



## 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, April 24, 2019**

Brookens Administrative Building, Lyle Shields Room  
1776 E. Washington St., Urbana, IL 61802

**8 AM**

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

1. Call to Order
2. Roll Call
3. Approval of Agenda\*
4. Citizen Input/Public Participation  
*At the chairperson's discretion, public participation may be limited to five minutes per person.*
5. President's Comments – Ms. Deb Ruesch
6. Executive Director's Report – Lynn Canfield
7. Approval of CCDDDB Board Meeting and Study Session Minutes\* **(pages 3-8)**  
*Minutes from 03/20/19 and 03/27/19 are included. Board action is requested.*
8. Financial Information\* **(pages 9-10)**  
*A copy of the claims report is included in the packet. Action is requested.*
9. New Business
  - A. Agency Requests for I/DD Funding for FY2020 **(pages 11-111)**  
*For discussion, the packet includes: spreadsheet of requests for funding, from the CCDDDB, for I/DD programs DRAFT 2020 Summary Analyses of Applicants' Cultural and Linguistic Competence Activities (per agency); DRAFT Program Summaries for FY2020 Requests; and a list of acronyms specific to CCDDDB/CCMHB application/reporting. All applications were reviewed by agency staff, board members, and an independent reviewer. Comments were consolidated as 'Reviewer.'*
  - B. Board Direction  
*This item supports board discussion of planning and funding. No action is requested.*
  - C. Successes and Other Agency Information

*Funded program providers and self-advocates are invited to give oral reports on individuals' successes. At the chairperson's discretion, other agency information may be limited to five minutes per agency.*

10. Old Business

A. Meeting Schedules (**pages 112-114**)

*Copies of CCDDB and CCMHB meeting schedules and CCDDB allocation process timeline are included in the packet for information.*

11. CCMHB Input

12. Board Announcements

13. 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 –March 20, 2019*

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

*8:00 a.m.*

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**MEMBERS PRESENT:** William Gingold, David Happ, Gail Kennedy, Deb Ruesch

**MEMBERS EXCUSED:** Cheryl Hanley-Maxwell

**STAFF PRESENT:** Kim Bowdry, Lynn Canfield, Stephanie Howard-Gallo, Chris Wilson, Shandra Summerville

**OTHERS PRESENT:** Dale Morrissey, Vickie Tolf, Annette Becherer, Patty Walters, DSC; Katie Harmon, Regional Planning Commission (RPC); Becca Obuchowski, Community Choices; Kathy Kessler, Rosecrance, Inc., Amy Slagell, CU Able

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**CALL TO ORDER:**

Ms. Deb Ruesch, CCDDB President called the meeting to order at 8:00 a.m.

**ROLL CALL:**

Roll call was taken and a quorum was present.

**APPROVAL OF AGENDA:**

The agenda was in the packet for review. The agenda was approved.

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**CITIZEN INPUT:**

None.

**PRESIDENT'S COMMENTS:**

None.

**EXECUTIVE DIRECTOR'S COMMENTS:**

Ms. Canfield reviewed current Senate Bills relative to ID/DD.

**APPROVAL OF CCDDDB MINUTES:**

Minutes from the February 20, 2019 meeting were included in the Board packet.

**MOTION: Ms. Ruesch moved to approve the meeting minutes from February 20, 2019. Dr. Kennedy seconded the motion. The motion passed unanimously.**

**FINANCIAL INFORMATION:**

A copy of expenditures was included in the Board packet.

**MOTION: Dr. Gingold moved to approve the claims report as presented. Dr. Kennedy seconded the motion. The motion passed unanimously.**

**NEW BUSINESS:**

**Community Choices Matching Funds Request:**

A Decision Memorandum and a written formal request from Community choices was included in the Board packet for action.

Community Choices has applied for a two-year grant from the Illinois Council on Developmental Disabilities (ICDD) to provide funding to continue and expand on the work the members of Community Choices have already done locally with health care professionals. The Executive Director of Community Choices has written a formal request for the CCDDDB to provide 21% matching funds towards the budget of the project.

Community Choices has requested \$71,000 from the Illinois Council on Developmental Disabilities to finance this project over two years. The program total budget is \$90,000. The request for the CCDDDB is to allow Community Choices to reserve \$19,000 from the PY20 CCDDDB grant for matching funds from FY20 for the ICDD grant. If awarded the ICDD grant, Community Choices would then decrease the total request from the CCDDDB for the Self-

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Determination Support funds for FY20 from \$138,000 to \$119,000. This would ensure program continuity without an assumption of future funding from the CCDDDB.

Funding from the ICDD would allow Community Choices to expand on the work currently being done with health care professionals in the Self-Determination Support program. Newly developed personalized tools for people with I/DD, to use when working with people supporting them, will be presented and taught during workshops co-led and taught by self-advocates. Community Choices will collaborate with health care providers to use these tools to address the rights and needs of patients with I/DD.

**MOTION:** Ms. Ruesch moved to approve the match of \$19,000 as described in the memorandum and contingent upon the award of the Illinois Council on Developmental Disabilities grant. Dr. Kennedy seconded the motion. A roll call vote was taken and the motion passed unanimously.

**Program Year 2018 Service Data:**

A Briefing Memorandum detailing specific services delivered and offering limited insight into the actual cost of I/DD services was included in the packet for information only.

**Update on Legislative and Policy Conferences:**

A Briefing Memorandum summarizing activities of the March 2019 NACBHDD and NACO Legislative and Policy Conferences was included in the Board packet for information only.

**Board Direction:**

No discussion.

**Successes and Agency Information:**

Becca Obuchowski from Community Choices, Annette Becherer from DSC, and Kathy Kessler from Rosecrance provided the Board with recent success stories.

**OLD BUSINESS:**

**Meeting Schedules:**

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

**Acronym Sheet:**

A list of useful acronyms was included for information only.

**CCMHB Input:**

The CCMHB will meet this evening.

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**STAFF REPORTS:**

Staff reports from Kim Bowdry, Stephanie Howard-Gallo, Shandra Summerville, and Chris Wilson were included in the packet for review.

**BOARD ANNOUNCEMENTS:**

None.

**ADJOURNMENT:**

The meeting adjourned at 9:00 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

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

*Minutes—March 27, 2019*

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

*5:30 p.m.*

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**MEMBERS PRESENT:** Thom Moore, Joe Omo-Osagie, William Gingold, Gail Kennedy

**MEMBERS EXCUSED:** Julian Rappaport, Susan Fowler, Judi O'Connor, Elaine Palencia, Kyle Patterson, Jane Sprandel, Margaret White, Cheryl Hanley Maxwell, Deb Ruesch, David Happ

**STAFF PRESENT:** Lynn Canfield

**OTHERS PRESENT:** Hannah Behm, Lindsey Defilippo, Erik Garcia, Angela Ellsion, UIC College of Nursing

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**CALL TO ORDER:**

The study session was called the meeting to order at 5:30 p.m.

**ROLL CALL:**

Roll call was taken and a quorum was not present.

**CITIZEN INPUT / PUBLIC PARTICIPATION:**

None.

**PRESIDENT'S COMMENTS:**

None.

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**STUDY SESSION:**

**Online System Review:**

Alex Campbell from EMK Consulting provided an introduction to navigating the CCMHB/CCDDB online system.

The meeting adjourned at 6:55 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo  
CCMHB/CCDDB Staff

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





CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/09/19

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VENDOR NO	VENDOR NAME	TRN B TR DTE N CD	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						MENT HLTH BD FND 090			
	2/26/19	80 VR 108- 111			588681	2/28/19	108-050-533.07-00	PROFESSIONAL SERVICES	DEC ADMIN FEE	472.55
	3/07/19	04 VR 108- 28			589045	3/08/19	108-050-533.07-00	PROFESSIONAL SERVICES	MAR ADMIN FEE	28,129.00
	4/01/19	06 VR 108- 37			590541	4/09/19	108-050-533.07-00	PROFESSIONAL SERVICES	APR ADMIN FEE	28,129.00
									VENDOR TOTAL	56,730.55 *
161	CHAMPAIGN COUNTY TREASURER						REG PLAN COMM FND075			
	3/07/19	04 VR 108- 20			589048	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR DECISION SUPPOR	9,969.00
	4/01/19	05 VR 108- 29			590544	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR DECISION SUPPOR	9,969.00
									VENDOR TOTAL	19,938.00 *
11587	CU ABLE									
	3/07/19	04 VR 108- 22			589079	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COMM OUTREACH	1,273.00
	4/01/19	05 VR 108- 31			590570	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COMM OUTREACH	1,273.00
									VENDOR TOTAL	2,546.00 *
18203	COMMUNITY CHOICE, INC						SUITE 419			
	3/07/19	04 VR 108- 23			589098	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COMMUNITY LIVIN	6,041.00
	3/07/19	04 VR 108- 23			589098	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CUSTOM EMPLOY	7,250.00
	3/07/19	04 VR 108- 23			589098	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR SELF DETERMINAT	9,666.00
	4/01/19	06 VR 108- 32			590589	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COMMUNITY LIVIN	6,041.00
	4/01/19	06 VR 108- 32			590589	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CUSTOM EMPLOY	7,250.00
	4/01/19	06 VR 108- 32			590589	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR SELF DETERMINAT	9,666.00
									VENDOR TOTAL	45,914.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF						CHAMPAIGN COUNTY INC			
	3/07/19	04 VR 108- 24			589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR APARTMENT SVCS	35,821.00
	3/07/19	04 VR 108- 24			589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CLINICAL SVCS	14,500.00
	3/07/19	04 VR 108- 24			589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COMMUNITY EMPLO	30,114.00
	3/07/19	04 VR 108- 24			589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COMMUNITY FIRST	66,583.00

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

4/09/19

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VENDOR NO	VENDOR NAME	TRN B TR DTE N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 108 DEVLPMNTL DISABILITY FUND										
3/07/19	04 VR 108-	24	589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CONNECTIONS		7,083.00	
3/07/19	04 VR 108-	24	589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR EMPLOYMENT FIRS		6,667.00	
3/07/19	04 VR 108-	24	589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR INDIV/FAMILY SU		33,702.00	
3/07/19	04 VR 108-	24	589113	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR SERVICE COORD		34,237.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR APARTMENT SVCS		35,821.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CLINICAL SVCS		14,500.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COMMUNITY EMPLO		30,114.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COMMUNITY FIRST		66,583.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CONNECTIONS		7,083.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR EMPLOYMENT FIRS		6,667.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR INDIV/FAMILY SU		33,702.00	
4/01/19	06 VR 108-	33	590606	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR SERVICE COORD		34,237.00	
							VENDOR TOTAL		457,414.00 *	
22816 DOWN SYNDROME NETWORK										
3/07/19	04 VR 108-	21	589116	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR DOWN SYNDROME		1,250.00	
4/01/19	05 VR 108-	30	590610	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR DOWN SYNDROME		1,250.00	
							VENDOR TOTAL		2,500.00 *	
54930 PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT, INC										
3/07/19	04 VR 108-	25	589180	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR CONSUMER CONTRO		1,750.00	
3/07/19	04 VR 108-	25	589180	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR OP FOR INDEPEND		4,083.00	
4/01/19	06 VR 108-	34	590663	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR CONSUMER CONTRO		1,750.00	
4/01/19	06 VR 108-	34	590663	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR OP FOR INDEPEND		4,083.00	
							VENDOR TOTAL		11,666.00 *	
61780 ROSECRANCE, INC.										
3/07/19	04 VR 108-	26	589200	3/08/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	MAR COORD SVC DD/MI		2,929.00	
4/01/19	06 VR 108-	35	590679	4/09/19	108-050-533.92-00	CONTRIBUTIONS & GRANTS	APR COORD SVC DD/MI		2,929.00	
							VENDOR TOTAL		5,858.00 *	
							DEPARTMENT TOTAL		602,566.55 *	
							FUND TOTAL		602,566.55 *	

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# I/DD Program Funding Requests for FY2020

July 1, 2019 thru June 30, 2020

Agency	Program Name	Current Awards		Requests	
		PY19	PY20	PY19	PY20
		DDB	MHB	DDB/MHB	Increase
<i>Priority: Linkage and Advocacy for People with I/DD</i>					
CCRPC - Community Services	Decision Support PCP	\$119,629.00		\$424,738.00	255%
Developmental Services Center	Service Coordination	\$410,838.00		\$423,163.00	3%
Rosecrance Central Illinois	Coordination of Services: DD/MI	\$35,150.00		\$35,150.00	FY19 level
<i>Priority: Employment Services and Supports</i>					
Community Choices, Inc.	Customized Employment	\$87,000.00		\$98,900.00	14%
Developmental Services Center	Community Employment	\$361,370.00		\$361,370.00	FY19 level
Developmental Services Center	Connections	\$85,000.00		\$85,000.00	FY19 level
Developmental Services Center/Community Choices	Employment First	\$80,000.00		\$80,000.00	FY 19 level
United Cerebral Palsy Land of Lincoln	Vocational Services	\$34,590.00		\$60,000.00	73%
<i>Priority: Non-Work Community Life and Flexible Support</i>					
Developmental Services Center	Apartment Services	\$429,861.00		\$442,757.00	3%
Developmental Services Center	Clinical Services	\$174,000.00		\$174,000.00	FY19 level
Developmental Services Center	Community 1st (formerly ISBS)	\$799,000.00		\$822,970.00	3%
Developmental Services Center	Individual & Family Support	\$404,428.00		\$416,561.00	3%
PACE	Consumer Control in Personal Support	\$21,000.00		\$23,721.00	13%
<i>Priority: Comprehensive Services &amp; Supports for Young Children</i>					
Champaign County Head Start/Early Head Start	Social Emotional Development Svcs		\$73,605.00	\$112,004.00	52%
Developmental Services Center	Family Development		\$562,280.00	\$579,148.00	3%
<i>Priority: Self-Advocacy and Family Support Organizations</i>					
CU Able	CU Able Community Outreach	\$15,285.00		\$15,275.00	FY19 level \$10 less
Champaign County Down Syndrome Network	CC Down Syndrome Network	\$15,000.00		\$15,000.00	FY19 level
Community Choices, Inc.	Self-Determination Support	\$116,000.00		\$138,000.00	19%
PACE	Opportunities for Independence	\$49,000.00		\$55,640.00	14%
<i>Priority: Expansion of Independent Community Residential Opportunities</i>					
Community Choices, Inc.	Community Living	\$72,500.00		\$81,000.00	12%
CILA (now substracted from totals)	CILA Expansion	50,000	50,000	\$100,000.00	
<b>TOTAL</b>		\$3,309,651.00	\$635,885.00	\$4,444,397.00	
		total PY19 = \$3,945,536		total requests	
		w/ CILA = \$4,045,536		w/ CILA = \$4,544,397	

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2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Champaign County Regional Planning Commission and Head Start

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes</b>
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	<b>Yes</b>
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>Yes-</b> Include in annual self-assessment, identification of the linguistic capacity of staff, collaborators, and the language assistance needs of consumers/families.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	Offer a higher rate of pay to potential employees who are fluent in languages other than English.
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	CCHS- conducts recruitment throughout Champaign County at libraries, elementary schools, door to door, grocery and convenience stores, community events, community agencies, among other locations. CCHS also uses its Community Assessment to focus recruitment efforts where income-eligible families reside. In addition, Head Start Staff attends and presents Head Start information at community meetings to share program information with providers, who serve the same populations.
<i>Inter-Agency Collaboration</i>	<b>Yes-</b> CCRPC Community Services and CC Head Start- Early Head

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Champaign County Regional Planning Commission and Head Start

	Start attend community meetings within Champaign County, and the information is shared across divisions. It is also outlined in the program plan Part One.
<i>Language and Communication Assistance</i>	<b>Yes- Outlined in CLC Plan</b>
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes</b>

**Additional Comments:**

*The CLC Plan for Champaign County Regional Planning Commission/Head Start matched the actions with National (Culturally and Linguistic Appropriate Services) CLAS Standards and the updated format that was outlined in the application. CCHS has a clear strategy of engagement for underrepresented or marginalized communities and rural communities outside of meetings and web presence. In the application there is interagency collaboration to ensure access and cross system collaboration for the targeted populations. All staff employed by Community Services and Head Start receives cultural and linguistic competence organizational assessment survey annually. CCRPC-Community Services and CCHS-EHS combined their CLC Plan to ensure that there was continuity across departments. Since CCPRC Programs have so many different target populations, engagement for each program is unique and must be planned intentionally.*



Developmental Disabilities Board
Draft PY2020 CCDDDB Program Summary
Agency: CCRPC - Community Services
Program: Decision Support PCP

PY20 CCDDDB Funding Request \$424,738
PY20 Total Program Budget \$424,738
Current Year Funding (PY19) \$119,629
Proposed Change in Funding - PY19 to PY20 = 255 %

Priority: Linkage and Advocacy for People with I/DD

Services/People Served

Target Population: People with I/DD registering on the PUNS database for the first time and/or for their annual update, adults with I/DD registered on PUNS without Medicaid waiver funding and receiving services funded through the CCDDDB, and people with I/DD who are transitioning from an ISBE setting and in need of adult I/DD services.

Reviewer: Above and below edited. Expansion of existing PCP and case management services increased to serve up to 200 adults with I/DD receiving CCDDDB funding only, up from 40 in FY19. Transition Consultant services and Preference Assessment continue.

Scope, Location, and Frequency of Services

Scope: Single point of intake for persons with I/DD seeking DHS Medicaid waiver funding, providing Independent Service Coordination (ISC) services and conflict free person centered planning. The Decision Support PCP program proposes to conduct extensive outreach, preference assessment, and person centered planning services for Champaign County residents with I/DD without Medicaid waiver funding. Consultation and transition planning services provided to those nearing graduation from ISBE services. Preference assessment data compiled after new PUNS registration/enrollment for those transferring into Champaign County services. Conflict free person centered planning and case management services, uses the same Discovery and Personal Plan tools developed by DHS and currently required for all ISC agencies

Outreach: Public and private high school professionals and families, scheduled events in the community to engage underserved populations, and CCDDDB funded I/DD provider agencies. Up to 200 adults, without DHS Medicaid waiver funding, in the PUNS seeking services category and on PUNS for the longest, served through CCDDDB funding eligible to participate in conflict free person centered planning and case management services.

Location: Program staff will meet with people seeking services/families at Champaign County High Schools, CCRPC offices, I/DD provider agency buildings, persons served homes, and community locations.

Frequency: PUNS preference assessments and assistance with case management supports are provided at minimum once annually and ongoing as long as the persons served remain on PUNS. Transition Consultant services are provided, on average, bi-monthly for approximately one to three months. PCP services are provided on a quarterly basis but more frequently based on each client's needs for approximately one year.

Residency

Table with 3 columns: Category, PY2018 (count and percentage), PY2019 (count and percentage). Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County.

Demographics: Total Served = 67 in PY2018

Age

Ages 0-6 -----	1 (1.5%)
Ages 7-12 -----	6 (9.0%)
Ages 13-18 -----	8 (11.9%)
Ages 19-59 -----	49 (73.1%)
Ages 60-75+ -----	3 (4.5%)

**Race**

White -----	52 (77.6%)
Black / AA -----	10 (14.9%)
Asian / PI -----	1 (1.5%)
Other (incl. Native American and Bi-racial) -	4 (6.0%)

**Gender**

Male -----	38 (56.7%)
Female -----	29 (43.3%)

**Ethnicity**

Of Hispanic/Latinx Origin -----	2 (3.0%)
Not of Hispanic/Latinx Origin -----	65 (97.0%)

**Program Performance Measures**

**CONSUMER ACCESS:** Champaign County residents with a suspected I/DD diagnosis will be eligible for a PUNS meeting. Those who are determined to have an I/DD diagnosis and registering on PUNS are eligible to participate in a preference assessment. Adults with an I/DD in the PUNS seeking services category are eligible for conflict free person centered planning. People with an I/DD diagnosis nearing graduation from high schools in Champaign County and requesting assistance with transition to adult I/DD services are eligible for Transition Consultant services. Referrals from: other service providers, outreach events, flyer distribution to local community committees and agencies, high school professionals, CCRPC’s website and social media accounts, direct contact from individuals with I/DD and their families, and inter-organizational referrals through CCRPC’s community services programs.

**Of those seeking assistance or referred 100% will receive Services/Support.**

**Within 5 days from referral, 95% of those referred will be assessed;**

**Within 5 days of assessment, 95% of those assessed will engage in services.**

**People will engage in services, on average, for one to three months and for one year.**

The estimated length of participant engagement is one to three months. For person centered planning participants it is 1 year.

**Additional Demographic Data:** Household income of TPCs, insurance information, and Medicaid RIN number.

*Reviewer: Above lightly edited.*

**CONSUMER OUTCOMES:**

Outcome #1: Individuals with I/DD will have greater choice of services and supports in Champaign County.

Outcome #2: Individuals with I/DD transitioning out of ISBE services will have a transition plan in place to adult I/DD services.

Outcome #3: Individuals selected from PUNS who were provided service through the Decision Support Person Centered Planning Program will be supported in service connection based on their personal preferences; they will also meet eligibility criteria and have quicker access to Medicaid Waiver Services upon PUNS selection.

**Assessment Tools:**

Outcome #1: Preference Assessment, Discovery Tool, and Person-Centered Plan, collected annually.

Outcome #2: Transition Plan, Individualized Education Plan (IEP), collected quarterly.

Outcome #3: DHS required PAS paperwork and Medicaid Waiver Service award letters, collected annually.

**Outcome gathered from all participants: Yes**

**Anticipate 498 total participants for the year.**

**Is there a target or benchmark level for program services? Yes**

Outcome #1 – For Person Centered Planning Services all persons served required to have at least one outcome. This standard is set by the State of Illinois Department of Human Services, Division of Developmental Disabilities.

Outcome #2 – All persons served with Transition Consultant services will have a transition plan in place. This is a requirement by the State of Illinois, Board of Education.

Outcome #3 – 95% of persons selected from PUNS will be found eligible for services. Outcome requirement set forth by the State of Illinois Department of Human Services, Division of Developmental Disabilities in FY20 for all ISC programs.

Reviewer: for Outcome #2, the responsibility for completed transition plans and IEPs remains with the school, per School Code and 377 statute. For Outcome #3, 'support' for service connection should be defined: e.g., giving a phone number or helping a person make the call? Is there a list of available resources not necessarily waiver-funded or DDB/MHB funded but which could be meaningful, in response to personal preferences? If not, such a list could be developed through collaboration (TPC, Expo, other). People may want things other than a job or house, especially while waiting for them, and some may be low cost and community based. Another possible enhancement of these outcomes would be to develop a plan for the 5% who are not eligible for services through PUNS.

**Estimated level of change for these outcomes are 100%, 100%, and 95%.**

**Outcome #1** - 100 percent of individuals will be given the opportunity to complete a preference assessment. 100 percent of individuals will be supported in identifying services based on their preferences through their person centered plan.

**Outcome #2** - 100 percent of eligible individuals working with a Transition Consultant will be registered on PUNS and provided support in developing a transition plan prior to graduation.

**Outcome #3** - 95% of individuals selected from PUNS who were provided service through the Decision Support Program will be found eligible for Medicaid Waiver Services and 90% will begin receiving services within three months.

Reviewer: above edited. Data collected by program staff and Program Manager.

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 248 Individuals registering on PUNS who need linkage/referral to community resources and brief conflict free case management including gathering of PAS documentation prior to being selected from PUNS; adults receiving conflict free person centered planning who are in the PUNS seeking services category; and individuals/families receiving Transition Consultant services.

**Non-Treatment Plan Clients (NTPCs):** 250 Individuals registering on PUNS and completing preference assessment and persons PUNS registered updating their preferences.

**Service Contacts (SCs):** 300 Individuals attending outreach events.

**Community Service Events (CSEs):** 40 Staff presentations and tabling at outreach events, meeting with Champaign County high schools and other professionals.

Reviewer: service hours for TPCs and NTPCs will be reported into online reporting system.

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$424,738

**PY20 Total Program Budget:** \$424,738

**Current Year Funding (PY19):** \$119,629

**Proposed Change in Funding - PY19 to PY20 = 255%**

PY19 request was for \$119,629

PY18 request was for \$86,460, Award was for \$86,460

PY17 request was for \$48,622, Award was for \$48,622

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**Funding from the CCDDDB is 100% of budgeted revenue.**

Reviewer: Increase in funding provides Conflict Free Case Management to up to 200 people enrolled in services funded by CCDDDB, waiting for PUNS selection. What is the plan for services if this is not funded at the full requested amount?

**Expenses:** Personnel-related costs (Salaries/Wages \$214,798, Payroll Taxes \$28,152, and Benefits \$71,785) are the primary expense charged to CCDDDB at 75% of \$424,738.

Other expenses: Professional Fees/Consultants \$1,200, Consumables \$1,500, General Operating \$7,027 (2%), Occupancy \$96,276 (23%), Conferences/Staff Development \$2,000, and Local Transportation \$2,000.

Reviewer: Occupancy expense reflects indirect cost rate of 45% charged to the program. The indirect cost rate applied to CCRPC Head Start and to CCRPC Community Services applications is different. This approach is approved by Illinois DCEO: 45% on 100% of salaries, for benefit time and staff related overhead, is recorded under 'Occupancy' expense line. (In contrast, CCRPC Head Start uses 45% on 85% of salaries, per GATA approved rate.) CCDDDB funds a portion of the program manager, a portion of a transition consultant, and a portion of seven case managers.

**Total Agency, Total Program, and CCDDDB Budgets are balanced.**

**Program Staff funded by CCDDDB:** Indirect 0 FTEs and Direct 5.55 FTEs = Total 5.55 FTEs



**Total Program Staff:** Indirect 0 FTEs and Direct 5.55 FTEs = Total 5.55 FTEs

**Audit Findings:** *Included in Champaign County audit, PY18 audit not yet available, PY19 audit not yet due. If selected for funding in PY20, an audit will again be required.*

## **CCDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDB Priorities? Yes**

### **Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** The Decision Support PCP program will continue to attend and conduct outreach regarding available services at events that reach members of underserved and underrepresented minority populations. In FY18 and FY19, outreach events were conducted at (not an exhaustive list): Choices' Community Resource Fun Fair Event at the Urbana Civic Center, disABILITY Resource Expo, Rantoul Community Resource Fair, CU Pridefest, and Church of the Living God Health and Wellness Fair. Transition Consultant services have also targeted rural High Schools. Services can be provided at locations preferred by persons served.

**Inclusion, Integration and Anti-Stigma:** CCRPC collaborates with persons served to advocate for increased independence, autonomy, and community inclusion. As required by DHS, CCRPC upholds all components of the Person Centered Planning process that are supportive of promoting inclusion, reducing stigma or discrimination, or improving access to the community. CCRPC continues to attend outreach events, conduct presentations, and educates the community regarding the strengths and abilities of persons with I/DD and the services available to assist persons with I/DD in order to promote inclusion and reduce stigma.

**Coordinated System:** Program works collaboratively with 8 Champaign County I/DD provider agencies and Champaign County High School professionals.

**Budget and Program Connectedness:** Yes. *The budget narrative provides adequate descriptions of associated items.*

**Person Centered Planning (PCP):** Yes

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** Conflict of Interest Free Case Management specifies that States are required to separate case management functions (including the person centered plan development) from service delivery functions. Case management includes: determination of eligibility, provider identification, service plan development, and monitoring of Plan. "Conflict free" means that Case Management must be performed by someone other than a relative of the person served, someone other than a direct provider of service, someone who does not have a financial interest in a provider, or someone who is not employed by a provider.

**Evidence of Collaboration:** The Decision Support PCP program works collaboratively with all I/DD provider agencies in Champaign County and works closely with Champaign County High School professionals. Written working agreements are in development and are anticipated to be fully executed no later than 7/1/19.

**Staff Credentials:** Yes, all program staff are Qualified Intellectual Disability Professionals (QIDP) and required to have a bachelor's degree in a human services field and minimum of one year of experience working with people with I/DD. Program Manager is an LCSW with 10+ years of experience working in social services. Other program staff have 10-40 years' experience in social work, having a Master's degree, and one has a PhD.

**Resource Leveraging:** No **Other Pay sources** None. **Client Fees** No. **Sliding Scale** No. **Willing to participate in DD waiver programs** No, program only serves people without state waiver funding who are awaiting PUNS selection.

### **Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Evidence of written working agreements and sample PCP documents.*
- *In order to avoid duplication of effort, this program (if funded for all proposed purposes) will be required to work closely with another service provider to best address and meet the needs of individuals and families who do not have state funding for service coordination or other supports. Combined reports on these efforts may be required, to ensure that CCDDB funding is supporting people appropriately.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Developmental Services

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

Required Benchmark by CCMHB/DDB	Summary of Actions outlined CLC Plan
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> Board and Staff will receive annual Cultural Competence Training
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	<b>Yes-</b> Documentation is kept on how the organization recruits for diverse backgrounds.
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>Yes-</b> All DSC staff and management will participate in a cultural and linguistic diversity self-assessment. This process will inform the cultural diversity training for the organization.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>Yes-</b> Monthly articles will be submitted to the "In House" newsletter about cultural competence. Resources allocated will include a line item in the budget for cultural competence research, training, and implementation of the CLC plan.
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	<b>Yes-</b> Many strategies are outlined in the program plan part 1 for the programs offered by DSC.
<i>Inter-Agency Collaboration</i>	<b>Yes-</b> It is outlined in the program plan part 1.
<i>Language and Communication Assistance</i>	<b>Yes-</b> A List of qualified interpreters will be maintained as a resource to ensure informed care. DSC will translate and/or update the agency brochure in

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2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Developmental Services

	Spanish and Braille. Agency brochure will be available in English, Spanish, and Braille. <b>DSC will post signage</b> indicating the availability of language assistance.
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes-</b> Actions matched the National CLAS Standards.

**Additional Comments:**

*DSC Programs have so many different target populations, engagement for each program is unique and must be planned intentionally. The CLC Plan that was presented provided actions that were able to be measured and attainable.*



**Draft PY2020 CCDDDB Program Summary**  
**Agency: Developmental Services Center**  
**Program: Service Coordination**

**PY20 CCDDDB Funding Request:** \$423,163  
**PY20 Total Program Budget:** \$595,441  
**Current Year Funding (PY19):** \$410,838  
**Proposed Change in Funding - PY19 to PY20 =** 3%

**Priority:** Linkage and Advocacy for People with I/DD

**Services and People Served**

**Target Population** Children and adults with I/DD, residing in Champaign County, and requesting support to enhance or maintain their highest level of independence in the community, at work, and in their home.

**Scope, Location, & Frequency of Services**

**Scope:** DSC Case Coordinators/QIDPs provide services to children and adults, including: Intake screening; Advocacy; Assessment; Medical support/advocacy; Information services; Crisis intervention; 24-hour on-call emergency support; Intermittent direct service; Planning and implementation of individual support plan/implementation strategies; Recognize informed choice through conflict-free case management; •Collaborate with CCRPC ISC in developing Person-Centered Plans and by developing Implementation Strategies for Waiver and CCDDDB Person-Centered plans; Coordinate interdisciplinary team, including direct support staff, program writers, and clinical consultants; Linkage to benefits/entitlement services; Apply for SSDI and SSI; Representative Payee support; complete yearly reports for the Social Security Administration; maintain records and files of all money spent; in accessing tax professionals for filing federal and state taxes; Assist in securing a burial plots and funeral home plans; Legal Support; DCFS Support and guardianship; Housing support; complete yearly LIHEAP enrollment.

**Location/Frequency:** Services and supports occur in the person’s home, at DSC, medical facilities, clinicians’ offices, and other community locations where the person served requests support.

*Reviewer: Scope of services is unchanged from PY19. Applicant provided additional detail on specific services participants might be linked to and processes for SSDI/ SSI benefits application and on varying levels of supports needed and Person Centered Plan. Definition of Conflict Free Case Management – Case Management must be performed by someone other than a relative of the person served, someone other than a direct provider of service, someone who does not have a financial interest in a provider, or someone who is not employed by a provider. Collaboration with CCRPC ISC in developing PCPs is critical to reducing the risk of conflict of interest, as this program is ‘employed by a provider.’*

**Residency**

Total Served	279 in PY2018	262 in PY2019 (first two quarters)
<b>Champaign Set</b>	113 (40.5%) for PY18	107 (40.8%) for PY19
<b>Urbana Set</b>	94 (33.7%) for PY18	87 (33.2%) for PY19
<b>Rantoul</b>	8 (2.9%) for PY18	8 (3.1%) for PY19
<b>Mahomet</b>	15 (5.4%) for PY18	16 (6.1%) for PY19
<b>Other Champaign County</b>	49 (17.6%) for PY18	44 (16.8%) for PY19

**Demographics: Total Served in PY2018 = 279**

**Age**

Ages 0-6 -----	2 (.7%)
Ages 7-12 -----	2 (.7%)
Ages 13-18 -----	3 (1.1%)
Ages 19-59 -----	235 (84.2%)
Ages 60-75+ -----	37 (13.3%)

**Race**

White -----	213 (76.3%)
Black / AA -----	49 (17.6%)
Asian / PI -----	9 (3.2%)
Other (incl. Native American and Bi-racial) -	8 (2.9%)
<b>Gender</b>	
Male -----	160 (57.3%)
Female -----	119 (42.7%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	6 (2.2%)
Not of Hispanic/Latinx Origin -----	273 (97.8%)

## Program Performance Measures

**CONSUMER ACCESS:** Children and adults with I/DD and eligible for the PUNS list, residing in Champaign County are eligible for services. People learn about the program through the disAbility Expo, the Champaign County TPC Round Table presentation, support group referrals, physician and interagency referrals, DSC website, Facebook, outreach events, brochures, and other informational materials.

**Of those seeking assistance or referred 90% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 30 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services throughout lifetime in many cases.**

**Additional Demographic Data:** Disability and referral source are also collected at the time of intake.

*Reviewer: Applicant also provided detail on eligibility for the program.*

## CONSUMER OUTCOMES:

Outcome 1: People will actively participate in the development of their personal outcomes driving the content of the implementation strategies documented by assigned QIDP.

Outcome 2: People will participate in POM (personal outcome measures) interviews.

Outcome 3: People will maintain/make progress toward their chosen outcomes.

### Assessments/Data Collection:

Outcome 1: Personal Plan will be reviewed and documented at annual meeting, with monthly QIDP notes recorded in each individual's records and by Service Coordination staff in monthly QIDP notes. Self-report on specified survey questions will be documented.

Outcome 2: POM interview booklets will be maintained. Participation in interview will be documented in the person's file.

Outcome 3: Progress toward meeting personal outcomes is documented on a monthly basis and twenty-five random files will be reviewed each quarter to review progress.

**Outcome gathered from all participants?** No. Random sample of individual records will be selected on a quarterly basis for people receiving services for at least one year.

**Anticipate 300 total participants for the year.**

**Will collect outcome information** Quarterly.

**Is there a target or benchmark level for program services?** Yes. Targets/benchmarks are estimated from past outcomes in the program.

**FY19 Measure:** People will actively participate in the development of their goals at their annual meeting.

FY19 Target: 98%

FY19 Mid-Year Outcome: 95%

**FY19 Measure:** Individuals will maintain/make progress toward their defined goals.

FY19 Target: 80%

FY19 Mid-Year Outcome: 80%

**Estimated level of change for each outcome:** We would hope to see increase personal growth and independence, be it incremental or substantial. With each individual being a unique person, our responsibility is to support and advocate for each in a manner and at a rate he or she is comfortable.

Outcome 1: 98%

Outcome 2: Thirty-five interviews

Outcome 3: 80%

*Reviewer: Are all participants given the opportunity to participate in POM interviews or only random sample? If 75% of clients are engaged in services within 30 days of assessment, how long do others wait?*

#### **UTILIZATION:**

**Treatment Plan Clients (TPCs):** 300 individuals with case records and Individual Service Plans (ISP) funded by CCDDDB.

**Non-Treatment Plan Clients (NTPCs):** 36 individuals with service and support records but no formal Individual Service Plans who are funded by CCDDDB. **Service Contacts (SCs):** 100 Phone and face-to-face contacts with consumers who may or may not have open cases in a given program – including information and referral contacts, initial screenings/assessments, and crisis services.

**Community Service Events (CSEs):** 2 Contacts/meetings to promote the program, including public presentations, consultations with community groups, or caregivers, and small group workshops.

*Reviewer: Hours of services reported as claims in the online reporting system.*

#### **Financial Analysis**

**PY20 CCDDDB Funding Request:** \$423,163

**PY20 Total Program Budget:** \$595,441

**Current Year Funding (PY19):** \$410,838

**Proposed Change in Funding - PY19 to PY20 = 3%**

PY19 request was for \$423,165

PY18 request was for \$410,838 and award \$410,838

PY17 request was for \$398,872 and award \$398,872

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 71% of total program revenue.** Other revenue is from DHS Fee for Service \$169,332 (28%), DHS FFS-Training \$2,850 (<1%), and Other Program Service Fees \$96 (<1%).

**Expenses:** Personnel related costs (Salaries/Wages \$310,505 (73%), Payroll Taxes \$26,001, and Benefits \$38,150) are the primary expense charged to CCDDDB at 88% of \$423,163. Other expenses are: Professional Fees/Consultants \$1,501 (0%), Consumables \$3,138 (1%), General Operating \$6,120 (1%), Occupancy \$10,761 (3%), Conferences/Staff Development \$4,140 (1%), Local Transportation \$5,861 (1%), Equipment Purchases \$204 (0%), Lease/Rental \$8,629 (2%), Membership Dues \$1,493 (0%), and Miscellaneous \$6,660 (2%).

**Total Agency Budget shows a deficit of \$547,744, Total Program a deficit of \$3,616, and CCDDDB Budget balanced.**

**Program Staff - CCDDDB Funds:** 0.96 FTE Indirect and 6.79 Direct. Total CCDDDB = 7.75 FTEs.

**Total Program Staff:** 1.34 FTE Indirect and 9.55 FTE Direct. Total Program = 10.89 FTEs.

*Reviewer: How can agency continue to operate at such a high deficit? How many clients are served through DHS-DDD for \$169K in comparison to CCDDDB request of \$423K to serve 200 people? CCDDDB funds a portion of 7 Case Coordinators/QIDPs and one more to be hired, a portion of one Program Director, a portion of the RN coordinator, a portion of the Clinical Coordinator, and \$1,848 of Case Coordinator Overtime. How is overtime estimated? Program could be funded at fee for service.*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

#### **CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities? Yes**

#### **Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** DSC has been represented at the Champaign County TPC for many years and staff have participated as speakers at the Transition Conference. Transportation is noted as a barrier to folks residing in outlying areas. Service Coordination support occurs in the person's home, at DSC, medical facilities, clinicians' offices, and other community locations as requested by the individual. Program currently serves individuals from underserved and underrepresented minority populations and being responsive to the individual or family request regarding cultural and/or

religious preferences and considerations. The program has received referrals for underserved and underrepresented minority residents from parents, school personnel, Champaign County TPC, and CCRPC ISC.

*Reviewer: Application provides more details on role of TPC. Transportation issue is addressed for some participants in Community Day Services. Regarding outreach and engagement to underserved minority populations, just that they are served. About 17% of those served are from rural areas.*

**Inclusion, Integration and Anti-Stigma:** Service Coordination staff will endeavor to assist and encourage all individuals served, to reside, shop, recreate and worship in whatever diverse community that individual desires. Isolation and loneliness is common in our target population and staff try to encourage people to get out and experience activities throughout the community often and suggest they call a friend to go along. We believe with greater access and involvement in the community, those receiving services will broaden the scope of inclusion, reduce stigma, and diminish discrimination.

*Reviewer: program encourages and tries to assist people to access their community, no description of action steps being taken.*

**Coordinated System:** Community Choices and Rosecrance. We serve as resources to one another and also make referrals to our respective agencies when applicable. We also serve some of the same people with each organization, which requires communication and collaboration to ensure seamless and effective service coordination.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items, indirect cost allocation method, notes on 3% salary increase, 10% health insurance cost increase, staff shortage/hiring crisis; audit cost is not mentioned.*

**Person Centered Planning (PCP):** Yes. *Program activities include planning and coordination.*

## Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** Staff employ comprehensive and effective service to ensure individuals served receive the highest quality of support and advocacy. Staff facilitate and contribute to the annual surveys conducted by the Bureau of Accreditation, Licensure, and Certification in which a significant portion of the evaluation process involves a comprehensive review of individuals' files, focusing upon plan completion timeframes, Implementation Strategies, and QIDP monthly notes. DSC's Service Coordination supports are noteworthy and consistent with the results of the Illinois results in the National Core Indicators. *Reviewer: Additional details on NCI results, including website. Compliance score of 99% from recent BALC survey.*

**Evidence of Collaboration:** Champaign County Regional Planning Commission/Shelter Plus Care Program.

**Staff Credentials:** Program staff are required to a bachelor's degree in a social service field as well as one year of experience working directly with individuals with I/DD. Staff also receive 120 hours of a DHS-mandated training as well as State of Illinois' QIDP training that consists of 40 instruction hours. QIDPs must be approved by the Illinois Department of Human Services and are required to acquire 12 continuing education hours per year.

**Resource Leveraging: Other Pay sources:** State funding is utilized when available. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes.

## Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Timely reporting of personnel changes.*
- *Coordination/planning efforts should not be duplicated; contract may include requirement to refocus efforts toward intensive case management and supports for those with no other funding or who are otherwise underserved.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Rosecrance Central Illinois(RCI)

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> RCI leadership and direct service staff will participate in at least one cultural competency training per year.
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	Board demographics to mirror as closely as possible the population being served, including board member with lived mental health and/or substance use disorders experience or a family member of a person with one or more disorders.
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>Yes-</b> Rosecrance completes a bi-annual Organizational Cultural Competence assessment and utilizes the survey responses from client satisfaction surveys and analysis of population served to develop specific CLC Action for the following year after the assessment is completed.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<p>Monthly facility checklists are completed by the Environmental Services Staff assess and modify physical facilities to be welcoming, clean, accessible and attractive.</p> <p>SOPs are reviewed quarterly by the Performance Improvement staff to ensure they are aligned with CLC principles.</p>

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2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Rosecrance Central Illinois(RCI)

	An Annual CLC Event planned for each department within RCI.
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	Former/current clients assist with education, outreach, and engagement activities. In addition, services are provided in a school setting and in community-based settings, based on the client's needs.
<i>Inter-Agency Collaboration</i>	Interagency Collaboration is outlined extensively within Part One of all the program applications.
<i>Language and Communication Assistance</i>	There are procedures for utilizing interpreters. Print and multimedia are provided in most languages that are commonly used by the populations that are served. There is no cost for the clients to utilize language services that are provided by RCI.
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes-</b> The CLC Plan was outlined with the CLAS Standards and the updates were provided.

**Additional Comments:**

*Rosecrance has a comprehensive CLC Plan that has clear action that can be measured. The CLC Plan that has been developed captured elements from the CLC Plan from PCHS as a result of the merger.*

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# Draft PY2020 CCDDDB Program Summary

Agency: Rosecrance Central Illinois  
Program: Coordination of Services: DD/MI

**PY20 CCDDDB Funding Request:** \$35,150  
**PY20 Total Program Budget:** \$435,142  
**Current Year Funding (PY19):** \$35,150  
**Proposed Change in Funding =** 0 %

**Priority:** Linkage and Advocacy for People with I/DD

## Services and People Served

**Target Population:** People 18 years of age or older residing in Champaign County and are dually diagnosed with an I/DD and a mental health disability.

### Scope, Location, & Frequency of Services:

**Scope:** All clients referred to the program will be screened for eligibility and if appropriate, will then receive a full mental health assessment to determine a diagnosis and need for coordinated services. Eligible clients/families will work with the clinician, when appropriate, to develop treatment plan goals. Treatment plan may include skill development/education assisting client in managing mental health symptoms as well as linkage to other services and supports. Clinician ensures that the clients are enrolled in PUNS database, DHS-DD eligibility and coordination of services. Clinician also provides assistance to the family as needed; technical assistance to professionals involved in care, coordination of inter-disciplinary meetings; consumer advocacy and community education. Specific mental health services provided by the Clinician are: case management, community support individual (skill building), community support group (Drum Circle and WRAP) medication monitoring, medication training, and client-centered consultation. Clients may be referred to group therapy (Anxiety, Art Therapy, Dialectical Behavior Therapy, etc.) provided by other agency staff. Because of dual diagnosis, intensive case management is required for most clients to be successful. The goals of the program are to ensure that the services received by the client are coordinated effectively, that consistent messages and language are used by service providers; and that the individual's needs receive appropriate priority in both systems of care.

**Location:** Clinician meets with clients in whichever setting they feel most comfortable (their home, family home, office, work setting, community setting, service provider agency, etc.).

**Frequency:** Based on the client's medical necessity and coordination between the client/clinician/family. This can be weekly, every other week or monthly.

**Reviewer:** Also included details on development of the program. Scope of services appears similar to PY19, with addition of drum circle. PUNS eligibility required.

### Residency

Total Served	29 in PY18	28 in PY19 (first two quarters)
<b>Champaign Set</b>	15 (51.7%) for PY18	15 (53.6%) for PY19
<b>Urbana Set</b>	7 (24.1%) for PY18	7 (25%) for PY19
<b>Rantoul</b>	2 (6.9%) for PY18	3 (10.7%) for PY19
<b>Mahomet</b>	1 (3.4%) for PY18	1 (3.6%) for PY19
<b>Other Champaign County</b>	4 (13.8%) for PY18	2 (7.1%) for PY19

### Demographics for FY2018

<b>Age</b>	
Ages 13-18 -----	2 (6.9%)
Ages 19-59 -----	26 (89.7%)
Ages 60-75+ -----	1 (3.4%)

Race	
White -----	20 (69.0%)
Black/AA -----	7 (24.1%)
Asian/PI -----	2 (6.9%)
<b>Gender</b>	
Male -----	16 (55.2%)
Female -----	13 (44.8%)
<b>Ethnicity</b>	
Not of Hispanic/Latinx Origin -----	29 (100%)

**Program Performance Measures**

**CONSUMER ACCESS:** Residents of Champaign County who are 18 years of age and have a confirmed dual diagnoses of an I/DD and a mental illness; demonstrate the need for medically necessary services; in need of integrated and coordinated services and reside in their own home, with family or in a residential facility. Clinician will conduct preliminary eligibility screening. If eligible, an Integrated Assessment Treatment Plan (IATP) is scheduled to assess current role functioning and demonstrate need for services. Clinician also ensures client is enrolled in PUNS database. Once they meet the above criteria they will then begin services. If ineligible, referral to other community resources that best address their needs. Target population learns about services by word of mouth or referrals from I/DD service providers, MH providers within agency, PAS agents, family, friends, outreach and agency marketing efforts, speaking engagements and the Disability Fair.

*Reviewer: Section is slightly edited. Clear expectations and a process for those not determined eligible.*

**Of those seeking assistance or referred 80% will receive Services/Support.**

**Within 21 days from referral, 75% of those referred will be assessed.**

**Within 21 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services, on average, for 18 months and we anticipate 3 will be successfully discharged.**

**Additional Demographic Data:** None

*Reviewer: why are 3 clients successfully discharged? What does a successful discharge look like? Are clients eligible to reenroll in services if necessary? Do clients reenrolling have to wait for services to begin?*

**CONSUMER OUTCOMES:**

1. Improved mental health functioning
2. Improved access to services

Data collected by:

1. To measure overall improvement in mental health the Global Assessment of Functioning (GAF) Scale will be administered. Clients are scored based on a 1-100 point range with 100 representing superior functioning. The clinician assigns a score based on the psychological, social and occupational functioning of the client. This assessment score is required by the state of Illinois for any client receiving Rule 132 Medicaid services.
2. To measure improved access to services, the Self-Sufficiency Matrix, created by the Snohomish County Self-Sufficiency Taskforce will be used. The Matrix includes a range of dimensions (i.e., In-Crisis, Vulnerable, Stable, Safe, and Thriving) to describe levels of functioning in the domain of measure.

The clinician will collect the above data at intake and then every 6 months up to discharge and will record the data in a spreadsheet to be reported on at year-end

**Outcome gathered from all participants?** No. We will collect outcome data on Treatment Plan Clients only.

**Anticipate 30 total participants for the year.**

**Will collect outcome information every 6 months.**

**Is there a target or benchmark level for program services?** No

**Estimated level of change for each outcome:**

1. Improved mental health functioning demonstrated by at least a 5 point improvement on the Global Assessment of Functioning Scale by 60% of the clients from intake to discharge for those engaged in services a minimum of 6 months.
2. Improved access to services demonstrated by at least a level increase (in-crisis to vulnerable, vulnerable to stable, stable to safe or safe to thriving) for 60% of the clients who have participated in services for at least 6 months.

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 30 Clients who have had a mental health assessment and treatment plan.

**Non-Treatment Plan Clients (NTPCs):** 0 N/A

**Service Contacts (SCs):** 20 telephone calls or face-to-face contacts with potential consumers who have not had a mental health assessment or treatment plan, information and referral contacts, initial screening/assessments, or crisis services. This may also include contacts for non-case specific consultations.

**Community Service Events (CSEs):** 12 contacts (meetings) to promote the program including speaking engagements, presentations at small group workshops, consultations with community groups and/or caregivers, interviews with media and attendance at open houses or other agencies to share information about service provided.

**Other:** 0 N/A

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$35,150

**PY20 Total Program Budget:** \$435,142

**Current Year Funding (PY19):** \$35,150

**Proposed Change in Funding - PY19 to PY20 = 0%**

PY19 request was for \$35,510

PY18 request was for \$34,126 and award \$34,126

PY17 request was for \$32,903 and award \$32,903

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes,** detailed below in "Other Pay Sources" section.

**CCDDDB request is 8% of total program revenue.** Other revenue is from United Way \$ 3,378 (<1%), Program Service Fees-Client Fees \$8,819 (2%), Program Service Fees- Medicaid \$354,005 (81.4%), Interest Income \$3,814 (<1%), Rental Income \$19,250 (4.4%), and Miscellaneous \$10,654 (2.4%).

**Expenses:** Personnel related costs (Salaries/Wages \$22,233, Payroll Taxes \$1,701, and Benefits \$5,414) are the primary expense charged to CCDDDB at 83% of \$35,150. Others are: Professional Fees/Consultants \$4,218 (12%), and Local Transportation \$1,584 (5%).

**Total Agency Budget shows a deficit of \$380,646, Total Program a deficit of \$47,471, and CCDDDB budget balanced.**

**Program Staff - CCDDDB Funds:** 0 FTE Indirect and 0.55 FTE Direct. Total CCDDDB = 0.55 FTEs

**Total Program Staff:** 0.45 FTE Indirect and 6.05 FTE Direct. Total Program = 6.50 FTEs

*Reviewer: CCDDDB funds support a portion of a supervisor, a portion of a MH Clinician, and a portion of the Director of Clinical Services.*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities? Yes**

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** Clinician and Rosecrance's Marketing staff are available to provide information/brochures/fliers about services during identified community service events (resource fairs, Disability Fair, Days in the Parks, etc.). They are available to conduct speaking engagements in these designated areas upon request. Clinician meets with the client where they feel most comfortable (home, family home, office, work-setting, community setting, service provider agency, etc.).

*Reviewer: PY18 residency data show county-wide reach; PY18 demographic data show some engagement with underrepresented minority populations. The practice of clinician traveling to client's choice of meeting place is an effective strategy for engaging both types of underserved resident.*

**Inclusion, Integration and Anti-Stigma:** Clinician promotes inclusion; reduces stigma or discrimination by educating the community about this dually diagnosed population and the specific needs they face. In addition, the Clinician will advocate with clients, families, service providers, etc. to assure they are aware of how to make linkage to needed services and resources that best address the clients' needs.

**Coordinated System:** Our services are unique in that we provide mental health and case management services to the dually diagnosed populations (I/DD and the mentally ill) and there are no other agencies in the county that provide these services or

have this particular focus. Clinician coordinates with I/DD and other social service, legal, medical agencies in setting-up the needed identified resources and services for the clients. Clinician consults with these agencies and in monitoring the progress of the clients' that have been referred to them. Clinician is available to attend staffings of client cases where information about the services offered is explained. Clinician receives referrals from these agencies and screens the clients for service eligibility. Clinician also serves on the Disability Fair Advisory Board and attends the Case Management meetings sponsored by CCDDDB where her presence is seen regularly reminding services providers of the services our agency provides to these populations.

**Budget and Program Connectedness:** Yes. *Budget Narrative contains adequate detail on associated items and indirect cost allocation for this small program within a very large provider agency.*

**Person Centered Planning (PCP):** Yes, agency staff should be sure to coordinate PCP with ISC for any clients receiving ISC PCP services.

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** The Clinician utilizes a person-centered and strength-based approach to effectively assist clients in meeting their needs and to improve coordination between intellectual/developmental disability and mental health providers. During the past FY the agency has been promoting the use evidenced-based groups as an additional mode of treatment. Research has shown the effectiveness of these types of groups towards promoting the reduction of symptoms in clients in a group-setting where they receive feed-back from their peers. The clinician and other agency staff have incorporated various groups which clients have utilized: Wellness Recovery Action Planning (WRAP), Drum Circle, Art Therapy, Anxiety Group, Dialectical Therapy Behavior (DBT), etc. Clients have responded most favorably to groups and we have seen positive behavior changes due to groups, in their coping, communication and symptom management skills.

*Reviewer: Application also gives website details of groups listed.*

**Evidence of Collaboration:** We have written working agreements with: DSC, Champaign County Probation Office (CCPO) and CCRPC and informal working agreements with: Community Connections, UCP and The Autism Program (TAP).

Clinician works closely with these agencies in advocating and coordinating services for the shared dually diagnosed clients.

**Staff Credentials:** Services are provided by a Bachelor's level Clinician with experience in working with both I/DD and the mentally ill populations. The preferred clinician is a QIDP and a qualified Mental Health Professional (MHP).

*Reviewer: Application includes details on QIDP requirements and current staff's credentials.*

**Resource Leveraging: Other Pay Sources:** If the client has Medicaid it would pay for the mental health assessment, treatment plan and follow up case management services if the individual meets medical necessity. Medicaid would not pay for any engagement efforts or communications with service providers, client or parents prior to an assessment. Medicaid would not pay for any outreach and educational activities by the clinician. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

*- Coordination/planning efforts should not be duplicated; if an individual receives case management services through this and another funded program, documentation may be required which either justifies the use of more than one similar program or demonstrates how the individual chooses between them, freeing up space for others to access this valuable support.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Community Choices

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> All the staff and board members receive annual training.
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	<b>Yes-</b> Intentional recruiting of diverse skills, and cultural experiences, including those of self-advocates will be sought.
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>Yes-</b> An annual membership meeting is held to get feedback from members along with collecting information from satisfaction surveys.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>Yes</b>
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	Develop diverse community partners (churches, university departments, informal clubs/groups) with at least 5 groups for FY 2020
<i>Inter-Agency Collaboration</i>	<b>Yes-</b> Continue formal partnership with DSC on employment 1st. Continue participation in Expo Planning, TPC, MHAC, Job Developers, and other state and local interest groups. Support self advocates to have voice in those groups.
<i>Language and Communication Assistance</i>	<b>Yes-</b> Board of Directors reviews the policy annually. Visual charts are created for clients. Cooperative relationships with interpretive resources are maintained and renewed.
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes-</b> Format was followed to match the CLAS Standards.

**Additional Comments:**

None

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## Draft PY2020 CCDDDB Program Summary

Agency: Community Choices, Inc. DDB

Program: Customized Employment

**PY20 CCDDDB Funding Request:** \$98,900  
**PY20 Total Program Budget:** \$170,900  
**Current Year Funding (PY19):** \$87,000  
**Proposed Change in Funding - PY19 to PY20 = 14 %**

Priority: Employment Services and Supports

### Services and People Served

**Target Population:** Adults with I/DD in Champaign County who are currently unemployed or underemployed and who are interested in community-based customized employment. It is estimated that only 20% people with I/DD are employed and only 6% in integration community settings, according to Equip for Equality’s Blueprint for Employment First in Illinois.

#### Scope, Location, & Frequency of Services:

**Scope:** Customized employment focuses on individualizing relationships between employees and employers resulting in mutually beneficial employment relationships.

**DISCOVERY:** Uses a person-centered approach of identifying strengths, needs, and desires of those seeking employment and creates a unique Vocational Profile and Plan used to target ideal job leads and design training and supports.

**JOB MATCHING:** Staff develops social and communication skills of job seeker, learns needs of local businesses and meeting those needs through customized employment. Job seekers learn about options through job shadowing and business tours.

**SHORT-TERM SUPPORT:** Staff works with the employee and employer to develop accommodations and support, and provides limited job coaching. Intentional efforts are made to connect and increase natural support within the workplace.

**LONG-TERM SUPPORT:** Staff provide ongoing support to maintain and expand employment. Assistance with obtaining promotions, retraining, accessing benefits, and conflict resolution long after the initial job coaching phase.

**Location/Frequency:** Staff meet with participants at their employers, community locations, or in their homes. Community-settings allow participants to gain real-world access to potential employers, explore new job leads, and allows the employment specialists working with them to gain insight on their support needs in the environments where they will be working.

*Reviewer: Above is edited. Scope of services unchanged from FY19. In addition to being “motivated to work” (consumer access section, below) an individual will indicate interest in particular types of work through the person-centered Discovery Tool described here. How does Discovery match people with opportunities that arise unexpectedly?*

#### Residency

<b>Total Served</b>	36 in PY2018	29 in PY2019 (first two quarters)
<b>Champaign Set</b>	19 (52.8%) for PY18	18 (62.1%) for PY19
<b>Urbana Set</b>	9 (25.0%) for PY18	6 (20.7%) for PY19
<b>Rantoul</b>	0 (.0%) for PY18	0 (.0%) for PY19
<b>Mahomet</b>	2 (5.6%) for PY18	2 (6.9%) for PY19
<b>Other Champaign County</b>	6 (16.7%) for PY18	3 (10.3%) for PY19

#### Demographics

Total Served in PY2018 = 36

##### Age

Ages 13-18 -----	1 (2.8%)
Ages 19-59 -----	35 (97.2%)

##### Race

White -----	30 (83.3%)
Black / AA -----	4 (11.1%)

Asian / PI ----- 1 (2.8%)  
 Other (incl. Native American and Bi-racial) - 1 (2.8%)  
**Gender**  
 Male ----- 22 (61.1%)  
 Female ----- 14 (38.9%)  
**Ethnicity**  
 Of Hispanic/Latinx Origin ----- 1 (2.9%)  
 Not of Hispanic/Latinx Origin ----- 33 (97.1%)

**Program Performance Measures**

**CONSUMER ACCESS:** People at least 18 years of age with a documented I/DD, enrolled in PUNS, and motivated to work. Those meeting DRS criteria receive short-term services through DRS and transfer to grant for longer-term support. Those not meeting DRS criteria start with the grant. Motivation determined by person requesting services and reporting a desire to work. Timeframes below refer to the internal processes of intake. Formal and informal outreach within the Champaign-Urbana community and Champaign County. Referrals to the Customized Employment program come from the DRS, area schools, and word of mouth. Referrals to and from DSC, CCRPC-ISC, Rosecrance, UCP, TAP, and PACE. Informal outreach through outreach events (Disability Expo and Northern Champaign County Community Resource Fair).

**Of those seeking assistance or referred, 90% will receive Services/Support.**

**Within 14 days from referral, 95% of those referred will be assessed.**

**Within 112 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services, on average, for 2-6 months, with 18 months long-term support.**

Discovery and Job Matching typically last 2-6 months, followed by up to 18 months of long-term support.

**Additional Demographic Data:** RIN number, PUNs eligibility, and medical insurance information. Information about involvement with other service providers will also be collected to ensure supports are not duplicated.

**CONSUMER OUTCOMES:**

Program Outcome: With opportunities for strength-based vocational assessment and person-centered support, individuals with I/DD can find, obtain, and keep community-based competitive employment.

GOAL: 100% of participants with I/DD will report that they are getting the support they need to meet employment goals. 85% will report that their strengths and interests are important to the employment process.

Discovery Outcome: Individuals develop a personalized employment plan based off interests and strengths.

GOAL: 15 people will complete the process and agree on personal employment profile based on strengths and interests.

Job Matching Outcome: Individuals will acquire community based employment based upon strengths and interests.

GOAL: 9 people will obtain paid employment, 4 individuals will obtain volunteer jobs or internships.

Short-Term Support Outcome: Persons with I/DD, negotiate and learn roles and duties to be successful at jobs.

GOAL: 13 people will receive job negotiation and coaching leading to greater independence when at their jobs.

Long Term Support Outcome: People with I/DD maintain their jobs through ongoing support and job expansion.

GOAL: 25 individuals receive on-going support according to their needs. 70% of individuals keep their jobs for at least 1 year.

**Assessment Tools:**

Program Outcome: Annual Member Survey, presented to all participants and their families (if they are involved).

Discovery Outcome: Griffin and Hammis’s Customized Employment Model, using asset-based assessment, multiple data sources including community based observation, individual and team interviews will be used to develop job seeker profiles.

Job Matching Outcome: Job offers tracked and communicated through regular meetings.

Short-Term Support Outcome: Regular meetings with employment program participants including observation and discussion with stakeholders will be used as formative assessment data to inform the level and type of support offered on the job.

Long Term Support Outcome: Meetings and contacts with employment participants and their teams will be recorded in the individual’s file. These will be used to determine status and assess ongoing support needs.

*Reviewer: Above and below are edited. Data collection includes surveys, contact notes, Discovery completion, and job offer information. Job Matching & Short-Term Support outcomes will include an additional 5 people through DRS funded support (slight decrease from PY19). How does the program minimize the risk of conflict of interest if the consumer does person-centered-planning with support from staff employed by the same agency?*

*Below: Will agency assist 13 people if they find jobs but cannot maintain them?*



**Outcome gathered from all participants?** Yes.

**Anticipate 38 total participants for the year.**

**Outcome information:** Collected annually. Discovery profile completed when services initiate. Formative assessment collected continually.

**Is there a target or benchmark level for program services?** No

**Estimated level of change:** Program aims to work with 13 people to find community-based employment and an additional 25 individuals to maintain their employment.

#### **UTILIZATION:**

**Treatment Plan Clients (TPCs):** 38 adults with I/DD who are participants in the Customized Employment program.

**Non-Treatment Plan Clients (NTPCs):** 0

**Service Contacts (SCs):** 1,120 - recorded as Claims through the online service reporting system, SCs include activities directly working with people in the program as well as activities directly connected to providing support (including connecting to employers, collaborating with families and natural supports, and documenting the support provided).

**Community Service Events (CSEs):** 4 outreach events to organizations, community groups, area service providers and other events meant to support the community's knowledge of these programs as well as the importance of people with I/DD having the opportunity to work in the community.

**Other:** 1,530 direct hours by staff supporting people with I/DD and their employment goals. For TPCs these hours will be recorded via the Claims online reporting system.

*Reviewer: TPC hours will be documented in online reporting system. How many service hours are being provided per person, per month, per year?*

#### **Financial Analysis**

**PY20 CCDDDB Funding Request:** \$98,900

**PY20 Total Program Budget:** \$170,900

**Current Year Funding (PY19):** \$87,000

**Proposed Change in Funding - PY19 to PY20 = 13.7%**

P19 request was for \$87,000

P18 request was for \$115,000 and award \$74,103

P17 request was for \$70,000 and award \$70,000

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB request is for 58% of total program revenue.** Other revenue is from CCDDDB DSC Employment 1st Sub Contractor = \$20,500 (12%), DRS Program Service Fees = \$42,000 (25%), Contributions = \$8,000 (4.7%), and Member Fees = \$1,500 (0.9%).

**Expenses:** Personnel related costs (Salaries/Wages \$70,374, Payroll Taxes \$5,346, and Benefits \$8,600) are the primary expense charged to CCDDDB at 85% of \$98,900. Other expenses are: Professional Fees/Consultants \$4,920 (5%), Consumables \$1,850 (2%), General Operating \$2,000 (2%), Occupancy \$2,610 (3%), Conferences/Staff Development \$800 (1%), and Local Transportation \$2,400 (2%).

**Total Agency Budget shows a surplus of \$1,941, Total Program a surplus of \$724, and CCDDDB Budget is balanced.**

**Program Staff - CCDDDB Funds:** 0.20 FTE Indirect and 1.85 FTE Direct. Total CCDDDB = 2.05 FTE.

**Total Program Staff:** 0.30 FTE Indirect and 3.30 FTE Direct. Total Program = 3.60 FTE.

*Reviewer: \$12,000 less from DRS than PY19. Professional fees include a portion of CQL accreditation fee and audit fees. Agency is proposing 14% increase of funds, but that changes to an increase of 58% of the operation budget. How many people are served overall in program budget? 36 people served in FY18, are additional people served through the additional 42% of the budget? CCDDDB funds a portion of the Executive Director and a portion of three Employment Specialists.*

**Audit Findings:** PY18 audit in compliance, PY19 audit required. If funded, PY20 contract will also require audit by an Independent CPA.

#### **CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities?** Yes

## Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** Participation in outreach events attended by a broad scope of people in Champaign County. Services and supports are included in many resource lists and databases (Expo, 211, DRS). Strong relationships with other organizations where underrepresented or underserved groups might be connected and referred from, includes RPC, DRS, churches, NCCRC, Champaign County Healthcare Consumers and others. Upon service initiation, CC helps build natural support networks. Rural residents served in the community where they wish to find employment. If the participant would rather work in the Champaign-Urbana area, CC offers C-CARTS training during job exploration process.

**Inclusion, Integration and Anti-Stigma:** Working and building self-sufficiency is a critical part of each person's growth into adulthood. People with I/DD have historically had limited access to employment of any kind. The service system designed to support this group has legitimized and incentivized the practice of isolating people with disabilities into segregated work settings and paying them sub-minimum wages for their work. This has limited the access that people with I/DD have to the working community and limited the community's ability to see this population as a group with strong and recognized skills to contribute. It has also kept people with disabilities from earning the wages that would allow them to be more active and engaged community members – challenging their ability to pay for housing, education, and social experiences. By supporting job seekers with I/DD to discover their own skills and interests and matching those to employers, our employment department is actively working to combat the history of segregation and discrimination experienced by people with I/DD. Participants in our program get support to access the competitively paid, community-based work that will allow them to earn meaningful wages, and to be seen as meaningful and welcomed contributors to the community.

*Reviewer: Above is edited, web presence, program seeks employment where participants want to work. Inclusion/Integration – jobs in community.*

**Coordinated System:** The following local organizations also provide employment support, though unknown if similar approach is used: DSC, UCP, and Cunningham Children's Home. Due to similarity in supports offered, people are asked to choose between CC Employment Supports or employment supports from another local organization. In an effort to collaborate and generally keep good open lines of communication with other service providers, CC Employment Specialists all participate in local collaborative groups such as Job Developers and TPC. CC also continues its LEAP partnership with DSC.

**Budget and Program Connectedness:** Yes. The budget narrative provides adequate descriptions of associated items.

**Person Centered Planning (PCP):** Yes

## Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** Griffin and Hammis and Marc Gold and Associates' approach. Federal Office of Disability Employment Policy cites Customized Employment as important policy to support the employment outcomes for people with I/DD and has been incorporated into the employment initiatives as part of WIOA. Academic research recognizes Customized Employment as a noteworthy strategy for supporting employment. Additional research is needed to determine if it is truly evidenced-based.

*Reviewer: Above edited, details on methods and evidenced based article.*

**Evidence of Collaboration:** CC does not have a well-established system of written agreements with other organizations, though it is a process we are working to develop. Strong working relationships and informal partnerships with: DSC (formalized); PACE; RACES; Champaign Urbana Public Health; CU 1:1 Mentoring; Urbana Park District; Promise Healthcare; Champaign County Healthcare Consumers; The Autism Program; and CCRPC.

**Staff Credentials:** Current program staff have extensive experience supporting people with I/DD. Lead Employment Specialist is a Certified Employment Specialist, team has 10+ years' experience in the field.

**Resource Leveraging: Other Pay sources:** Funding through DRS to support 5 people through Milestone Contract. The organization also accepts private pay for employment support if individuals are willing and able to pay. **Client Fees:** No.

**Sliding Scale:** Yes. **Willing to participate in DD waiver programs?** No.

## Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- Sample of tools used in Discovery process and copies of written agreements once they are obtained.
- Consider mirroring DRS SE rate of \$40 per staff/client hour for reimbursement.

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



Draft PY2020 CCDDDB Program Summary
Agency: Developmental Services Center
Program: Community Employment

PY20 CCDDDB Funding Request: \$361,370
PY20 Total Program Budget: \$517,413
Current Year Funding (PY19): \$361,370
Proposed Change in Funding - PY19 to PY20 = 0 %
Priority: Employment Services and Supports

Services and People Served

Target Population: Champaign County residents 18 years old or older who have a documented I/DD and want help finding or maintaining a job. Those are in open plan through the Department of Rehabilitation Services are not eligible.

Scope, Location, & Frequency of Services:

Scope: Services provided through support of an Employment Specialist include all aspects of job development and retention, including but not limited to: Employment plan development; Resume or portfolio development; Interview preparation and support; Soft skills practice; Contact with potential employers; Submission of applications and follow-up if applicable; Supports for the newly; On-going job coaching; and Supported Employment options

We have added a paid job experience for up to three months through Carle dining services at the end of Job Club to provide experience in getting and maintaining a job including getting to work independently, showing up on time, being a responsible employee, problem-solving, co-worker and supervisor relationships, and other problematic aspects of job retention.

Location/Frequency: Job development takes place at a variety of locations - the person's home, library, and visits and tours of potential employers. Job coaching typically occurs at the job, but also includes feedback and training outside of work. The most frequent support occurs just after hire when the person is learning their new job. Job coaching is faded as the person becomes comfortable. It then occurs at a frequency that provides support that helps the person maintain their job without fostering dependence on the job coach.

Reviewer: Above is edited: details on Employment plan development, networking with employers, supports for the newly employed, job coaching tasks. Paid job experience at Carle, new this year. CCDDDB funds do not cover people enrolled in DRS services. Services largely unchanged from PY19.

Residency

Table with 3 columns: Category, PY2018, PY2019. Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County.

Demographics: Total Served in PY2018 = 70

Age

Table with 2 columns: Age Group, Count/Percentage. Rows include Ages 19-59 and Ages 60-75+.

Race

Table with 2 columns: Race, Count/Percentage. Rows include White, Black / AA, Asian / PI, and Other (incl. Native American and Bi-racial).

Gender

Male -----	43 (61.4%)
Female -----	27 (38.6%)
<b>Ethnicity</b>	
Not of Hispanic/Latinx Origin -----	70 (100.0%)

**Program Performance Measures**

**CONSUMER ACCESS:** PUNS eligible people with I/DD, 18 years old or older who want help finding a job or maintaining a job. People learn about services through DRS, school programs, Champaign County TPC, Champaign County Transition Services Directory, community events (Disability Resource Expo), Employment First family meetings, and current employers.

**Of those seeking assistance or referred 75% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 90 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services, on average, for:** Job coaching is provided for as long as needed for the person to maintain employment.

**Additional Demographic Data:** Referral source and primary disability are also recorded.

**CONSUMER OUTCOMES:**

Outcome 1: People will be opened in the program for job development.

Outcome 2: New businesses will hire people.

Outcome 3: People will participate in supported employment.

Data collected by:

Outcome 1: A referral is completed for each person referred for job development. When the person is opened in the program, a movement form is completed and kept in the main clinical file. An Employment Specialist is assigned to start job development. Monthly progress is documented in the main clinical file by the Employment Specialist. Direct service hours are documented in the CCDDDB direct service hour data base.

Outcome 2: A data base of businesses that hire people is kept by the Employment Program Manager. This data base includes the business, the person hired, the position they are hired for, and the date of hire. Changes in employment are noted in the data base as they occur.

Outcome 3: The data base mentioned above includes the names of people employed in supported employment.

**Outcome gathered from all participants.**

**Anticipate 65 total participants for the year.**

**Will collect outcome information** monthly and include in the quarterly report submitted to CCDDDB.

**Is there a target or benchmark level for program services?** Yes. Targets/benchmarks are estimated from reviewing outcomes, targets, and progress annually.

**FY 19 Measure:** New employers/businesses will hire individuals with I/DD.

FY 19 Target: Eight businesses

FY 19 Mid-Year Outcome: Seven businesses

**Estimated level of change for each outcome:**

Outcome 1: Five people will be opened in the program for job development.

Outcome 2: Eight new businesses will hire individuals.

Outcome 3: Fifteen people will participate in supported employment.

*Reviewer: How many people are expected to obtain jobs in PY20 as a result of this program? The identified outcomes relate strongly to the provider's performance rather than consumer choice. As a Council on Quality and Leadership accredited agency, the Personal Outcomes Measures system developed with CQL support would be of interest.*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 65 Champaign County residents with I/DD formally opened in this program who do not receive state funding for these services.

**Non-Treatment Plan Clients (NTPCs):** 0

**Service Contacts (SCs):** 8 contacts with people or anyone in their support network seeking information about the Community Employment Program.

**Community Service Events (CSEs):** 2 formal presentations or tours to organizations, civic groups, school personnel, or other community entities.

## Financial Analysis

PY20 CCDDDB Funding Request: \$361,370

PY20 Total Program Budget: \$517,413

Current Year Funding (PY19): \$361,370

Proposed Change in Funding - PY19 to PY20 = 0%

PY19 request was for \$361,370

PY18 request was for \$361,370 and award \$361,370

PY17 request was for \$229,484 and award \$229,484

Does the application clearly explain what is being purchased by the CCDDDB? Yes

Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes

**CCDDDB request is for 70% of total program revenue.** Other revenue is from Grants – Ford County MHB \$3,145 (1%), DHS Fee for Service \$2,814 (1%), DHS DRS \$150,000 (29%), and DHS Program Service Fees – Other \$84 (<1%). *Reviewer: revenue from DRS is for short term services. The two smaller DHS revenue sources are not fully explained but very small; the latter is likely to be allocated portion of reimbursement from the state for required trainings.*

**Expenses:** Personnel related costs (Salaries/Wages \$267,006, Payroll Taxes \$19,658, and Benefits \$28,465) are the primary expense charged to CCDDDB at 87% of \$361,370. Other expenses are: Professional Fees/Consultants \$1,130 (0%), Client Wages / Benefits \$84 (0%), Consumables \$1,976 (1%), General Operating \$3,465 (1%), Occupancy \$5,382 (1%), Conferences/Staff Development \$3,298 (1%), Local Transportation \$18,355 (5%), Equipment Purchases \$86 (0%), Lease/Rental \$5,134 (1%), Membership Dues \$1,195 (0%), and Miscellaneous \$6,136 (2%).

**Total Agency Budget has a deficit of \$547,744, program deficit of \$23,658, and CCDDDB budget balanced.**

**Program Staff - CCDDDB Funds:** 1.14 FTE Indirect and 4.98 FTE Direct. Total CCDDDB = 6.12 FTEs.

**Total Program Staff:** 1.69 FTE Indirect and 7.15 FTE Direct. Total Program = 8.84 FTEs

*Reviewer: A 3% salary increase is planned, along with 10% health insurance cost increase – standard across DSC applications and previous year requests. How can agency continue to operate at such a high deficit? Hours of services are entered as claims in online system. Is Supported Employment billed to HBS? Why does this employment program receive triple the amount of funds than other CCDDDB funded employment programs, but does not serve three times as many people as other programs? How many services are being provided to each client per week/month/year? 70 people served in FY18; how many additional people served through the additional 30% of the budget? CCDDDB funds support a portion of the Program Director, a portion of five Employment Specialists, a portion of the Employment Coordinator, a portion of the Vice President, and Employment Specialist overtime. Per indirect cost allocation, very small portions of 21 indirect staff are also assigned to this contract (this is an acceptable and common strategy, though somewhat confusing in the Personnel form).*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

Does the plan align with one or more CCDDDB Priorities? Yes

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** DSC has been represented at the Champaign County Transition Planning Committee for many years. The TPC service area covers about 5000 students in 10 school districts in Champaign County, offers education and resource information. DSC staff participate at the Transition Conference. Referrals are received from CCRPC-ISC. Participation in a variety of community activities such as: Champaign County TPC Roundtable, Disability Expo, website and social media to provide awareness and information about DSC and access to an array of services. Identification of businesses in close proximity to the person's home is one of the core functions of meeting with people in their homes and home communities. When possible jobs are secured in that community, but given the scarcity of employment in small communities, the job search often leads to the Champaign-Urbana area. This presents the additional challenge of securing reliable transportation, a basic requirement for employment, and a barrier noted in the recent CCDDDB survey.

**Inclusion, Integration and Anti-Stigma:** The benefits of employment for people with disabilities mirror the benefits for non-disabled working people. Work provides a social network outside of family connections that may lead to opportunities to participate in company events or other social events with co-workers. Work connections help people gain confidence and self-identify as contributing members of society. Stigma is reduced when people with no previous relationship with a person with a

disability sees that they share more similarities with their co-worker than differences and that this person also contribute to the viability and diversity of not only their work community but the community at large.

*Reviewer: Above is lightly edited. Outreach to underserved populations is TPC and website/ social media. See CLC Plan Review for further details.*

**Coordinated System:** Other service providers for adults seeking employment include: Community Choices, Cunningham Children's Home, United Cerebral Palsy. DRS refers people to adult service agencies for job development activities. DSC's Community Employment Program has historically served people who require more support in obtaining and maintaining employment. On-going job coaching is an important function in helping people keep their jobs. