



# 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 (CCDDDB) AGENDA

**Wednesday, November 16, 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
2. Roll Call – Stephanie Howard-Gallo
3. Additions to Agenda
4. Citizen Input/Public Participation  
*The CCDDDB reserves the authority to limit individual public participation to five minutes and limit the total time to 30 minutes.*
5. CCMHB Input
6. Approval of CCDDDB Board Meeting Minutes\* **(pages 4-7)**  
A. *Minutes from 10/19/16 meeting are included. Board action is requested.*
7. President's Comments – Ms. Deb Ruesch
8. Executive Director's Report – Lynn Canfield
9. Staff Report – Shandra Summerville **(pages 8-9)**
10. Consultant Report **(pages 10-12)**  
*A report from Ms. Barb Bressner on the 10<sup>th</sup> Annual disAbility Resource Expo is included in the packet for information.*
11. Agency Information
12. Financial Report  
A. Approval of Claims\* **(pages 13-14)**  
*Included in the packet. Board action is requested.*
13. New Business

A. UIUC Student Presentations

*Students working on various projects through the Community Learning Lab will present on their results.*

B. Integration Transition Successes

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

C. Letter to the Editor (**page 15**)

*A copy of Joyce Dill's letter to the News Gazette, on the issue of DSP wage increase legislation, is included in the packet for information only.*

D. First Quarter FY2017 Agency Service Activity Reports (**pages 16-40**)

*Copies of an overview of all CCDDDB and CCMHB funded ID/DD programs and those programs' first quarter service activity reports are included for information only.*

14. Old Business

A. Draft FY2018 Allocation Criteria (**pages 41-48**)

*A Briefing Memorandum is included in the packet. This is the same version which appeared in the October 19<sup>th</sup> meeting packet.*

B. Draft Three Year Plan with FY2017 Objectives (**pages 49-57**)

*A Briefing Memorandum describing stakeholder comments on the Draft Plan is included in the packet for information only. The Draft Plan is attached, with related changes added.*

C. Assessment of Needs (**pages 58-83**)

*A Briefing Memorandum summarizing various assessments is included in the packet for information only.*

D. Multi-Year Contracting (**pages 84-87**)

*A Briefing Memorandum on multi-year contracting is included in the packet for information only.*

E. Employment First Update

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

F. CILA Update

*An oral report will be provided at the meeting.*

G. Meeting Schedules (**pages 88-90**)

*Copies of CCDDDB meeting schedule and allocation process timeline are included in the packet for information.*

H. **Ligas Family Advocate Program Acronym Sheet (pages 91-92 )**

*A list of useful acronyms, compiled and published by the Ligas Family Advocacy Program, is included for information.*

15. Board Announcements

16. Adjournment

*\*Board action requested*



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

*Minutes –October 19, 2016*

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

**DRAFT COPY**

*3:30 p.m.*

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**MEMBERS PRESENT:** Joyce Dill, David Happ, Deb Ruesch

**MEMBERS EXCUSED:** Cheryl Hanley-Maxwell, Mike Smith

**STAFF PRESENT:** Lynn Canfield, Mark Driscoll, Shandra Summerville

**STAFF EXCUSED:** Nancy Crawford, Stephanie Howard-Gallo

**OTHERS PRESENT:** Janice McAteer, Annette Becherer, Felicia Gooler, Developmental Services Center (DSC); Becca Obuchowski, Community Choices; Barb Bressner, Consultant; Lisa Benson, Regional Planning Commission (RPC); Kathy Kessler, Rosecrance; Becca Obuchowski, Community Choices; Elise Belknap, Head Start; Beth Chato, League of Women Voters (LWV); Maggie Potter, Victoria Palmer, Brooke Garren, University of Illinois; Jermaine Raymer, Persons Assuming Control of their Environment (PACE)

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**CALL TO ORDER:**

Ms. Deb Ruesch, CCDDB President, called the meeting to order at 3:30 p.m.

**ROLL CALL:**

Roll call was taken and a quorum was present.

**ADDITIONS TO AGENDA:**

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An agenda item was added. "Contract Amendment Process Expectations and Practice" will be added under "New Business".

**CITIZEN INPUT:**

None.

**CCMHB INPUT:**

None.

**APPROVAL OF CCDDDB MINUTES:**

Minutes from meetings on September 21, 2016 and October 12, 2016 were included in the Board packet.

**MOTION:** Ms. Dill moved to approve the minutes from the September 21, 2016 CCDDDB meeting as presented in the Board packet. Mr. Happ seconded the motion. A voice vote was taken and the motion passed.

**MOTION:** Ms. Ruesch moved to approve the minutes from the October 12, 2016 CCDDDB meeting as presented in the Board packet. Ms. Dill seconded the motion. A voice vote was taken and the motion passed.

**PRESIDENT'S COMMENTS:**

Ms. Ruesch expressed her gratitude to everyone who worked on the disABILITY Expo.

She also welcomed UIUC Learning Lab students who will be doing a presentation on their anti-stigma research later in the meeting.

**EXECUTIVE DIRECTOR'S REPORT:**

Ms. Canfield announced a training event on Trauma and Implicit Bias will be held on Monday, October 24<sup>th</sup> from 12:30 p.m. until 4:30 p.m. at the Brookens Administrative Center. The event is being done by the C-U Neighborhood Champions.

**STAFF REPORTS:**

A staff report from Ms. Summerville was included in the packet.

**CONSULTANT'S REPORT:**

Ms. Bressner provided a verbal update on Expo activities.



**AGENCY INFORMATION:**

Jermaine Raymer from Persons Assuming Control of their Environment (PACE) spoke regarding a request asking to redirect staff effort to support students in transition.

**FINANCIAL REPORT:**

The claims report was included in the Board packet.

**MOTION:** Ms. Ruesch moved to accept the claims reports as presented. Mr. Happ seconded the motion. A voice vote was taken and the motion passed.

**NEW BUSINESS:**

**Anti-Stigma Strategies:**

Maggie Potter, Brooke Garren, and Tori Palmer from the University of Illinois shared their initial research on anti-stigma efforts across the county. Copies of their Powerpoint were distributed to the CCDDDB.

**Integration Transition Successes:**

Ms. Annette Becherer from Developmental Services Center (DSC) provided an update on LEAP. Twenty to thirty new businesses have been reached.

**FY2016 Agency Utilization Summaries:**

Summaries of data reported during FY16 for all DD/ID programs funded by the CCDDDB or the CCMHB was included in the Board packet for review.

**Draft FY2018 Allocation Criteria:**

A Briefing Memorandum was included in the Board packet. This document is draft and suggestions are welcome. The final document will be presented in November or December for Board action.

**Multi-Year Contracting:**

A Briefing Memorandum on Multi-Year Contracting was included in the packet for review and discussion.

**Contract Amendment Process Expectations and Practice:**

A Briefing Memorandum was included in the Board packet. The current process should be discussed and reviewed by Board members.

**OLD BUSINESS:**

**2017 Alliance for Inclusion and Respect (AIR) Event:**

A Decision Memorandum was included in the Board packet.



**MOTION:** Ms. Dill moved to defer action on the Alliance for Inclusion and Respect Event until a full Board is present. Mr. Happ seconded the motion. All members voted aye and the motion passed.

**Employment First Update:**

No report.

**CILA Update:**

Ms. Canfield provided an update on finances and the staff crisis.

**Meeting Schedules:**

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

**BOARD ANNOUNCEMENTS:**

None.

**ADJOURNMENT:**

The meeting adjourned at 4:25 p.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

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## **November- Monthly Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator**

October was a full month of activities beginning of November starts with my first review of 2016 CLC Plans with providers. I will begin providing feedback and recommendations for the next few weeks.

Disability Expo- There were a total of 94 volunteers for the events. There were volunteers that also showed up on Monday to help with the unloading and putting things back in PNC Bank. I will attend the final meeting to talk about recommendations for the next year 2017.

Community Outreach/NAACP- I attended the NAACP November Meeting at this meeting there was a presentation from Jefferson Middle School. Principal Angi Franklin challenged her staff to actual engage the community where students live. The activity included all administrative staff, support personnel, and building service workers. This activity was done before the first day of school to show families that the staff from Jefferson cared about the students.

I have attended the CU Collaborative Conversations about Race in CU. This is an opportunity to begin to build relationships and solutions about how to address discussion about race and how to move the conversation more intentional. The collaboration has expanded and it was recommended that additional stakeholders become involved that would like to build the bridge of CU Race Relations.

**Cradle to Career-** I will participate in Kindergarten Readiness activities to spread awareness about the event.

The Family Conference at Windsor Road Church is November 12, 2016. I will present a workshop about how to begin talking about Race and Culture with children.

**Youth Mental Health First Aid** has updated the instructor's manual to include more up to date information and additional research. I provide instruction as a part of the Project Aware Grant in collaboration with Champaign Unit 4 School District. I also participated in a Webinar to discuss how to market Mental Health First Aid to community members.

My first CLC Review is with DSC. I will provide feedback and a desk review about their 4<sup>th</sup> quarter report.

**The School of Social Work students** – Will host two trainings

Ethical Communication- On Monday, November 28, 2016 1:30-3:30 Location TBA

Effective Collaboration- Monday, December 5, 2016 at 1:30-3:30 Location TBA

National Center for Cultural Competence: The National Center for Cultural Competence has developed a new leadership program for DD/IDD populations.



I had a conference call with the Director, Tawara Goode about work with DD/IDD populations and the Transitional Planning for Champaign County. I have begun reviewing best practices and researching the disparities within the DD/IDD Populations.

*“The Leadership Institute is a collaborative, multifaceted initiative with a goal to increase the number and capacity of leaders to advance and sustain cultural and linguistic competence (CLC) and respond to the growing cultural diversity among people with intellectual and developmental disabilities (I/DD) in the United States, its territories, and tribal communities. The Institute is funded over a five-year period through a Cooperative Agreement from the Administration on Intellectual and Developmental Disabilities (AIDD), Administration for Community Living, U.S Department of Health and Human Services. The Institute's activities include:*

*five annual Leadership Academies*

*a series of web-based learning and reflection forums for the I/DD network*

*long-term, tailored mentoring to selected organizations to assist them to achieve their cultural diversity and CLC goals. “*

*(Source: National Center for Cultural Competence [nccc.georgetown.edu/leadership/](http://nccc.georgetown.edu/leadership/))*

I have connected with the Center for Capacity Building for Minorities with Disabilities to begin learning about their Transitional Model and “A Roadmap to Personal Success: Student Manual.

I conducted a presentation at the GED program located on the campus of College of Southern Nevada. The class is focused on health careers and I gave an introduction presentation on Cultural Competence principles.

I met with Linda Tortorelli to begin foundational conversations about transition support for young adults with a DD/IDD in Champaign County and their families. We begin identifying the priorities and gaps in services experienced by this population:

- Robust Transitional Planning IEP meetings are not happening at the age of 14 ½
- -The Independent Service Coordination team is not present for all transition planning meetings in order to share information about PUNS and all of the adult services that are offered in Champaign County to provide more coordinated care.
- Students with 504 plans are not getting transition support plans and don't have access to services.

It is recommended that a broad group of community stakeholders begin to identify needs for the transition populations and recommend to the DDB how they can begin supporting transitional supports for individuals and families.

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**disABILITY Resource Expo: Reaching Out For Answers  
Board Report  
November, 2016**

Another successful Expo is in the books! The 10<sup>th</sup> anniversary Expo was held on Saturday, October 15<sup>th</sup> at the Fluid Event Center. This year's Expo was a busy and happening place, with an estimated 1500-2000 in attendance.

I'd like to extend a huge thanks to our Steering Committee, who not only planned, but carried out so many of the tasks related to making this Expo a reality. We continue to have such a strong, highly dedicated group of people on this committee, and for that we are so grateful! They readily jump in to assist with everything from fundraising to promotion to set-up and tear down, and everything in between. I am truly humbled by the wonderful people I am so privileged to work with on this important event in our community.

**Exhibitors** – 92 exhibitors spent the day sharing information on services, resources and new technology geared toward assisting individuals with disabilities and their families. There were 19 for-profit and 73 not-for-profit exhibitors who participated this year. Thirteen exhibitors were new to the Expo for 2016. General categories represented by exhibitors were Advocacy, Legal and Service Organizations, Education and Recreation, Health Care and Equipment, Self-Help and Support Groups, Vocational and Residential, and Transportation Resources. We were pleased, again this year, to bring some great new technology recruited from the Abilities Expo, which is a national Expo we attend each year in Schaumburg. Obi, a robotic self-feeding system and uControll, a remote controlled door system brought their exciting new technology to this year's Expo.

Exhibitors enjoyed a wonderful hospitality center, provided courtesy of Einstein Bagels, County Market and Meijer. A special thanks to Nancy Crawford for securing these sponsors again this year to help our exhibitors feel welcome and appreciated. We also upgraded our event venue with pipe and drape around each exhibitor booth. Exhibitors voiced that they were pleased with this addition, and that it really helped with the noise level, making it easier to chat with their visitors.

Visitors enjoyed this year's scavenger hunt focused on Employment First, with participants attempting to locate, within our exhibitor area, pictures of local employees with their employers at their various worksites. A special thanks goes out to DSC and Community Choices for organizing this great game for our visitors.

**Marketing/Sponsorship** – We were very fortunate to have some wonderful TV promotion this year through WCIA (CI Living and The Morning Show), and WICD (Doug Quick). Stevie Jay Broadcasting, WDWS/WHMS and WBGL all helped to get the word out through interviews, psa's and paid ads. We advertised on MTD buses (also interior of 75 buses), window clings on vehicles, yard signs, newspaper ads (\$1000 grant from News-Gazette), a special display in the Champaign City Building, our Expo website, e-mail blitz's and social media. Committee members also distributed 8,700 brochures (English & Spanish), 700 posters, and more than 14,000 school flyers (English & Spanish).

The 2016 edition of the Expo Resource Book was developed and distributed to Expo visitors, and will continue to be distributed throughout the coming year through our various community partners. Another huge thank you to Jim and Pat Mayer for taking on the awesome and rather daunting task of developing this amazing resource. They did a great job!

We held a 50/50 raffle and a raffle for a pair of tickets donated by Krannert Center for the Performing Arts during the Expo. These raffles, along with booth fees and several other fundraisers, have really helped to off-set some of our event costs.

**Accessibility** – Five ASL Interpreters, 2 personal assistants, mobility accommodations, and much more were provided to enable our visitors to have the accommodations they needed to get around and explore the Expo. Large print maps were made available, and alternate formats were available per individual requests. We were, also, able to provide a Spanish translator to a family who needed that resource. An information/Accessibility booth was manned throughout the day to ensure all needs were appropriately addressed.

**Entertainment** – A big shout out to our friends at Stevie Jay Broadcasting for sending DJ's, Diane Ducey and Josh Laskowski to be with us for the day. They did all of the announcing, introduced our entertainment, and kept everything rolling on the main stage, and in the Artistic Expressions Room throughout the day. They did a fabulous job, and took a lot of pressure off of members of our Steering Committee. The entertainment this year was second to none! As usual, our AMBUCS friends presented one of their fabulous Amtrykes to a young lady to further her therapy and mobility. First Gig Rock & Roll Camp for Kids entertained us next. These young people did a wonderful job. First Gig, also, set up an interactive area at their booth to allow kids to try out different instruments, and learn how they might get involved in their annual camp for kids with special needs. We were pleased to have Champaign-Urbana Theatre Company's Penguin Project perform a few numbers from Aladdin, Jr., the play they were doing the weekend of the Expo. This is the first year in Champaign for this national program that gives children with special needs an opportunity to participate in the performing arts. I dare say, it will certainly not be their last. These talented young actors/actresses and their mentors gave an amazing performance! Individuals from C-U Special Recreation's bocce ball team put on a wonderful demonstration of their skills for our visitors. What a fun sport! A Jazz and Latin band, Ryan & Nucleus performed for our visitors. They were wonderful, also! Artists, entrepreneurs and visitors to the Artistic Expressions room enjoyed music by classical pianist, Borah Kang. Suffice to say, we had talent galore at the 2016 Expo!

**Children's Activities** - The Children's Activity Room sponsored by our friends at Flaghouse and First Federal Savings Bank of C-U was a happening place again this year. Children enjoyed lots of new games donated by Flaghouse, a bounce house, face painting, snacks and more. Of course, our friend, Joe the Balloon Man, was there creating some awesome balloon animals for the kids again this year too.

**Artistic Expressions** – Another big thanks goes out to Thrivent Financial, sponsor of the Artistic Expressions Room. They treated our artists to lunch and some great snacks during the day, and provided some wonderful volunteer help both Friday and Saturday. One of their volunteers even jumped in to assist those of us who began working very early Saturday morning! A total of 26 talented artists and entrepreneurs showcased and sold one-of-a-kind handmade works, including paintings, photography, jewelry, children's books, crocheted/knitted items, crafts, etc. As always, Vickie Tolf did a phenomenal job coordinating this important area of the Expo.

**Volunteers** – Becca Obuchowski and Shandra Summerville did a great job coordinating volunteers to provide needed support in the various areas of the Expo this year. We were so fortunate to have great volunteers



working with us for our Friday set-up, during the event on Saturday, and on Monday when we packed everything away for the year.

AND THAT'S A WRAP!

Respectfully submitted  
Barb Bressner, Consultant

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/04/16

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VENDOR NO	VENDOR NAME	TRN B	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	DEVLMTNL DISABILITY BOARD									
90	CHAMPAIGN COUNTY TREASURER										
	11/01/16	05 VR 108-	112	550122	11/04/16	108-050-533.07-00	MENT HLTH BD FND 090	PROFESSIONAL SERVICES	NOV ADMIN FEE	31,487.45	
									VENDOR TOTAL	31,487.45 *	
161	CHAMPAIGN COUNTY TREASURER										
	11/01/16	05 VR 108-	105	550128	11/04/16	108-050-533.92-00	REG PLAN COMM FND075	CONTRIBUTIONS & GRANTS	NOV DECISION SUPPOR	4,052.00	
									VENDOR TOTAL	4,052.00 *	
18203	COMMUNITY CHOICE, INC										
	11/01/16	05 VR 108-	106	550152	11/04/16	108-050-533.92-00	SUITE 419	CONTRIBUTIONS & GRANTS	NOV COMMUNITY LIVIN	5,250.00	
									VENDOR TOTAL	5,250.00 *	
19900	CTF ILLINOIS										
	11/01/16	05 VR 108-	103	550160	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV NURSING	500.00	
	11/01/16	05 VR 108-	103	550160	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV ADVOCACY CENTER	6,250.00	
									VENDOR TOTAL	6,750.00 *	
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC										
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV APARTMENT SVCS	34,778.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV CLINICAL SVCS	14,916.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV COMMUNITY EMPLO	19,124.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV CONNECTIONS	7,296.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV EMPLOYMENT 1ST	6,667.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV FAM DEV CENTER	46,857.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV INT SITE SVCS	75,453.00	
	11/01/16	05 VR 108-	108	550163	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV SVC COORD	34,237.00	
									VENDOR TOTAL	239,328.00 *	
22816	DOWN SYNDROME NETWORK										
	11/01/16	05 VR 108-	104	550166	11/04/16	108-050-533.92-00		CONTRIBUTIONS & GRANTS	NOV DOWN SYNDROME	1,250.00	
									VENDOR TOTAL	1,250.00 *	

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

11/04/16

PAGE 9

VENDOR TRN B TR	TRN NO	PO NO	CHECK NO	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND								
35550	IL ASSOC OF MICROBOARDS & COOPERATIVES							
11/01/16 05 VR 108-	109	550181	11/04/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV BUILD INCLSV CO		5,357.00
						VENDOR TOTAL		5,357.00 *
54930	PERSONS ASSUMING CONTROL OF THEIR							
11/01/16 05 VR 108-	110	550196	11/04/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV OP FOR INDEPEND		3,379.00
						VENDOR TOTAL		3,379.00 *
61780	ROSECRANCE, INC.							
11/01/16 05 VR 108-	107	550207	11/04/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV COORD OF SERVIC		2,662.00
						VENDOR TOTAL		2,662.00 *
76107	UNITED CEREBRAL PALSY LAND OF LINCOLN							
11/01/16 05 VR 108-	111	550217	11/04/16	108-050-533.92-00	CONTRIBUTIONS & GRANTS	NOV VOCATIONAL SVCS		7,206.00
						VENDOR TOTAL		7,206.00 *
						DEVLMTL DISABILITY BOARD	DEPARTMENT TOTAL	306,721.45 *
						DEVLPMNTL DISABILITY FUND	FUND TOTAL	306,721.45 *
REPORT TOTAL *****								633,029.26 *

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13.C

# Override veto on caregivers' wages

Fri, 10/28/2016 - 7:00am | The News-Gazette (http://www.news-gazette.com/users/digitalmedia)

My family, like thousands of families across Illinois, has a loved one with a developmental disability who depends on direct support staff to assist him/her in meeting everyday needs such as eating, dressing and bathing.

