Agency Collaboration- No

Overall CLC Plan Comments

Cultural Competence Training

- *Upon hire, all employees are trained on person centered planning, individual choice, and communication during their classroom and orientation training.*
- *Case Managers use their training to develop programming to increase individual voice and choice via communication boards, adaptive equipment acquisition, and goals.*
-

Comments: It is recommended that the Board of Directors and Administrative Team receive annual cultural competence training/workshop

Recruitment of a diverse Board and Staff

Comments: There was no information provided in the CLC Plan regarding the recruitment of diverse board and staff.

Cultural Competence Organizational Assessment/Evaluation

- Regular quality assurance (QA) of sites completed by Administrative staff to ensure the facilities meet the needs of the individuals that receive services from CTF ILLINOIS.
- Employee evaluations are administered that address meeting individual choice and promoting their voice.
- Site (residential and day service) meeting area held every month to encourage input/comments from residents.
- Administrative Team completes site visits bi-monthly to complete quality assessment, including environmental issues, individual choice, and cultural competency.
- Review company consents/releases/questionnaires/training material to ensure easy to understand.

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
CTF Illinois

Comments:

Policies and procedures which reflect Cultural Competence values

- CTF ILLINOIS currently has in place the following procedures/policy in place to promote cultural competency: Programs/Services - Human Rights Policy and Complaint and Grievance Policy
- Human Resources - Employee Grievance Policy, Employee Development, Employee Handbook (Discrimination and Harassment) Policies are typically reviewed in July of each year.
- Individuals and their guardians have the primary decision-making role in the development in their service plan.

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- We will provide services to individuals with developmental disabilities who wish to learn about and develop skills within the field of advocacy.
- Rural Residents, as defined by the CCDDB as those living outside of Champaign, Urbana, Savoy, and Rantoul, will be welcome, but due to transportation limitations, must be within one-hour driving distance of the Advocacy Center.

Comments: It is recommended that you collaborate with other organizations and community based organizations that serve persons with DD/IDD to ensure a broader reach of persons that may not be familiar with advocacy services that are being offered by CTF.

Inter-Agency Collaboration

Comments: There was no mention of Inter-agency collaboration.

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: CTF Illinois

Program Name: CTF Illinois Advocacy Center (2017)

Contract Format Requested: Grant - NEW

Funding Requested: \$87,000

Target Population: People with intellectual and developmental disabilities (I/DD) interested in learning how to “raise their voices” as advocates while at the same time exploring issues related to services for people with I/DD. The participants will have an interest in learning about and developing skills in the field of advocacy.

Service Description/Type:

Adult day programming with emphasis on social and community integration with a strong focus on advocacy for people with I/DD. To accomplish this the program will have an Advocacy Director to lead efforts with outreach to media, speaking engagements, community volunteerism, trainings, organized events, and new avenues for outreach and advocacy. The program will provide support and training to participants in the following areas: public speaking and critical thinking; social technology; letter writing, newsletters, and phone calls; video, photos, radio, and podcasts; community volunteer opportunities; rallies and conferences; participation/hosting one community event per month; and semi-annual special projects. The project will be modeled after successful models such as the Advocacy Center of Rochester NY, and others.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? YES – The project supports this focus.
- Support a person building connections to the broader community? YES – emphasis is on inclusion and advocacy.
- Support a person participating in community settings of their choice and in ways they desire? YES – the focus is on helping the person find their own voice and passions.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES – this is included in the project outcomes.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? YES – this is included in the project outcomes.
- Incorporate Employment First principles? YES – project supports these principles.
- Acknowledge support and encouragement of self-advocacy? YES, this is a component of the Advocacy Center.
- Address cultural competence and outreach to underserved populations? NO – this is not explicitly mentioned. *See agency Cultural and Linguistic Competence review attached.*

Alignment with Other ID/DD Priority: Self Advocacy and Family Support Organizations (addresses the former,) Adult Day Programming that Emphasizes Social and Community Integration.

Program Performance Measures:

Consumer Access:

The Advocacy Director will be responsible for identification of participants and will enroll individuals with I/DD in the project as an alternative to traditional day programming. The 10 people selected must have an I/DD, can't be a danger to self or others, and must be 18 years or older.

Staff assessment: the quantifiable measure appears to be a utilization target.

Consumer Outcomes:

The participants in the Advocacy Center will discover their own passions, define their own goals, and find their own voice. 100% of individuals will participate in at least one community event per month. All participants will receive an initial evaluation and subsequent annual evaluation to assess current abilities, skills, knowledge and needs. Progress will be reviewed monthly by case manager.

Utilization/Production Data:

Ten people (with maximum of 15 people) with I/DD who meet the program criteria; 100 service contacts and 12 community service events.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$87,000
PY17 Total Program Expenses: \$87,000

Program Staff – CCDDDB/CCMHB Funds: FTE: 1.0
Total Program Staff: FTE: 1.0

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid rates?
Not Applicable – these are most likely not Medicaid billable services.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Budget Narrative: The project is to be entirely funded with CCMHB/CCDDDB funds. The narrative provides adequate explanation about how CCMHB/CCDDDB funding is to be used. \$33,000 is to be used for leasing space for the Advocacy Center, with \$41,000 for salary and benefits for the Advocacy Director.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Staff Comments: No audit issues.

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.

2. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
3. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
4. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: CTF Illinois

Program Name: CTF Illinois Nursing

Contract Format Requested: Grant

Funding Requested: \$6,000

Staff Assessment: a decrease from FY16 level.

Target Population: seven adult residents of agency's CILA in Champaign, who have DD and assessed need for these supports, including nursing services as described in Illinois Department of Human Services (DHS) Rules 115 and 116.

Staff Assessment: includes mention of some residents' additional healthcare support needs related to aging and illness.

Service Description/Type: DHS-approved nurse trainer to oversee all medical support activities; 24 hour on-call support, for the health and safety of individuals; coordination of medical/nursing care; medication training and annual recertification of staff; quality assurance; updating of documentation and policy; monthly RN site visits; monthly medication checks and physician order sheet reviews; annual physical status review/nursing packets; quarterly psychotropic med reviews; annual physicals; screenings for tardive dyskinesia (of those taking psychotropic meds); input to development of individuals' service plans.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? Indirectly, as positive health outcomes contribute to independence.
- Support a person building connections to the broader community? Not directly.
- Support a person participating in community settings of their choice and in ways they desire? Not directly.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? NO.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? NO.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summaries of current and previous years' demographic and residency data below.*

Alignment with Other ID/DD Priority: Stated focus is Residential Services.

Program Performance Measures:

Consumer Access: Because nursing services are a subset of the IDHS CILA services, access to the total program is described; capacity is limited to 7 residents, per license.

CTF-N

36

Consumer Outcomes: This section describes opportunities for individuals to contribute to their service plans and give customer satisfaction feedback, assessment of medication skills/knowledge, quarterly visits by CCRPC Independent Service Coordination staff to assure quality, annual IDHS compliance surveys (99% agency score in 2015) and needs-based rate redetermination. Two quality measures are included: one for 10% decrease in medication errors, and the other for progress toward self-medication in 10 of 12 months, documented in monthly summaries. (Utilization section describes the tracking and review of errors and incidents, and that increased nursing support needs related to aging are offset by documentation and health advocacy activities of non-medical staff.)

Utilization/Production Data:

FY 17 Targets: 7 continuing TPCs and 228 Other (hours.)

FY16 (\$8,580) Mid-Year: 7 TPCs with target 7; 65 SCs (# not reported in Q2); hours = 58 (hours not reported in Q2.)

FY 15 (\$8,580): 7 TPCs against target 7: Service Contact report is of 209 hours rather than # contacts.

COUNTY WIDENESS

FY16 Mid-Year: 100% reside in Champaign.

FY15: 100% in Champaign.

DEMOGRAPHICS

FY16 Mid-Year: 57% are 19 to 59, and 43% are 60 and up; 14% were Black/AA, and 86% White; none are of Hispanic or Latino origin; 71% are female and 29% male.

FY15: 57% were 19 to 59, and 43% were 60 and up; 14% were Black/AA, and 86% White; none were of Hispanic or Latino origin; 71% were female and 29% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$ 6,000

PY17 Total Program Expenses: \$ 9,243

Program Staff – CCDDDB/CCMHB Funds: 0.10 FTE direct staff and .02 FTE indirect.

Total Program Staff: 1.00 FTE direct staff and 1.00 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: although the form appears to have been completed incorrectly, with total program and CCDDDB columns switched, personnel costs assigned to this contract are 2% of Vice President (as indirect) and 10% of RN Nurse Trainer (as direct staff.)

Budget Narrative: No other revenue source is assigned, though the services are tied to IDHS requirements of CILA, where a small amount of revenue per resident is expected (and noted in Plan Narrative.) 100% of CCDDDB/CCMHB requested amount is for staff costs, with no other expenses

assigned. **Budget Narrative** describes purpose of CCDDDB/CCMHB revenue request, explains each expense line and the responsibilities of staff assigned.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
2. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Down Syndrome Network

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- *Yes*
2. Diverse Board and Staff Recruitment- *Yes*
3. Cultural Competence Organizational Assessment/Evaluation-*Yes*
4. Implementation of Cultural Competence Values in Policy and Procedure- *Yes*
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-*Yes*
6. Inter-Agency Collaboration- *Yes*

Overall CLC Plan Comments

The Template Format was followed this year. It is recommended that you have more defined actions and how you will achieve the benchmark. The value of diversity is expressed in your plan, it is also important to have some concrete and specific goals on how you will engage diverse populations, underserved populations, and rural populations.

Cultural Competence Training

Annual Cultural linguistic training will be provided the DSN Board of Directors.

Comments: It is recommended that you incorporate cultural and linguistic competence training to your volunteer orientation as well.

Recruitment of a diverse Board and Staff

DSN is volunteer based and the board is developed based on the number of volunteers that are engaged in the DSN.

Comments: Evaluate the composition of your board and see if it is balanced with all of the things needed in order to continue to build the network that acknowledges the value of diversity in your CLC Plan.

Cultural Competence Organizational Assessment/Evaluation

The Board survey's its members for activities and interests and strives to provide those requested services.

Comments:

Policies and procedures which reflect Cultural Competence values

- Board Members will read and sign the CLC Plan
- Parent books are provided in English and Spanish

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Down Syndrome Network

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- Free brochures and new parent packets are provided both in English and Spanish.
- Information is disseminated to all-inclusive environments, (Schools, hospitals, and internet sources, (Facebook, website, email- list serve) and the News Gazette.
- Plan how do disperse information in different and unique places for example, Churches, community centers, and prenatal classes.
- There will be community outreach to WIC and the Public Health District to pass out information about the DSN.

Comments: It is recommended that you have a specific timeframe that you provide the information to new parents. Is it the first 30 Days or is it within the first year?

Inter-Agency Collaboration

- A local list of providers and other community supports will be developed to support the mission of DSN.
- Utilizing the Buddy Walk to increase our population and invite family members to attend the DSN meetings.

Comments: The DSN is a network of volunteers that collaborates with many agencies. It is recommended that you provide additional details about Inter-agency collaboration in your CLC plan.

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Champaign County Down Syndrome Network

Program Name: CC Down Syndrome Network

Contract Format Requested: Grant

Funding Requested: \$15,000

Staff Assessment: *no increase is requested.*

Target Population: The application states they serve families who have a member with Down syndrome as well as parents, professionals and the general public.

Staff Assessment: *Some services and events are touched upon in this section of the application as well.*

Service Description/Type: Support to families, people with Down Syndrome, the community and professionals. They offer home and hospital visits, books, DVD's and other information related to Down Syndrome. Support at Individualized Education Program (IEP) meetings is offered. DSN holds monthly meetings, workshops, social events, presentations, and maintains an online presence on numerous social media outlets. The annual Buddy Walk is held in the fall to raise funds and community awareness.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? NO.
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? YES.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? N/A
- Incorporate Employment First principles? N/A
- Acknowledge support and encouragement of self-advocacy? YES.
- Address cultural competence and outreach to underserved populations? *See agency CLC review; demographic and residency data for previous and current contract year are summarized below.*

Alignment with Other ID/DD Priority: Self-Advocacy and Family Support Organizations.

Program Performance Measures:

Consumer Access: DSN distributes info on their parent support group to hospitals, schools, places of employment, agencies, and churches. They produce a newsletter and maintain a website. DSN provides hospitals with new parent packets and when requested, a DSN parent will visit the hospital or home of new parents for in-person support. DSN holds several meetings a year in public places

such as parks, pools, hotel conference rooms, bowling alleys, and restaurants. For those needing transportation, transport costs are included in the yearly budget.

Staff Assessment: *A quantifiable measure of access does not appear to have been included. This section contains definitions of utilization targets: Treatment Plan Clients (TPCs) are members, people who have attended at least one event, other than the Buddy Walk, per year; Non-Treatment Plan Clients (NTPCs) are professionals attending trainings hosted by the organization.*

Consumer Outcomes: This year, DSN requested targeted activities for particular age ranges. "Teen and Tween" dance parties were added to the calendar. The Buddy Walk was attended by approximately 1500 people. Informational brochures are printed in English and Spanish. DSN refers families to appropriate community services such as early intervention, respite, pre-school, early childhood, daycare, vocational and recreational programs

Staff Assessment: *a quantifiable measure of consumer outcome does not appear to be included.*

Utilization/Production Data:

FY 17 Targets: 120 Continuing and 10 New TPCs, 50 New NTPCs, 50 Service Contacts, and 20 Community Service Events.

FY16 (\$15,000) Mid-Year: 142 TPCs against target 120; 172 NTPCs against no target; 12 CSEs against target 15.

FY 15 (\$10,000): 291 TPCs against target 120; 234 NTPCs against no target; 29 CSEs against target 15. FY15 was the first year CSEs were defined as discrete events and TPCs as members attending meetings regularly.

COUNTY WIDENESS

FY16 Mid-Year: 26% Urbana, 39% Champaign, 11% Mahomet, 3% Rantoul, 21% Other CC, of 142.

FY15: 26% Urbana; 39% Champaign; 13% Mahomet; 4% Rantoul; 16% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 11% are 6yo and younger, 17% are 7 to 12, 26% are 13 to 18, 37% are 19 to 59, and 10% are 60 and up; 8% are Asian/PI, 13% Black AA, 4% Other, and 75% White; 15% are of Hispanic or Latino origin and 85% not; 63% are female and 37% male.

FY15: 10% were 6yo and younger, 20% 7 to 12, 19% 13 to 18, 46% 19 to 59, and 5% 60 and up; 9% Asian/PI, 10% Black/AA, 2% Other, and 79% White; 1% were of Hispanic or Latino origin, 83% not; 67% were female, 33% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$ 15,000
PY17 Total Program Expenses: \$ 50,000

Program Staff – CCDDDB/CCMHB Funds: 0 FTE 0 FTE
Total Program Staff: 0 FTE 0 FTE

CCDSN

42

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? N/A
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Budget Narrative: DSN expects approximately \$2,000 in contributions and \$33,000 from the Buddy Walk this year. DSN is run by volunteers, so there are no personnel expenses. Conferences are the largest expense at 50% of the requested amount. The remainder is earmarked for general operating, consumables, professional fees, equipment, and transportation.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit Requirement Waived X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Regional Planning Head Start

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure- Yes
5. Outreach and Engagement of Underrepresented Populations defined in the criteria- Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLC Plan Template format was followed and the required CLCP actions were included in the plan and the application. It is recommended that although actions are on-going, be sure to attach a time frame for the completion of the goal. This will ensure accountability.

Cultural Competence Training-

- One or more managers will attend at least one training annually that deals with diversity issues.
- Train staff using information from January 2015 Institute on School Readiness for African American Boys.

Comments: It is recommended that cultural differences should be presented as opportunities to learn about different cultural populations and not considered as an issue.

Recruitment of a diverse Board and Staff

- Recruit enrolled parents of diverse nationalities to run for the Policy Council Representatives.
-

Comments: Evaluate the composition of your board and see if it is balanced with all of things needed in order to have a Policy Council. Expertise of nationalities should one consideration along with skills and expertise.

Cultural Competence Organizational Assessment/Evaluation

- *Include in an on-going Self-Assessment procedures analysis of cultural and linguistic sensitivity of services.*
- *Include in Community Assessment on-going procedures identifying services available or lacking for culturally and linguistically diverse populations of the community.*

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Champaign County Regional Planning Head Start

Comments:

Policies and procedures which reflect Cultural Competence values

- Review with new Policy Council Members the 2016-2017 Cultural and Linguistic Competence Plan as a factor in decision making.

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

Comments: It is recommended that you have a specific timeframe that you provide the information to new parents. Is it the first 30 Days or is it within the first year?

Inter-Agency Collaboration

- Collaborates with East Central Illinois Refugee Mutual Assistance Center to seek translators.

Comments:

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: CCRPC - Champaign County Head Start/Early Head Start

Program Name: Social Emotional Disabilities Services

Contract Format Requested: Grant

Funding Requested: \$55,645

Staff Assessment: request is \$822 over FY2016 level.

Target Population: children (to kindergarten entry age) living in Champaign County, enrolled in Champaign County Head Start/Early Head Start, with evidence of need for service based on screening, and with limited family resources for the cost of care. Screening tools are the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire Social-Emotional (ASQ-SE).

Service Description/Type: Ages and Stages Questionnaire and ASQ Social-Emotional screenings for those newly enrolled, development of social-emotional goals, Social-Emotional environmental observations of any classroom needing support due to presence of an identified child, individual child observations during class time, development of behavioral plans (Individual Success Plans) through meetings with teachers and parents, possible referrals to other providers, individual play therapy, informational support/training for families, annual staff training and social-emotional articles for parent newsletters, and collaboration/networking meetings.

Staff Assessment: staff credentials are included in this section; detail is also present on anticipated numbers of persons served per category of service.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? NO.
- Support a person building connections to the broader community? Not directly.
- Support a person participating in community settings of their choice and in ways they desire? YES, with regard to very young children preparing to enter kindergarten.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not directly.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? YES, for very young children, preparing for school.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summary of current and previous contract year demographic and residency data.* Outreach to rural residents is addressed through total program (Head Start/Early Head Start;) ample detail is included in this application, with timelines and measures and data collection, countrywide recruitment, and priority to residents of medically underserved townships.

Alignment with Other ID/DD Priority: Comprehensive Services and Supports for Young Children

Program Performance Measures:

Consumer Access: Total program outreach (including at local libraries, stores, events, etc.) and enrollment is described. Home based services and part- or full- day center based options, some with transportation. Annual Community Assessment is a federal requirement, includes total program and community demographic, income, employment, low-income density areas, health, housing, service gaps, family needs, resources/services, enrollment, and other data; this is used to identify the unserved and underserved and to improve outreach. Staff support parents in health and screening requirements, using the EPSDT schedule for exams and immunizations. Access measures focus on timeliness: during first 45 days of school year, weekly reports on progress of screenings and health requirements; monthly reports thereafter.

Consumer Outcomes: total program has a goal for 90% kindergarten readiness, including children served under this contract. Federal requirement is that 10% of enrollment opportunities are for children with a delay or disability. Child progress assessments occur three times a year, four times for full-year classrooms. FY15 outcomes are included: of 60 children with delay or disability, 31 were in center-based services through public school programs, and 29 received therapy services; of 81 referrals for individual child observations (behavioral or developmental), 69 led to behavior plan (Individual Success Plan or ISP), 39 of which carried into FY16; 42 of the 77 with SE goals carried over from the previous year and had new goals; 32 had S-E goals incorporated into their lesson plans by mid-year FY16, with others being developed. This section also references current contract year utilization and intends 600 FY17 screenings.

Staff Assessment: 600 screenings, though Utilization Section identifies a target of 580 screenings.

Utilization/Production Data:

FY 17 Targets: 30 Continuing and 68 New TPCs (play therapy or counseling, developing individual S-E goals, or developing behavioral plans); 55 New NTPCs (those with behavioral planning meetings, parent meetings, or parent training); 580 Service Contacts (screenings with ASQ, ASQ-SE, Social Emotional Environmental Observations, and individual child observations); 5 Community Service Events; 8 Other (trainings, newsletter articles.)

FY16 (\$54,823) Mid-Year: 4 CSEs against target 1; 582 SCs against target 600; 43 continuing and 25 new TPCs against target 90; 87 new NTPCs against target 55; 14 Other (trainings, newsletters) against target 8.

FY 15 (\$41,029): 3 CSEs against target 1; 843 SCs against target 625; 47 continuing and 144 new TPCs against target 90; 232 new NTPC against target 55; 42 Other against target 8.

COUNTY WIDENESS

FY16 Mid-Year: 26% Urbana, 54% Champaign, 15% Rantoul, 4% Other CC, of 68

FY15: 21% Urbana; 59% Champaign; 17% Rantoul; 3% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 94% are 6 years old and younger, 1% 7 to 12, and 4% are 19 to 59, and 10% are 60 and up; 62% Black/AA, 15% Other, and 24% White; none are of Hispanic or Latino origin; 40% are female, and 69% male.

CCRPC-HS/EHS-SE

47

FY15: 98% were 6 years old and younger, and 2% 19 to 59; 2% were Asian/PI, 57% Black/AA, 22% Other, and 19% White; 4% were of Hispanic or Latino origin, 98% not; 31% were female, 72% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$55,645
PY17 Total Program Expenses: \$92,490

Program Staff – CCDDDB/CCMHB Funds: 0.70 FTE direct staff and 0.05 FTE indirect
Total Program Staff: 0.75 FTE direct staff and 0.25 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? N/A
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: personnel form associates the costs of 5% of Fiscal Manager (as indirect staff) and 70% of Social-Emotional Development Specialist (as direct.)

Budget Narrative: CCDDDB/CCMHB request is for 60% of total program revenue, with the rest from Department of Health and Human Services (0.7% of the total federal grant for Head Start). Staff costs comprise 96% of the CCDDDB/CCMHB budgeted expenses, and small amounts of consumables, conferences/staff development, and local transportation are charged. The **Budget Narrative** describes all of Head Start/Early Head Start's projected funding sources, each expense line related to the CCDDDB/CCMHB program and how it was determined, and the three staff associated with this program (although no portion of the Program Manager's salary is charged to this contract.)

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable X

Staff Comment: this program, within the Champaign County Regional Planning Commission, is included in Champaign County's audit.

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall specify the estimated hours of each type of service to be provided for people served under this contract and tie back to the contract maximum.
2. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Community Choices

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLCP followed the template that was outlined in the application. The plan outlined clear specific actions with actual timeframes for accomplishing the benchmarks.

Cultural Competence Training

- *Complete Cultural Competence Training for 100% of the Board and Staff by March 31, 2017*

Comments:

Recruitment of a diverse Board and Staff

Begin to identify and recruit diverse membership on the Board of Directors with diverse cultural experiences, skills, and cultural experiences.

- *Utilize a multi-pronged approach to advertising positions (i.e. send info to culturally diverse groups), include interview questions that indicate the openness of interviewees.*

Comments:

Cultural Competence Organizational Assessment/Evaluation

- Families complete satisfaction surveys; Quality Assurance Committee reviews survey responses.

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Community Choices

-Develop services with input from young adults and families.

Comments:

Policies and procedures which reflect Cultural Competence values

Board of directors, management staff and individuals that are served will read and sign new Cultural Competence Plan during the program year.

- Identify natural supports and community resources to support the individual and family

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

-Work with individual, their personal network, and management to develop and implement person-centered plans.

- Develop relationships with 5 diverse groups over the course of the year.

Comments:

Inter-Agency Collaboration

- Cooperative agreements with bilingual and interpretive resources.

Comments:

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Community Choices, Inc.

Program Name: Community Living

Contract Format Requested: Grant

Funding Requested: \$63,000

Staff Assessment: request is for \$3,000 above FY2016 level; fee for service is the current format.

Target Population: adults who live in Champaign County, have mild to moderate ID/DD, and who with minimal staff support and (development of) natural supports can live independently.

Service Description/Type: Program has three service components to support integrated community life. Community Transitional Support is approximately two years per person, in four phases – *planning* to move into the community, *moving out* with support for life skills, *reaching out* to build connections/meaningful activities, and finally *consultation* or staff check-ins as needed. Life Skill Training – 8 small group classes or one-on-one instruction on money management, household management, social skills, community engagement, etc., and, new in FY17, instruction designed for Personal Support Workers (increases competencies and capacity.) Home Based Support Facilitation – writing plans, finding and managing personal support workers, community connections; as a component of a Illinois Department of Human Services - Division of Developmental Disabilities (IDHS-DDD) Medicaid waiver award, facilitation services are not charged to this contract.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? YES.
- Support a person building connections to the broader community? YES – a core service.
- Support a person participating in community settings of their choice and in ways they desire? YES – through Community Transitional Support component.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? YES.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? Not explicitly.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and demographic and residency data below.* Regarding rural outreach, staff meet with people where they live, and 25% live outside of CU.

Alignment with Other ID/DD Priority: Workforce Development and Stability – through development of Personal Support Workers’ training. Stated focus is on Person Centered Planning.

Program Performance Measures:

Consumer Access: Formal outreach is through collaboration with other organizations serving adults with disabilities, and informal outreach is through IEPs community events (Love Clinic, e.g.), and networking. PUNS enrollment and DD eligibility (per IDHS-DDD) are referenced. Referral and intake process described, with approximate timelines and very small waiting list.

Staff Assessment: *does not appear to include a quantifiable measure of access.*

Consumer Outcomes: Outcomes for Community Transitional Support are completion of the first three phases (5 people per), of person-centered plans (by all participants), of goals identified in the plans (by all), and of Personal Outcome Measures with improved scores (all) as well as engagement in a new activity (all participants.) Life Skill Training outcome measures are for 5 life skills classes, participants' increased skills measured by pre- and post-tests, and 10 personal support workers' improved ability to support.

Utilization/Production Data:

FY 17 Targets: 12 continuing and 5 new TPCs (Community Transitional Support participants), 6 continuing and 6 new NTPCs (those in the 5 classes), 1370 Service Contacts, and 2 Community Service Events. Other = 1582 hours.

FY16 (\$60,000) Mid-Year: 2 CSEs against target 15; 19 TPCs served under the Fee for Service contract; 3 completed classes; Hours = 721.

FY 15 (\$55,000): 2 CSEs against target 2; 20 TPCs against expected 15 in Fee for Service contract; 1489 hours.

COUNTY WIDENESS

FY16 Mid-Year: 16% Urbana, 58% Champaign, 11% Mahomet, 16% Other CC, of 19.

FY15: 20% Urbana; 60% Champaign; 5% Mahomet; 5% Rantoul; 10% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 100% are 19 to 59; 11% Black/AA, and 89% White; none are of Hispanic or Latino origin; 16% are female and 84% male.

FY15: 100% were 19 to 59; 20% Black/AA, 2% Other, and 80% White; none were of Hispanic or Latino origin 15% were female, 85% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$63,000

PY17 Total Program Expenses: \$115,184

Program Staff – CCDDDB/CCMHB Funds: 1.10 FTE direct staff and 0.13 FTE indirect

Total Program Staff: 2.00 FTE direct staff and 0.25 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
HBS facilitation is not charged to this contract.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *personnel charges include 13% of the Executive Director (as indirect), 10% of Community Support Specialist and 100% of Community Life Coordinator (as direct.)*

Budget Narrative: CCDDDB/CCMHB request is 54% of total program **revenue**, with other sources being contributions (15%), IDHS-DDD (30%), and private pay (1.3%). Staff costs comprise 81% of CCDDDB/CCMHB program **expenses**, with small amounts for professional fees, consumables, general operating, occupancy, conferences/staff development, and local transportation. Each revenue source and expense item is explained in the **Budget Narrative**, along with the responsibilities of each staff person assigned to the contract.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
2. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
3. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.
4. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Community Choices, Inc.

Program Name: Customized Employment

Contract Format Requested: Grant

Funding Requested: \$70,000

Staff Assessment: request is \$15,000 over FY2016 level; consider fee for service format for most program activities.

Target Population: adult residents of Champaign County who have disabilities, are unemployed or underemployed, and have an interest in self-employment support or customized employment in the community.

Staff Assessment: includes an estimate that 2,000 working aged adults in Champaign County have DDs and Arc estimate that 90% of people with DD are unemployed or underemployed.

Service Description/Type: Customized Employment. Discovery is a person centered process (primarily interviews of individual and those in their network of support plus observations in various settings) to identify a job seeker's strengths, desires, and needs for support. Matching Job Seekers and Employers may involve strengthening social/communication and job skills for success in the desired work environment, along with learning from businesses what they need, coordinating tours and job shadows, and negotiating employment contract. Short-Term Employment Support – with single point of contact staff for any concerns, limited job coaching for the employee with a disability, and development of natural supports. Long-Term Employment Support – support for maintaining employment, seeking a promotion, additional training, benefits, and conflict resolution; emphasis on employee makes a contribution to their workplace and is accepted and valued, with opportunities to expand their role.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person's control of his/her day and life? YES.
- Support a person building connections to the broader community? YES – through work.
- Support a person participating in community settings of their choice and in ways they desire? YES.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Through employment and related.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES – Discovery process is central.
- Incorporate Employment First principles? YES.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and demographic and residency data below.* Rural outreach is addressed by pursuing employment which fits (can mean location), training on rural transportation service; limits related to few potential worksites.

Alignment with Other ID/DD Priority: Employment Services and Supports.

Program Performance Measures:

Consumer Access: Outreach is accomplished formally through other organizations serving people with disabilities, and informally through school IEPs, community events, and word of mouth. Eligibility defined as adults with I/DD, PUNS enrollment, motivation to work; IDHS Division of Rehabilitation Services short-term funding is used first, for any eligible. Engagement is described - referral and intake processes, expectation of timeliness, capacity limited.

Staff Assessment: *eligibility is not explicitly defined as identical to that for IDHS-DDD services, although PUNS enrollment may eventually include this. The Division of Developmental Disabilities and Division of Rehabilitation Services use different qualifying criteria. Quantifiable measures do not appear to be included in this section.*

Consumer Outcomes: Outcomes relate to each of the four components of service, are quantifiable, of value (e.g., to acquire paid jobs, volunteer jobs, or internships, to receive support for problem solving or job training or expansion), and include expected numbers of people receiving these services but charged to other funder (DRS.)

Utilization/Production Data:

FY 17 Targets: 25 continuing and 11 new TPCs; 817 Service Contacts; 4 Community Service Events; and 1334 hours as Other.

FY16 (\$55,000) Mid-Year: 2 CSEs against target 4; 420 SCs against target 785; 32 continuing and 3 new TPCs against target 37; Hours = 588.

FY 15 (\$50,000): 4 CSEs against target 4; 1074 SCs against target 890; 31 continuing and 15 new TPCs against target 29; Hours = 1423.

COUNTY WIDENESS

FY16 Mid-Year: 26% Urbana, 39% Champaign, 11% Mahomet, 3% Rantoul, 21% Other CC, of 142.

FY15: 17% Urbana; 40% Champaign; 9% Mahomet; 11% Rantoul; 23% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 100% are 19 to 59; 3% are Asian/PI, 17% Black/AA, 3% Other, and 77% White; 3% are of Hispanic or Latino origin and 97% not; 26% are female and 74% male.

FY15: 96% were 19 to 59, and 4% 60 and up; 2% Asian/PI, 15% Black/AA, 5% Other, and 78% White; 4% were of Hispanic or Latino origin, 96% not; 30% were female, 70% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$ 70,000

PY17 Total Program Expenses: \$156,417

Program Staff – CCDDDB/CCMHB Funds: 1.35 FTE direct staff and 0.10 FTE indirect

Total Program Staff: 3.00 FTE direct staff and 0.25 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: personnel charged to this contract include 10% of Executive Director, as indirect staff, 50% of two Employment Specialists, and 35% of Director of Employment Services.

Budget Narrative: CCDDDB/CCMHB request is for 44% of total program **revenue**, with other sources from IDHS-DRS (34%) and contributions (9%). Staff costs comprise 83% of CCDDDB/CCMHB **expenses**, with smaller amounts for consumables, general operating, occupancy, conferences/staff development, and local transportation.

Staff assessment: there appears to be an error in the submitted budget form, with CCDDDB/CCMHB amount in second column.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance ___X___

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
2. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.
3. The applicant shall specify the estimated hours of each type of service to be provided for people served under this contract and tie back to the contract maximum.
4. The applicant shall propose an appropriate case rate which is predicated by monthly hours of service x the rate established by DHS for the service, provide a rate setting methodology to support any proposed rates.
5. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Community Choices, Inc.

Program Name: Self-Determination Support

Contract Format Requested: Grant

Funding Requested: \$70,000

Staff Assessment: request is for \$15,000 over FY2016 level.

Target Population: The application states this program has two target populations: adults with developmental disabilities and family members of adults with disabilities.

Service Description/Type:

Building Community -- by organizing social events (dinner movies, sports crafts); co-op clubs (smaller groups engaging in a social activity they desire), "togethering" (social connections with others) and "Open Champaign" (community building events developed by partnerships between people with disabilities focusing on minorities and community groups).

Self-Advocacy—through leadership classes that was co-developed by self -advocates.

Family Support and Education—educating families about the system and services available and helping them advocate for improved services.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES.
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? YES.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? Not directly.
- Incorporate Employment First principles? Not directly.
- Acknowledge support and encouragement of self-advocacy? YES.
- Address cultural competence and outreach to underserved populations? *See agency Cultural and Linguistic Competence review attached and summaries of current and previous years' demographic and residency data below.* The applications states 25% of participating families are from Mahomet, Fisher and Rantoul. Some social events have been held in rural areas and outreach to rural areas has been formal and informal.

Alignment with Other ID/DD Priority: Self-Advocacy and Family Support Organizations

Program Performance Measures:

CC-SDS

57

Consumer Access:

The applications states they can provide referrals to and from six local agencies. They reach out to the community by attending school IEP's and participating in social events. To be eligible for services individuals must be 18 years old and complete the intake process in order to become a member of the agency. There is no wait to access the services of this program once the required paperwork/documentation is completed.

Staff Assessment: A quantifiable measure of access does not appear to be included.

Consumer Outcomes:

Building Community Social Events: 40 independent of family; 45 give input and attend activities of interest; 15 develop relationships with other members of the agency. Co-op Clubs: 4 self-directed clubs organize and meet. "Togetherness": 6 develop relationships in the community with a shared interest. Self advocacy: 20 gain leadership skills, participate in 1 statewide event and 1 local project with support. Family support and Education: 30 develop connections with other families, 30 increase their knowledge regarding services and policies, and 10 actively engage in advocacy.

Utilization/Production Data:

FY 17 Targets: 4 Community Service Events, 1656 Service Contacts, 125 Continuing and 10 New Non-TPCs, 150 Hours (reported under "Other.")

FY16 (\$55,000) Mid-Year: 4 CSEs against target 4; 471 SCs against target 774; 139 continuing and 15 new NTPCs against target 120; Hours = 492.

FY 15: 5 CSEs against target 4; 1036 SCs against target 822; 125 continuing and 37 new NTPCs against target 126; Hours = 921.

COUNTY WIDENESS

FY16 Mid-Year: 15% Urbana, 51% Champaign, 12% Mahomet, 3% Rantoul, 19% Other CC, of 154.

FY15: 18% Urbana; 51% Champaign; 12% Mahomet; 3% Rantoul; 16% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 94% are 19 to 59, and 6% are 60 and up; 6% are Asian/PI, 6% Black/AA, 2% Other, and 86% White; 3% are of Hispanic or Latino origin and 97% not; 51% are female and 49% male.

FY15: 1% were 13 to 18, 93% 19 to 59, and 6% 60 and up; 5% Asian/PI, 7% Black/AA, 1% Other, and 87% White; 4% were of Hispanic or Latino origin, 96% not; 52% were female, 48% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$ 70,000
PY17 Total Program Expenses: \$ 139,050

Program Staff – CCDDDB/CCMHB Funds: 1.13 FTE direct staff and 0.12 FTE indirect
Total Program Staff: 2.25 FTE direct staff and 0.25 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid rates?
Not addressed.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? *YES.*

Staff Assessment: *the personnel form assigns 12% of the Executive Director's salary as 'indirect;' direct staff salaries assigned to this contract include 75% of Membership Coordinator, 25% of Special Projects Coordinator, and 13% of the Executive Director.*

Budget Narrative: The CCDDDB/CCMHB request is for a little over 50% of the total program revenue, with other sources being contributions (16%), the Illinois Council on Developmental Disabilities grant (34%) and private pay. Staff costs comprise of 84% of CCDDDB/CCMHB expenses, with the remainder going to general operating, professional fees/consultants, occupancy, transportation, consumables and conferences/staff development. The **Budget Narrative** contains sufficient detail on revenue source and expense items, with rationale, as well as duties of the personnel assigned to this program.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance x

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Community Elements

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLCP followed the template that was outlined in the application. In addition, an attachment was provided outlining the specific details that capture the CLC Activities of Community Elements. There were actions that provided a specific timeframe and accountability. Due to the broad spectrum of services that are provided organizationally some of the actions are conducted on an on-going basis. There is access to interpreter services for a 24 hour time period.

Cultural Competence Training

- *The Board of Directors will be offered an opportunity to participate in at least one cultural competency event.*
- *Due to varying shifts of the 24-7 Operation several options of cultural competence training is offered to staff. Each department is required to conduct at least 2 cultural competence trainings each year.*
 - o *Culture of Poverty*
 - o *Assessing your Ethnocentrism*
 - o *Trauma Informed Care*
 - o *Review of SAMHSA's American Indian Culture Card*
 - o *Lunch and Learn viewing of: "Homestretch" exploring homeless youth culture.*

Comments:

Recruitment of a diverse Board and Staff

- *The Board of Directors has been committed to recruiting members who reflect the diversity of our community. This includes diversity that goes beyond race. Community members and board*



DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Community Elements

members are invited to participate Program Quality Review Committee that is an advisory committee that advises the board of directors. Input is taken from community members and persons with lived experience of a mental health challenge.

- The Agency Scorecard is reviewed annually by the Board of Directors and the Cultural Competency Committee. The percent of Black/African American employees has grown each year from 15.9% in 2011 to 18.2% in 2015. Employees who identify as two or more races make up 2.8% of our staff, which is an increase from 1.2% in 2011. Hispanic/Latina and Asian employees are 1.3% and American Indian/Alaskan Native employees are at .6%. Caucasian employees are at 75.8%.

Comments:

Cultural Competence Organizational Assessment/Evaluation

In July 2015 the agency adapted a new organizational assessment. Results are currently being reviewed by the Cultural Competency Committee with recommendations to follow. Analyzing the results of this tool is where our agency could use additional technical assistance.

Comments:

Policies and procedures which reflect Cultural Competence values

Our agency and services are grounded in the principles of Recovery and Trauma Informed Care. We have over 180 Policies, Rules and Procedures (PRP) that guide our practices in providing client- centered ethical, compassionate care.

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- Disability Expo Fair, NAMI events; Garden Hill's Neighborhood Resource Fair; Champaign-Urbana Gay Pride, Love Clinic Health and Wellness Fair, Migrant Season Farm Workers Interagency Group, Dabbins Down Play Group and weekly visits to the Phoenix.

- In 2015 our agency served over 4,000 unduplicated clients. Thirty-three percent of our clients were Black/African American; 2% Asian; 2.9% Hispanic, 7% listed as unknown and 58% were Caucasian. Sixty-three percent had an income below the federal poverty level.

Inter-Agency Collaboration

We have over 180 signed collaborative agreements on file.

61

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Community Elements, Inc.

Program Name: Coordination of Services: MI/DD

Contract Format Requested: Grant

Funding Requested: \$32,903

Staff Assessment: request is for \$958 over FY2016 level.

Target Population: adults who live in Champaign County and have diagnoses of both developmental disability and mental health disability and an assessed need for coordinated services. Emphasis on those in residential settings for persons with DD or with family but struggling with self-care or at-risk for hospitalization or homelessness due to inadequate supports related to the co-occurring conditions.

Staff Assessment: also mentions limited financial resources, third party insurance which does not cover the cost of these case management services, and efforts to secure Medicaid funded services for program participants.

Service Description/Type: intensive case management, with a person-centered, strength-based approach, case identification, screening for mental illness, direct support to individuals and their families, technical assistance to others involved in the care, team coordination, treatment planning, advocacy, effort to improve coordination between providers of DD and MH services; individuals' choice of setting for services.

Staff Assessment: staff credentials (preferred) include *Qualified Intellectual Disabilities Professional, Qualified Mental Health Professional, Master's degree, with supervision by Licensed Clinical Social Worker; leverages other funding, refers people to Access & Benefits Case Manager.*

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? Not directly, but positive health outcomes are foundational.
- Support a person building connections to the broader community? No, but coordinates among providers of services on behalf of an individual and toward improved system of care.
- Support a person participating in community settings of their choice and in ways they desire? Not directly.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not directly.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summary of current and previous contract years' demographic/residency data below.* Plan

narrative mentions county-wide delivery of service, effort to identify eligible persons, with “special emphasis” on rural residents, though specific outreach methods are not defined.

Alignment with Other ID/DD Priority: Although the stated Focus is “Other or Combination,” these services align with “Planning for People with Challenging and Complex Service Needs.” Within the agency’s case management services.

Program Performance Measures:

Consumer Access: Referrals and requests for services are tracked, along with personal data; engagement is expected within four weeks of referral. Outreach activities include presentations to other organizations, community events, etc. Cultural Competency Committee is also described here.

Staff Assessment: a measure of timeliness of service engagement is referenced – is the target 100%?

Consumer Outcomes: a satisfaction survey tool is tailored to this program, with some measures comparable to traditional mental health case management. A target of 80% consumer satisfaction plus questions related to how a personal situation/problem has changed and whether the participant would refer a friend. Time from referral to engagement is again referenced, and cases taking longer than four weeks are reported to program director. Focus on navigating complex/separate service systems and on addressing barriers to participation as they arise.

Utilization/Production Data:

FY 17 Targets: 12 Community Service Events, 8 Service Contacts (information and referral contacts, screenings, and crisis services for people not open in the program,) and 32 TPCs.

FY16 (\$31,945) Mid Year: 10 CSEs against target 12; 4 SCs against target 15; 21 continuing and 1 new TPCs against target 32; 2 NTPCs against target 2; hours = 274 (Q1 hours missing from report.)

FY 15 (\$35,060): 8 CSI's against target 12; 10 SCs against target 18; 20 continuing and 6 new TPCs against target 30; 1 NTPC against target 3; hours = 1034.25.

COUNTY WIDENESS

FY16 Mid-Year: 27% Urbana, 50% Champaign, 5% Mahomet, 2% Other CC, of 22

FY15: 22% Urbana; 58% Champaign; 4% Mahomet; 8% Rantoul; 8% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 91% are 19 to 59, and 9% are 60 and up; 9% are Asian/PI, 23% Black/AA, 9% Other, and 59% White; 9% are of Hispanic or Latino origin, 86% not, and 5% data unavailable; 36% are female and 64% male.

FY15: 4% were 13 to 18, 92% 19 to 59, and 4% 60 and up; 4% were Asian/PI, 19% Black/AA, and 77% White; 8% were of Hispanic or Latino origin, 92% not; 38% were female, 62% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$ 32,903

PY17 Total Program Expenses: \$620,457

Program Staff – CCDDDB/CCMHB Funds: 0.52 FTE direct staff and 0.11 FTE indirect
Total Program Staff: 9.27 FTE direct staff and 1.64 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES,
primarily the services of a specialized Case Manager/Clinician.

Staff Assessment: *indirect personnel costs assigned to this program are: 1% of CEO, CFO, and COO and 2% of IT Supervisor, Corporate Compliance Manager, Support Services Coordinator, and Maintenance Supervisor; direct staff costs are 2% of Community Support Manager and 50% of Community Support Clinician II (recently hired.)*

Budget Narrative: within Case Management/Community Support, the CCDDDB/CCMHB request is 5% of total program **revenue**, with other sources being insurance (61%), DMH fee for service (31%), client fees (1.3%), client group fees (0.6%), medicare (0.2%), and miscellaneous (0.02%). Staff costs comprise 92.5% of the CCDDDB/CCMHB budgeted **expenses**, the only other assigned line item being local transportation, at 7.5%, consistent with the program activities and goal of county-wide outreach and service. The **budget narrative** lists all revenue and expense lines associated with total program, notes that indirect personnel are allocated, explains the rationale for describing total program in all financial forms, and explains Management & General Costs.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.
Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
3. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
4. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Developmental Services Center (DSC)

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments-

The correct CLCP template was used that was outlined in the application instructions. It is recommended that you outline more specific details about time frame for some of the actions mentioned in the CLCP.

Cultural Competence Training

- *DSC Administration and Management staff will participate in a cultural diversity training.*
- *DSC Board will participate in a mid-year study session to review CLC plan progress.*
-

Comments:

Recruitment of a diverse Board and Staff

- *Documented outreach to diverse community members for board membership.*
- *Expand recruiting efforts by including diverse organizations in employment notices.*
- *DSC Board and Administration will research the feasibility and logistics of an Advisory Board.*

Comments: It is recommended that specific outreach efforts are specific within the plan. It is recommended that you find out best practices for the role of an advisory board and how it can provide an opportunity learn about cultural experiences that will enhance programs and services of a DSC Advisory Board.

65

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Developmental Services Center (DSC)

Cultural Competence Organizational Assessment/Evaluation

- *DSC will elicit feedback regarding consumer satisfaction, including specific indicators of cultural and linguistic responsiveness, via an annual consumer satisfaction survey.*
- *Upon inspection by members of the CLC committee, 100% of residential, employment, day program, and children's areas will exhibit art and materials that reflect the diversity of the people in the spaces.*

Comments:

Policies and procedures which reflect Cultural Competence values

- *FY 2017 budget will include a line item for cultural competence spending on research, training, and implementation of the CLC plan.*
- *All new staff will participate in staff orientation which includes introduction to the CLC plan and will sign acceptance of the plan.*
- *All current staff will review and sign the plan annually.*
- *DSC Human Resource department will provide support and incentives for preventing burn-out, compassion fatigue. (EAP Programs and Direct Services Professionals Week, and DSC Promoted events.)*

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- *Staff will attend community events in diverse neighborhoods (e.g. Jheddie Rhodes Neighborhood Day) and develop relationships with organizations serving under-represented groups.*
- *Consumers will participate in art fairs at Ebert Fest, Disability Expo. and will attend conferences such as Speak Up, Speak Out.*

Comments:

Inter-Agency Collaboration

- *Quarterly Reports will include current and new collaborative relationships.*

Comments:



DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center, Inc.

Program Name: Apartment Services

Contract Format Requested: Grant

Funding Requested: \$417,341

Staff Assessment: increase is \$12,156 over FY2016 level. Fee for service format would track varying intensity of support referred to in plan narrative.

Target Population: people with ID/DD living in Champaign County who benefit from support in order to live in the community; less intensive support than in CILA; residence is an apartment or house of the person's choice, or an apartment building owned by DSC (houses 24 people.)

Staff Assessment: this section also addresses the range of hours of service, from 1 to 40 per month per person, based on individual needs; 20 people have no other support, and 17 have significant health issues.

Service Description/Type: assist people in learning and maintaining life skills in a safe environment; ongoing support in areas not mastered; increased support for those with health issues which challenge independent living. Individualized, can include money management, household management, community integration supports, self-advocacy, support for healthcare. 24 hour crisis response.

Staff Assessment: this section describes staff-training specific to this work and to the individuals served, collaboration with other agencies and benefits programs, rent calculation for the DSC owned apartment units (30% of income,) and use of subsidized housing by many others in the program.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES, through a person-centered plan and aligned with Council on Quality and Leadership values.
- Support a person building connections to the broader community? YES - referenced.
- Support a person participating in community settings of their choice and in ways they desire? Not explicitly.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES – referenced.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? NO.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? YES.
- Address cultural competence and outreach to underserved populations? *See attached evaluation of agency CLC plan, and residency and demographic data below.* Plan narrative notes that many people from rural areas of the county choose to relocate to urban area for increased access to housing, work, transportation, etc. Outreach to underserved townships and to members of ethnic or racial minority groups is mentioned but not detailed.

Alignment with Other ID/DD Priority: Stated focus is Individualized Residential Support Options, carried from previous year's application.

Program Performance Measures:

Consumer Access: referral process is described in detail, referencing urgency of need and program's ability to serve. A measure related to timeliness is included: 30 days from residential referral to review by Admissions Committee. Target will be for 90% of all referrals.

Staff Assessment: this section also includes a note that all who are on waiting lists for services are referred to Champaign County Regional Planning Commission's Independent Service Coordination unit for PUNS enrollment, toward state Medicaid waiver funding. A later section notes that all persons served in the program are also referred to PUNS. Is there a possibility they are ineligible for Ligas class membership by virtue of receiving county-funded services?

Consumer Outcomes: Two measures currently tracked will continue in FY17: progress toward individuals' independent living skills objectives (80% target, with 91% actual at mid-year FY16;) and supporting individuals to explore new activities (target is 35 opportunities, with 19 at mid-year FY16.) Encouraging people to "explore culturally diverse activities" and use personal support networks.

Utilization/Production Data:

FY 17 Targets: 60 continuing TPCs and 3 new TPCs, as in previous two contract years. Will continue to report service hours.

FY16 (\$405,185) Mid-Year: 1 SC against no target; 57 continuing and 2 new TPCs against target 63; hours = 3734.

FY 15 (\$405,185): 1 CSE against no target; 10 SCs against no target; 60 continuing and 4 new TPCs against target 63; hours = 10,658.

COUNTY WIDENESS

FY16 Mid-Year: 46% Urbana, 49% Champaign, 2% Rantoul, and 3% Other CC, of 59.

FY15: 56% Urbana; 39% Champaign; 1% Rantoul; 4% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 81% are 19 to 59, and 19% are 60 and up; 3% are Asian/PI, 10% Black/LA, 2% Other, and 85% White; 2% are of Hispanic or Latino origin, 98% not; 41% are female, and 59% male.

FY15: 83% were 19 to 59, and 17% 60 and up; 3% were Asian/PI, 12% Black/LA, 2% Other, and 83% White; 2% were of Hispanic or Latino origin, 98% not; 44% were female, 56% male.

Staff Assessment: includes notes about DSC-owned building rent adjustment to changes in income, effort to capture state funding (Home Based Support) and not charge individuals with HBS to this contract. As people receive HBS funding, this program will take on new cases through county funding.

Financial Information:

DSC-AS

68

PY17 CCDDDB/CCMHB Funding Request: \$417,341
PY17 Total Program Expenses: \$520,949 (deficit = 9,262)

Program Staff – CCDDDB/CCMHB Funds: 8.16 Direct FTE and 0.57 Indirect FTE
Total Program Staff: 10.20 Direct FTE and 0.73 Indirect FTE

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

***Staff Assessment:** As direct staff, charges 80% of 8 full-time Apartment Services Case Managers and one Community Living Coordinator, 52% of Program Director, 36% of RN Coordinator, and 4% of RN and LPN. Indirect staff costs are 4% and less of 19 positions (HR, accounting, maintenance, admin.)*

Budget Narrative: CCDDDB/CCMHB funding would comprise 82% of total program revenue, with 13% state funding (HBS, for individuals, and reimbursement for training, allocated), and 5% United Way. Expense line items (with 2% salary increase and estimated 10% health benefits increase) are described in the **Budget Narrative** in detail (some program-specific, often related to staff offices, some allocated) - benefits, professional fees/consultants, consumables, general operating, occupancy, conferences/staff development, local transportation (5% of budget, appropriate to the program's service activities), etc. Good detail on each staff position's responsibilities to this program. Allocated Program Expense formula is referenced. Staff costs comprise 88% of CCDDDB/CCMHB budgeted expenses, 90% of total program budget.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.
Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
2. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
3. The applicant shall propose an appropriate case rate which is predicated by monthly hours of service x the rate established by DHS for the service, provide a rate setting methodology to support any proposed rates.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DSC-AS

69

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center

Program Name: Clinical Services

Contract Format Requested: Grant

Funding Requested: \$178,986

Staff Comment: request is \$5,213 over FY2016 level.

Target Population: Residents of Champaign County who have ID/DD, any age. Includes persons not otherwise involved with agency programs.

Staff Assessment: includes detail on the wide range of costs of services to each person, referral process, and note that none have Medicaid-waiver funding to cover the services. Because this program previously served people who had insurance, including Medicaid, but limited access to participating providers, the statement may represent a shift in patient practices.

Service Description/Type: psychological assessments (to establish eligibility and to track changes in functioning) for 5% of current funding; counseling (assessment, planning, crisis, short and long term counseling services) for 70%; psychiatric services (assessment, med review, crisis) for 25%; and consultation with treatment teams.

Staff Assessment: includes detail on service locations (agency and community) and staff credentials (licensed clinical psychologist, 5 licensed clinical social workers, 3 licensed clinical professional counselors, 1 licensed professional counselor, 1 psychiatrist, one speech therapist, and one occupational therapist.) States that ID/DD must be re-established periodically for some community supports but does not specify which supports have this requirement.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? Not directly, but promotes positive behavioral and physical health.
- Support a person building connections to the broader community? Not directly.
- Support a person participating in community settings of their choice and in ways they desire? YES with regard to some types of support and location.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not directly.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? Not directly.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? YES – referenced.
- Address cultural competence and outreach to underserved populations? YES. Outreach to rural residents is approached through DSC staff presence at school IEPs and Multi-Disciplinary Conferences throughout the county, website, professional and parent networks, Transition Planning Committee, interagency collaborations. *See demographic and residency data in Utilization section below and agency CLC review is attached.*

Alignment with Other ID/DD Priority: Flexible Family Support.

Program Performance Measures:

Consumer Access: Self-referral and referral by family members, professionals, or others in a person's support network. Urgency of need is considered, other community and payment options identified or ruled out, and people are served as consultants have capacity. Includes a measure for monitoring the consultants' billings and case notes for all 70 of those to be served, as in current year. Detail is provided on this and other documentation of these services.

Staff Assessment: includes a comment about effort to identify options billable to insurance and alludes to treatment needs associated with ID/DD (i.e., some Medicaid providers may be less effective/less available.) Given capacity demands and the changes in publicly funded insurance, a measure of the impact of the stated efforts would be appropriate. This program may become a resource for Medicaid providers ready to improve their service to this population - through training or coordination of care - creating capacity and improving outcomes.

Consumer Outcomes: Three measures are identified. The first is a quarterly review of the progress of each counseling arrangement, for 100% of cases, as in FY16 (and met so far.) The second is for progress review "on a regular basis" in psychiatric practice, with med reduction when possible, also for 100% of cases, as in FY16. The third is a measure of consumer satisfaction, target 90%, although the method is not described. Consumer choice, input from direct support staff, and a case study with positive outcome are also described.

Utilization/Production Data:

FY 17 Targets: 2 Community Service Events – public presentations, consultations with community groups or caregivers, and small workshops. 15 Service Contacts – information and referral contacts initial screenings, and crisis services. 61 Continuing and 5 New Treatment Plan Clients (people served in other agency programs) plus 1 Continuing and 3 New NTPCs (people not otherwise involved with the agency.)

FY16 (\$173,773) Mid-Year: 2 CSEs against target 2; 8 SCs against target 25; 61 continuing and 7 new TPCs against target 66; 2 continuing NTPCs against target 4. Seven people received more than one type of service.

FY 15 (\$173,773): 3 CSEs against target 2; 21 SCs against target 25; 63 continuing and 10 new TPCs against target 86; 3 continuing and 82 new NTPC against target 4. Twenty people received more than one type of service.

COUNTY WIDENESS

FY16 Mid-Year: 33% Urbana, 54% Champaign, 1% Mahomet, 7% Rantoul, 4% Other CC, of 70.
FY15: 34% Urbana, 55% Champaign, 1% Mahomet, 5% Rantoul, and 5% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 1% are 7 to 12, 90% are 19 to 59, and 9% are 60 and up; 1% are Asian/PI, 17% Black/AA, and 81% White; 1% are of Hispanic or Latino origin; 41% female and 58% male.

FY15: 3% were 7 to 12, 1% were 13 to 18, 90% 19 to 59, and 6% 60 and up; 1% were Asian/PI, 16% Black/AA, and 83% White; 1% were of Hispanic or Latino origin, 99% not; 40% were female, 60% male.

DSC-CS

71

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$178,986
PY17 Total Program Expenses: \$179,396

Program Staff – CCDDDB/CCMHB Funds: 0.88 direct FTE and 0.62 indirect FTE
Total Program Staff: 0.88 direct FTE and 0.63 indirect FTE

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

***Staff Assessment:** Direct staff includes 50% of Clinical Coordinator, 15% of Program Director, 10% of a COTA, 5% of 75% of Vice President, and 4% of an RN and an LPN. Indirect staff costs are 4% and lower of 19 positions. Because the program relies primarily on subcontractors and their own facilities, the allocation of indirect staff to this program seems large, at \$32,200 (or 18% of CCDDDB/CCMHB amount.) For reference, the allocation presented for Apartment Services is 7% of CCDDDB/CCMHB amount.*

Budget Narrative: CCDDDB/CCMHB request is for over 99% of program revenue, with a very small amount from DHS reimbursement for training. **Expenses** are staff costs (2% salary increase and 10% health insurance increase) at 52% of CCDDDB/CCMHB budget, and consultant costs, at 46%. Small amounts for consumables, general operating, occupancy, staff development, transportation, equipment, lease/rental, membership dues, miscellaneous, and depreciation are included, based on current year actuals. **Budget narrative** explains personnel assignments and expense line items, including Specific Assistance, for which no amount appears in the expense form.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. As addenda, copies of all related consultant subcontracts, including payment information and contract maximums, will be provided. As people who have insurance move into practices where insurance can be billed, both parties may consider the value of cost-shifting to support these individuals with any needed care coordination or intensive case management not covered by insurance.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DSC-CS

72

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center, Inc.

Program Name: Community Employment

Contract Format Requested: Grant

Funding Requested: \$229,484

Staff Assessment: request is an increase of \$6,684 over FY2016 level.

Target Population: Champaign County residents aged 18 and older, who have an intellectual/developmental disability and are seeking support to find or keep a job.

Staff Assessment: program serves people who have state funding for the service but does not charge them to this contract.

Service Description/Type: Customized to support an individual's stated goals and needs, using: interviews with the individual and members of their support network and employers, in a person-centered discovery process; visiting and researching potential employers, exploring potential job niches (to match a job seeker's strengths) and learning from the work experiences of others; job development and trial activities; resume building and interview preparation; benefits counseling; soft skills; accommodations and adaptive tools; etc. To demonstrate successful outcomes, data are collected on: how many people secure employment and then keep it for 12 months; how many employers hire another person referred by this program and how many hire additional job seekers. Length of time to secure a job is also tracked, as are aggravating factors (limited transportation, e.g.) New job sites are developed as a result of pursuing job seekers' interests and matching with needs of employers.

Staff Assessment: staff training is described in this section, includes certification by national Association of People Supporting Employment First.

Alignment with ID/DD Priorities, Through the "Lens of Integration," Does the application:

- Focus on a person's control of his/her day and life? YES – regarding work life.
- Support a person building connections to the broader community? YES – with regard to employment.
- Support a person participating in community settings of their choice and in ways they desire? YES – with regard to employment.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not explicitly.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES – by use of discovery process.
- Incorporate Employment First principles? YES – emphasis on person centered discovery and 'niche' development.
- Acknowledge support and encouragement of self-advocacy? NO.

- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summaries of current and previous years' residency and demographic data below.* Rural outreach is through school IEPs, transition events in rural areas, and involvement with the Champaign County Transition Planning Committee and Job Developers Network; limited rural employment opportunities and transportation are noted.

Alignment with Other ID/DD Priority: Employment Supports and Services.

Program Performance Measures:

Consumer Access: through self-referral or referral by family member, current employer, or upon transition out of high school. Best transitions are those coordinated across team members. Program also continues support for those requesting it after the DRS-funded period (90 days.) Proposes a measure of timeliness, 30 days or fewer from receipt of proof of eligibility to consideration of the case by Admissions Committee, for 90% of all cases. Referral to RPC for PUNS enrollment. Notes the value of cultural diversity and outreach to underrepresented groups, although detail is not provided here.

Consumer Outcomes: Supports for securing and maintaining employment are based on interviews and the subsequent employment plan. Job search follows the stated interests. Outcomes tracked are long-term employment and the engagement of 'new' businesses. One measure relates to people keeping their job for a year, with FY17 target of 75%, as in current year (mid year actual is 70%). A second measure targets 8 new employers of persons with ID/DD; the FY16 target is also 8, with mid-year actual of 3.

Utilization/Production Data:

FY17 Targets: 2 Community Service Events (formal presentations about the program,) 2 Service Contacts (meetings with prospective participants, tours of agency sites, visits to individuals' home, etc.), and 45 Continuing and 5 New TPCs.

FY16 (\$222,800) Mid-Year: 0 CSEs against target 2; 2 SCs against target 2; 41 continuing and 7 new TPCs against target 50; hours = 1332.25.

FY 15 (\$216,300): 2 CSEs against target 2; 2 SCs against target 2; 47 continuing and 3 new TPCs against target 50; hours = 3103.25

COUNTY WIDENESS

FY16 Mid-Year: 38% Urbana, 46% Champaign, 4% Mahomet, 6% Rantoul, 6% Other CC, of 48.

FY15: 40% Urbana, 44% Champaign, 4% Mahomet, 6% Rantoul, and 6% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 100% are 19 to 59; 4% are Asian/PI, 27% Black/AA, 2% Other, and 67% White; 4% are of Hispanic or Latino origin; 19% are female, and 58% male.

FY15: 100% were aged 19 to 59; 4% were Asian/PI, 24% Black/AA, 2% Other, and 70% White; 2% were of Hispanic or Latino origin, 98% not; 42% were female, 58% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$229,484

PY17 Total Program Expenses: \$374,678

DSC-CE

74

Program Staff – CCDDDB/CCMHB Funds: 2.74 direct FTE and 0.94 indirect FTE
Total Program Staff: 4.50 direct FTE and 1.59 indirect FTE

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? N/A.
Program services not covered under Medicaid waiver.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: Direct staff assigned to the contract are: 61% of 4 Employment Specialists, 18% of Program Director, and 6% of RN and LPN. 6% and less of 19 indirect staff salaries are assigned.

Budget Narrative: CCDDDB/CCMHB request is 61% of total program revenue, with other sources being DRS (37%), DHS grant (not explained in Budget Narrative, but less than 1%), and reimbursement for training through DHS (0.5%). **Expenses:** 82% of the CCDDDB/CCMHB amount relates to staff costs, 7% to transportation, 5% depreciation, and smaller amounts for professional fees, client wages, consumables, general operating, occupancy, staff development, equipment, lease/rental, membership dues, and miscellaneous. **Budget Narrative** explains each expense item, with 2% wage increase and 10% health insurance cost increase, describes duties of personnel assigned (except the LPN), and refers to Allocated Program Expense formula.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
2. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.
3. The applicant shall propose an appropriate case rate which is predicated by monthly hours of service x the rate established by DHS for the service, provide a rate setting methodology to support any proposed rates.
4. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DSC-CE

75

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center, Inc.

Program Name: Connections

Contract Format Requested: Grant

Funding Requested: \$87,550

Staff Assessment: request is an increase of \$2,550 over FY2016 level.

Target Population: people with ID/DD seeking to connect with their communities, through identifying their own interests and the connections of value to them (friends, service to others, continuing education, support group, etc.)

Service Description/Type: to connect people to the broader community, through individual or group activities identified by the people served and occurring at any time of day: hosts a self-advocacy group monthly and supports their fundraising activities and attendance at larger advocacy events and trainings; hosts a diabetes support/education/cooking group; connects artists to art sale events; supports participants' individual interests such as attending sports events, trying a sport, leading a "walk" (fundraiser) team, and learning a craft with interested friends.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? Not directly.
- Support a person building connections to the broader community? YES – the primary goal of the program.
- Support a person participating in community settings of their choice and in ways they desire? YES – activities are identified by program participants.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? Not directly.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? YES.
- Address cultural competence and outreach to underserved populations? Notes that a person-centered process is culturally responsive. *See agency CLC review attached and summaries of current and previous years' demographic and residency data below.* Outreach to rural residents and for rural activities noted but with minimal detail.

Alignment with Other ID/DD Priority: Stated focus is Inclusion and Anti-Stigma Programs and Supports. Also supports Self-Advocacy Organizations.

Program Performance Measures:

Consumer Access: Includes information on how people request involvement with the program and activities of interest; determination made by Admissions Committee; staffed by those with Direct

Support Professional (DSP) training and by agency-screened volunteers. A measure of rural access is included, that 25% of program participants will be from areas of the County other than the cities of Champaign and Urbana; FY16 target was 20%, or 14 people, with mid-year actual of 11.

Staff Assessment: section mentions cultural diversity as a value, agency-wide staff involvement in Cultural Diversity Committee, outreach to underrepresented groups, and interagency collaborations as an access strategy.

Consumer Outcomes: Two measures are described. One is to offer 20 different social activities; the current year target is 15 with mid-year actual of 18. The other measure is for self-advocates to engage in at least four culturally diverse activities; the current year target is two, with mid-year outcome of three (one a live readings event at public library.)

Utilization/Production Data:

FY17 Targets: TPCs = 60, lower than FY16 target in order focus on smaller groups. NTPCs = 15, peers who accompany but are not eligible (due to CILA funding.) Service hours and # of separate activities (target 40) are also reported.

FY16 (\$85,000) Mid-Year: 41 new TPCs against target 70; 11 new NTPCs against target 10; hours = 236.

FY 15 (\$85,000): 66 new TPCs against target 70; 21 new NTPCs against target 10; hours = 247.25 (missing Q2 hours.)

COUNTY WIDENESS

FY16 Mid-Year: 39% Urbana, 44% Champaign, 2% Mahomet, 7% Rantoul, and 7% Other CC, of 41.

FY15: 47% Urbana, 43% Champaign, 3% Mahomet, 3% Rantoul, and 4% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 93% are 19 to 59, and 7% are 60 and up; 2% are Asian/PI, 12% Black/AA, and 85% White; none are of Hispanic or Latino origin; 44% are female, and 56% male.

FY15: 86% 19 to 59, and 14% 60 and up; 3% were Asian/PI, 17% Black/AA, 80% White; 2% were of Hispanic or Latino origin; 50% were female, 50% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$87,550

PY17 Total Program Expenses: \$88,031

Program Staff – CCDDDB/CCMHB Funds: 1.33 FTE direct and 0.27 FTE indirect

Total Program Staff: 1.34 FTE direct and 0.27 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES. People with CILA funding are not funded by this contract but may attend activities and be reported as Non-TPCs.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *personnel form assigns 2% and less of 19 indirect positions to this contract, along with the following direct staff: 99% of an Employment Counselor, 15% of a Program Director, 10% of Training Coordinator, 5% of 75% of a Vice President, and 2% of RN and LPN.*

Budget Narrative: CCDDDB/CCMHB request is for greater than 99% of program revenue, with a very small allocated amount of DHS funding (reimbursement for training.) **Expenses:** staff costs comprise 83% of CCDDDB/CCMHB budget, with 8% for consumables and 4% conferences (appropriate to program activities) and smaller amounts for professional fees, general operating, occupancy, transportation, specific assistance, lease/rental, membership dues, miscellaneous, and depreciation. The **Budget Narrative** explains each expense item and references Allocated Program Expense formula. Two staff positions with duties related to this contract are not assigned in the Personnel form: Apartment Services Case Manager, Family Home Maintenance Tech.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center

Program Name: Family Development Center

Contract Format Requested: Grant

Funding Requested: \$562,280

Staff Assessment: request is for \$16,377 over FY2016 level.

Target Population: children from birth through age five, with/at risk of developmental disabilities, and their families.

Staff Assessment: this section includes detail about use of state funds for eligible children (under 3, 30% delay in one or more areas or qualifying disability); this contract extends those services to age five and to those at risk. Comments about revenue sources and that no Medicaid is involved.

Service Description/Type: early detection and intervention to improve children's developmental outcomes, family-centered and promoting a coordinated system of care. Developmental screenings in various settings (primarily home), Developmental Therapy, Speech Therapy, Comprehensive Evaluation, Developmental Play Groups, Parent Support Groups, Child Care Consultation, and PLAY Project. Resource room with therapy equipment available to parents and professionals. Family-driven service planning encourages parent/caregiver advocacy.

Staff Assessment: 37% of children screened in FY16 are bilingual, 41% are members of underrepresented groups. Section includes staff credentials (education and licenses) and certifications: 2 in PLAY Project; 1 an evaluator and trainer in DENVER Developmental training tool.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? Parent control of planning/intervention.
- Support a person building connections to the broader community? Not directly.
- Support a person participating in community settings of their choice and in ways they desire? YES, with regard to very young children's success in classrooms.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not directly.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES - identifies family strengths; supports positive developmental outcomes for very young children.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? See agency CLC review attached and summaries of current and previous years' demographic and residency data below. Rural access through collaborations, events, and home visits throughout the county.

Alignment w Other ID/DD Priority: Comprehensive Services and Supports for Young Children.

Program Performance Measures:

Consumer Access: Several sources of referral are listed, along with collaborations between this program and other provider agencies/entities. All children referred receive an assessment and potential further evaluations, rescreenings at 3, 6, or 9 months, and referral to other services, within this program or through other providers. Section includes comments about the focus on family choice, culturally responsive services, natural supports maximized by coaching parents and other supporters, and diversity as an agency value. Uses an access measure of 90% of children having assessments completed within 14 days of evaluation; the same target is in place for current year, with a mid-year actual of 84%.

Consumer Outcomes: Two outcome measures are included. 90% consumer satisfaction with services, measured through satisfaction surveys with questions based on best practice (defined by Division of Early Childhood of the Council for Exceptional Children) and other requests for parents' feedback at planning and home visits: for the current contact year, the same target, with actual outcome of 100%. The second measure is for 90% of children served to make progress toward developmental outcomes, using several standardized instruments (DENVER II, Battelle, Rossetti, etc.) at intervals not exceeding six months; the current year target is the same, with actual outcome 100% at mid-year.

Utilization/Production Data:

FY 17 Targets: 300 Community Service Events (several named large events, classes, collaborations,) 200 Service Contacts (developmental screenings,) 435 Continuing and 220 New TPCs. Hours of service will also be reported.

FY16 (\$545,903) Mid-Year: 191 CSEs against target 300; 119 SCs against target 200; 451 continuing and 123 new TPCs against target 653; hours = 3545.5.

FY 15 (\$545,903): 370 CSEs against target 300; 252 SCs against target 200; 434 continuing and 266 new TPCs against target 653; hours = 6782.5.

COUNTY WIDENESS

FY16 Mid-Year: 20% Urbana, 39% Champaign, 3% Mahomet, 23% Rantoul, and 16% Other Champaign County, of 574.

FY15: 19% Urbana, 40% Champaign, 4% Mahomet, 20% Rantoul, and 15% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 100% are 6yo or younger; 4% are Asian/PI, 17% Black/AA, 15% Other, and 63% White; 20% are of Hispanic or Latino origin, 80% not; 41% are female, and 59% male.

FY15: 100% were 6yo and younger; 5% were Asian/PI, 18% Black/AA, 15% Other, and 62% White; 17% were of Hispanic or Latino origin, 83% not; 40% were female, and 60% male.

Staff Assessment: Unexpected/unintended results – in response to the demand for PLAY project, a third developmental therapist began the PLAY Project Home Consultant Training and is completing the certification process.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$562,280
PY17 Total Program Expenses: \$738,872

Program Staff – CCDDDB/CCMHB Funds: 7.26 FTE direct staff and 0.90 FTE indirect
Total Program Staff: 8.16 FTE direct staff and 1.24 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *Personnel form assigns 6% and less of 19 positions to this contract (8% of total request.) Direct positions assigned here are 76% of 4 Child Development Specialists, Speech Language Pathologist, Screening Coordinator, Program Director, and Office Manager, 61% of another Child Development Specialist, 23% of Vice President, 11% of Training Coordinator and another Program Director, 6% of an RN and an LPN.*

Budget Narrative: The CCDDDB/CCMHB request is for 76% of total program revenue. Other sources of revenue are Early Intervention (18%), United Way (5.7%), and DHS reimbursement for training (0.6%). Staff costs comprise 82% of CCDDDB/CCMHB budgeted expenses, with Occupancy at 5.5%, Lease/Rental at 5.4%, and 2.4%, and smaller amounts for Professional Fees/Consultants, Consumables, General Operating, Conferences, Equipment, Membership Dues, Miscellaneous, and Depreciation. The **Budget Narrative** explains each estimated revenue source, each expense line and how it was estimated (e.g., 2% salary increase and 10% health benefits increase), and the relationship of assigned personnel to this contract, with the exception of the second Program Director (Program Assurance) and the LPN. The agency's Allocated Program Expense formula is referenced, reviewed by auditors.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall specify the estimated hours of each type of service to be provided for people served under this contract and tie back to the contract maximum.
2. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center, Inc.

Program Name: Individual and Family Support

Contract Format Requested: Grant

Funding Requested: \$387,428

Staff Assessment: request is for \$11,284 over FY2016 level.

Target Population: residents of Champaign County who have intellectual and developmental disabilities, especially those with significant behavioral, medical, training, or support needs, or who are in crisis.

Staff Assessment: emphasizes consumer choice, flexibility, integrated settings, wide range of costs per person depending on support needs and other resources.

Service Description/Type: Assessment, planning, direct staff support, social skills/social thinking training, emergency respite, home modification by independent contractor, equipment for therapy/sensory/accessibility, enhanced independent living skills training, activities throughout the county per individuals' interests (Tae Kwan Do, horseback riding, conferences, fitness clubs, e.g.) Services and supports in a variety of settings, choice-driven and community-based. Families may select part-time providers (agency screens and hires) for evening and weekend supports.

Staff Assessment: staff trainings as mandated by Illinois Department of Human Services and some specific to the individuals served. Could the program meet the emergency respite needs of people transitioning to CILA from out of county placements (for example,) as they wait for capacity or a placement?

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES.
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? YES.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not explicitly.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? NO.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? See agency CLC review attached and summaries of demographic and residency data for current and previous years below. Rural outreach through attending IEP meetings and Multi-Disciplinary Conferences county-wide, providing information through website, participating in the Champaign County Transition Planning Committee and other collaborations, and parent and professional networks.

Alignment with Other ID/DD Priority: Flexible Family Support

Program Performance Measures:

Consumer Access: Agency referral process is described (see program summary for Service Coordination,) along with practice of referring people to RPC's ISC for PUNS enrollment and statement about diversity, cultural competence, and outreach (per total agency.) A new measure of consumer access to this program is described, that in 90% of cases, Admissions Committee will consider a person's request for IFS within 30 days of documentation of eligibility being received.

Consumer Outcomes: Section contains a vignette to illustrate IFS' individualized supports and positive outcomes. Includes three measures of outcomes. The first is for 90% of people requesting 'community outings' to participate in at least two per month; this continues an FY16 measure, at 100% at mid-year. A second is for 100% of people receiving the service (or their guardian) to be involved in choosing the IFS provider; FY16 target and mid-year actual are also 100%. The third is a measure of satisfaction, at 90%, as the current year target.

Utilization/Production Data:

FY17 Targets: 2 Community Service Events (CSEs), 5 Service Contacts, 16 Continuing and 3 New TPCs (people with case records and Individual Service Plans funded by CCDDDB/CCMHB); 25 Continuing and 6 New Non-TPCs (people with service and support records but no formal Individual Service Plans, who are funded by CCDDDB/CCMHB.)

FY16 Mid-Year: 2 CSEs against target 2; 7 SCs against target 5; 15 continuing TPCs against target 21; 28 new NTPCs against target 26; hours = 4791 (program also pays for one-time supports.)

FY 15: 3 CSEs against target 2; 9 SCs against target 5; 14 continuing and 5 new TPCs against target 21; 18 continuing and 8 new NTPC against target 29; hours = 10258 (program also pays for one-time supports.)

DEMOGRAPHICS

FY16 Mid-Year: 7% are 6yo or younger, 31% are 7 to 12, 24% are 13 to 18, 33% are 19 to 59, and 5% are 60 and up; 7% are Asian/PI, 7% Black AA, 10% Other, and 76% White; 2% are of Hispanic or Latino origin, 98% not; 19% are female, and 81% male. FY15: 6% were 6yo and younger, 31% were 7 to 12, 18% were 13 to 18, 38% 19 to 59, and 7% 60 and up; 7% were Asian/PI, 9% Black/AA, 9% Other, and 75% White; 2% were of Hispanic or Latino origin, 98% not; 18% were female, 82% male.

COUNTY WIDENESS

FY16 Mid-Year: 29% Urbana, 36% Champaign, 17% Mahomet, 2% Rantoul, and 17% Other CC, of 42 Treatment Plan Clients and Non-Treatment Plan Clients. FY15: 34% Urbana, 36% Champaign, 16% Mahomet, 2% Rantoul, and 12% Other CC.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$387,428
PY17 Total Program Expenses: \$448,981

Program Staff – CCDDDB/CCMHB Funds: 6.17 FTE direct staff and 0.90 FTE indirect
Total Program Staff: 8.56 FTE direct staff and 1.22 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Contains a specific statement to this effect.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *The personnel form assigns portions of 6% and less of each of 19 indirect staff salaries (total cost is 11% of CCDDDB/CCMHB expenses). Direct staff salaries include: 72% of 7 Family Home Maintenance Technicians and 1 Family Home Maintenance Manager, \$16,591 overtime, \$28,812 for part-time FHMTs, 25% of Program Director, 6% of RN and LPN, and 4% for Vice President.*

Budget Narrative: The CCDDDB/CCMHB request is for 86% of total program revenue, with other sources being DHS-FFS (13%), and a small amount (allocated) for DHS training reimbursement. Staff costs comprise 83% of the CCDDDB/CCMHB budgeted expenses, with Specific Assistance at 5.6%, Transportation at 2%, and smaller amounts for Professional Fees/Consultants, Client Wages, Consumables, General Operating, Occupancy, Conferences/Staff Development, Equipment, Lease/Rental, Membership Dues, Miscellaneous, and Depreciation. The **Budget Narrative** provides explanation for all revenue and expense categories, with 2% wage increase and 10% health insurance cost increase; the duties of assigned personnel are described (not LPN;) agency Allocated Program Expense formula is referenced.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. The applicant shall specify the estimated hours of each type of service to be provided for people served under this contract and tie back to the contract maximum.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Developmental Services Center, Inc.

Program Name: Service Coordination

Contract Format Requested: Fee for Service (FFS)

Funding Requested: \$410,838

Staff Comment: request is for \$11,966 over FY2016 level. Grant format may be appropriate this year.

Target Population: residents of Champaign County who have intellectual and developmental disabilities and have requested support for community, work, and/or home life.

Staff Assessment: costs per person range from hundreds to several thousands of dollars, depending on individual needs.

Service Description/Type: intake screening, advocacy, assessment, information services, crisis intervention, 24-hour call emergency support, intermittent direct service, individual service plan development and monitoring, coordination of emergency or nursing home placements with the region's Independent Service Coordination unit, linkage/application to services and benefits (many sources and activities are listed) and housing supports, and interaction with members of the individual's team toward person-centered services, with a focus on strengths and preferences and the most integrated settings.

Staff Assessment: Staff are Qualified Intellectual Disabilities Professionals (QIDP) for which educational and training requirements are described. Of the services listed, a risk for conflict of interest is inherent in those associated with the assessment of need for services provided by this and other programs operated by the agency, as well as in the development and monitoring of the service plan. The value of intensive, individualized case management supports is enhanced by reduction of the risk of conflict, also aligning the services with federal standards.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES, through person-centered planning.
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? YES – person centered planning aligned with values of Council on Quality and Leadership.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES.
- Incorporate Employment First principles? NO.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summary of current and previous years' demographic and residency data below.* Rural outreach through agency website, collaboration with other human service providers and family groups, participation in IEP and MDC meetings throughout the county as well as with the Champaign County Transition Planning Committee, and networking with professionals and parents.

Alignment with Other ID/DD Priority: Person Centered Planning (FY16), Flexible Family Support

Program Performance Measures:

Consumer Access: After referral and follow up contact, information is gathered to confirm eligibility and understand an individual's strengths, aspirations, support needs, preferences, interests, family and cultural considerations. If the Admissions Committee determines the agency has capacity consistent with these, services are offered. All on agency waiting lists or requesting services are referred to RPC for PUNS enrollment. Two measures of access are identified. The first is for 90% of intakes to be presented to Admissions within 30 days of eligibility documentation; target for FY16 is also 90%, and at mid-year, performance was 100%. The second measure is for initiation of contact with 100% of those on waiting lists, by 9/30/16; current year target was 100% and met.

Consumer Outcomes: This section attributes to this funding source an increased range of services and numbers of people served, notes greater need for direct supports, gives example of critical support (investigations of abuse, subsequent residential placement, state guardianship, and coordination with two attorneys), and identifies two outcome measures. The first is for 90% customer satisfaction (presumably by surveys, as described in other applications); the current year target is also 90%, with data not yet available. The second measure is for completion of 40 Personal Outcome Measure (POM) interviews (per Council on Quality and Leadership); FY16 target is 25; although mid-year outcome was 7 (interviews take longer than expected,) it may be met.

Utilization/Production Data:

FY 17 Targets: 303 unduplicated individuals as Treatment Plan Clients, or those with case records and Individual Service Plans, charged to this contract. Non Treatment Plans have records of service and supports but no ISP, charged to this contract.

FY16 (\$397,872) Mid-Year: Fee for service contract, with 302 TPCs against target 305, billing per member per month. # of people receiving intake is not reported. (Section includes note that suspension of state funded Respite Program resulted in decrease of TPCs.)

FY 15 (\$397,872): Fee for service contract, with 313 TPCs against target 360 (does not include # of people in intake,) and 9,813.75 total service hours.

COUNTY WIDENESS

FY16 year to date: 30% Urbana, 42% Champaign, 5% Mahomet, 6% Rantoul, 17% Other CC.

FY15: 30% Urbana; 43% Champaign; 6% Mahomet; 7% Rantoul; 14% Other CC.

DEMOGRAPHICS

FY16 year to date: less than 1% under 5 years of age, 2% are 6 to 18, 91% are between 19 and 64, and 5% are over 64; 3% are Asian, 17% Black/African American, 2% Other, 75% White; 1% are of Hispanic/Latino origin; 43% are female and 57% male.

FY15: less than 1% under 5, 1% aged 6-18, 91% 19 to 64, and 7% were 64 or older; 3% were Asian/PI, 16% Black/AA, 2% Other, and 78% White; 2% were of Hispanic or Latino origin; 43% were female, 57% male.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$410,838
PY17 Total Program Expenses: \$710,792 (deficit of \$143,112)

Program Staff – CCDDDB/CCMHB Funds: 7.36 FTE direct staff and 0.61 FTE indirect
Total Program Staff: 12.67 FTE direct staff and 0.94 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: *Personnel form assigns 4% and less of the salaries of 19 indirect staff positions (and a small amount of overtime,) for a total cost of \$28,710 or 7% of the CCDDDB/CCMHB request. Direct staff assigned to this contract are: 58% of 10 Case Coordinators/QIDPs (and associated overtime), Developmental Instructor, 32% of RN Coordinator, 29% of Program Director and Clinical Coordinator, and 4% of RN and LPN.*

Budget Narrative: The CCDDDB/CCMHB request is for 72% of total program revenue, with other sources DHS FFS (27%), and DHS reimbursement for training (0.7%). Staff costs comprise 88% of the CCDDDB/CCMHB budgeted expenses. Other expenses assigned to this contract are: Professional Fees/Consultants, Consumables, General Operating, Occupancy, Conferences/Staff Development, Local Transportation (2.6%), Equipment Purchases, Lease/Rental (1.8%), Membership Dues, Miscellaneous (1.5%), and Depreciation. **Budget Narrative** notes DHS FFS without detail; each expense line item is explained, with many based on current and previous year actual costs, and describes the responsibilities of assigned personnel, except for LPN; Developmental Instructor is here referred to as Consumer Appointment Facilitator (appropriate to the program activities.) Agency Allocated Program Expense formula is referenced.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.
Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

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87

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Illinois Association of Microboards and Cooperative

CCMHB/CCDDB will review all CLCP plans submitted with FY 2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- See Comments
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLCP template was followed. There are specific timeframes and accountability to the actions. It is recommended that you provide examples of the connections

Cultural Competence Training

Board of Directors and staff will complete CLC training by March 2017.

Comments:

Recruitment of a diverse Board and Staff

- Utilize connections from underserved communities to promote employment opportunities.

Comments: It is recommended a recruitment of a diverse board of directors is included as well.

Cultural Competence Organizational Assessment/Evaluation

- Families and individual's complete satisfaction survey and give feedback
- -Provide alternative forms of surveys to accommodate various needs
- -Provide opportunities for team and relationship building among program participants.

Comments:

Policies and procedures which reflect Cultural Competence values

- *Staff is trained to ensure that person-centered, culturally competent approach is utilized.*
- *Board Members and Staff will review and sign new Cultural Competence Plan*



DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
Illinois Association of Microboards and Cooperative

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

Participate in 3-4 community events to promote awareness of and interest in programs

Comments:

Inter-Agency Collaboration

- *Develop diverse community partners (parent groups, advocacy groups, university departments, community groups)*
- *Presentations to 2 college or university classes and 2 local organizations.*
- *Continued participation in Disability Expa planning, local parent groups, and statewide organizations such as the Arc of Illinois and the Ligas Parent Advisory Committee.*
- *Cooperative agreements with interpreters.*
-

Comments:

89

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Illinois Association of Microboards and Cooperatives

Program Name: Champaign County Advocacy Training (2017)

Contract Format Requested: Grant - NEW

Funding Requested: \$83,000

Target Population:

Adults from Champaign County with intellectual and developmental disabilities and their families.

Service Description/Type:

The program will provide a series of eight training events to be held at the YMCA in Champaign County. Each of these eight sessions will be for an entire day, and will be scheduled on a monthly basis. The participants (25-30 people) will be a balance of people with I/DD and family members. Between the monthly sessions, participants will be assigned homework and meet for discussions and small group projects to reinforce information learned. Speakers at the monthly sessions will include state and national experts in a variety of fields.

The program will be open to people from anywhere in Champaign County, and arrangements for car-pooling or stipends will be available for transportation. Respite care will also be made available to participants.

This program is a customized version of "Partners in Policymaking," a model established in Minnesota which is designed to be a statewide advocacy training model.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES – The project outcomes are focused on advocacy to attain this goal.
- Support a person building connections to the broader community? YES – emphasis is on inclusion and advocacy.
- Support a person participating in community settings of their choice and in ways they desire? YES – the training has a component on self-direction and independence.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES – this is included in the project outcomes.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES – this is included in the project outcomes.
- Incorporate Employment First principles? YES – project includes understanding of why Employment First is important.
- Acknowledge support and encouragement of self-advocacy? YES, this is also a component of the training.
- Address cultural competence and outreach to underserved populations? NO – this is not explicitly mentioned. *See agency Cultural and Linguistic Competence review attached.*

Alignment with Other ID/DD Priority: Advocacy for People with I/DD

Program Performance Measures:

Consumer Access:

Outreach for selection of participants will start in July 2016 with outreach to local organizations and school districts. People will have to apply to participate. Selection of participants will try to get a cross section representative of different communities in the county. Other criteria will include the potential for developing into strong advocates for I/DD. The first session will begin in September 2016. Includes a measure for 100% of participants to be identified by August 30, 2016. Participation and engagement will be tracked.

Consumer Outcomes:

People who complete the program will have information about I/DD necessary to become strong advocates, along with the following competencies: an understanding of the history of I/DD services and perceptions of people with I/DD; the Parents Movement; self-advocacy and the independent living movement; benefits of inclusive education; understanding of service coordination system and services available; importance of person centered planning and self-direction; choices and control of Person Centered Planning; state of the art technologies for people with I/DD; importance of supported competitive employment; options and supports for alternative living arrangements; understanding of flexible supports for families and a true system of community supports; and the changes in life style over a person's life span.

Staff Assessment: this section does not appear to include a quantifiable measure of outcomes.

Utilization/Production Data:

Twenty-five people, comprised of 10 with I/DD and 15 family members. The total service contacts are estimated to be 600 with 8 community service events.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$83,000
PY17 Total Program Expenses: \$87,100

Program Staff -- CCDDDB/CCMHB Funds: FTE: 0.75
Total Program Staff: FTE: 0.75

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? N/A – these are most likely not Medicaid billable services

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES

Budget Narrative: The project is to be primarily funded with CCMHB/CCDDDB funds with about \$4,100 in additional revenue (in-kind and contributions). The narrative provides adequate explanation about how CCMHB/CCDDDB funding is to be used.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable X

Staff Comments: New Application

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: Illinois Association of Microboards and Cooperatives (IAMC)

Program Name: IAMC Building Inclusive Communities (2017)

Contract Format Requested: Grant

Funding Requested: \$64,278

Target Population: People with I/DD who have challenging and complex service needs and could benefit from community-based circles of support. This cohort may or may not be receiving services and have services needs not met by the existing service system.

Service Description/Type: Training and technical assistance for a minimum of ten people with I/DD and their family and friends to create formal microboards or informal support circles to enhance their quality of life. The program will include a PATH Person Centered Plan along with technical assistance and support to achieve the person's goals and objectives vis a vis their PATH plan.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES – project outcomes are focused on planning/training to attain this goal.
- Support a person building connections to the broader community? YES – emphasis is on inclusion and advocacy.
- Support a person participating in community settings of their choice and in ways they desire? YES – the Project uses PATH as a component for self-direction and independence.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? YES – this is included in the project outcomes.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES – this is included in the project outcomes.
- Incorporate Employment First principles? YES – project supports these principles.
- Acknowledge support and encouragement of self-advocacy? YES, this is a component of the PATH process.
- Address cultural competence and outreach to underserved populations? NO – this is not explicitly mentioned.

Alignment with Other ID/DD Priority: Planning for People with Challenging and Complex Service Needs

Program Performance Measures:

Consumer Access:

The Provider (IAMC) will contact parent groups, self-advocacy groups, providers and other community groups to recruit participants who are underserved by the system of care, as well as people

with challenging service needs. Families and people with I/DD interested in creating new options are also appropriate for this program.

Staff Assessment: *does not appear to include a quantifiable measure of access. Length of engagement is expected to vary. Documentation will include attendance sheets, evaluation forms, written summaries and (pending permission) photos of individual plans.*

Consumer Outcomes:

For people with I/DD who are participants will have improved quality of life, extended support and stability from family, and greater acceptance and inclusion in the community. In addition: increased community based activities; movement toward independent living; employment options; volunteer opportunities; micro enterprise opportunities; development of social supports and friendships; and acquisition of new skills in daily living.

For family member participants the program will develop circles of support; sibling support and planning; increased access to information necessary to allow the person with I/DD to assume more responsibility.

Staff Assessment: *Many outcomes are identified, associated with people, families, and community, but they do not appear to include quantifiable measures (targets.)*

Utilization/Production Data: Ten people with I/DD who meet the program criteria; 200 service contacts and 5 community service events.

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$64,278
PY17 Total Program Expenses: \$66,778

Program Staff – CCDDDB/CCMHB Funds: FTE: 0.75
Total Program Staff: FTE: 0.75

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? N/A—these are most likely not Medicaid billable services.

Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES

Budget Narrative: The project is to be primarily funded with CCMHB/CCDDDB funds with about \$2,500 in additional revenue (membership dues and contributions). The narrative provides adequate explanation about how CCMHB/CCDDDB funding is to be used.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.

Not Applicable ___X___

Staff Comments: New Application

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

IAMC-IBIC

94

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
3. Initial statement summarizing the agency's approach to increasing the availability and utilization of integrated settings and related benchmarks. With the shared goals of assuring alignment with state and federal system transformation while causing least disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, progress, and obstacles.
4. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
PACE, Inc.

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments

The CLCP followed the format that outlined in the application. It is recommend that you Board of Directors participotes in the cultural diversity in-service. There was timefrone provided for all of the action steps. There was plan of action outlining the specific prcess for recommending members and nominations for the Diversity Advisory Board.

Cultural Competence Training-

PACE staff will sponsor and attend a Cultural Diversity in-service series to increase awareness of the changing needs of the service area's communities

Comments:

Recruitment of a diverse Board and Staff

Ensure that individuols of diverse backgrounds are included in policy-making ond program develapment

Ensure that individuals of diverse backgrounds are integrated into Board and staff positions and volunteer opportunities.

Contacts are being made with community groups to help establish a community presence for Diversity Advisory Graup.

Comments:



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2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
PACE, Inc.

Cultural Competence Organizational Assessment/Evaluation

Assess and modify the physical to ensure access for clients. There was an issue with lighting in the lobby area. Modifications were made to the lighting to ensure that some of the clients had more light. Light covers were removed from ceiling fixtures which made the reception area too dark for some consumers.

Comments:

Policies and procedures which reflect Cultural Competence values

Integrate consumers into Board and staff positions and volunteer opportunities.

Comments:

Evidence of outreach and engagement with underrepresented populations defined in application criteria

PACE staff will sponsor and attend a Cultural Diversity in-service series to increase awareness of the changing needs of the service area's communities

PACE will continue to translate PACE brochures into Spanish and to acquire other materials in Spanish and other languages. This is one of the Committee's priorities.

Provide a program specific to people 55 years and over who have visual impairments

Comments:

Inter-Agency Collaboration

PACE, Inc. provides a list of sign language resources available on their website. In addition, ASL classes are taught.

Members of PACE, Inc. participate actively in the Human Services Council of Champaign County.

Comments:

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: PACE, Inc.

Program Name: Opportunities for Independence

Contract Format Requested: Grant

Funding Requested: \$54,546

Staff Assessment: request is for \$24,546 over FY2016 level; FY2014 contract maximum was \$58,623. Fee for service format would capture the varying levels of service provided according to individuals' needs and choices.

Target Population: residents of Champaign County who have ID/DD, meeting all of the current eligibility requirements established by IDHS-DDD, and who request support from the agency, a Center for Independent Living (CIL) serving people of all disabilities. A new target population is included, young people who desire support in developing the skills to transition from secondary education to post-secondary or employment. Employment services for this population would potentially be through the agency's new WIOA-based initiative.

Staff Assessment: includes details of eligibility criteria and needs assessment. The former are specific to this contract, both target populations, and the latter is the agency's Independent Living Needs Assessment, developed by the Division of Rehabilitation Services and Centers for Independent Living.

Service Description/Type: total agency provides linkage to other programs, agencies, and benefits; assessment of career interest, training for employment readiness and 'soft skills,' and employment support; housing search and skills training. This program also supports social skills, increasing community awareness, advocacy for greater independence/integration in all life areas, health promotion, literacy, etc. Services are delivered in group or individual settings, at agency or in community, based on Independent Living assessment, and via a person-centered and person-controlled plan.

Staff Assessment: dignity of risk is mentioned; although Vocational Training is identified as application focus, services described in this section are much broader.

Alignment with ID/DD Priorities, Through the "Lens of Integration." Does the application:

- Focus on a person's control of his/her day and life? YES
- Support a person building connections to the broader community? YES.
- Support a person participating in community settings of their choice and in ways they desire? YES.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? Not explicitly.
- Systematically identify and mobilize a person's capabilities and create access to community associations, workplaces, and learning spaces? YES.
- Incorporate Employment First principles? YES.
- Acknowledge support and encouragement of self-advocacy? YES – directly through this program, and consumer advisory board provides input to program development.

- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and demographic and residency data below.* Rural outreach through mailings, newsletter, email, social media, accessible website, presentations, community events, toll free number, collaborations with state and other organizations, and input from Advisory Committee.

Alignment with Other ID/DD Priority: Employment Supports and Services, Self-Advocacy.

Program Performance Measures:

Consumer Access: cultural competence and diversity are discussed. There is sufficient detail on referral to the program, expectations of timeliness, and the intake process. Describes data collected for various assurances (county-wideness, personal outcomes met, enhancement of diversity) and collaborations with other agency. A quantifiable measure of access to the program does not appear to be included, although information present suggests it is measured.

Staff Assessment: *care is taken to identify Medicaid eligibility and to avoid billing for persons with services through Medicaid Reintegration, but DD waiver (Medicaid) funding is not explicitly mentioned; increased collaboration with the RPC ISC unit regarding eligibility and the services covered under waivers helps to clarify any potential issues.*

Consumer Outcomes: details the agency outcome measures instrument, which tracks along the categories included in agency needs assessment, and was developed by the National Centers for Independent Living and tested in four other programs. Uses quarterly phone survey of randomly selected program participants. Method is described here and in greater detail through attachments.

Staff Assessment: *an attachment details 7 goals and provides the outcomes measures survey instrument. Because the 7 goals were not described within Plan Narrative section, they are not explicitly tied to the sections on access, outcomes, or utilization; all have timelines, and some have utilization targets, addressing requirements and priority areas.*

Utilization/Production Data:

FY 17 Targets: 35 Community Service Events; 650 Service Contacts; 14 continuing and 11 new TPCs; 35 new NTPCs. (Staff note: "Other" category can be a report of direct service hours, if contract is not Fee for Service format, and Service Contacts can be a tally of contact events or outcome activities rather than hours.)

FY16 (\$30,000) Mid-Year: 16 CSEs against target 15; 365.5 SCs against target 375 (hours); 9 continuing and 6 new TPCs against target 20; 21 new NTPCs against target 10; hours = 365.5.

FY 15 (\$29,311): 15 CSEs against target 15; 309.75 SCs against target 375 (report of hours?); 6 continuing and 6 new TPCs against target 20; 13 new NTPC against target 10; hours = 309.75.

COUNTY WIDENESS

FY16 Mid-Year: 27% Urbana, 50% Champaign, 5% Mahomet, 2% Other CC, of 22

FY15: 22% Urbana; 58% Champaign; 4% Mahomet; 8% Rantoul; 8% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 10% are 13 to 18, 80% are 19 to 59, and 10% are 60 and up; 10% Black/AA, 5% Other, and 85% White; 5% are of Hispanic or Latino origin, 95% not; 40% are female, 60% male.

FY15: 10% were 13 to 18, 80% 19 to 59, and 10% 60 and up; 5% were Asian/PI, 10% Black/AA, and 85% White; 5% were of Hispanic or Latino origin, 95% not; 35% were female, 65% male.

PACE-OIP

99

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$54,546
PY17 Total Program Expenses: \$54,546

Program Staff – CCDDDB/CCMHB Funds: 1.45 FTE direct staff
Total Program Staff: 1.45 FTE direct staff

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: No indirect personnel costs are assigned to this contract; direct personnel costs are 95% of the Independent Living Specialist and all of a half-time Employment & Transition Specialist, to be hired.

Budget Narrative: CCDDDB/CCMHB request is the sole source of revenue for this program. Staff costs comprise 91% of CCDDDB budgeted expenses; smaller amounts are charged for consumables, general operating, occupancy, conferences/staff development, local transportation, and lease/rental. **Budget Narrative** provides detail on all agency revenue, each expense item associated with this program (with calculations), and the responsibilities of assigned program personnel.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.
Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. The applicant shall guarantee that all persons served under the contract, other than young children, are known to the regional PAS/ISC agency and either enrolled in PUNS or have documentation of deferment.
2. As addenda, written description of Person-Centered Planning process(es) and blank copies of documents used to accomplish PCP.
3. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
4. The applicant shall propose an appropriate case rate which is predicated by monthly hours of service x the rate established by DHS for the service, provide a rate setting methodology to support any proposed rates.
5. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

PACE-OIP

100

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
United Cerebral Palsy Land of Lincoln

CCMHB/CCDDB will review all CLCP plans submitted with FY2017 applications for funding, with particular attention to benchmarks for each of the following action areas:

1. Annual Cultural Competence Training- Yes
2. Diverse Board and Staff Recruitment- Yes
3. Cultural Competence Organizational Assessment/Evaluation- Yes
4. Implementation of Cultural Competence Values in Policy and Procedure-Yes
5. Outreach and Engagement of Underrepresented Populations defined in the Criteria-Yes
6. Inter-Agency Collaboration- Yes

Overall CLC Plan Comments-

Cultural Competence Training-

- *Board of directors has allotted minimum of 2 hours for each staff person to take CLC Training*
- *It is required all staff to have at least 2 hours of CLC Training annually.*
- *The annual training curriculum through Relias Learning Management System will be reviewed and revised to reflect our commitment to diversity and cultures reflective of our central Illinois communities. Changes to annual requirements will be made as identified.*

Comments:

Recruitment of a diverse Board and Staff

The Human Resources Manager will contact local churches, job fairs offered through minority organizations to expand UCP's applicant pool

Comments: There was no action on the recruitment of a diverse board.

Cultural Competence Organizational Assessment/Evaluation

- *Annually review/revise the Board policies on accessibility and compliance*

101

DRAFT
2017 Summary Analysis of Applicant's Cultural and Linguistic Competence
Activities
CCDDB/CCMHB
United Cerebral Palsy Land of Lincoln

- *Annual review of accessibility plan with goals to address barriers to services*

Comments: It is recommended the staff participates in a cultural competence assessment to measure the awareness of culturally responsive values.

Policies and procedures which reflect Cultural Competence values

" UCP recognizes that a plan may include considerations for persons served, personnel and other stakeholders in the following areas: culture, age, gender, sexual orientation, sexual orientation, spiritual beliefs, socioeconomic status, and language."

Questions: 1. Is ethnicity/race included in considerations for persons served, personnel and other stakeholders, when creating a plan?

- *All staff must sign and read the CLC Plan within on allotted time period the CLC Plan is reviewed.*
-

Evidence of outreach and engagement with underrepresented populations defined in application criteria

- *Individuals/families participate in the development of the service plan with inclusion of any communicotian and cultural considerations in the way services will be delivered.*
- *The troining curriculum for persons served will be reviewed and revised to reflect our commitment to diversity and cultures reflective of our central Illinois communities.*

Comments:

Inter-Agency Collaboration

Comments:

102

DRAFT CCDDDB PROGRAM SUMMARY FY2017

Agency: United Cerebral Palsy Land of Lincoln

Program Name: Vocational Services

Contract Format Requested: Grant

Funding Requested: \$91,895

Staff Assessment: request is for \$5,420 over FY2016 level. Could be in Fee for Service format, if rates for individual support and group work were negotiated.

Target Population: Champaign County residents aged 18-55, who have a developmental disability and need for training or support to secure and keep a job in the community.

Staff Assessment: includes a comment that referrals come from schools, Division of Rehabilitation Services (DRS), Champaign County Regional Planning Commission, and other organizations serving people with DD.

Service Description/Type: for those already employed, long term job coaching and case management; for job seekers or those interested in improving job skills, vocational training and job development. After short-term DRS funding ends, an individual may continue job supports if needed to maintain employment, work toward a promotion, or increase work schedule. Individual skills, interests, preferences, and strengths are identified through assessment, interview, and career exploration, and a profile developed. Skills training can include employment etiquette, social skills, interviewing, etc. An 8-week janitorial training is available. Job development follows assessment and skills training.

Alignment with ID/DD Priorities, Through the “Lens of Integration.” Does the application:

- Focus on a person’s control of his/her day and life? Specific to employment.
- Support a person building connections to the broader community? Not directly but through employment in the community.
- Support a person participating in community settings of their choice and in ways they desire? YES - specific to employment settings.
- Support a person developing and strengthening personal support networks which include friends, family, and people from the broader community? NO.
- Systematically identify and mobilize a person’s capabilities and create access to community associations, workplaces, and learning spaces? YES – specific to employment.
- Incorporate Employment First principles? YES.
- Acknowledge support and encouragement of self-advocacy? NO.
- Address cultural competence and outreach to underserved populations? *See agency CLC review attached and summaries of current and previous contract year demographic and residency data below.* Rural access includes job development and transportation training in individuals’ preferred work settings, which could include rural employers.

Alignment with Other ID/DD Priority: Employment Services and Supports.

UCPLL-VS

103

Program Performance Measures:

Consumer Access: Referral sources are identified. Staff provide inservices about the program to other organizations. Eligibility determination is described, with a measure for 100% of cases. Timelines and events from initial contact to engagement are: 7 days from referral to scheduling of intake; 30 days to complete four vocational assessment tools determining appropriateness of service, to notify the individual, and to set a schedule for services. Each case file contains Multi-Disciplinary Conference, UCP Individual Service Plan, Monthly Progress Reports.

Staff Assessment: "CCRPC Case Manager to determine whether they meet the eligibility requirements for the program" is presumed to refer to CCRPC Independent Service Coordination staff and eligibility requirements of IDHS-DDD programs. The measure for 100% eligibility is important for compliance with CCDDDB funding guidelines.

Consumer Outcomes: Values and strengths of the agency are described, along with several recognitions, including for continuous quality improvement. Two outcomes for the program relate to utilization targets. On behalf of 20 new people using extended job supports/coaching, staff have monthly employer contacts toward finding employment; 10 participants in vocational training will be involved in training or employment search three times per week. Section includes detail on services specific to each category/outcome.

Utilization/Production Data: Section contains information about person-centered planning and individuals' goals, collection of data on program activities and individuals' participation and progress, feedback from program participants, and documentation of direct service hours.

FY 17 Targets: 70 Community Service Events (20 inservice trainings to agencies, presentations to other groups and classes); 160 Service/Screening Contacts; 30 new and 20 continuing TPCs; and Hours = 11,000 (300 hours for each of 30 new people and 100 hours for each of 20 continuing.)

FY16 (\$86,475) Mid-Year: 37 CSEs against target 70; 34 SCs against target 160; 8 continuing and 4 new TPCs against target 50; hours = 1693. At mid-year, 7 people are employed in the community with job coach support.

FY 15 (\$86,475): 59 CSEs against target 70; 97 SCs against target 120; 23 TPCs against target 30; hours = 1398.

COUNTY WIDENESS

FY16 Mid-Year: 42% Urbana, 33% Champaign, 25% Other Champaign County, of 12.

FY15: 48% Urbana; 22% Champaign; 13% Mahomet; 17% Other CC.

DEMOGRAPHICS

FY16 Mid-Year: 92% are 19 to 59, and 8% are 60 and up; 33% Black/AA, and 67% White; none are of Hispanic or Latino origin (or data not available); 42% are female, and 58% male.

FY15: 100% 19 to 59; 44% Black/AA, 4% Other, and 52% White; none were of Hispanic or Latino origin; 43% were female, 57% male.

Staff Assessment: The FY17 target for service hours seems high compared to FY16 and FY15 actuals and, given the total request, would cost \$8.35 per hour if the services are one on one; janitorial skills classes are included, but estimates of time are not. Could a group rate and an individual rate be identified?

UCPLL-VS

104

Financial Information:

PY17 CCDDDB/CCMHB Funding Request: \$91,895
PY17 Total Program Expenses: \$91,895

Program Staff – CCDDDB/CCMHB Funds: 3.83 FTE direct staff and 0.06 FTE indirect
Total Program Staff: 32.00 FTE direct staff and 3.08 FTE indirect

Does the application warrant that CCDDDB/CCMHB funding will not supplement Medicaid? YES.
Does the application clearly explain what is being purchased by the CCDDDB and CCMHB? YES.

Staff Assessment: the personnel forms assigns 2% of Chief Employment Officer and 1% of 2 Accounting Clerks, a Receptionist, and a Human Resources Manager, as indirect staff, and 100% of 2 Job Coaches, 50% of Job Developer, and 33% of Job Development Supervisor, as direct staff. There appears to be an error in one or more financial forms, resulting in a large deficit and not likely intended.

Budget Narrative: The CCDDDB/CCMHB funding request is 100% of revenue for this program. Staff costs comprise 94% of CCDDDB/CCMHB budgeted expenses, with smaller amounts for local transportation (3%), lease/rental (1%), consumables, general operating, conferences/staff development, equipment purchases, and miscellaneous. **Budget Narrative** explains that expenses are estimated based on experience with this and similar programs operated by the agency, identifies the salaries and direct staff positions along with the relationship to this contract of the indirect staff, and shows how benefits and payroll taxes were determined.

Audit Findings: This applies only to applicants with existing CCMHB or CCDDDB contracts and is predicated on findings from the audit protocol.
Audit in Compliance X

Contracting Considerations: If this application is approved by the CCDDDB or CCMHB for funding, the applicant may be required to submit the following for staff review and approval prior to execution of the final FY17 contract:

1. Initial statement of efforts to decrease and eliminate the risk of conflict of interest associated with Case Management activities and to identify areas of duplication of service among local providers of similar services, toward potential systemic remedies. With the shared goals of assuring alignment with state and federal system transformation while minimizing disruption to those engaged with or seeking these services, the provider agency will make available, upon request, input from key staff regarding associated planning, benchmarks, and obstacles.
2. The applicant shall propose an appropriate case rate which is predicated by monthly hours of service x the rate established by DHS for the service, provide a rate setting methodology to support any proposed rates.
3. Applicant shall warrant that these services are not covered under the Illinois School Code.

Applicant Review and Input:

The applicant is encouraged to review this document upon receipt and notify the CCDDDB/CCMHB office in writing if there are factual errors which should be corrected prior to completion of the award process.

Recommendation: Pending

UCPLL-VS

105

CCDDB and CCMHB ID/DD Contracts for FY2016

14.A

Autism Society of Illinois CU Autism Network \$10,000

Services: Community resource information, support through meetings, email and phone consults, email, listserv, facebook, networking and education. 8 regular meetings throughout the year. Free activities for children are offered, as well as free 'childwatch' for smaller children. Three free family events are hosted each year such as golf, pizza parties and bowling. **Utilization targets:** (from part one form) 50 TPC, 1775 NTPC, 12 CSE.

CCRPC - Community Services

Decision Support Person for CCDDB \$48,000

Services: data collection, client tracking, and case management activities not currently funded by DHS-DDD, with the purposes of improving local needs assessment and planning and of hastening consumer access to desired/needed services. Establish an all payer database for those accessing or seeking DD services, to track their choices (met or unmet) to strengthen person-centered systems of care; assist individuals in obtaining all documentation required for eligibility for DHS-DDD funded services, speeding up approvals for those drawn from PUNS; refers those determined ineligible to other supportive programs rather than remaining on the waiting list for an eventual denial; assisting those on the PUNS waiting list with emergency planning. **Utilization targets:** 32 TPC, 300 NTPC, 20 SC, 10 CSE.

CTF Illinois Nursing Services \$8,580

Services: Coordination of medical nursing care, medication training of staff, quality assurance of all medical concerns, input into medical forms and policies, formal monthly site visits by Registered Nurse, monthly medication checks and review of Physician Order Sheets, annual Physical Status Review nursing packets, quarterly medication assessments for those on psychotropic medications, annual physical assessments, tardive dyskinesia screenings, quality assurance on medication errors, annual recertification of med administration for all staff, on call 24/7 for emergencies, informing and participating in team meetings to develop residents' programming and goals. **Utilization targets:** 7 TPC, 240-300 SC.

Champaign County Down Syndrome Network CC Down Syndrome Network \$15,000

Services: Support to families and people with Down Syndrome. New parent packets, books, DVD's, home and hospital visits, are ways they offer support. The DSN offers support at Individualized Education Program (IEP) meetings. Monthly meetings, annual conferences, workshops, social events, presentations, and the annual Buddy Walk are held. The DSN sponsors a newsletter and a website. **Utilization targets:** 140 TPC, 20 CSE.

Champaign County Regional Planning Commission Head Start/Early Head Start

Social Emotional Disabilities Services \$54,823

Services: Ages and Stages Questionnaire and ASQ- Social Emotional screenings for those newly enrolled (anticipate 300 ASQ-SEs,) development of social-emotional goals, Social-Emotional environmental observations of each classroom, individual child observations, development of behavioral plans (Individual Success Plans), individual play therapy, counseling for family members, informational support/training for families, annual staff training and social-emotional articles for parent newsletters, and collaboration/networking meetings. **Utilization targets:** 90 (60 new) TPC, 55 NTPC, 1 CSE, 600 SC, 8 Other (newsletter articles, staff training).

Community Choices Community Living \$60,000 (CCMHB)

Services: Community Transitional Support: a two-year, four-phase model for moving into the community: 1) Planning includes assessments, observations, financial discussions, core skills eval; 2) Move Out, focused on schedules and life skills support; 3) Post-Move Out, with community connections and meaningful activities; 4) Maintenance, with decreased staff support (check-ins as needed).

106

Life Skill Training: individual and small group instruction, approx. 8 sessions of interactive instruction, with topics such as finances, social skills, housekeeping; people may take multiple sessions to build skills in these areas (and self-care, community engagement, well-being) and confidence for life-long learning in the community. **Utilization targets:** 15 TPC (Community Transitional Support), 12 NTPC, 5 classes, 2 CSE.

Community Choices Customized Employment \$55,000 (CCMHB)

Services: focus on individualizing the relationship between employees and employers to meet both parties' needs. Discovery – determination of strengths, needs, and desires (through observations, interviews, various settings). Career Planning - exploration of specific career opportunities (classes, internships, financial planning, etc.) Matching Job Seekers and Employers – instruction in social and communication skills associated with particular work environment; targeted job skills training; discussion with potential employers regarding their needs; tours and job shadowing; negotiation of employment contract. Short-Term Employment Support – development of accommodations/supports and natural supports with both parties; agency contact person for concerns; limited job coaching. Long-Term Employment Support – to support employee making a contribution and becoming valued/accepted; to maintain and expand employment (promotions, retraining, benefits, conflict resolution.) **Utilization targets:** 37 TPC, 785 SC, 4 CSE,

Community Choices Self Determination Support \$55,000 (CCMHB)

Services: Building Community Capacity – collaboration with other organizations to expand local capacity, services, connections; system advocacy and change in specific areas, such as inclusion of people with DD in life skills classes available in the community. Family Support and Education –family advocate group meetings concurrent with self-advocate group meetings; focus on information and networking, with presentations and speakers on many topics including best practices; direct support during transitions or challenges. Social Opportunities – Self-Advocacy through group meetings plus a new group led by self-advocates, will also work on systems advocacy; Social Engagement through family social events and separate events for and planned by teens and adults; Social Coaching for Individual Activities hosted by self-advocates with planning support from staff; Community Connections to develop individual relationships with community members, regardless of disability. **Utilization targets:** 65 family NTPC and 75 self NTPC, 264 family plus 510 SC, 4 CSE.

Community Elements, Inc. Coordination of Services – DD/MI \$31,945

Services: strength-based approach, case identification, screening for mental illness, direct support to individuals and their families, technical assistance to other professionals involved in the care, treatment planning, advocacy, effort to improve coordination between providers of DD and MH services. **Utilization targets:** 32 TPC, 15 SC, 12 CSE.

Developmental Services Center Apartment Services \$405,185

Services: assistance in acquiring skills for independence, long-term support for areas not mastered, and increased support when skills are compromised by health problems. Areas of support include: money management, cooking, cleaning, and other home management and personal care; social skills, safety, and other community integration; support for positive health habits and meeting medical needs; linkage to benefits and other services. Crisis support available 24/7. Services provided at home and in community, determined by individual's plan, reviewed monthly and revised as needed. **Utilization targets:** 63 TPC.

Developmental Services Center Clinical Services \$173,773

Services: psychological assessment, for eligibility and for those whose level of functioning may have changed; counseling assessment and planning, individual and group counseling and counseling in response to crisis; initial and annual psychiatric assessment, medication review, and crisis intervention; occupational therapy evaluation and consultation; clinical consultant collaboration with interdisciplinary teams. Consultants on contract meet with people at agency offices and in community and include: one Licensed Clinical Psychologist, four Licensed Clinical Social Workers, two Licensed Clinical Professional

107

Counselors, one Licensed Professional Counselor, one Licensed Marriage and Family Therapist, a Psychiatrist, a Speech Therapist, and an Occupational Therapist. Staff and family members may assist with appointment scheduling and transportation. **Utilization targets:** 66 TPC, 4 NTPC, 25 SC, 2 CSE.

Developmental Services Center Community Employment \$222,800

Services: person-centered discovery process: interviews of individuals and those who know them; research into particular jobs of interest; resume/portfolio development; interview preparation; job matching; advocacy for accommodations; development of adaptive tools; support of self-advocacy at work; benefits information; 'soft skills' support; and feedback from peers. **Utilization targets:** 50 TPC, 2 CSE, 2 SC.

Developmental Services Center Connections \$85,000

Services: individual and small group activities developed by participants' interest, during afternoon/evening/weekend, brief or overnight, including (e.g.): self-advocacy group with fundraising activities to attend Speak Up and Speak Out Summit and Alliance for Change trainings; diabetes support/education group; art events; other activities of interest. **Utilization targets:** 70 TPC, 10 NTPC, 40 Other (activities).

Developmental Services Center Employment First (with Community Choices) \$80,000 (two year contract)

Services: educational events (success stories, benefits planning, etc.) for individuals and family members of those in day program, waiting list, or transitioning out of school; staff training by national expert plus train-the-trainer component, supporting culture change and sustainability; disability awareness outreach to local businesses/potential employers; system reform/advocacy statewide. **Utilization targets:** 15 NTPC, 48 SC.

Developmental Services Center Family Development Center \$545,903

Services: early detection through developmental screenings in a variety of community settings (especially homes), family-centered interventions maximizing the family's strengths, in familiar routines and environments, promoting a coordinated system of care. Comprehensive services: Developmental Therapy, Speech Therapy, Comprehensive Evaluation, Developmental Play Groups, Parent Support Groups, Child Care Consultation, and PLAY Project (evidence-based, with training certification required of staff). **Utilization targets:** 653 TPC, 200 SC, 300 CSE.

Developmental Services Center Individual & Family Support \$376,144 (CCMHB)

Services: supports based on medical, behavioral, residential, and personal resource considerations. Day supports in integrated, community-based settings with full-time staff; part-time program staff, including family members, cover evening and weekend needs. Program will also purchase services from another agency or independent contractor, if assessment. Includes a variety of services and supports planned in collaboration with families, teachers, and other support persons, including: assessment, planning, direct staff support, social skills/social thinking training, emergency respite, minor home modification, therapy/sensory/accessibility equipment, enhanced independent living skills training, legal funding and support, various community activities (Tae Kwan Do, horseback riding lessons, overnight trips to art classes, fitness club memberships, etc.) **Utilization targets:** 21 TPC, 26 NTPC, 5 SC, 2 CSE.

Developmental Services Center Integrated/Site-Based Services – Community 1st \$905,441 (two year contract)

Services: aligned with core values of Council of Quality and Leadership, this day program seeks to transition to greater community integration of service activities by: strengthening connections (family, friends, community) through volunteering, civic involvement, self-advocacy; participation in recreational, social, educational, fitness, creative, and other activities; making friends and acquaintances by regular

108

patronage of various local businesses and public spaces; job exploration driven by identified interests and long term employment goals. **Utilization targets:** 50 TPC, 20 NTPC, 4 SC, 4 CSE.

Developmental Services Center Service Coordination \$398,872

Services: intake screening, advocacy, assessment, information services, crisis intervention, 24 hour call emergency support, intermittent direct service, monitoring and development of individualized service plan, collaboration with Champaign County Regional Planning Commission's Pre-Admission Screening/Independent Service Coordination (PAS/ISC) unit when emergency or nursing home placement is sought, Social Security Representative Payee support, and linkage to (and application for) programs such as food stamps, medical card, health benefits for workers with disabilities, circuit breaker, SSDI and SSI benefits, housing support, and LIHEAP. As the central point of contact, collaboration with members of interdisciplinary team on person-centered service plan (PCP) and implementation, focused on integrated environments. **Utilization targets:** 305 TPC.

PACE, Inc. Opportunities for Independence \$30,000

Services: this program makes services and supports of the total agency, a Center for Independent Living, available to those with ID/DD: I&R, skills training, peer counseling, advocacy, transition; single point of access for DD systems of care, linkage to appropriate services. PCP is said to be 'inherent within the concept of consumer control' (philosophy of the total agency) and broadened by it. In this program, that consumer control and philosophy are enhanced by career interest, job etiquette, on the job conflict resolution, and pre-employment skills training, consistent with Employment First Act; residential support through housing search and homeownership skills training; self-advocacy support; individual and small group training; participants have control over individual goals and approach through an Independent Living Plan, reviewed quarterly; program itself is reviewed by a Consumer Advisory committee. **Utilization targets:** 20 TPC, 10 NTPC, 37S SC, 15 CSE.

United Cerebral Palsy Land of Lincoln Vocational Services \$86,475

Services: extended job coaching and case management for those working; training (work readiness, soft skills, etc.), interest assessment, and job development for those seeking work or to improve skills. Often continues supports for those previously funded by Division of Rehabilitation Services (DRS.) Also offers 8 week janitorial program to those interested. Transportation not provided. Staff provide training and coaching services at work sites county wide, as well as transportation training. **Utilization targets:** 50 TPC, 160 SC, 70 CSE.

109

14.B.

Planning for the Executive Director Search for the Champaign County Mental Health Board and Developmental Disabilities Board. April 2016

(Note: Funds for conducting search were approved at Feb. DDB and March MH meetings.)

1. Establish criteria for job—see attached- Board members asked to respond with comments (April)

2. Executive Committee (Presidents and V-Presidents) identify the search committee membership—range of 6-8 (April) (Nominations were requested)

- a. 2 MHB members (Fowler, Moore)
- b. 2 DDB members (Smith, Ruesch)
- c. 1-2 consumer representatives who receive services in Champaign County
- d. 2 community representatives who have backgrounds in human resources, developmental disabilities and/or mental health;

Members of the search committee report through an elected chair to both Boards. They maintain confidentiality regarding candidates until such time as the individual candidates are finalized and agree to be publicly identified.

3. Delegate to search committee: (April to early June)

- a) identify venues for advertising (based on staff and community input)
- b) develop rubric based on attached criteria for evaluating written applications
- c) develop initial phone interview questions and rubric for responses to interview
- d) conduct phone interviews with promising candidates
- e) based on interviews, identify top tier and request references; notify them that the search will become public
- f) conduct reference checks

4. Bring list of finalists to both Boards for approval and make public (June)

5. With Boards develop interview schedule and meet and greets that will include CCDB/MHB Board members, MHB/DDB Staff, representatives from agency/service providers who receive funding from Board as well as consumers, county and city administrators, and elected officials who indicate an interest in the process. Interview schedule to be developed by search committee once preferred candidates are identified. (June)

6. Conduct interviews with public notice (June-July)

7. Collect feedback from all concerned participants. Summarize the feedback, use this and responses to interview questions, reference checks to identify finalist(s). (June-July).

110

8. Conduct negotiations with preferred candidate using Mental Health Board personnel policies (July-Aug)



**Executive Director, Champaign County Mental Health and
Developmental Disabilities Boards**

4/4/16

Criteria:

- Can articulate a vision of community mental health
- background and education in a mental health or disability area
- skills as a public administrator managing a complex organization supported by public funds
- advanced degree, or baccalaureate degree with equivalent advanced experience, in a field relevant to mental health, substance abuse, developmental disabilities, or health care.
- Experience in program administration or management
- strong ability to communicate with citizens, service providers, and public officials, including preparation of reports, program evaluation, and proposal processes
- working knowledge of Medicaid Law and requirements; managed care operations; relevant State of Illinois Administrative Rules.
- reports to both the Mental Health Board and the Developmental Disabilities Board
- Collaborates with other public bodies in Illinois and appropriate national organizations
- Committed to addressing disparities in service access and efficacy; promoting cultural and linguistic competency.

112

The Executive Director manages and oversees a budget of approximately \$7 million generated by referenda-based tax levies in Champaign County for the support of persons with mental health challenges, substance abuse disorders, intellectual disabilities, developmental disabilities, and related challenges. The position is funded from these tax levies. The position requires a person with a background and education in a mental health or disability area and skills as a public administrator managing a complex organization supported by public funds.

Education and experience: The minimum requirements are an advanced degree, or baccalaureate degree with equivalent advanced experience, in a field relevant to mental health, substance abuse, developmental disabilities, or health care. Experience in program administration or management is required. Evidence of strong ability to communicate with citizens, service providers, and public officials, including preparation of reports, program evaluation, and proposal processes is required. The person prepares contract terms and leads contract negotiations with applicants and providers. Additional experience includes: working knowledge of Medicaid Law and requirements; managed care operations; relevant State of Illinois Administrative Rules.

The Executive Director reports to both the Mental Health Board and the Developmental Disabilities Board, and is responsible for collaboration and coordination with other state and county-funded social services. Collaboration with other public bodies in Illinois and appropriate national organizations is expected. The Director must demonstrate a commitment to addressing disparities in service access and efficacy by promoting cultural and linguistic competency.

113

14.F.

CCDDB 2016 Meeting Schedule

Board Meetings

8:00AM and Noon, variously

Brookens Administrative Building, Lyle Shields Room

1776 East Washington Street, Urbana, IL

May 18, 2016 – 8:00 AM

June 22, 2016 – 8:00 AM

July 20, 2016 – Noon

This schedule is subject to change due to unforeseen circumstances.

Please call the CCMHB/CCDDB office to confirm all meetings.

114

CCMHB 2016 Meeting Schedule

First Wednesday after the third Monday of each month--5:30 p.m.
Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St., Urbana, IL (unless noted otherwise)

January 20, 2016
February 17, 2016
March 23, 2016
April 20, 2016
May 18, 2016
June 22, 2016
July 20, 2016
August 17, 2016
September 21, 2016
October 19, 2016
November 16, 2016
December 14, 2016

**This schedule is subject to change due to unforeseen circumstances. Please call the CCMHB-CCDDB office to confirm all meetings.*

115