The direct support workforce is essential to the lives of people with developmental disabilities, their families and the state as a whole. With the help from direct support staff, people with developmental disabilities are able to live as independently as possible and become part of their communities.

As a member of the Champaign County Developmental Disability Board, I hear about the status of the agencies doing this work. My son's agency and hundreds of others are struggling to find people to do this critical work because they can't compete with the wages paid by fast-food chains, retail stores and distribution centers.

The General Assembly recognized the value of direct support staff and passed HB 5931 this spring, which would require the state to increase the wages they pay for direct support staff for the first time in eight years.

Gov. Bruce Rauner vetoed HB 5931 and now my family is joining people throughout our community by asking our state and local lawmakers to show support for people with disabilities by voting "yes" to override the veto.

This is the right decision for the people in our state who require extra care and for those who provide it.

JOYCE DILL

Urbana

Join the Conversation <sup>(0)</sup>

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**Champaign County Developmental Disability Board Program Investments, FY2017 (July 1, 2016 to June 30, 2017)**

Agency	Program Name	Focus	Amount	Summary
Autism Society of Illinois	CU Autism Network	Parent Support	12,000	Autism Society of Illinois: Champaign-Urbana Autism Network provides a network of sharing, caring, support, and understanding for anyone living or working with persons on the spectrum. We address all areas of development and ages, along the whole spectrum. Of course, people with autism are welcome too. Our FREE monthly meetings feature guest speakers, childcare, networking, and support. They are held the first Thursday of each month September - May. Visit <a href="http://cuautisnetwork.org">cuautisnetwork.org</a> for more info and meeting location. Additionally, we hold a variety of FREE family events like a swim party cookout, bowling, and mini golf.
CILA Expansion (purchase of houses)	Individual Advocacy Group provides CILA services	Independent Living	50,000	LAG helps individuals with special needs live full, self-directed lives with dignity and independence. LAG provides a full array of quality, customized, outcome-focused services for people with developmental, intellectual, emotional, behavioral, neurological or mental disabilities. We enable individuals to define and pursue their life goals and interests, develop skills to reach those goals, grow increasing personal responsibility, engage their community, and lead active, enjoyable, independent lives. The agency offers residential and day services to individuals living in board-owned CILAs as well as family-owned residences in the community.
CTF Illinois	CTF Illinois Advocacy Center	Employment and Social	75,000	The mission of CTF ILLINOIS Advocacy Center of Champaign is to empower each individual we support to live the life they want to live. As advocates, we develop the tools and experiences we need to take greater control over our lives. We help speak up for people in the community who feel they have no voice, lobby local and state government to bring about change, and work in the community. We also contribute to our community by organizing community events, joining social clubs, and volunteering at local businesses and organizations.
16	CTF Illinois Nursing	Independent Living	6,000	CTF ILLINOIS provides 24 hr. residential services to seven individuals in Champaign. Some of these individuals are aging and have developed related medical issues (i.e. Dementia, heart failure, diabetes). Nursing services include, but are not limited to: coordination of medical nursing care, medication training for staff members, quality assurance of medical concerns and medication errors, regular site visits, medication checks and physician order sheet review, quarterly medication, annual assessments, on call 24/7 for emergencies, and providing information to and participating in Interdisciplinary Team meetings in the development of the residents person centered plan.
Champaign County Down Syndrome Network	CC Down Syndrome Network	Parent Support	15,000	The Champaign County Down Syndrome Network serves families who have members with Down syndrome in Champaign County & East Central Illinois. The DSN offers support to families by providing current DS related information for members, parents, professionals, and the general public. DSN reaches out to new parents, providing many networking & social opportunities as well as education, support & connections to local resources. DSN hosts many community awareness events including an annual Buddy Walk that draws 1000-2,000 people each year, helping to promote inclusion for individuals with Down syndrome in our community.
Champaign County Regional Planning Commission-Community Services	Decision Support Person for CCDDDB	Planning, Case Mgt	48,622	The Decision Support program targets individuals with Intellectual/Developmental Disabilities (I/DD) who are eligible for, but not receiving DHS waiver funded services. Staff schedule outreach events at high schools throughout Champaign County and at community events, engaging underserved populations who are not in school. Completion of the Preference Assessment continues during new PUNS enrollments and service enrollment for persons transferring into Champaign County for services. For persons seeking CCDDDB funded services, staff confirm eligibility for individuals on the PUNS waiting. Person awaiting funding will be offered services to develop a conflict-free individual service plan.
Community Choices, Inc.	Community Living	Independent Living	63,000	PERSONAL DEVELOPMENT: These are sessions in group settings covering a variety of topics, all focused on maximizing your potential and achieving your goals, while building skills along the way. COMMUNITY TRANSITIONAL SUPPORT: Supporting participants with all aspects of the moving out process, including finding housing, identifying roommates if desired, planning and building community connections.

13.D

<p><b>Developmental Services Center</b></p>	<p>Apartment Services</p>	<p>Independent Living</p>	<p>417,341</p>	<p>Apartment Services provides support to people with ID/DD that reside in their own home in the community (an apartment/house of their choice which may include DSC's semi-supported apartment building, a HUD subsidized, secured apartment building). The program has three primary goals to support participants: 1. Promote independence by learning/maintaining skills within a safe environment; 2. Provide long-term/on-going support in areas that cannot be mastered; 3. Provide increased support as needed due to aging, deteriorating health, or other chronic conditions that jeopardize their ability to maintain their independence. Emergency Response is available to individuals in this program to support for those needing assistance after hours and on the weekends.</p>
	<p>Clinical Services</p>	<p>Various</p>	<p>178,986</p>	<p>The Clinical Services Program provides an array of clinical supports and services to children and adults with ID/DD. Consultants under contract with DSC include one Licensed Clinical Psychologist, four Licensed Clinical Social Workers, two Licensed Clinical Professional Counselors, one Licensed Professional Counselor, a Licensed Marriage and Family Therapist, one Psychiatrist, a Speech Therapist and an Occupational Therapist. Consultants meet with individuals on site and in private practice. Individuals receive support from DSC staff and/or family members for scheduling and transportation, if necessary. Outcomes are strengthened through careful and integrated interdisciplinary team planning consistent with person-centered practice to include services such as assessment, medication review, crisis intervention, etc.</p>
<p>17</p>	<p>Community Employment</p>	<p>Employment</p>	<p>229,484</p>	<p>Helping people to secure and maintain jobs. Meeting with the individual and others they want to include in the development of an employment plan head best results. Meeting employment goals of the job seeker and needs of the employer is the desired outcome. Job searches based on the interests of the individual will result in an array of businesses being explored and a growing number of businesses that hire individuals with ID/DD. Abbreviated sample of activities may include: Discover interests, strengths, personal goals as it pertains to employment; Employer research - visiting companies, researching online; Resume/portfolio development; Interview prep and job skill development; Identify potential niches in local businesses that emphasize the job seeker's strengths; Help the person learn to advocate for him/herself on the job and identify natural supports.</p>
	<p>Connections</p>	<p>Social Connection; Self-Advocacy Support</p>	<p>87,550</p>	<p>Building connection, companionship, and contribution in the broader community for people wanting support to participate. Person-centered and self-defined! Individual and small group activities are based on individual interest ranging from a few hours to overnight plans/events. Current examples include: Self-Advocacy - fund-raise throughout the year to attend the Speak Up and Speak Out Summit sponsored by the ICDD and attend trainings offered by the national advocacy group, Alliance For Change; "Learning Is Sweet" - Diabetes support group, with educational activities including carb-counting, heart-health, skin/feet protection, emergency skill training for high/low blood sugar readings, and cooking healthy recipes that are converted to picture format for participants to use at home; Artists displaying/selling their art at the Resource Expo, Alliance for the Promotion of Acceptance, Inclusion and Respect Events connected with Ebertfest; and Other activities as identified by participants.</p>
	<p>Employment First</p>	<p>Employment, Community Awareness</p>	<p>80,000</p>	<p>Per the Champaign County Employment First Plan that was drafted and presented to the CCDDB/MHB in November 2014, DSC and Community Choices are collaborating to create the infrastructure to implement Employment First. Deliverables include: 1. Individual/family education events for people currently participating in day program, on waiting lists for services and transitioning out of school. I.e. success stories, embracing the idea of employment, guardianship, benefits planning. 2. Staff training/consultation - a national expert will facilitate a shift in culture to include a Train-the-trainer component for long term sustainability. 3. Business/employer outreach - develop/implement a disability awareness campaign for local employers. 4. System Reform - engage in communication/advocacy with various state agencies/representatives.</p>
	<p>Family Development Center</p>	<p>Young Children</p>	<p>562,280</p>	<p>Serves infants, toddlers, and young children, age birth to five years, with or at risk of developmental disabilities and their families, in Champaign County. Early detection and prompt, appropriate intervention can improve developmental outcomes. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments. As a home-based model of support, families guide services and supports with sensitivity to their own personal values. FDC services are responsive to the needs of families within this community and promote a coordinated system of care including but not limited to developmental and speech therapies, play groups and daycare consultation.</p>

<p>Integrated/Site Based Services Community 1st</p>	<p>Employment and Social</p>	<p>905,441</p> <p>This day program continues its transition to a community-based/integrated service model. Person-centered practices with individuals focus on building networks of support, strengthening community connections, employment opportunities and enhancing quality of life through meaningful activities. Emphasis will be on strengthening connections with friends, family, and local community through volunteering, civic duty, citizenship, and self-advocacy opportunities; enhancing quality long term employment goals. The focus is on personal and individualized supports which is a shared priority area for CCDDDB and a core value for the Council of Quality and Leadership. The success of this transformation to increased community access/experience for this program works in tandem via the collaboration with Community Choices and DSC via Employment First described below. While this Community First application is person-centered with specific consumer access/outcomes, the Employment First application aims to widen the net of opportunities through individual/family education, business/employer outreach and staff training to expedite our plans toward fuller community and employment opportunities as a whole.</p>
<p>Service Coordination</p>	<p>Planning, Case Mgt</p>	<p>410,838</p> <p>Service Coordination for people with ID/DD who request support to enhance or maintain their highest level of independence in the community, at work, and in their home through person-centered practices. The focus is on the hopes, dreams, and aspirations for planning and achieving outcomes for each person with support based on trust and relationships consistent with the values of the CQL. There is a clear focus on individual strengths, preferences, and needs to define the level of support needed and to advocate for supports and services to optimize independence and quality of life to include community, work, learning, and recreational environments. Level of support ranges from intermittent activities such as issues related to acquiring/maintaining social security and health insurance benefits to emergency/crisis intervention.</p>
<p>Illinois Association of Microboards and Cooperatives</p>	<p>Planning, Awareness</p>	<p>64,278</p> <p>LAMC: Building Inclusive Communities is an effort to demonstrate the power of merging family, community and professional expertise in supporting 12 adults with ID/D who want a better quality of life. Individual teams use their creativity and connections over time to create new options based on person-centered planning.</p>
<p>PACE</p>	<p>Case Mgt, Self-Advocacy Support</p>	<p>40,546</p> <p>P.A.C.E.'s Opportunities For Independence (OIP) assists people with developmental disabilities increase or maintain independence through individual &amp; peer counseling, implementation of independent living plans, skills training in areas such as budgeting, advocacy (systemic and self), using technology for access, job readiness, social skills, housing search and many other skills. P.A.C.E. consumers gain knowledge of local resources build confidence, and develop a knowledge of disability rights while they develop their own disability pride. The consumer identifies goals and develops their plan to achieve them with the assistance of a facilitator. We don't call ourselves case managers because the consumer manages their case with our facilitation. P.A.C.E. welcomes inquiries about this or one of our many other programs.</p>
<p>Rosecrance Champaign-Urbana</p>	<p>Case Mgt, Awareness</p>	<p>32,903</p> <p>Intensive Case Management, with a person-centered, strength-based approach is provided to individuals who live in Champaign County with a diagnosed with a developmental disability and a mental illness. Emphasis is placed supporting individuals with intellectual disabilities living in residential settings or families that are struggling with maintaining their loved ones in the community. The goal is to better coordinate the care between the various services providers in an effort to improve treatment and reduce hospitalization or crisis whenever possible.</p>
<p>United Cerebral Palsy Land of Lincoln</p>	<p>Employment</p>	<p>86,475</p> <p>UCP provides vocational support services to individuals with disabilities in Champaign County. Services include extended job coaching and case management to individuals currently working in the community as well as vocational training and job development to individuals with disabilities who have lost employment or want to improve their job skills. UCP provides job coaching/ support services to allow individuals to continue working in their community, receive promotions, and have the opportunity to work more hours. Individuals looking for employment receive vocational training to help prepare them for the workforce and to increase their employability skills. UCP works with participants on assessments, interviews and career exploration and assists the individuals in developing a profile that includes information on their skills, interests, preferences and strengths.</p>
<p>CCDDDB Total Investment in Programs</p>		<p>3,415,744</p>

**Champaign County Mental Health Board's DD Program Investments, FY2017 (July 1, 2016 to June 30, 2017)**

Agency	Program Name	Focus	Amount	Summary
CILA Expansion (purchase of houses)	Individual Advocacy Group provides CILA services	ID/DD	50,000	LAG helps individuals with special needs live full, self-directed lives with dignity and independence. LAG provides a full array of quality, customized, outcome-focused services for people with developmental, intellectual, emotional, behavioral, neurological or mental disabilities. We enable individuals to define and pursue their life goals and interests, develop skills to reach those goals, grow increasing personal responsibility, engage their community, and lead active, enjoyable, independent lives. The agency offers residential and day services to individuals living in board-owned CILAs as well as family-owned residences in the community.
Champaign County Regional Planning Commission - Head Start/Early Head Start	Social Emotional Disabilities Services	ID/DD	55,645	Champaign County Head Start/Early Head Start is a federally funded program that promotes the school readiness of children ages 5 and under by enhancing their cognitive, health, social, and emotional development. The program also supports families in reaching their goals and building their family's future.
Community Choices	Customized Employment	ID/DD	70,000	DISCOVERY & JOB DEVELOPMENT: Learns the strengths and interests of each participant, expanding skills and assisting each person with finding a job that fits their goals and utilizes their talents. EMPLOYMENT SUPPORT: Develops supports for the job, job coaching, as well as supports each person to expand job roles and thrive in the workplace.
	Self Determination Support	ID/DD; Parent and Self-Advocacy Support	70,000	SOCIAL OPPORTUNITIES: offers a range of options to build relationships, including weekly social events around town, support with organizing your own small group, and connecting with Community Choices members and people in the community. LEADERSHIP & SELF-ADVOCACY: Includes an 8-week leadership course developed and facilitated by people with and without disabilities as well as trips to join advocacy efforts at the state level. OPEN CHAMPAIGN: This is a collaborative event series focused on building community through the power of shared experiences. FAMILY SUPPORT AND EDUCATION: Offers monthly meeting which arm you and your family with knowledge about the system and services.
Developmental Services Center	Individual & Family Support	ID/DD	387,428	DSC's IFS program serves children/adults with ID/DD with priority consideration given to individuals with significant behavioral, medical, training, or support needs. This model reflects the shared philosophy between provider and funder in that the IFS program is a flexible and effective type of choice-driven service to individuals and families in a variety of integrated community settings. Individuals/families may choose to purchase services from an agency, or an independent contractor/vendor, based on the specific need of the individual and their family. The program continues to provide creative planning, intervention, home/community support, and training in close collaboration with families, teachers, and other members of the individual's support circle.
	<b>CCMHB Total Investment in DD Programs</b>		<b>633,073</b>	

# Consumer Service Report

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## Quarterly Program Activity / Consumer Service Report

- \* Agency **CTF Illinois**
- \* Board **Developmental Disabilities Board**
- \* Program **CTF ILLINOIS Advocacy Center (2017)**
- \* Period **2017 - First Quarter FY17**

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[ **Change Status** ] to **Submitted**

Status Submitted

Date Submitted 10/27/2016 09:12 AM

Submitted By DPITTMAN

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other  
 (CSE) (SC) (NTPC) (TPC)

Annual Target	4	3
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Quarterly Data (NEW Clients)

Continuing from Last Year (Q1 Only)

Since approval for this grant requested as granted, we have searched for and hired a director/coordinator for the program. She has been going through various trainings, including DHS direct support training, DHS QIDP training, CQL trainer, and general orientation/training for CTF ILLINOIS. She has attended both CCDDDB and CCMIDDB meetings and given updates on the status of the opening of the programs. We leased a location for the site and that building is currently under construction and should be in the building by the end of October. In preparation for the program, our coordinator has been attending meetings/functions, reaching out to agencies/prospective attendees, and spreading the word of the new program in the area. Activities have included the following:

**Comments** Community Events: Attended/set up booth at DSN Buddy Walk and the Disability Expo, spoke at CU Autism Family meeting and at Community Choices family group meeting.  
 Contacts: meetings with representatives from Regional Planning Commission case managers, DSC, and UPC of Land of Lincoln. She also worked with the Advocacy Program in Charleston to create a brochure for the program, which has been sent out to multiple locations, including special ed directors and staff in Urbana and Champaign high schools, CU Autism Network, TAP, Community Choices, United Cerebral Palsy of Land of Lincoln, and CU Down Syndrome Network. She is also attended the August and September CCMHDDDB and CCDDDB meetings.

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Quarterly Program Activity / Consumer Service Report

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- # Agency **CTF Illinois**
- # Board **Developmental Disabilities Board**
- # Program **CTF ILLINOIS Nursing (2017)**
- # Period **2017 - First Quarter FY17**

Status Submitted

**[ Change Status ]** to **Submitted**

Date Submitted 10/27/2016 09:21 AM

Submitted By DPITTMAN

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Other (NTPC)  
(CSE) (SC)

Annual Target

69

Quarterly Data (NEW Clients)  
Continuing from Last Year (Q1 Only)

Comments  
RN provided 62 hours of services while making these contacts. Services include POMAR/medication reviews, appointment reviews, evaluations, assessments, and physician contacts.



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Quarterly Program Activity / Consumer Service Report

- # Agency Champaign County Down Syndrome Network
- # Board Developmental Disabilities Board
- # Program Champaign County Down Syndrome Network (2017)
- # Period 2017 - First Quarter FY17

[ Change Status ] to Submitted

Status Submitted

Date Submitted 10/26/2016 08:20 PM

Submitted By MSCOTT

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients (SC)	Treatment Plan Clients (TPC)	Other Clients
Community Service Events Service (CSE)	120	
Annual Target	15	
Quarterly Data (NEW Clients)	7	75
Continuing from Last Year (Q1 Only)		70

Pool Party - 7/10 (attendance: 56)  
 BW Kickoff Meeting - 8/11 (attendance: 37)  
 Comments BW Cape Painting Parties - various meetings (attendance: ~40)  
 TOT Ice Cream Social - 8/21 (attendance: 6)  
 Board Meetings - 7/12, 8/1 & 9/11 (attendance: 9, 8, 7)

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# Consumer Service Report

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Quarterly Program Activity / Consumer Service Report

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- \* Agency **CCRPC - Community Services**
- \* Board **Developmental Disabilities Board**
- \* Program **Decision Support Person for CCDDDB -2017 (2017)**
- \* Period **2017 - First Quarter FY17**

Status Submitted

[ Change Status ] to Submitted

Date Submitted 10/21/2016 11:49 AM

Submitted By KBOWDRY

	Community Service Events (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	50	60	60	32	0
Quarterly Data (NEW Clients)	7	23	28	1	0
Continuing from Last Year (Q1 Only)			0	0	0

During the reporting period, ISC staff conducted 7 Community Service/outreach Events. The ISC team completed 23 Preference Assessments (NTPC), 5 clients refused to complete a preference assessment. One client was identified as needing extra assistance for PUNS enrollment or non-waiver funded services (TPC). Five individuals contacted were ineligible for PUNS enrollment.

# Consumer Service Report

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## Quarterly Program Activity / Consumer Service Report

- Agency **Community Choices, Inc. DDB**
- Board **Developmental Disabilities Board**
- Program **Community Living (2017)**
- Period **2017 - First Quarter FY17**

[ Change Status ] to Submitted

Status Submitted

Date Submitted 10/28/2016 04:24 PM

Submitted By CCCOOP

Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	1370	15	1582
Quarterly Data (NEW Clients)	230	0	412
Continuing from Last Year (Q1 Only)			
Comments Other = Direct Service Hours			16

# Consumer Service Report

## Instructions

### Quarterly Program Activity / Consumer Service Report

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- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Connections (2017)**
- # Period **2017 - First Quarter FY17**

Status Submitted

[ **Change Status** ] to [ **Submitted** ]

Date Submitted 10/25/2016 02:50 PM

Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	15	60		
Quarterly Data (NEW Clients)	7	19	50	
Continuing from Last Year (Q1 Only)	0	0	0	

Comments Service hours for this grant totaled over 50 hours this quarter. Some of the activities included: selling fundraising tickets, participating in the planning of the Buddy Walk, selling art at the Musefest in Charleston, IL, and enjoying the Fun Festival.

25

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Apartment Services (2017)**
- # Period **2017 - First Quarter FY17**

Status Submitted [ **Change Status** ] to Submitted

Date Submitted 10/25/2016 01:02 PM  
Submitted By VICKIE2010

Community Service Events (CSE)	Service / Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target			63	
Quarterly Data (NEW Clients)			2	2316.25
Continuing from Last Year (Q1 Only)				56

Comments There were two openings in the Apartment Services Program this quarter. Both of these individuals moved into CU Independence. Service hours for the quarter total 2316.25.

26

Quarterly Program Activity / Consumer Service Report

- Agency: **Developmental Services Center**
- Board: **Developmental Disabilities Board**
- Program: **Clinical Services (2017)**
- Period: **2017 - First Quarter FY17**

[ Change Status ] to Submitted

Status Submitted

Date Submitted 10/25/2016 01:13 PM

Submitted By VICKIE2010

	Community Service Events (CSE)	Service / Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	15	4	66	
Quarterly Data (NEW Clients)	0	5		5	
Continuing from Last Year (Q1 Only)			0	57	

Services provided to new TPC individuals this quarter consisted of one new psychological evaluation, three new counseling services, and one new psychiatric evaluation. Six individuals received two types of clinical services.

Service/Screening Contacts for the quarter equals five. All five were for counseling services which two received this quarter. Two contacts were referred to Promise for counseling and one is still waiting.

27

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Community Employment (2017)**
- # Period **2017 - First Quarter FY17**

Status Submitted [ **Change Status** ] to **Submitted** ▼

Date Submitted 10/25/2016 03:14 PM  
Submitted By VICKIE2010

Community Service Events Service (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	2	50	534.25
Quarterly Data (NEW Clients)	1	1	1	
Continuing from Last Year (Q1 Only)			40	

The Community Service Event for this quarter was a tour and discussion with U of I exchange students from Taiwan. The Service/Screening Contact was a telephone call about employment and eligibility for a family member moving to the area from St Louis. There was one opening this quarter. Service hours for this quarter totaled 534.25

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Quarterly Program Activity / Consumer Service Report

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- Agency **Developmental Services Center**
- Board **Developmental Disabilities Board**
- Program **Employment First (2017)**
- Period **2017 - First Quarter FY17**

[ **Change Status** ] to **Submitted** ▼

Status Submitted

Date Submitted 10/25/2016 04:02 PM

Submitted By VICKIE2010

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients Treatment Plan Clients Other (CSE) (SC) (NTPC) (TPC)

Annual Target 3 50

Quarterly Data (NEW Clients) 9 0

Continuing from Last Year (Q1 Only)

29

- Family Informational Meeting held September 20, 2016. Barry Lowy, Vice President of Civil Rights and Systemic Litigation, Equip for Equality provided information regarding guardianship to an audience of 9.
- Mr. Lowy also conducted an in-service for case management, apartment services, and other staff regarding alternatives to guardianship. Staff in attendance numbered 20.
- Outreach to the 14 businesses that were certified during the past 3-6 months resulted in recommendations for changes to the LEAP presentation.

Comments

- Changes were made to the LEAP presentation adding more information about accommodations and focusing more on the benefits of hiring job seekers with intellectual disabilities.
- Chike Coleman, Employment 1st/LEAP Coordinator, DSC and Ashley Withers, Community Choices were hired for the program following the departure of the previous LEAP presenters. After making the changes mentioned above, they conducted 2 practice presentations and are ready to continue outreach to local businesses.

Non-Treatment Plan Clients (NTPC) are the number of people attending information sessions.



- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Family Development Center (2017)**
- # Period **2017 - First Quarter FY17**

Status Submitted [ **Change Status** ] to **Submitted** ▼

Date Submitted 10/25/2016 03:06 PM  
Submitted By VICKIE2010

	Community Service Events Service (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	300	200	0	655	
Quarterly Data (NEW Clients)	102	70	0	62	1595
Continuing from Last Year (Q1 Only)				436	

Comments  
Community service events include participation in day care settings, as well as community events with children and families. Screening contacts include developmental evaluations for the purpose of screening only. Children may be identified for further evaluation or for re-screening at three to six month intervals. Of the total number of children screened this quarter, 28% were referred to Early Intervention. Service hours comprise time spent in activities that are not state funded and equaled 1595 for the quarter.

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Quarterly Program Activity / Consumer Service Report

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- Agency **Developmental Services Center**
- Board **Developmental Disabilities Board**
- Program **Integrated/Site-Based Srvs-Community 1st (2017)**
- Period **2017 - First Quarter FY17**

[ Change Status ] to Submitted

Status Submitted

Date Submitted 10/27/2016 12:34 PM

Submitted By VICKIE2010

	Community Service Events Service (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	4	4	25	53	
Quarterly Data (NEW Clients)	3	0	59	0	
Continuing from Last Year (Q1 Only)			2	47	

31

Community Service Events for this quarter consisted of tours for U of I students from Taiwan, collaboration with a representative from Clark-Lindsey to discuss services and share ideas, and a tour/discussion of services for a representative of Trinity Services.

DSC's Integrated Program provided 9,194.75 hours of support to participants, including continuing and new non-treatment and treatment plan clients as outlined above. Twenty people spent at least 40% of their time in the community experiencing garage sales, fishing, MTD exploration/training, park walking, Movie Review Club, and Book Club (this group is working its way through the Harry Potter series and then watching the movie after reading the book). People also enjoyed exercising at their local YMCA and at the Forum Fitness Center in Rantoul.

One person spent 56% of her time involved in community work and recreational activities that was highlighted by her continued progress in planning and executing trips to cities and venues of interest to her and her friends which this summer included a trip to Clinton's Encore Thrift Store and the Bonanza Steakhouse, GoodWill, and Goody's Department store in Lincoln, IL.

Volunteer groups continued their efforts at Salt and Light, CatSnap, Champaign County Nursing Home, Orphan's Treasure Box, Adopt a Shelter with CU/MTD to name a few.

In September, a group began working with Enactus, a U of I student group, to develop and run their own small business. Once the initial group has started their business, another group from DSC will begin working with Enactus. This is a long range partnership and people are excited about the opportunities involved. Another individual was able to maintain his one day a week part-time employment with Papa John's pizza with the on-going support of a DSC job coach through this program.

Quarterly Program Activity / Consumer Service Report

- Agency Developmental Services Center
- Board Developmental Disabilities Board
- Program Service Coordination (2017)
- Period 2017 - First Quarter FY17

[ Change Status ] to Submitted

Status Submitted

Date Submitted 10/27/2016 04:12 PM

Submitted By VICKIE2010

Community Service Events Service / Screening Contacts NON-Treatment Plan Clients (NTPC) 303  
 (CSE)

Treatment Plan Clients (TPC) 2  
 Other

Annual Target

Quarterly Data (NEW Clients) 0

43

288

Continuing from Last Year (Q1 Only)

32

Supports and services include: Person-Centered Case Coordination; Interdisciplinary Team Coordination; linkage and referral to community clinical supports and DSC clinical supports; consumer documentation management; DHS Home-Based Support Facilitation; DHS Additional Staff Supports Coordination; HFS Medical Card/SNAP Coordination and maintenance; CCDDB Individual and Family Support Coordination/Management; Shelter Plus Care Program Coordination; 24-hour Consumer Emergency Response and Response Team Supervision; Social Security Administration representative payee services; Affordable Care Act Coordination; Illinois Office of the Inspector General Abuse and Neglect Reporting and OIG Agency/State Investigations; medical appointment coordination and intermittent direct support The Services/Screening Contacts reported consist of 38 Intake calls received during July, August, and September of 2016 and staff attendance at five IEPs. Service hours for the quarter = 1738.25.

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Quarterly Program Activity / Consumer Service Report

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- ✦ Agency **Illinois Association of Microboards and Cooperatives**
- ✦ Board **Developmental Disabilities Board**
- ✦ Program **IAMC Building Inclusive Communities (2017)**
- ✦ Period **2017 - First Quarter FY17**

Status Submitted

**[ Change Status ]** to Submitted v

Date Submitted 10/31/2016 12:09 PM

Submitted By VNISWANDER

	Community Service Events (CSE)	Service / Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	5	200	0	10	
Quarterly Data (NEW Clients)	3	212	0	11	
Continuing from Last Year (Q1 Only)			0	0	

Comments

The IAMC participated in 3 Community Service Events this quarter. Prior to the start of the fiscal year, one day after the grant was approved, we were given a few minutes to discuss the new grant in front of a local crowd at Brookens who came to attend the meeting held by the Ligas Family Advocates. At that meeting, 21 family members and professionals signed up to receive more information. This event is not counted in the quarterly report as it occurred prior to the start of the year.

After July 1 the IAMC met with CU Able, a local parent group. A guest lecture at the University of Illinois on September 28 provided information to almost 200 students. The course is a general studies offering called "The Culture of Disability". We also spoke at a meeting of the parent group for Community Choices.

Initially we had a series of conversations in the form of phone calls and or emails with representatives from 16 families interested in participating in the grant. 13 of those contacts resulted in scheduled face-to-face meetings. 12 of 13 were held this quarter. One family opted out of participation. Another does not qualify for Medicaid waiver funding; another is in the process of applying for PUNs. Eligibility has not been determined.

Six families have scheduled dates for PATHs, and one of those has already been completed. Two families have opted to delay starting services due to busy schedules in the fall.

Every person-centered plan is a unique experience. Our first one for this grant was for a young man with autism who I will call Ted. His team included both parents, his sister and a representative from his service provider. Prior to the meeting Ted's parents told me that he would not express any hopes and dreams for his future. They held out little hope that the process would result in any success. I then spoke privately with Ted and explained a bit about the process, and that I would be asking him to think about what the best possible future could be for him. When we started the PATH, I asked Ted what he wanted for his future. He responded by saying, "I have a list." He then took out his phone and read the list which included, "Someday I want to travel to Japan. I want to go hiking in the mountains in Wyoming. I'd like a job working for a veterinarian. I want a girlfriend. I want more friends and things to do with friends. I want a different apartment in a safer neighborhood." His parents were both shocked and pleased. We finished the PATH with a number of activities established for the team, and set a date to follow up in October, inviting 2 additional people to participate in the team, a friend and a personal support worker. Afterward, Dad told me that the PATH was the "most amazing" event their son had ever participated in.

We continue to seek out more diverse participants in the project. I met with Shandra Summerville, Carol Ammons, and Special Education Director for the Unit 4 school district, Elizabeth deGruy. All are seeking to connect with diverse families who qualify for services. In the case of the school district, we are looking to build teams for students who will be leaving IDEA services prior to the end of the grant year.

Lastly, I am pleased to inform you that we have hired a Project Organizer for 10 hours a week. Amy Slagell is a former teacher, and a parent with two young children, one of whom has been diagnosed on the autism spectrum. She is a co-founder of the group CU Able and was also recently trained as a PATH facilitator. Amy will be assisting me with facilitation as well as scheduling and staying connected with families and teams as we move forward.

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# Consumer Service Report

## Instructions

Quarterly Program Activity / Consumer Service Report

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Agency **PACE, Inc.**

Board **Developmental Disabilities Board**

Program **Opportunities for Independence (2017)**

Period **2017 - First Quarter FY17**

Status Submitted

[ [Change Status](#) ] to [ [Submitted](#) ]

Date Submitted 10/19/2016 12:17 PM

Submitted By NANCY

	Community Service Events Service (CSE)	Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	25	575	30	20	
Quarterly Data (NEW Clients)	3	29.25	0	0	
Continuing from Last Year (Q1 Only)			0	7	

Comments: The ILS was out on medical leave for over two months during this quarter, resulting in lower-than-expected numbers.

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Instructions

Quarterly Program Activity / Consumer Service Report

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- Agency **Rosecrance Champaign/Urbana**
- Board **Developmental Disabilities Board**
- Program **Coordination of Services: DD/MI (2017)**
- Period **2017 - First Quarter FY17**

Status Submitted

[ Change Status ] to Submitted

Date Submitted 10/25/2016 12:32 PM  
Submitted By KKESSLER

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	12	8	0	32	
Quarterly Data (NEW Clients)	5	11	2	9	
Continuing from Last Year (Q1 Only)					19

Referrals increased during this quarter for the program. Miranda Hoffmann screened 11 new clients, 9 of which became treatment plan clients. There were 19 clients continuing services into FY17. The primary focus of Miranda's work this quarter was direct service. She provided 234.18 hours of direct service to clients this quarter. Miranda was also involved in 5 CSEs. She attended 4 Disability Expo meetings and attended the Home Community Based Service Activity Meeting which discussed possible waivers available in the future to persons with intellectual disabilities.

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# Consumer Service Report

## Instructions

Quarterly Program Activity / Consumer Service Report

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# Agency **United Cerebral Palsy Land of Lincoln**

# Board **Developmental Disabilities Board**

# Program **Vocational Services (2017)**

# Period **2017 - First Quarter FY17**

Status Submitted

[ [Change Status](#) ] to **Submitted**

Date Submitted 10/28/2016 01:01 PM

Submitted By BYARNELL

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	70	160	0	30	11000
Quarterly Data (NEW Clients)	12	15	0	1	2063
Continuing from Last Year (Q1 Only)			0	11	0

Comments

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**Instructions**

**Quarterly Program Activity / Consumer Service Report**

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- Agency **Champaign County Head Start/Early Head Start MHB**
- Board **Mental Health Board**
- Program **Social-Emotional Disabilities Svs (2017)**
- Period **2017 - First Quarter FY17**

Status Submitted

[ **Change Status** ] to [ **Submitted** ]

Date Submitted 11/01/2016 06:28 PM  
Submitted By BRANDIMHB

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Other Treatment Plan Clients (TPC)
Annual Target	1	600	55	60
Quarterly Data (NEW Clients)	7	114	34	7
Continuing from Last Year (Q1 Only)			0	17

The new Social/Emotional Development Specialist, Elise Belknap, started in August 2016, so the client numbers are lower than normal for this time of year. Since September 6, 2016, Ms. Belknap has been: observing classroom environments and children, meeting with staff and families, counseling families, and modeling social/emotional support strategies with children and staff. The number of clients and services will increase next quarter.

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Instructions

Quarterly Program Activity / Consumer Service Report

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- Agency **Community Choices, Inc. MHB**
- Board **Mental Health Board**
- Program **Customized Employment (2017)**
- Period **2017 - First Quarter FY17**

Status Submitted

[ **Change Status** ] to [ **Submitted** ]

Date Submitted 10/28/2016 05:21 PM  
Submitted By CHOICES

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	2	1370	0	15	1384
Quarterly Data (NEW Clients)	1	262	0	2	175
Continuing from Last Year (Q1 Only)			0	18	

Comments CSE for Q1 Interview with ED on Disability Beat Radio Show - 9/12/16  
Other = Direct Service Hours

# Consumer Service Report

## Instructions

Quarterly Program Activity / Consumer Service Report

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# Agency **Community Choices, Inc. MHB**

# Board **Mental Health Board**

# Program **Self-Determination Support (2017)**

# Period **2017 - First Quarter FY17**

Status Submitted

[ **Change Status** ] to **Submitted**

Date Submitted 10/28/2016 04:38 PM  
Submitted By CHOICES

	Community Service Events Service (CSE)	Screening Contacts (SC)	NON Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	4	1656	155	0	1050
Quarterly Data (NEW Clients)	2	369	9		139
Continuing from Last Year (Q1 Only)					153

Other = Direct Service Hours  
Comments CSE - SPED 317 - Presentation with Self Advocates 7/12  
SPED 117 - Presentation with Self-Advocates 9/21

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# Consumer Service Report

SHOWARDGALLO Main Menu Logout

## Instructions

Quarterly Program Activity / Consumer Service Report

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Agency **Developmental Services Center**

Board **Mental Health Board**

Program **Individual and Family Support (2017)**

Period **2017 - First Quarter FY17**

Status Submitted

[ **Change Status** ] to [ **Submitted** ] 

Date Submitted 10/27/2016 12:26 PM

Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts NON-Treatment Plan Clients (CSE)	Treatment Plan Clients (SC)	Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	5	31	19	
Quarterly Data (NEW Clients)	0	0	0	0	11
Continuing from Last Year (Q1 Only)			18		

The Individual and Family Support Program continues to provide supports for individuals and families in the following ways: direct staff support, personal care, activity funds, camp registration fees, and financial assistance for medical needs. There were not any new openings into the program this quarter. Service hours equals 2606.75

04





# CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

### BRIEFING MEMORANDUM

DATE: November 16, 2016  
TO: Members, Champaign County Developmental Disabilities Board (CCDDDB)  
FROM: Lynn Canfield, Executive Director  
SUBJECT: FY2018 Allocation Priorities and Decision Support Criteria

#### Overview:

The purpose of this memorandum is to recommend allocation decision support criteria and funding priorities for the Champaign County Developmental Disabilities Board (CCDDDB) FY2018 allocation period, July 1, 2017 to June 30, 2018. The foundation of these recommendations is formed by board discussions and input from citizens, agency representatives, and other stakeholders during board meetings throughout the year, along with previous public input and our understanding of the transforming service delivery and payment systems.

From the September 18, 2013 Consolidated Statement of Priorities of Champaign County Stakeholders, the local service system was described as “*complicated*, even for its most expert users; *incomplete*, meeting some of the needs of many and none of the needs of others; and *fragmented*,” and problems associated with inadequate investments were identified across the lifespan. The experiences reported by families, advocates, individuals, and providers do not sound very different three years later.

An initial draft of this document was shared with stakeholders and provider organizations. Observations made by board members and others resulted in the following revisions: replace “multi-year applications” with “two-year applications” in the last section; change “thresholds” to “the expectations below” under Expectations for Minimal Responsiveness; delete reference to Dr. Carl Bell’s consultation under Underserved Populations and Countywide Access; clarify a statement under Medicaid Rates, Waivers, and Supplementation; move Workforce Development and Stability from Priorities to Overarching Considerations; clarify some Overarching Considerations; and add staging of the annual disAbility Resource Expo event to Priorities.

A final version will be presented for review and action at the December 14, 2016 meeting of the CCDDDB.

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### Statutory Authority:

The CCDDDB funding policies are predicated on the requirements of the County Care for Persons with Developmental Disabilities Act (55 ILCS 105/ Section 0.01 et. seq.) All funds shall be allocated within the intent of the controlling act, as codified in the laws of the State of Illinois. CCDDDB Funding Guidelines require that there be annual review and revision of the decision support criteria and priorities to be used in the funding allocation process. Upon approval by the Board, this memorandum shall become an addendum to the CCDDDB Funding Guidelines incorporated in standard operating procedures.

### Medicaid Rates, Waivers, and Supplementation:

As the State of Illinois has shifted its investments from grant contracts to DD waiver programs to capture federal matching revenue, the limitations of the waivers and rates and the changing requirements of Medicaid have impacted how local funding can best support the people it is intended to serve.

There is little debate about Illinois' inadequate Medicaid reimbursement rates. Each year we see their negative impact on the people who use Medicaid and Medicaid-waiver services and on the community-based organizations providing them. Yet the rate paid for a service or support is, by law, inclusive and must be taken as payment in full by the provider. Providers are prohibited from charging an amount greater than what Medicaid pays for a covered service to an eligible client or from accepting additional payment for that service from a third payer. Such supplementation can result in penalties to the provider or simply cost the taxpayers of Champaign County twice. Item #6 of the Waiver Program Provider Agreement for Participation in the Illinois Medical Assistance Program: "Payments to the Provider under this agreement shall constitute payment in full. Any payments received by the Provider from other sources shall be shown as a credit and deducted from the Provider's charges."

The CCDDDB will work with Providers and stakeholders to identify services and supports not included in the waivers but identified by individuals' person centered plans as important for achieving their ambitions and fullest inclusion in their communities. Many eligible residents of Champaign County do not yet have Medicaid waiver funding through the state, so their enrollment in the PUNS database not only poises them for selection but may justify the use of local funding to provide relief for those waiting. The CCDDDB may consider other investments which lead to the highest quality of life for Champaign County residents with I/DD.

### Expectations for Minimal Responsiveness:

Applications that do not meet the expectations below are "non-responsive" and will not be considered for funding. All agencies must be registered using the online system. The application must be completed using this system, with all required portions completed by the posted deadline. Accessible documents and technical assistance, limited to navigation of the online tools, are available upon request through the CCDDDB office.

1. Eligible Applicant, based on completion of the Organization Eligibility Questionnaire.

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2. Compliance with application deadline. Late applications will not be accepted.
3. Application must relate directly to intellectual/developmental disabilities programs, services, and supports.
4. Application must be appropriate to this funding source, providing evidence that other funding sources are not available to support this program/service.

### Overarching Priorities:

#### Inclusion and Integration

All applications for CCDDDB funding shall be assessed for movement toward community integration and away from segregated services and settings. The emphasis on inclusion aligns with changes in federal regulations and interpretation of the Olmstead Decision of the Americans with Disabilities Act.

The CCDDDB values programs that result in:

- people controlling what they do with their day, and how, where, and with whom they live and interact;
- people building connections to their community as they choose, for work, play, learning, and more, in places other community members use and when they use them;
- people creating networks of support for themselves, to include friends, family members, community members with similar interests, and allies they choose;
- and people advocating for themselves, making informed choices, and controlling their own service/support plans, with measurable outcomes they value.

Applications should explain how services are being transformed toward fullest integration, consistent with Center for Medicare and Medicaid Services (CMS) Home and Community Based Services regulations, Workforce Innovation and Opportunity Act provisions, the aspirations of Employment First, and recent Olmstead decisions. Applications will be required to include measurable objectives, goals, and timelines.

#### Underserved Populations and Countywide Access

Programs should promote access for underserved populations identified in the Surgeon General's Report on Mental Health: Culture, Race, and Ethnicity. A Cultural and Linguistic Competence Plan is required of each applicant organization, and a template is provided which aligns with requirements of Illinois Department of Human Services. The agency's Cultural and Linguistic Competence Plan may include specific activities consistent with the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.) Applications should focus on improved, earlier identification of I/DD in underrepresented populations, as well as on the reduction of racial and service disparities. Members of underserved minority populations and people living in rural areas of the county should have access to quality services; outreach strategies should be identified.

#### Anti-Stigma Efforts

Applications should describe how the program contributes to reduction of the stigma associated with I/DD. The CCDDDB is interested in creative approaches toward the goals of

increasing community awareness and access, promoting inclusion and respect, and challenging negative attitudes and discriminatory practices.

#### Budget and Program Connectedness

Applications should clearly explain the relationship between budgeted costs and program components. “What is the Board buying?” is the salient question that must be answered in the proposal, and clarity is required. For example, programs offering multiple services, such as those that involve services funded by Medicaid, identifying non-Medicaid activities and associated costs and personnel within the program is necessary and should be addressed in the Budget Narrative.

#### Person Centered Planning (PCP)

Applications should reference a PCP process used to develop an individual’s service and support plan, specific to CCDDDB funding, which identifies and mobilizes community partnerships and resources that exist beyond the service system. To the extent possible, CCDDDB funding will be associated with people rather than programs and will focus on PCP-driven supports and services.

Programs should promote self-directed and culturally appropriate, individualized service plans, with measurable desired outcomes striking a balance between what is “important to” and “important for” an individual. Planning processes should be outcome-based, focused on and directed by the individual, building on their gifts and strengths. Planning activities should include the participation of those chosen by the individual, such as family members, friends, or community partners in whom the person has indicated trust, especially where an individual may have difficulty expressing their preferences. Plans should be documented in a way that is meaningful and useful to the individual and those involved with plan implementation. Additional detail about the specific PCP process may be requested as an addendum to the program plan prior to execution of a contract for services.

#### Workforce Development and Stability

The board’s investments in other priorities are contingent on a stable and qualified workforce. The challenges to attracting and retaining this workforce follow from Illinois’ inadequate investment in community-based services, in particular through low Medicaid rates. The board seeks to emphasize efforts to reward this important work with competitive wages and advancement opportunities. Applications should propose creative solutions for recruitment and retention of direct support staff. Systemic problems associated with the workforce shortage include:

- Gaps in coverage, disruption of care, and high turnover interfere with the development of positive relationships between staff and people who use services;
- Capacity cannot be expanded without a much larger direct support staff workforce, so that even those selected from PUNS for Medicaid-waiver awards struggle to find providers;
- Turnover has significant associated costs in recruitment and hiring activities, overtime pay during shortages, and training of new staff;
- Agencies and programs compete to keep direct support staff as the need for their services increases in other systems (e.g., care of older citizens.)



## FY2018 CCDDDB Priorities:

### Priority: Linkage and Advocacy for People with Intellectual and Developmental Disabilities

The CCDDDB will support advocacy efforts to connect people who have I/DD to appropriate state funding. Conflict-free Case Management is a requirement for all Home and Community Based Services, and intensive case management services have demonstrated value for people with I/DD as they define their own goals and how to achieve them. Applications proposing advocacy, linkage, and other service coordination activities, with minimal or no conflict of interest and emphasis on person-centered service planning, will be prioritized. In addition, with the established ongoing success of the disAbility Resource Expo, applications to coordinate planning, implementation, and evaluation of the event will be considered.

### Priority: Employment Services and Supports

Applications featuring job readiness training, job development and matching, job coaching, and innovative employment supports will be prioritized. These should incorporate evidence based practices, the principles of Employment First, and a focus on people's specific employment aspirations and abilities, in the most integrated settings possible. Community employers who understand the benefits of employing people who have I/DD may be identified and cultivated as partners in the effort to maximize outcomes for all.

### Priority: Non-Work Community Life and Flexible Support

Applications emphasizing flexible support for people with I/DD, to stabilize home life in person-centered, family-driven, and culturally appropriate ways, and those emphasizing social and community integration for people with I/DD and behavioral or physical support needs will be prioritized. Selected by the person, supports for success may include: assistive technology and accessibility supports; speech or occupational therapy; respite; personal care support; independent living skills training; social, communication, or functional academics skills development; vocational training; facilitation of social and volunteer opportunities; transportation assistance; community education and recreation, health and fitness, mentoring or other opportunities; and development of networks of support for individuals and families.

### Priority: Comprehensive Services and Supports for Young Children

Applications focusing on services and supports, not covered by Early Intervention or under the School Code, for young children with developmental delays will be prioritized. Examples include: coordinated, home-based services addressing all areas of development and taking into consideration the needs of the family; early identification of delays through consultation with child care providers, pre-school educators, medical professionals, and other providers of service; education, coaching, and facilitation to focus on strengthening personal and family support networks (including community partners); systematic identification and mobilization of individual gifts and capacities, to access community associations and learning spaces.

### Priority: Self-Advocacy and Family Support Organizations

Applications highlighting sustainable self-advocacy and family support organizations, especially those governed by people who have I/DD, their families, and other allies, will be prioritized. Activities may center on: improved understanding of I/DD, supports, and rights;

peer mentoring; navigating the system of care; social connections; engaging in system advocacy; and other.

Priority: Expansion of Integrated Residential Opportunities

Applications offering creative approaches to expanding the availability of smaller residential settings (e.g., CILA homes for up to four people) in Champaign County will be prioritized.

**Secondary Decision Support and Priority Criteria**

The process items included in this section will be used as important discriminating factors which influence final allocation decision recommendations.

1. Approach/Methods/Innovation: Applications proposing evidence-informed, evidence-based, or research-based approaches and addressing fidelity to the model cited. Applications demonstrating creative, innovative approaches to meet defined community need.
2. Evidence of Collaboration: Applications identifying collaborative efforts with other organizations serving or directed by people with I/DD and members of their support networks, toward a more efficient, effective, inclusive system of care.
3. Resource Leveraging: Applications that involve additional grant funding, community support, “natural supports” in employment and community settings, volunteer initiatives, and other creative approaches that amplify resources.
4. Staff Credentials: Applications highlighting staff credentials and specialized training.
5. Records System Reflecting CCDDDB Values and Priorities: Applications proposing to develop and utilize records systems for individual supports, programs, and projects that clearly reflect CCDDDB values and priorities. Such records systems can be used to provide rapid feedback to CCDDDB on the impact and efficacy of innovative projects and provide project managers and direct support staff with direction and feedback that can be utilized in day-to-day management, supervision, and mentoring/coaching.

**Process Considerations**

The criteria described in this memorandum are to be used as guidance by the Board in assessing applications for CCDDDB funding. However, they are not the sole considerations in finalizing funding decisions. Other considerations include the judgment of the Board and its staff, evidence about the provider’s ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB funds, applications must reflect the Board’s stated goals and objectives as well as operating principles and public policy positions taken by the Board. The final funding decisions rest with the CCDDDB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs, equitable distribution across disability support areas, and decision-support match up.

The CCDDDB allocation of funding is a complex task predicated on multiple variables. This process is not a request for proposals (RFP.) Applicants are not responding to a common set

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of specifications but rather are seeking funding to address a wide variety of service and support needs for people who have developmental disabilities. In many respects our task is more difficult than conducting an RFP. Based on past experience, we can anticipate that the nature and scope of applications will vary widely and will include treatment and early intervention models. For these reasons, a numerical rating/selection methodology is not applicable or relevant to our particular circumstances. Our focus is on what constitutes a best value to our community, based on a combination of cost and non-cost factors, and will reflect an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB. In the event that applications are not sufficiently responsive to the criteria and priorities described in this memorandum, the CCDDDB may choose to set aside funding to support RFPs with prescriptive specifications to address the priorities.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDDB to award a contract or to pay any costs incurred in the preparation of an application or to pay for any other costs incurred prior to the execution of a formal contract.
- Technical assistance available to applicants will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB Funding Guidelines.
- Applications with excessive information beyond the scope of the application format will not be reviewed and, at the discretion of staff, may be disqualified from consideration. Letters of support for applications are discouraged and, if submitted, will not be considered as part of the allocation and selection process.
- The CCDDDB retains the right to accept or reject any or all applications and reserves the right to refrain from making an award when that is deemed to be in the best interest of the County.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of Champaign County.
- Applications and submissions become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made. Materials submitted will not be returned or deleted from the online system.
- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years with or without additional procurement.
- If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of the award of a contract.
- The execution of financial contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of Champaign County.

- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will be given equal opportunity to update proposals for the newly identified components.
- All proposals considered must be received on time and must be responsive to the application instructions. The CCDDDB is not responsible for lateness or non-delivery of mail or messenger. Late applications shall be rejected.
- The contents of a successful application will be developed into a formal contract, if selected for funding. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if there is misrepresentation of the applicant's ability to perform as stated in the application.
- The CCDDDB reserves the right to negotiate the final terms (i.e., best and final offer) of any or all contracts with the applicant selected, and any such terms negotiated as a result of this application process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.
- For FY2018, two-year applications will be considered as part of the award process.

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

BRIEFING MEMORANDUM

DATE: November 16, 2016  
TO: CCDDDB Members  
FROM: Lynn Canfield, Executive Director  
SUBJECT: Draft Three-Year Plan 2016-2018 with FY 2017 Objectives

The Champaign County Developmental Disabilities Board (CCDDDB) Three-Year Plan 2016-2018 enters its second year of implementation. A Draft Plan with objectives for Fiscal Year 2017 is an extension of the prior fiscal year with proposed modifications. Most objectives reflect on-going commitments while those completed are removed and others added or revised in response to changes in the operating environment. The draft document is subject to change with community input, Board directive, and staff review.

An initial draft was presented to the CCDDDB at their September 21<sup>st</sup> meeting and subsequently shared with stakeholders, including representatives of funded organizations, special education directors of local public schools, family members of persons with ID/DD, and advocates.

Stakeholder Responses to the First Draft

At the time the draft Plan was released to the Board, the document was disseminated for comment.

Annette Becherer, Director of Employment Supports at Developmental Services Center and co-chairperson for the Champaign County Transition Planning Committee (TPC): “regarding collaborations between schools and adult service providers in the 3-year plan, I thought maybe something under Goal #7 Objective #1 that talks about ‘supporting collaborations between schools and adult service providers that cultivate a continuum of...’ I know there is a decent amount of collaboration that goes on outside of TPC. I’ve spent time over the past few years working with school employment coordinators both in terms of competitive employment post school, internships for those who would benefit from work experiences that are more flexible, and also on occasion supporting the coordinators during meetings with parents.”

Elizabeth deGruy, Director of Special Education at Champaign Unit 4 School District: “Regarding the ‘assessed priorities’ and ‘needs of people with I/DD,’ are these outlined somewhere? I think it would be useful to have a reference to a needs assessment which was completed. Regarding Goal 1, Objective 6 (and others referring to health care,) does the Board do any work to building the capacity of our local providers to meet the needs of our population with I/DD?” To the first concern, please see the Briefing Memorandum entitled “Assessment of Needs for Champaign County Residents with ID/DD.” Needs assessment is typically done with the new Three Year Plan, and we tend to watch county data on unmet needs more frequently. To the second concern, around building capacity, Dr. deGruy clarified that she had in mind two different issues: helping

existing providers (of medical and other specialized services) interact more effectively with people who have I/DD; not enough Medicaid participating providers of behavioral health and other services.

Three-Year Plan for FY 2016 – 2018 with One-Year Objectives for 2017

The goals listed are for the period of 2016 through 2018. Objectives are for the 2017 fiscal year. A draft of the Plan is attached with proposed new or modified objectives italicized and underlined while completed objectives are lined out.

The updated Three Year Plan will be presented for approval at the December 14, 2016 Board meeting.

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

**THREE-YEAR PLAN**

**FOR**

**FISCAL YEARS 2016 - 2018  
(1/1/16 – 12/31/18)**

**WITH**

**ONE YEAR OBJECTIVES**

**FOR**

**FISCAL YEAR 2017  
(1/1/17 – 12/31/17)**

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

WHEREAS, the Champaign County Developmental Disabilities Board has been established under the Illinois County Care for Persons with Developmental Disabilities Act (IL Compiled Statutes, Chapter 55, Sections 105/0.01 to 105/13 inclusive) in order to “provide facilities or services for the benefit of its residents who are mentally retarded or under a developmental disability and who are not eligible to participate in any such program conducted under Article 14 of the School Code, or may contract therefore with any privately or publicly operated entity which provides facilities or services either in or out of such county.”

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

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

**MISSION STATEMENT**

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

**STATEMENT OF PURPOSES**

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

In order to accomplish these purposes, the Champaign County Developmental Disabilities Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the intellectual disability and developmental disability service and support system. The CCDDB shall perform those duties and responsibilities as specified in Sections 105/01 to 105/13 inclusive of The County Care for Persons with Developmental Disabilities Act.



## SYSTEMS OF CARE

Goal #1: Support a continuum of services to meet the needs of people with intellectual and/or developmental disabilities, along with their families, residing in Champaign County.

Objective #1: Under established policies and procedures, solicit proposals from community based providers in response to Board defined priorities and associated criteria using a competitive application process. ~~and during the allocation decision-making process consider multi-year term for select contract awards.~~

Objective #2: Implement two-year contracts for select programs, extending term of the contract for one year stipulating updated program and financial plans are required prior to the start of the second year of the contract.

Objective #3: Expand use of evidence-informed, evidence-based, best practice, and promising practice models which align with new and anticipated federal and state requirements and are appropriate to the presenting need in an effort to improve outcomes for people with I/DD, along with their families, across the lifespan.

Objective #4: Promote wellness for people with I/DD to prevent and reduce early mortality, through support services including enrollment in benefit plans and coordinated access to primary care. Partner with key stakeholders toward improved outcomes for people.

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

Objective #6: As enrollment in health insurance and Medicaid managed care plans reduces the numbers of uninsured, realign CCDDDB investments to fund services and supports outside the realm of Medicaid, including pilot projects and creative solutions to persistent problems such as workforce stabilization. Support benefits counseling and linkage and advocacy to all entitlements for eligible persons. Support access to physical and behavioral health treatments for persons regardless of ability/disability.

Goal #2: Sustain the commitment to addressing the need for underrepresented and diverse populations' access to and engagement in services.

Objective #1: Support culturally responsive and family driven support networks for underrepresented populations, underserved populations, and general populations of Champaign County.

Objective #2: Require, as part of the providers' stated capacity to deliver services, evidence of cultural and linguistic competence to meet the needs of the population served with submission of a cultural and linguistic competence plan and report on same on a bi-annual basis.

Objective #3: Encourage providers and other community-based organizations to allocate resources to provide training, seek technical assistance, and pursue other professional development activities for staff and governing and/or advisory boards to advance cultural and linguistic competence.

Objective #4: Use the Culturally and Linguistically Appropriate Services Standards (CLAS) as a blueprint to strengthen funded agencies' Cultural and Linguistic Competence.

Goal #3: Improve access to and engagement in services through increased coordination and collaboration between providers, community stakeholders, people with I/DD, and their families and other key supporters.

Objective #1: Encourage the development of collaborative agreements between providers to increase or maintain access and coordination of services for people with I/DD in Champaign County.

Objective #2: Participate in various collaborative bodies and intergovernmental councils, with missions aligned with that of the Board, toward strengthening coordination between providers in the delivery of services and creating or maximizing opportunities for people who have I/DD.

Objective #3: Engage other local funders and stakeholders and participate in coordinating bodies as appropriate, to develop new initiatives.

Objective #4: In collaboration with the CCMHB and other community partners, ensure that the needs of justice-involved persons with I/DD are considered in the development of an effective diversion system.

Objective #5: Track Illinois Department of Human Services Division of Developmental Disabilities' Prioritization for Urgency of Need for Services (PUNS) database for state and local trends and to ensure full representation of the service preferences of Champaign County residents. Maintain and increase communication with local ~~Pre-Admission Screening/~~Independent Service Coordination unit, representatives of the IDHS Division of Developmental Disabilities, and stakeholders regarding the use of PUNS, the service and support needs and preferences of Champaign County residents, and system changes.

Goal #4: Encourage high-quality person-centered planning and follow-through for individuals served by agencies receiving funding from the CCDDDB and, through the Intergovernmental Agreement, from the CCMHB.

Objective #1: Continue emphasis on self-determination and Person Centered Planning (PCP) training and implementation for all treatment plan clients. Develop guidelines for structuring and assessing the quality of person-centered planning processes and outcomes.

Objective #2: Require that reports of program performance include examples of outcomes and measures of person-centered planning.

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

Goal #5: Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).

~~Objective #1: In consultation with the CCMHB, review and revise as necessary the current CCMHB-CCDDDB Intergovernmental Agreement.~~

Objective #1: Coordinate integration, alignment, and allocation of resources with the CCMHB to ensure the efficacious use of resources within the service and support continuum for people with I/DD. ~~Identify opportunities for connection to resources used by residents of Champaign County who do not have a disability.~~

Objective #2: Assess alternative service strategies that empower people and increase access to integrated settings as exemplified by the local collaborative approach to the Employment First Act.

Objective #3: Concurrent with the CCMHB, continue financial commitment to expand the availability of Community Integrated Living Arrangement (CILA) and other community-based housing opportunities for people with ID/DD from Champaign County.

~~Objective #5: Foster communication between the CCDDDB and the CCMHB by holding regular meetings between the Executive Director and the Officers of the two Boards, sharing information between the Boards, and co-sponsoring public hearings, trainings, and anti-stigma/pro-inclusion events.~~

Objective #4: Collaborate with the CCMHB on issues of mutual interest as exemplified by the expansion of CILA housing and joint sponsorship of events promoting acceptance, inclusion, and respect for people with I/DD.

#### CHILDREN AND FAMILY FOCUSED PROGRAMS AND SERVICES

Goal #6: Identify children at-risk of developmental delay and intellectual disability or developmental disability and support early intervention services and family supports.

Objective #1: Support the use of evidence-based/informed models for provider programs serving families with young children not eligible for Early Intervention or under the School Code, and require collaboration and coordination by providers to limit duplication of effort.

Objective #2: Participate in collaborative bodies such as Champaign Urbana Cradle 2 Career, whose mission includes a focus on serving young children and their families.

Objective #3: Emphasize cultural competence in services and supports for young children and early identification in minority/underserved youth with disabilities. Reduce disparities in the age of identification and intervention to remediate delays. Promote culturally responsive and family driven support networks for underrepresented populations, underserved, and general populations of Champaign County.

Goal #7: Support access to services and programs for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.

Objective #1: Support a continuum of evidence-based, quality services for persons with I/DD and encourage training of interested persons on the use of evidence-based, evidence-informed, and promising practices and associated outcome measurement.

Objective #2: Establish a formal process for the development of recommendations for optimal transition from school to adult services. Foster collaborations among schools, adult service providers, young people with I/DD, and other stakeholders.

Objective #3: Emphasize flexible support for people with I/DD and their families to enhance their ability to live together, to transition to greater independence when and if they choose, and to be as connected to their communities as possible.

## COMMUNITY ENGAGEMENT & ADVOCACY

Goal #8: Address the importance of acceptance, inclusion, and respect of people with I/DD, through broad based community education efforts to increase community acceptance and positive self-image, to challenge discrimination, and to promote dignity and inclusion.

Objective #1: Continue support for and involvement in efforts to challenge stigma and discrimination, such as the Champaign County Alliance for the Promotion of Acceptance, Inclusion and Respect's signature event at Roger Ebert's Film Festival and other community education events including disABILITY Resource Expo: Reaching Out for Answers. New approaches will be researched and considered this year.

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

Objective #3: Support the continued awareness and understanding of developmental disabilities through sustainable self-advocacy and family support organizations, especially those comprised of parents of and persons with the most prevalent developmental disabilities or intellectual disabilities. Encourage groups' community education efforts to reduce stigma/promote inclusion and collaboration with Cultural and Linguistic Competence Coordinator on outreach and engagement strategies.

Objective #4: Encourage and support efforts to more fully integrate people with I/DD into community life in Champaign County. Emphasize inclusion as a benefit to all members of the community, regardless of ability.

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

Goal #9: Stay abreast of emerging issues affecting the local systems of care and access to services, and be proactive through concerted advocacy efforts.

Objective #1: Advocate for workforce development, stability, and retention, including supporting an increase in the state wage for entry level Direct Support Professionals.

Objective #2: Intensify advocacy efforts on behalf of people with developmental disabilities. Advocate for positive change in state funding, including increased Medicaid reimbursement rates, and policy decisions affecting the local system of care for persons with developmental disabilities. Through participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), the National Association of County Behavioral Health and Developmental Disabilities Directors (NACBHDDD), and other appropriate organizations, support efforts to strengthen local systems of care.

Objective #3: Track state implementation of class action suit settlements involving people with I/DD and the closure of state DD facilities. Advocate for the allocation of state resources sufficient to meet needs of people returning to home communities. Monitor and support the implementation of the Ligas Consent Decree in Champaign County. Encourage and support efforts to develop 4-person (or fewer) residential

options for people who are transitioning from large facilities and those selected from PUNS. For individuals not yet selected, and for those who have chosen Home-Based Support Services rather than CILA, encourage the development of preferred, flexible options.

Objective #4: Follow developments at the state and federal levels of other Olmstead cases. Follow the implementation of the Workforce Innovation and Opportunity Act and new Home and Community Based Services regulations and their impact locally.

Objective #5: As the State of Illinois and provider networks move to a regional service/managed care delivery model, track the implementation of managed care for I/DD services and supports and evaluate local impact. Adjust funding priorities to address service gaps and unmet need. Monitor the implementation of health care reform and Medicaid expansion and advocate for increased service capacity sufficient to meet demand.

Objective #6: Continue broad based advocacy efforts at the state and local levels to respond to reductions in state funding, reimbursement rates below actual cost, and delayed payments for local community-based intellectual disability and developmental disability services and supports and to the broader human services network under contract with the State of Illinois. As opportunities arise, participate in planning and policy development with state agencies such as IDHS, and use these opportunities to advocate for the needs of Champaign County residents.

Objective #7: In addition to the monitoring and evaluation of funded programs, encourage organizational change strategies which not only align with new and anticipated federal and state requirements but also result in the highest quality personal outcomes for individuals with ID/DD, their families, and those most closely involved in their lives.





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

BRIEFING MEMORANDUM

DATE: November 16, 2016  
TO: Members, Champaign County Developmental Disabilities Board (CCDDDB)  
FROM: Lynn Canfield, Executive Director  
SUBJECT: Assessment of Needs for Champaign County Residents with ID/DD

**BACKGROUND:**

One respondent to the Draft Three Year Plan with FY2017 Objectives noted that a specific needs assessment was not referenced. The purpose of this memorandum is to present some sources of our current understanding of needs and preferences of Champaign County residents with I/DD.

**SOURCES OF DATA ON UNMET NEEDS:**

- Regarding our youngest citizens, Child Find data are provided by the Local Interagency Council Coordinator, through the Birth to Six Council of Families and Agencies, on a quarterly basis. Data for first quarter FY2017 were examined and, while they measure access and age of referral, they do not reflect reasons for referral or services indicated. They also report for a four county region with no detail specific to Champaign County. The CU Cradle 2 Career Kindergarten Readiness group is gathering data with the intent to identify the needs of very young children in our community, along with the strengths of their families and barriers to appropriate services.
- In FY2014, a public forum hosted by the CCDDDB highlighted needs across the lifespan, exaggerated by inadequate federal and state investments in these populations. Among them were: early diagnosis and treatment for children and youth, with ongoing recommended therapies hard to secure; low transition support for young adults; inadequate capacity, especially in the most integrated settings, for all adult services; insufficient supports for those with complex needs related to co-occurring disorders, aging, and isolation. All of these are consistent with needs identified throughout the state and in other areas of the country.
- To understand the needs of adults, the CCDDDB has relied on unmet needs data tracked through the Illinois Department of Human Services (IDHS) Prioritization for Urgency of Need for Services. DHS' website contains reports of current data, sorted variously. We are aware of some limitations on the interpretation and comparability of those data, including where local funding may be meeting a need, however temporarily. *A summary is presented below.*
- During FY2016, the CCDDDB contracted with Champaign County Regional Planning Commission's Independent Service Coordination Unit which, through state contracts, is responsible for collecting and sharing regional data to IDHS for PUNS. The CCDDDB contract included a preference assessment collection so that, for the first time, we can examine what people enrolled in PUNS and waiting for state funding are seeking, which may lie beyond the PUNS service categories. The final document was included among FY2016 Agency Performance Outcome Reports in the September

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21<sup>st</sup> board packet and summarized along with others on the public page of our online application website at <http://ccmhddbrds.org>. *The summary is presented below.*

- Agency waiting lists could be helpful in determining unmet needs, but individuals waiting for agency services are encouraged to participate in the PUNS enrollment and updates so that the state has best information for planning, and so that individuals may receive state funding. Local service provider agencies may inform the CCDDDB about the unmet needs of individuals who already have state funding and therefore would be missing from PUNS. This information tends to appear in applications for funding and in quarterly and annual reports from the providers. It is nearly always mirrored by the concerns of advocates across the state, concerns tied to inflexibility of the waiver program rules, inadequacy of associated reimbursement rates, and insufficient provider capacity.

### SUMMARIES OF AVAILABLE DATA:

#### DHS-Division of DD PUNS Data and Unmet Need.

Early this year, the Ligas Court Monitor identified several compliance issues: the workforce crisis; scarcity of smaller CILAs and supports for those with intense needs; day and employment services not as flexible, person centered, or integrated as many prefer or as new Home and Community Based Services regulations will require; and 254 approved individuals were waiting for their approved waiver services to start.

As of January 2016, CCRPC Independent Service Coordination Program showed **262 Champaign County residents receiving HCBS (“waiver”) services**. Of these 262 individuals, some were selected from PUNS as Ligas class members and previously, some elected to move out of Intermediate Care Facilities as Ligas class members, some moved out of State Operated Developmental Centers through Governor Quinn’s ‘rebalancing’ effort, some received waiver awards due to emergency, and some were waiver recipients prior to PUNS selection, Ligas consent decree, or the rebalancing. In previous years, we have referenced the DHS-DDD Summary of PUNS by County and Selection Detail (see attached) in order to track three categories of urgency and list desired services in order of preference.

10/4/11: 201 with emergency need; of 278 with critical need, 123 are recent or coming grads.  
9/10/12: 224 with emergency need; of 288 with critical need, 131 are recent or coming grads.  
10/15/13: 244 with emergency need; of 378 with critical need, 160 are recent or coming grads.  
9/9/14: 260 with emergency need; of 425 with critical need, 180 are recent or coming grads.  
9/8/15: 254 with emergency need; of 440 with critical need, 181 are recent or coming grads.  
9/6/16: 168 with emergency need; of 426 with critical need, 151 have exited school in the past 10 years or expect to in the next 3 years.

*Emergency need = person needs in-home, day, or out of home supports immediately.*

*Critical need = person needs supports within one year.*

#### **What People Have.**

The majority of existing supports, in order, are: Transportation, Education, Speech Therapy, Developmental Training, Occupational Therapy, and Behavioral Supports.

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## **What People Want.**

The most frequently identified desired supports, in order, are Transportation, Personal Support, Support to work in the community, Support to engage in work/activities in a disability setting, Out-of-home residential services with less than 24-hour supports (**100 people**), Speech Therapy, Behavioral Supports, Occupational Therapy, Assistive Technology, Out-of-home residential services with 24-hour supports (**72 people**), and Physical Therapy.

## **Limitations on the use of these data for assessment of unmet needs in Champaign County.**

- Categories of desired service are prescribed, matching existing state-funded service categories, and therefore preferences which could inform local funding decisions are not captured.
- Changes in the way data are tracked, changes in public participation in PUNS enrollment and updates, and 'draws' (selections) related to Ligas compliance have impacted the comparability of these data across years. For example, a person selected for an award will not appear on the list later even if they are still waiting for services.
- Because eligibility determination is done after selection from PUNS rather than upon enrollment, these data will include an unknown number of individuals who do not have a qualifying diagnosis. An FY2016 CCDDDB contract with RPC ISC provides for some eligibility determinations at enrollment and upon request, and this practice may eventually be undertaken statewide.
- Persons likely to qualify as Ligas class members (toward state awards for Home and Community Based services) may be currently served by CCDDDB and CCMHB funded programs while enrolled in PUNS. As a result, these data include individuals whose short-term service and support needs may be met (in full or in part) while they wait for long-term DD waiver funding.

## **Independent Service Coordination Unit FY16 Report on Stated Preferences.**

Of **309 adults** surveyed for PUNS enrollment or annual update during contract year FY16 (July 1, 2015 to June 30, 2016), we learn:

Living Arrangement: 58% prefer to live with family; 20% to live alone; 12% with roommates; 20% in a CILA with a bedroom of their own; 3% in CILA with a roommate; 3% in CILA (unspecified room arrangement); and .33% for each of a Community Living Facility and State Operated Developmental Center.

Location of Residence: 25% prefer to live in Champaign-Urbana; 22% Champaign; 13% Urbana; 10% Champaign County; 10% outside of the County; 7% Rantoul; 5% Mahomet; 3% Philo; 2% St. Joseph; 1% Fisher; 1% Tolono; 0.65% Savoy; and 0.32% in each of Ludlow, Bondville, Gifford, Ogden, Penfield, Pesotum, Royal, and Seymour.

Employment/Volunteering: 37% prefer to work in "other" settings (not specified here); 25% factory; 23% retail; 22% with animals; 21% restaurant/food service; 15% education/childcare; 13% outdoors; 13% office; 12% the arts; 11% service industry; 9% recreation; 9% public services; 6% automotive; 5% trade work; 4% construction; 4% agriculture; 2.5% health services; and 2.5% finances.

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Community Opportunities: 53% are interested in Champaign Urbana (Park District) Special Recreation activities; 46% church; 44% Special Olympics; 31% Best Buddies; 27% other; 23% groups and clubs; 15% health & wellness; 11% continuing education; and 10% gardening.

Leisure: 82% enjoy eating out; 77% movies; 63% parks; 51% zoos/aquariums; 49% recreation/sports; 47% festivals; 47% swimming; 42% other; 42% concerts; 41% sporting events; and 40% theatre/arts/museums.

Supports needed: 70% independent living/daily living; 50% vocational; 45% financial; 42% transportation; 40% medical; 16% none; 13% socialization; 8% behavioral therapy/counseling; 7% assistive technology; and 7% physical/occupational/speech therapy.

Current case management services: 50% ISSA (through the CCRPC Independent Service Coordination unit); 46% Developmental Services Center; 32% other; 18% not currently receiving services; 6% Community Choices; 5% CCMHB/CCRPC Independent Service Coordination; 2.5% Community Elements; and 1% PACE.

The report also holds demographic and residency information: 78% of respondents were adults; 59% male; 74% white, 17% black/African American, 5% other, 3% Asian, and 1% American Indian/Alaskan Native; 2.4% of Hispanic or Latino ethnic origin; 39% lived in Champaign; 26.54% Urbana; 11% Rantoul; 7% Mahomet; 4% Philo; 2.3% St. Joseph; 1.3% Fisher; 1.3% Tolono; 1.3% Savoy; 1% Sidney; and less than 1% for each of Ludlow, Bondville, Broadlands, Gifford, Homer, Ogden, Penfield, Pesotum, Sadorus, and Seymour.

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**Division of Developmental Disabilities**  
**Prioritization of Urgency of Needs for Services (PUNS)**  
**Summary By County and Selection Detail**

September 06, 2016

**County: Champaign****Reason for PUNS or PUNS Update**

New	65
Annual Update	170
Change of category (Emergency, Planning, or Critical)	17
Change of service needs (more or less) - unchanged category (Emergency, Planning, or Critical)	9
Person is fully served or is not requesting any supports within the next five (5) years	183
Moved to another state, close PUNS	9
Person withdraws, close PUNS	20
Deceased	13
Individual Determined Clinically Ineligible	1
Unable to locate	25
Other, supports still needed	4
Other, close PUNS	159

**EMERGENCY NEED(Person needs in-home or day supports immediately)**

1. Individual needs immediate support to stay in their own home/family home (short term - 90 days or less); e.g., hospitalization of care giver or temporary illness of an individual living in their own home.	8
2. Individual needs immediate support to stay in their own home/family home or maintain their employment situation (long term); e.g., due to the person's serious health or behavioral issues.	14
3. Care giver needs immediate support to keep their family member at home (short term - 90 days or less); e.g., family member recuperating from illness and needs short term enhanced supports.	3
4. Care giver needs immediate support to keep their family member at home (long term); e.g., care giver is permanently disabled or is terminally ill and needs long term enhanced supports immediately to keep their family member at home.	12

**EMERGENCY NEED(Person needs out-of-home supports immediately)**

1. Care giver is unable or unwilling to continue providing care (e.g., person has been abandoned).	22
2. Death of the care giver with no other supports available.	3
3. Person has been committed by the court or is at risk of incarceration.	2
4. Person is living in a setting where there is suspicion of abuse or neglect.	4
5. Person is in an exceedingly expensive or inappropriate placement and immediately needs a new place to live (for example, an acute care hospital, a mental health placement, a homeless shelter, etc.).	5
6. Other crisis, Specify:	95

**CRITICAL NEED(Person needs supports within one year)**

1. Individual or care giver will need support within the next year in order for the individual to continue living in their current situation.	66
2. Person has a care giver (age 60+) and will need supports within the next year.	47
3. Person has an ill care giver who will be unable to continue providing care within the next year.	13
4. Person has behavior(s) that warrant additional supports to live in their own home or family home.	45
5. Individual personal care needs cannot be met by current care givers or the person's health has deteriorated.	16
6. There has been a death or other family crisis, requiring additional supports.	2
7. Person has a care giver who would be unable to work if services are not provided.	36
8. Person or care giver needs an alternative living arrangement.	12
9. Person has graduated or left school in the past 10 years, or will be graduating in the next 3 years.	151
10. Person is living in an inappropriate place, awaiting a proper place (can manage for the short term; e.g., persons aging out of children's residential services).	4
11. Person moved from another state where they were receiving residential, day and/or in-home supports.	3
12. The state has plans to assist the person in moving within the next year (from a state-operated or private Intermediate Care Facility for People with Developmental Disabilities, nursing home or state hospital).	1
13. Person is losing eligibility for Department of Children and Family Services supports in the next year.	7
20. Person wants to leave current setting within the next year.	7
21. Person needs services within the next year for some other reason, specify:	16

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**Division of Developmental Disabilities**  
**Prioritization of Urgency of Needs for Services (PUNS)**  
**Summary By County and Selection Detail**

September 06, 2016

<b>PLANNING FOR NEED(Person's needs for service is more than a year away but less than 5 years away, or the care giver is older than 60 years)</b>	
1. Person is not currently in need of services, but will need service if something happens to the care giver.	90
2. Person lives in a large setting, and person/family has expressed a desire to move (or the state plans to move the person).	1
3. Person is dissatisfied with current residential services and wishes to move to a different residential setting.	3
4. Person wishes to move to a different geographic location in Illinois.	3
5. Person currently lives in out-of-home residential setting and wishes to live in own home.	2
6. Person currently lives in out-of-home residential setting and wishes to return to parents' home and parents concur.	1
7. Person is receiving supports for vocational or other structured activities and wants and needs increased supports to retire.	1
8. Person or care giver needs increased supports.	70
9. Person is losing eligibility for Department of Children and Family Services supports within 1-5 years.	1
13. Person is residing in an out-of-home residential setting and is losing funding from the public school system within 1-5 years.	1
14. Other, Explain:	6
<b>EXISTING SUPPORTS AND SERVICES</b>	
Respite Supports (24 Hour)	11
Respite Supports (<24 hour)	16
Behavioral Supports (includes behavioral intervention, therapy and counseling)	93
Physical Therapy	50
Occupational Therapy	96
Speech Therapy	120
Education	156
Assistive Technology	53
Homemaker/Chore Services	3
Adaptions to Home or Vehicle	11
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.)	32
Medical Equipment/Supplies	32
Nursing Services in the Home, Provided Intermittently	5
Other Individual Supports	48
<b>TRANSPORTATION</b>	
Transportation (include trip/mileage reimbursement)	105
Other Transportation Service	145
Senior Adult Day Services	1
Developmental Training	98
"Regular Work"/Sheltered Employment	71
Supported Employment	66
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	18
Other Day Supports (e.g. volunteering, community experience)	17
<b>RESIDENTIAL SUPPORTS</b>	
Community Integrated Living Arrangement (CILA)/Family	3
Community Integrated Living Arrangement (CILA)/Intermittent	4
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	32
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	1
Skilled Nursing Facility/Pediatrics (SNF/PED)	3
Supported Living Arrangement	2
Shelter Care/Board Home	1
Children's Residential Services	9
Child Care Institutions (Including Residential Schools)	2

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**Division of Developmental Disabilities**  
**Prioritization of Urgency of Needs for Services (PUNS)**  
**Summary By County and Selection Detail**

September 06, 2016

Other Residential Support (including homeless shelters) 10

**SUPPORTS NEEDED**

Personal Support (includes habilitation, personal care and intermittent respite services) 240  
Respite Supports (24 hours or greater) 31  
Behavioral Supports (includes behavioral intervention, therapy and counseling) 93  
Physical Therapy 60  
Occupational Therapy 89  
Speech Therapy 108  
Assistive Technology 78  
Adaptations to Home or Vehicle 19  
Nursing Services in the Home, Provided Intermittently 6  
Other Individual Supports 38

**TRANSPORTATION NEEDED**

Transportation (include trip/mileage reimbursement) 222  
Other Transportation Service 207

**VOCATIONAL OR OTHER STRUCTURED ACTIVITIES**

Support to work at home (e.g., self employment or earning at home) 28  
Support to work in the community 180  
Support to engage in work/activities in a disability setting 156

**RESIDENTIAL SUPPORTS NEEDED**

Out-of-home residential services with less than 24-hour supports 100  
Out-of-home residential services with 24-hour supports 72

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**Q1 Personal Background and Social Summary (Provide a one-paragraph overview of the individual including a brief summary of the person's background, skills, and abilities, personal likes and dislikes current and future vision/hopes, relationships with family members and support staff)**

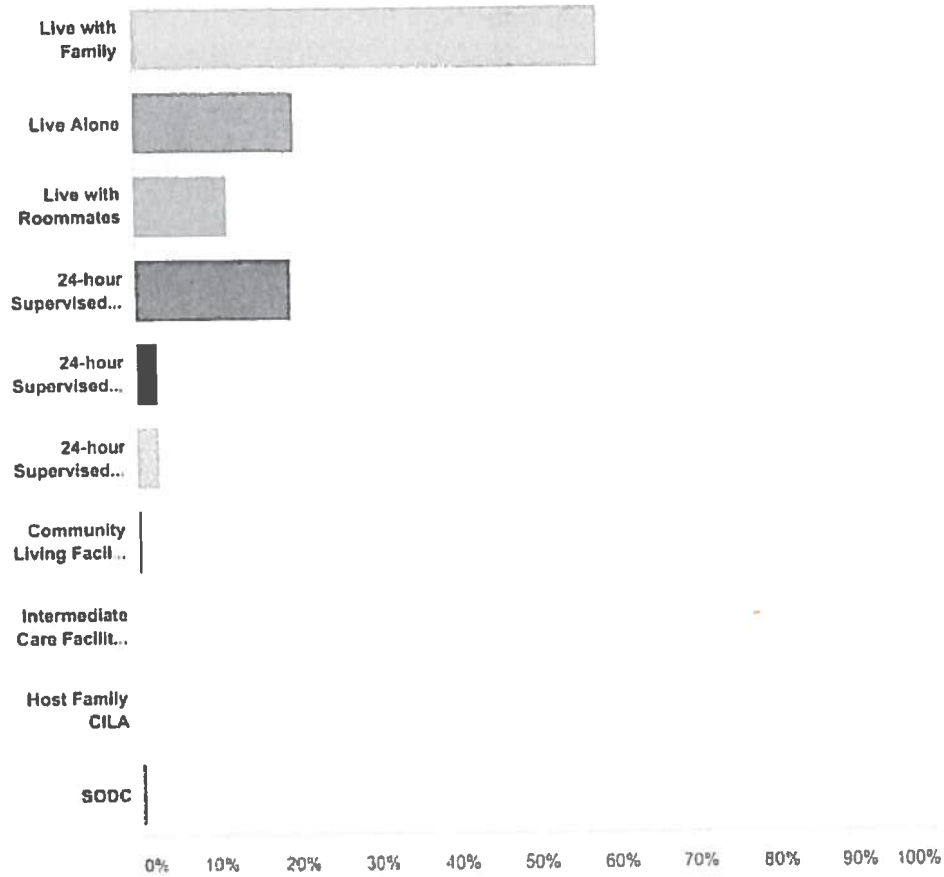
Answered 107 Skipped 2

Answers documented and on file.

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## Q2 What is your preferred living arrangement?

Answered: 302 Skipped: 7

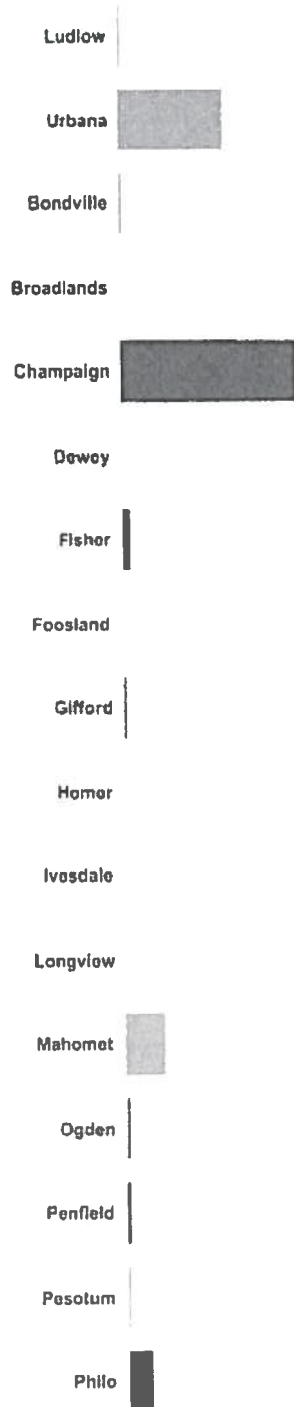


Answer Choices	Responses	Count
Live with Family	58.28%	176
Live Alone	20.20%	61
Live with Roommates	11.92%	36
24-hour Supervised Group Home (CILA) - Single Bedroom	19.54%	59
24-hour Supervised Group Home (CILA) - Shared Bedroom	2.65%	8
24-hour Supervised Group Home (CILA)	2.98%	9
Community Living Facility (CLF)	0.33%	1
Intermediate Care Facility (ICF/DD)	0.00%	0
Host Family CILA	0.00%	0
SODC	0.33%	1

*lol*

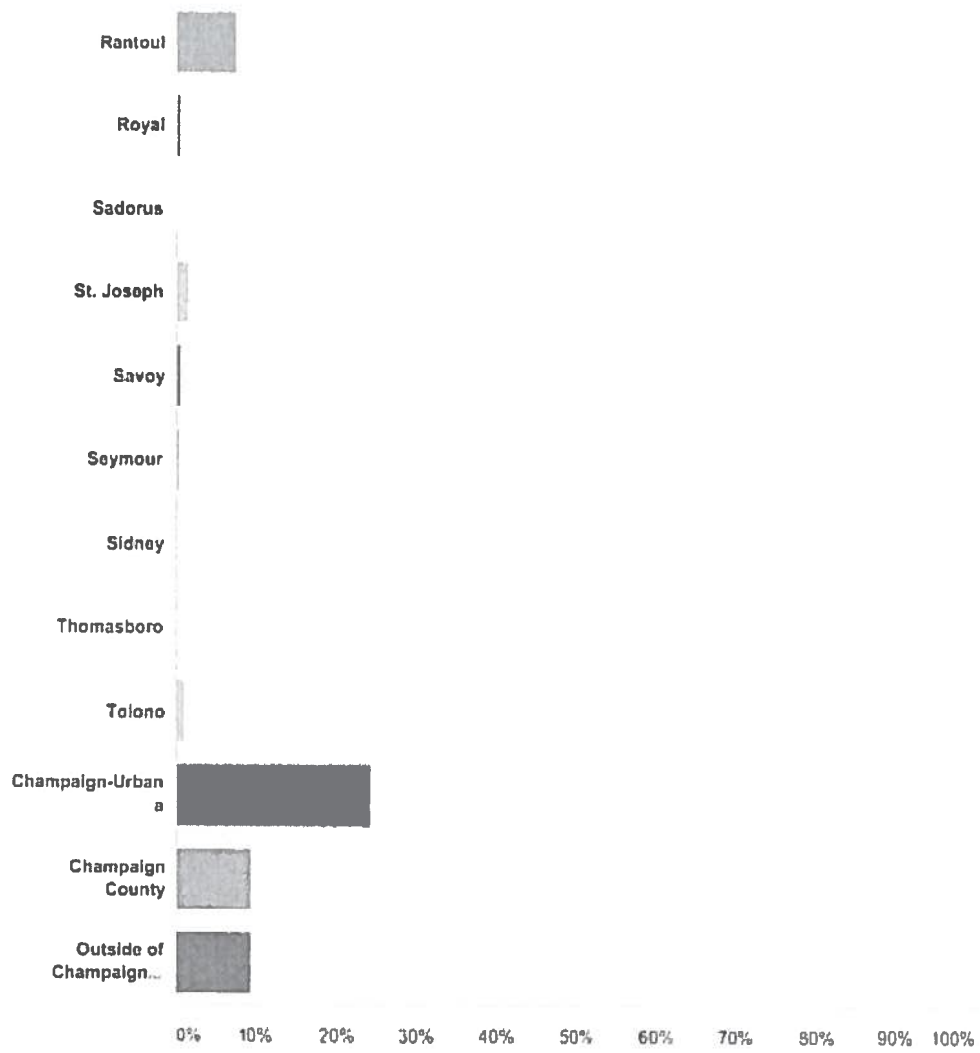
**Q3 Where do you want to live? (City, county, or geographic region; near friends, transportation, desire to learn skills to use public transportation, near employment, near day time activity, recreational services)**

Answered: 309 Skipped: 0



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Answer Choices	Responses	Count
Ludlow	0.32%	1
Urbana	12.94%	40
Bondville	0.32%	1
Broadlands	0.00%	0
Champaign	22.01%	68
Dewey	0.00%	0
Fisher	0.97%	3
Foosland	0.00%	0
Gifford	0.32%	1
Homer	0.00%	0
Ivesdale	0.00%	0

68

ISC Preference Assessment 2015

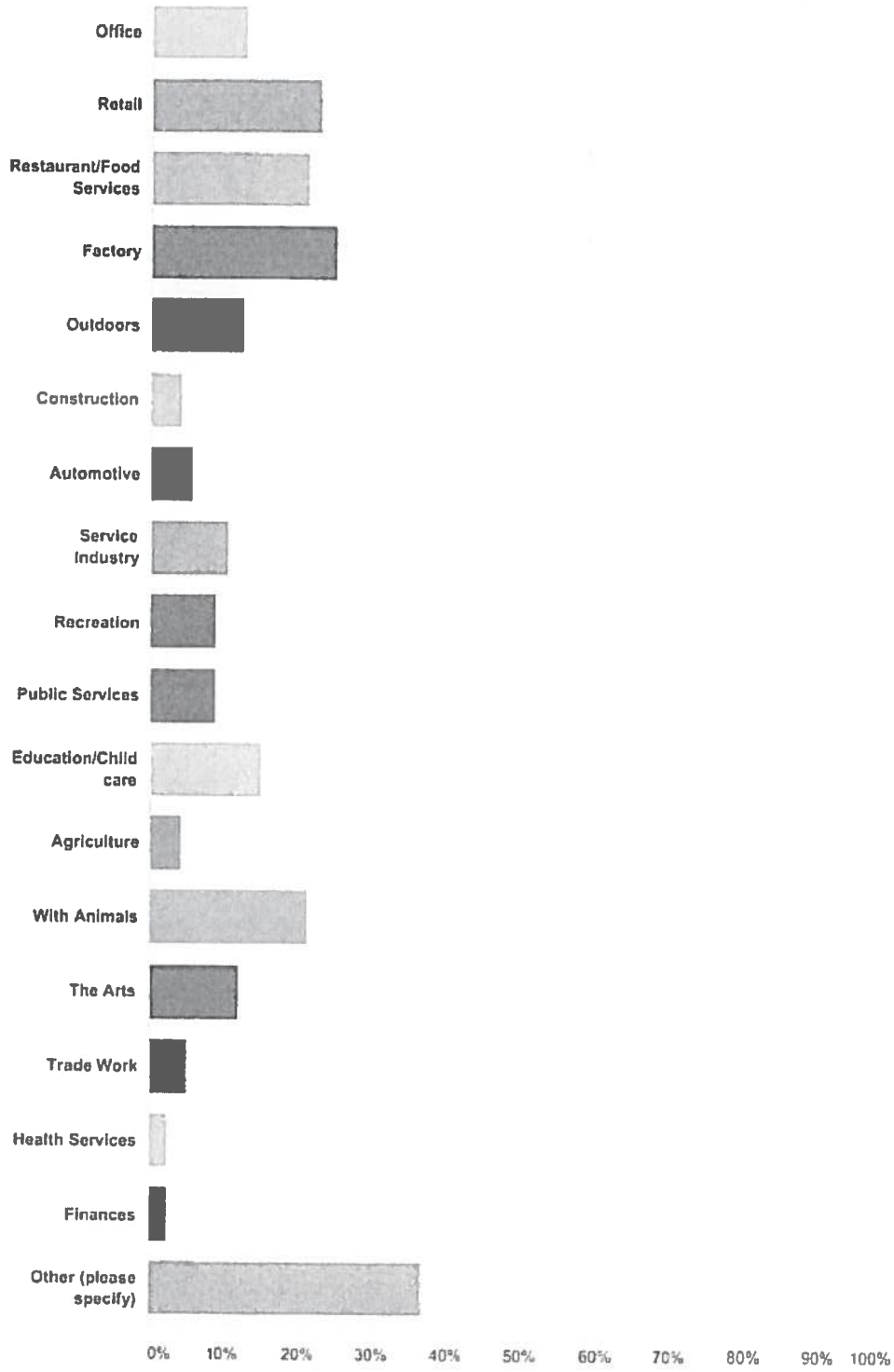
SurveyMonkey

Longview	0.00%	0
Mahomet	4.85%	15
Ogden	0.32%	1
Penfield	0.32%	1
Pesotum	0.32%	1
Philo	2.91%	9
Rantoul	7.44%	23
Royal	0.32%	1
Sadorus	0.00%	0
St. Joseph	1.62%	5
Savoy	0.65%	2
Seymour	0.32%	1
Sidney	0.00%	0
Thomasboro	0.00%	0
Tolono	0.97%	3
Champaign-Urbana	24.27%	75
Champaign County	9.39%	29
Outside of Champaign County	9.39%	29
<b>Total</b>		<b>309</b>

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### Q4 Employment or Volunteer

Answered: 285 Skipped: 24



Answer Choices

Responses

70

ISC - Preference Assessment 2015

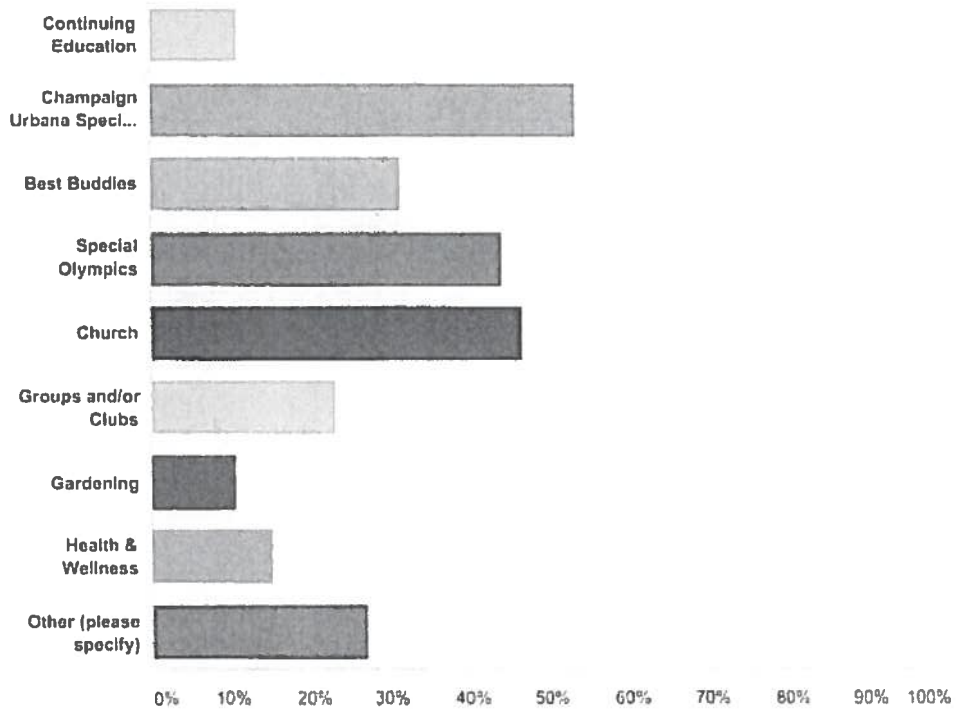
SurveyMonkey

Office	12.63%	36
Retail	22.81%	65
Restaurant/Food Services	21.05%	60
Factory	24.91%	71
Outdoors	12.28%	35
Construction	4.21%	12
Automotive	5.61%	16
Service Industry	10.53%	30
Recreation	8.77%	25
Public Services	8.77%	25
Education/Childcare	14.74%	42
Agriculture	4.21%	12
With Animals	21.05%	60
The Arts	11.93%	34
Trade Work	4.91%	14
Health Services	2.46%	7
Finances	2.46%	7
Other (please specify)	36.84%	105
<b>Total Respondents: 285</b>		

71

### Q5 Community Opportunities

Answered 278 Skipped 31

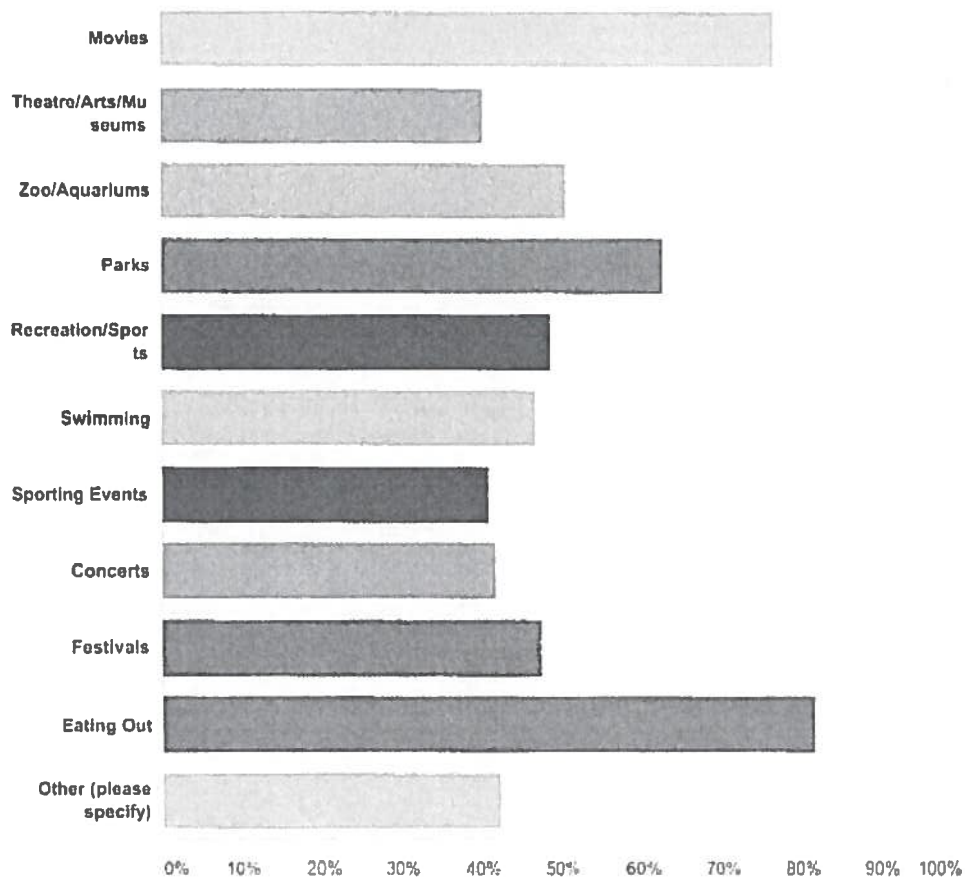


Answer Choices	Responses
Continuing Education	10.79% 30
Champaign Urbana Special Recreation (CUSR)	53.24% 148
Best Buddies	31.29% 87
Special Olympics	43.88% 122
Church	46.40% 129
Groups and/or Clubs	23.02% 64
Gardening	10.43% 29
Health & Wellness	15.11% 42
Other (please specify)	26.98% 75
<b>Total Respondents: 278</b>	

72

### Q6 Leisure

Answered: 300 Skipped: 9

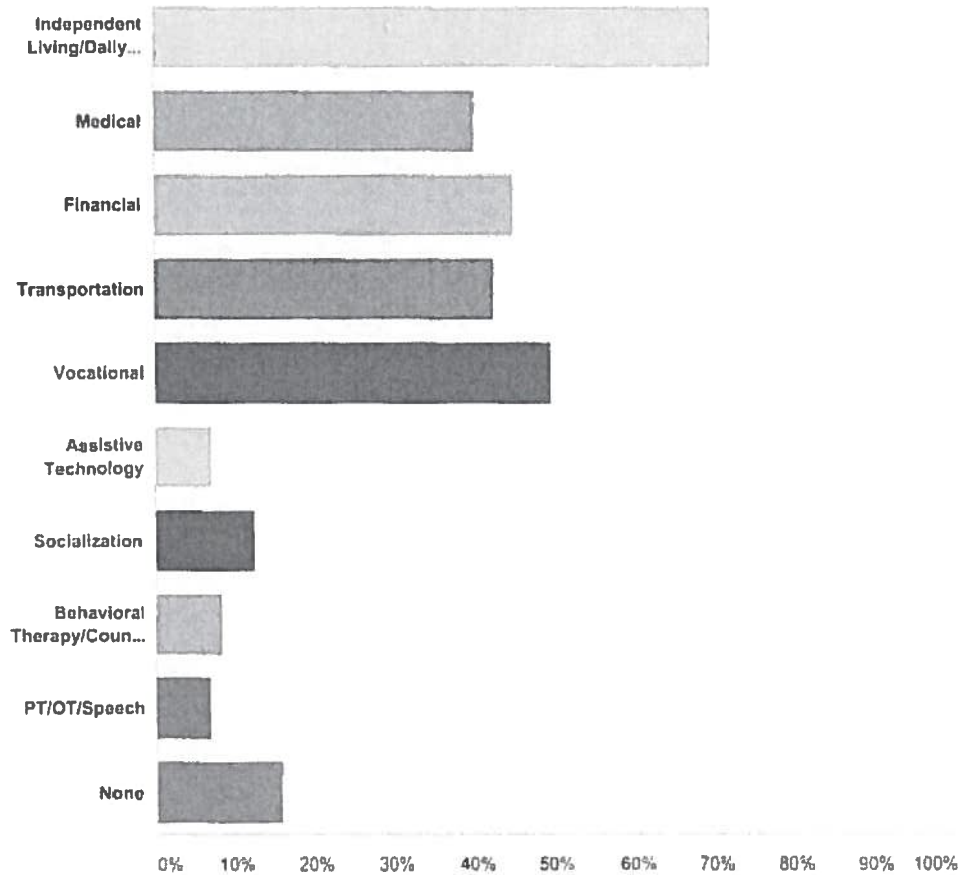


Answer Choices	Responses	Count
Movies	76.67%	230
Theatre/Arts/Museums	40.33%	121
Zoo/Aquariums	50.67%	152
Parks	62.67%	188
Recreation/Sports	48.67%	146
Swimming	46.67%	140
Sporting Events	41.00%	123
Concerts	41.67%	125
Festivals	47.33%	142
Eating Out	81.67%	245
Other (please specify)	42.33%	127

73

**Q7: What kind of supports do you need?- Question was open-ended but answers fell into the following categories.**

Answered 309 Skipped 0

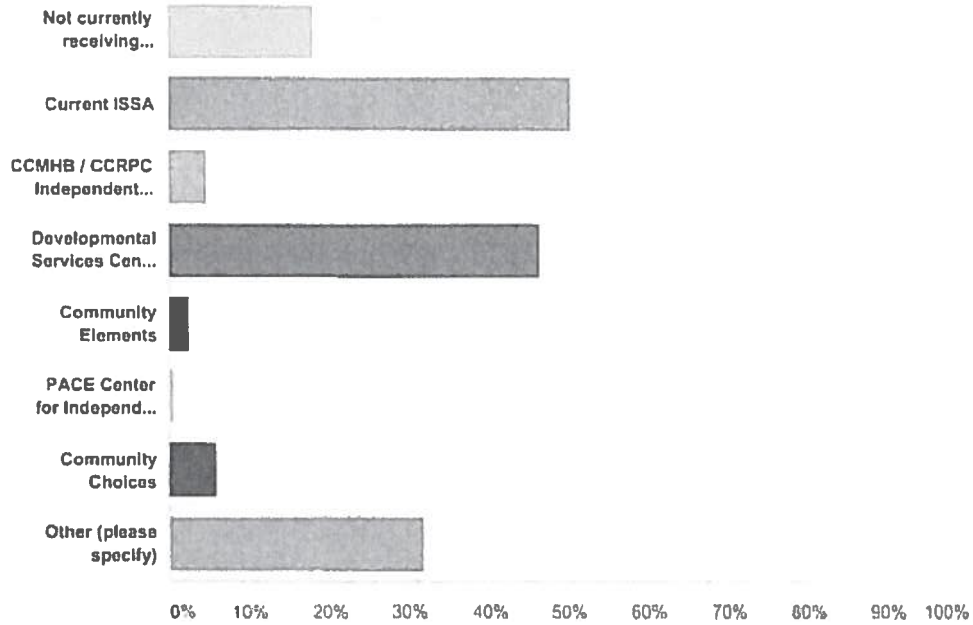


Answer Choices	Responses	Count
Independent Living/Daily Living	69.58%	215
Medical	40.13%	124
Financial	44.98%	139
Transportation	42.39%	131
Vocational	49.51%	153
Assistive Technology	7.12%	22
Socialization	12.62%	39
Behavioral Therapy/Counseling	8.41%	26
PT/OT/Speech	6.80%	21
None	15.86%	49

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### Q8 Are you currently receiving case management services? If so, where?

Answered: 274 Skipped: 35



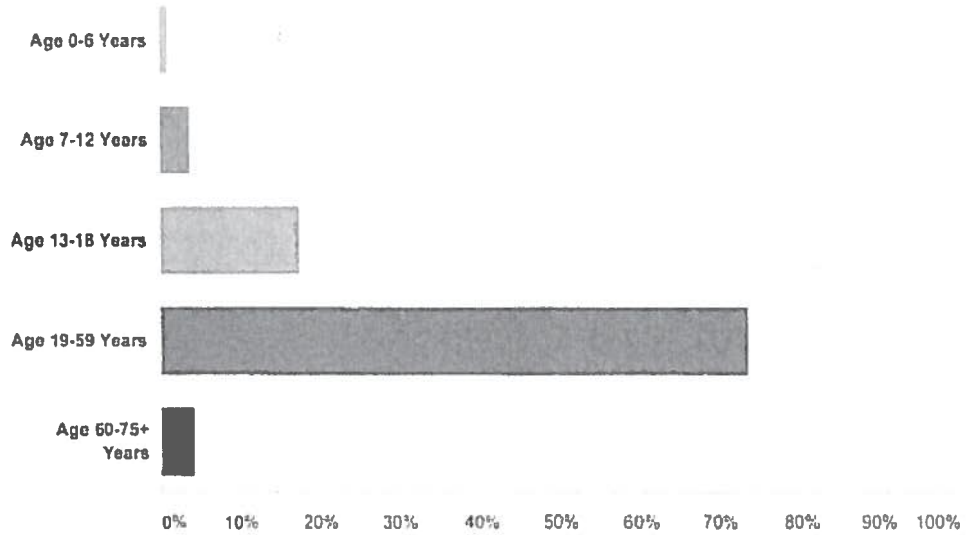
Answer Choices	Responses
Not currently receiving services	18.25% 50
Current ISSA	50.36% 138
CCMHB / CCRPC Independent Service Coordination	4.74% 13
Developmental Services Center (DSC)	46.35% 127
Community Elements	2.55% 7
PACE Center for Independent Living	0.73% 2
Community Choices	5.84% 16
Other (please specify)	31.75% 87
<b>Total Respondents: 274</b>	

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### Q10 Age Group

Answered 265 Skipped 44

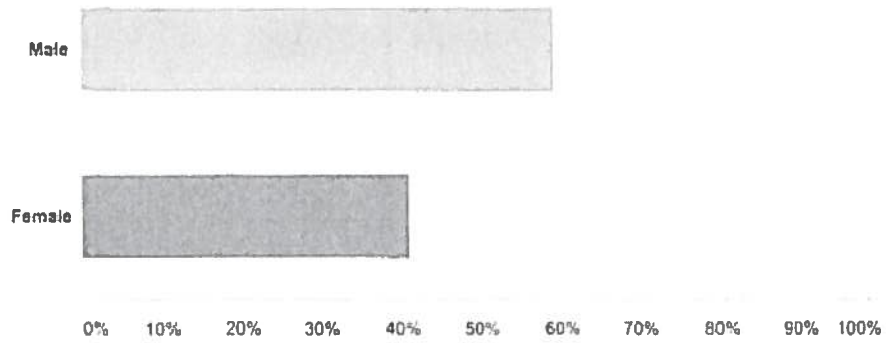


Answer Choices	Responses	
Age 0-6 Years	1.13%	3
Age 7-12 Years	3.77%	10
Age 13-18 Years	17.36%	46
Age 19-59 Years	73.58%	195
Age 60-75+ Years	4.15%	11
<b>Total</b>		<b>265</b>

76

### Q11 Gender

Answered: 296 Skipped: 13

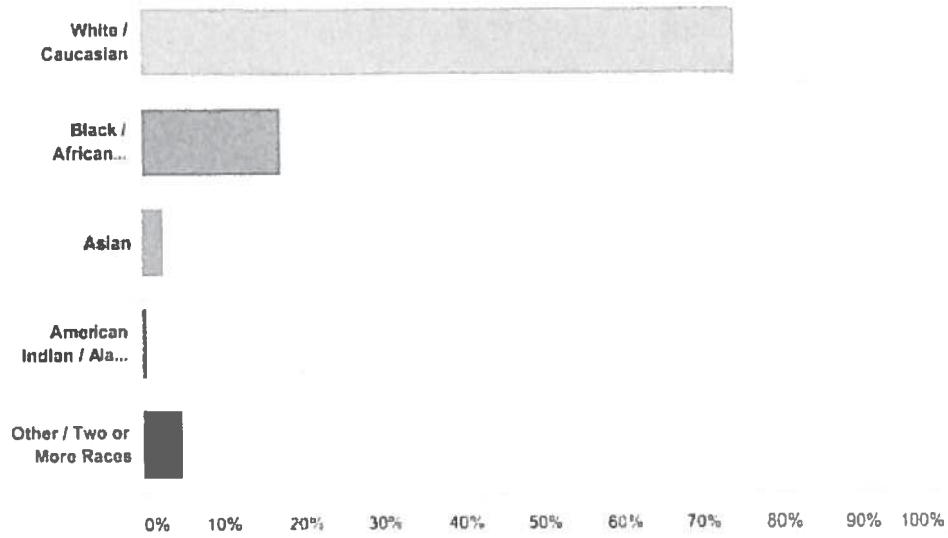


Answer Choices	Responses
Male	59.12% 175
Female	40.88% 121
<b>Total</b>	<b>296</b>

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### Q12 Race

Answered 296 Skipped 13

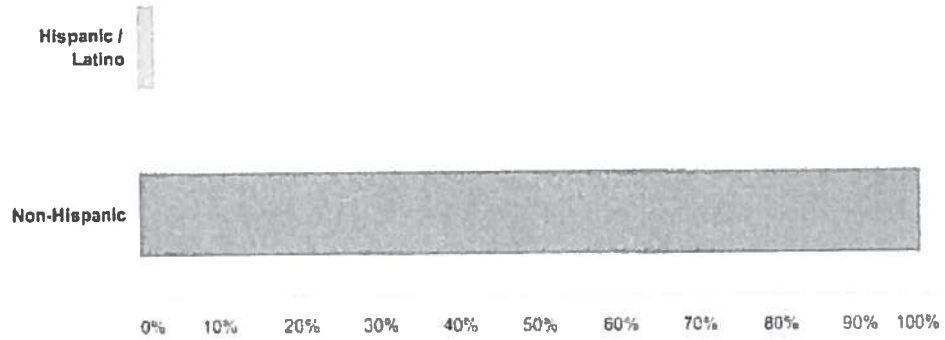


Answer Choices	Responses	Count
White / Caucasian	74.32%	220
Black / African American	17.23%	51
Asian	2.70%	8
American Indian / Alaska Native	0.68%	2
Other / Two or More Races	5.07%	15
<b>Total</b>		<b>296</b>

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### Q13 Ethnicity

Answered: 296 Skipped: 13



Answer Choices	Responses
Hispanic / Latino	2.36% 7
Non-Hispanic	97.64% 289
Total	296

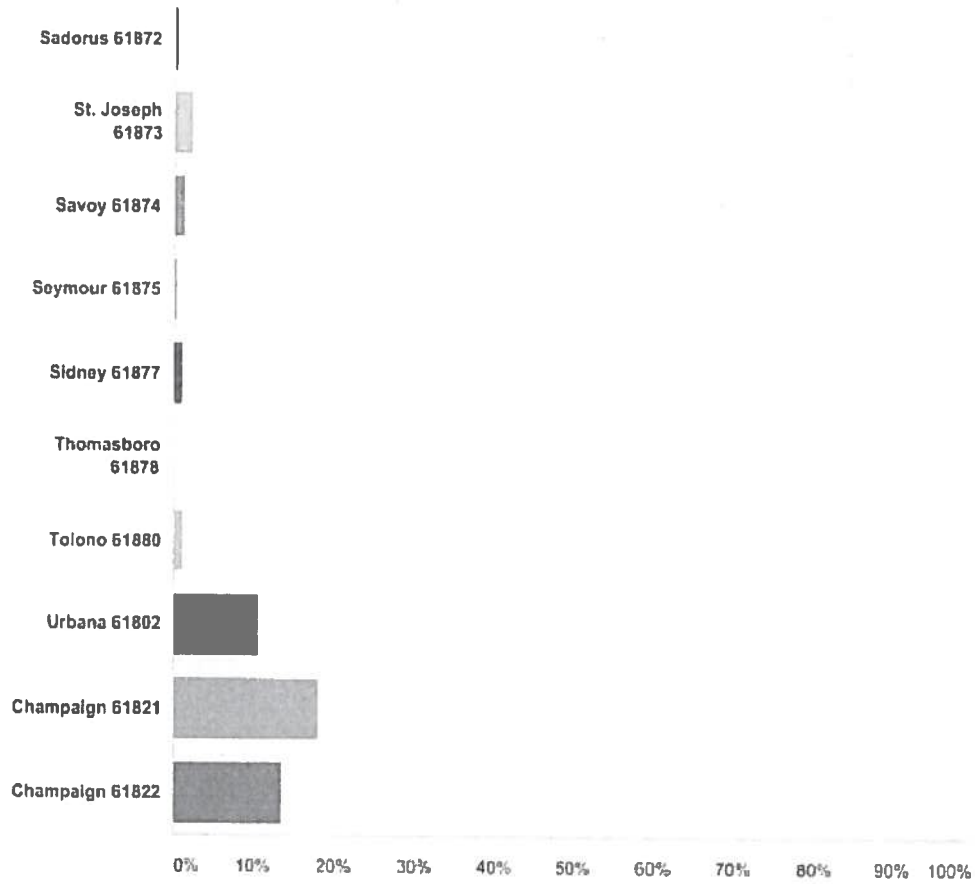
79

### Q14 Zip Code

Answered 309 Skipped 0



80



Answer Choices	Responses	Count
Ludlow 60949	0.65%	2
Urbana 61801	16.18%	50
Bondville 61815	0.32%	1
Broadlands 61816	0.65%	2
Champaign 61820	7.44%	23
Dewey 61840	0.00%	0
Fisher 61843	1.29%	4
Foosland 61845	0.00%	0
Gifford 61847	0.65%	2
Homer 61849	0.65%	2
Ivesdale 61851	0.00%	0
Longview 61852	0.00%	0
Mahomet 61853	7.12%	22
Ogden 61859	0.65%	2

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ISC Preference Assessment 2015 - 4

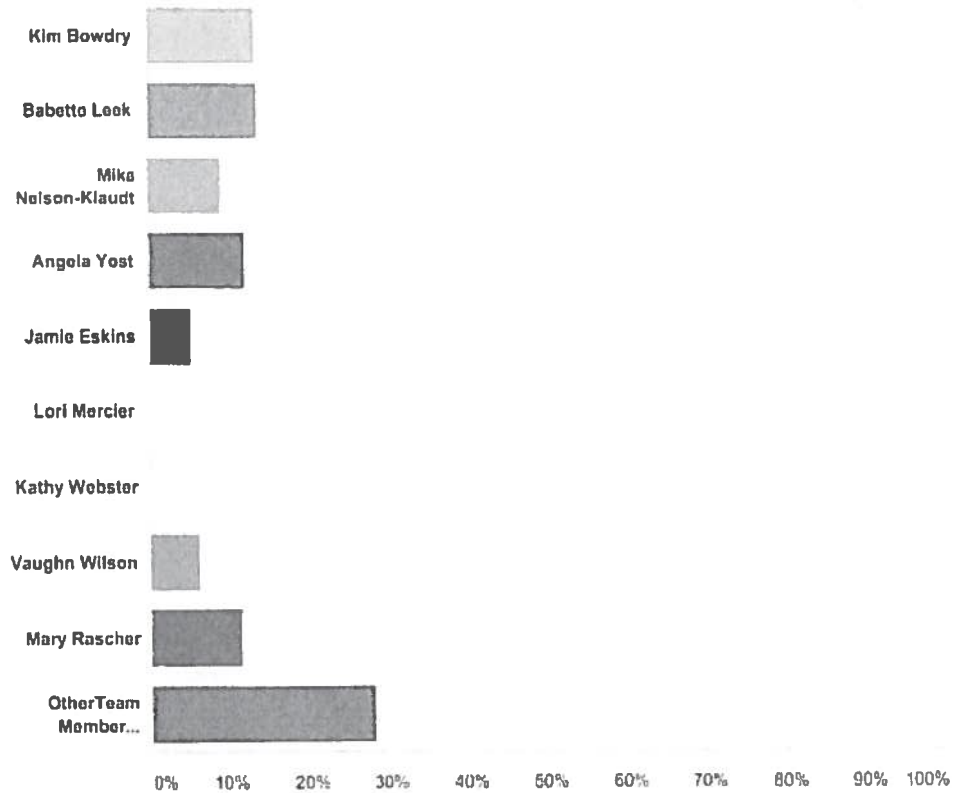
SurveyMonkey

Penfield 61862	0.32%	1
Posolun 61863	0.32%	1
Ph lo 61864	3.88%	12
Rantoul 61866	11.33%	35
Royal 61871	0.00%	0
Sadorus 61872	0.32%	1
St Joseph 61873	2.27%	7
Savoy 61874	1.29%	4
Seymour 61875	0.32%	1
Sidney 61877	0.97%	3
Thomasboro 61878	0.00%	0
Tolono 61880	1.29%	4
Urbana 61802	10.36%	32
Champaign 61821	18.12%	56
Champaign 61822	13.59%	42
<b>Total</b>		<b>309</b>

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### Q15 ISC Coordinator/Surveyor

Answered: 303 Skipped: 6



Answer Choices	Responses	
Kim Bowdry	13.53%	41
Babetto Leek	13.86%	42
Mika Nelson-Klaudt	9.24%	28
Angela Yost	12.21%	37
Jamie Eskins	5.28%	16
Lori Mercier	0.00%	0
Kathy Webster	0.00%	0
Vaughn Wilson	6.27%	19
Mary Rascher	11.55%	35
OtherTeam Member Completing Survey:	28.05%	85
<b>Total</b>		<b>303</b>

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

BRIEFING MEMORANDUM

DATE: November 16, 2016

TO: Members, Champaign County Developmental Disabilities Board (CCDDB)

FROM: Lynn Canfield, Executive Director

SUBJECT: Two-Year Contracts

Background

The issue of extending the term of a subset of FY2017 agency contracts was raised at the October 19, 2016 meeting of the CCDDB and also at the meeting of the Champaign County Mental Health Board (CCMHB.) Current contracts have terms ending June 30, 2017. Agencies had expressed an interest in extended terms, to lend stability, and some board members had indicated that reducing the number of applications to review each year would strengthen their work. The CCDDB Three Year Plan includes language acknowledging the interest in an extended term, and CCDDB Standard Operating Procedures allow for Multi-Year contracts with a maximum term of two years.

Questions raised during the October 19<sup>th</sup> CCMHB meeting may be of interest to the CCDDB as well. These included:

1. Do other county behavioral health authorities use multi-year funding?
2. How does the proposed action align with initial findings of the UIUC Evaluation Capacity study?
3. What criteria determine whether a contract is appropriate for this extension?
4. Would it be better to focus on new programs/special initiatives, with two years of funding to provide some stability for implementation?
5. Should we wait for the final recommendations of the UIUC Evaluation Capacity study, after July 1, 2017, before defining a two-year contracting approach?

In response to question #1, I sought guidance from members of the Association of Community Mental Health Authorities of Illinois. Their responses consisted primarily of cautions about the loss of flexibility by contracting for any term beyond a single year, with a few exceptions. Responses of interest follow:

- “never done multi-year contracts, based on the theory that our levy is determined year by year and we should not commit beyond what we know we have coming in. Now our contracts do include a ‘if we don’t get all the money we think we are getting’ type clause, which could be an ‘out,’ if needed, but you never know if something could change your priorities in some sort of drastic way, from year to year. Multi-year contracts tend to lock you

in. One of the advantages of being a local funder is the flexibility to respond to needs annually. I would opt for the flexibility.”

- “I concur strongly. . . We would never consider multiple year contracts. I know our Act was revised @ 1995 - Sec. 3e. (2) a ‘The board may enter into multi-year contracts for rendition or operation of services, facilities and educational programs.’ If memory serves me correctly the origin of the change was a desire by McHenry County to be able to do so.”
- “We do not have multi-year contracts.”
- “We have a contract amendment form which we use every other year just to cut back on paperwork for continuing contracts that have little to no changes, but we still have each agency apply and go through the board approval each February.”
- “We have started to explore multi-year contracts but have not worked through all the details yet. We ran into areas of concern about reconciliation and reporting. I do have a desire to develop multi-year contracts as many of our programs are funded annually without many changes. . . Our current contracts state that any funding is subject to county board appropriation. . . we are developing a ‘renewal’ or ‘continued funding’ application to reduce proposals year in and year out.”
- “We are also exploring multiple year funding. I am hoping that 3-year funding will stabilize funding streams and allow us to look at more appropriate outcomes. Although this has been a board recommendation, board members are apprehensive to move forward this year. We are hoping to try an 18-month project with this funding cycle and report the strengths and challenges. Our contracts will be dependent upon county board appropriation. Due to this, we have determined that will still need to review annually.”
- “We do not do the multiyear contracting either. What we do have, however, is a three-year funding cycle (Year one – full application materials – years two and three a much smaller application if you are not requesting further funds). This is the process for any current contractor. Any new agency that applies to us has to do the full application – no matter how many years they may have applied. We started doing this versus the large application each year about eight years ago, I believe. We too have somewhat of a ‘historical’ funding pattern with the agencies we contract with.”
- “We decide based on a number of factors what services for what people are needed and what then the Board wants to purchase. We then look for a provider either by doing an RFP or approaching a provider. Our contracts are for a year. In most cases if another funding source for a service we were purchasing developed, if local needs changed, if a provider fails to meet contract parameters-we would discontinue the old funding. If need etc. has not changed, we purchase the services from the same provider in the following year. If we aren’t going to, we let the provider know as soon as possible and many times when we redirect funds we provide close out funding etc. . . I would be very cautious about multi-year contracts because they temper a Board’s ability to be flexible and respond to current need. . . Another variable that may impact this decision is the number of available providers in an area. This year we have contracts with 18 providers involving 48 different services. . . In an area with fewer providers, multi-year contracts might have some value.”

To answer Question #2, from page 24 of the June 17, 2016 report by UIUC Department of Psychology researchers:

**“Consider Two-Year Contracts to Encourage Innovation and Evaluation**

One of the challenges in the use of evaluation is that it takes time to implement and see

results. It is likely that agencies would be pursuing funding for the following year *before* they have learned anything from their current year of implementation. In instances in which people are actively engaged in a new, innovative, evidence-based or highly desired effort (i.e., in strong alignment with CCMHB priorities) two year funding might facilitate more deliberate data driven practices. These contracts could be reserved for high priority areas for the Board and/or when programs are engaged in considerable innovation. Two year contracts would require an evaluation plan with a logic model (see #3) that clearly indicated what data would be gathered and how it would be used.”

To #3, as described in the initial Briefing Memorandum: “It has been our experience that some priorities continue from year to year and that some programs perform consistently to expectation, so that offering a second year to the current term may cause little disruption to the priority-setting and allocation processes.” Staff discussion of best contracts for second year extension focused on those contracts with a longer history of CCDDDB award no serious compliance issues upon monitoring, and those least likely to change in response to changes in health care delivery.

Perhaps Question #4 will be answered in July 2017 if our answer to Question #5 is “yes.”

#### Possible Action

As echoed by so many of the other local authorities in Illinois, single year contract terms allow great flexibility for both the board and providers, as funding priorities may change in response to the unmet support needs of individuals with ID/DD in Champaign County. Provider organizations are responding to a variety of changes in state and federal requirements, system redesign, and serious challenges related to workforce shortage, state budget crisis and payment practices, and the implementation of Medicaid Managed Care. Given the need to respond to so many factors and the Board’s ongoing desire to fund innovations, two-year contracting has not been explored. As a protection, all contracts contain language allowing for termination or redirection of effort when warranted by circumstances such as change in federal regulation or insufficient levy fund.

Agencies would still be required to update program and financial forms on the online system prior to the start of the second year of the contract. Given that all forms required for the annual application process would still be submitted, allowing for relevant updates and monitoring, and the year-end performance outcomes, financial, and CLC progress reports would capture mid-term results, staff recommend consideration of the following contracts for extension of their term to June 30, 2018.

Contracts under consideration include:

CTF Illinois, Nursing Services  
Champaign County Down Syndrome Network  
Community Choices, Community Living  
Developmental Services Center, Apartment Services  
Developmental Services Center, Family Development Center

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To preserve the CCDDDB's emphasis on FY2018 allocation decision criteria, all new applications should align with one or more of the specific priorities.

Board action at a subsequent meeting would involve approving the extension, by contract amendments, of selected contracts' terms from June 30, 2017 to June 30, 2018, and increase in each contract maximum equal to the original contract amount.

Allocations of funding to beginning July 1, 2017 could include two-year contracts for special initiative/pilot projects, if that is consistent with the findings of the Evaluation Capacity study and beneficial to people seeking services through a contract.

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14.G.

## CCDDB 2016-2017 Meeting Schedule

### Board Meetings

8:00AM except where noted

Brookens Administrative Building, Lyle Shields Room  
1776 East Washington Street, Urbana, IL

September 21, 2016 – 8:00 AM

October 12, 2016—8:00 AM Special Meeting

October 19, 2016 – 3:30 PM

October 24, 2016 – 12:30-4:30PM - Joint Study Session with CCMHB,  
on the topics of Trauma and Implicit Bias

November 16, 2016 – 8:00 AM

December 14, 2016 – 8:00 AM

January 18, 2017 – Noon

February 22, 2017 – 8:00 AM

March 22, 2017 – 8:00 AM

April 19, 2017 – Noon

May 17, 2017 – 8:00 AM

June 21, 2017 – 8:00 AM

*This schedule is subject to change due to unforeseen circumstances.*

*Please call the CCMHB/CCDDB office to confirm all meetings.*

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**DRAFT**  
**2016-2017 Meeting Schedule with Subject and Allocation Timeline\***

The schedule provides the upcoming dates and subject matter of board meetings through June 2017 for the Champaign County Developmental Disabilities Board. The subjects are not exclusive to any given meeting as other matters requiring Board review or action may also be addressed or may replace the subject listed. Study sessions may be scheduled throughout the year with the presentation and discussion held during the meeting, held immediately following the board meeting, or during the Champaign County Mental Board meeting. Included with the meeting dates is a tentative schedule for the CCDDDB allocation process for Contract Year 2018 (July 1, 2017 – June 30, 2018).

<u>Timeline</u>	<u>Tasks</u>
9/21/16	Regular Board Meeting Release Draft Three Year Plan 2016-2018 with FY 2017 Objectives
10/19/16	Regular Board Meeting Release Draft CY18 Allocation Criteria
10/24/16	Trainings on Trauma and Implicit Bias Study Session of the CCDDDB and CCMHB, 12:30-4:30PM
11/16/16	Regular Board Meeting Approve Three Year Plan with One Year Objectives Allocation Decision Support – CY 2018 Allocation Criteria
12/14/16	Public Notice published on or before this date, giving at least 21 day notice of the open application period.
12/14/16	Regular Board Meeting
1/4/17	CCMHB/CCDDDB Online System opens for CCDDDB CY 2018 application cycle.
1/18/17	Regular Board Meeting
2/10/17	Online System Application deadline – System suspends access to CY18 applications at 4:30 p.m. (CCDDDB close of business).
2/22/17	Regular Board Meeting List of Funding Requests
3/22/17	Regular Board Meeting
4/12/17	Program summaries released to Board and copies posted online with the CCDDDB April 19, 2017 Board meeting agenda.

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4/19/17 Regular Board Meeting  
Program Summaries Review and Discussion

5/10/17 Allocation recommendations released to Board and copies posted  
online with the CCDDDB May 17, 2017 Board meeting agenda.

5/17/17 Regular Board Meeting  
Allocation Decisions  
Authorize Contracts for CY 2018

6/21/17 Regular Board Meeting  
Approve FY 2018 Draft Budget

6/30/17 Contracts completed.

*\*This schedule is subject to change due to unforeseen circumstances. Please call the CCMHB-  
CCDDDB office to confirm all meetings and allocation process deadlines.*

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H. H.



## ACRONYMS

ABA	Applied Behavior Analysis
ADA	Americans with Disabilities Act
ADL	Activities of Daily Living
ASD	Autism Spectrum Disorders
CART	Clinical Administrative Review Team
CILA	Community Integrated Living Arrangement
CMS	Center for Medicaid & Medicare Services
DCFS	Department of Children and Family Services
DD	Developmental Disabilities
DDD	Division of Developmental Disabilities
DHS	Department of Human Services
DMH	Division of Mental Health
DPH	Department of Public Health
DRS	Division of Rehabilitation Services
DSCC	Division of Specialized Care for Children
DT	Developmental Training Day Program for adults
EI	Early Intervention (birth to 3)
HBS	Home Based Services
HFS	Department of Health Care and & Family Services (Public Aid)
HUD	Housing & Urban Development
ICAP	Inventory for Client and Agency Planning
ICF – DD	Intermediate Care Facility for Individuals with Developmental Disabilities
IDEA	Individual with Disabilities Education Act
IDPH	Illinois Department of Public Health
IEP	Individual Education Plan
ISBE	Illinois State Board of Education
ISC	Individual Service Coordination
ISP	Individual Support Plan
ISSA	Individual Service and Support Advocacy

OIG	Office of the Inspector General
PACKET	Information on paper going to Network Facilitator advocating your need for help
PAS	Pre-Admission Screening
PDD	Pervasive Developmental Disorder
POS	Purchase of Service funding method – fee for service
PUNS	Prioritization of Urgency of Need for Services (waiting list)
QA	Quality Assurance
QIDP	Qualified Intellectual Disabilities Professional
QSP	Qualified Support Professional
SEP	Supported Employment Program
SNAP	Supplemental Nutritional Assistance Program (food stamps)
SNT	Special Needs Trust
SODC	State Operated Developmental Center
SSA	Social Security Administration
SSDI	Social Security Disability Insurance
SSI	Supplemental Security Income
SST	Support Service Team
UCP	United Cerebral Palsy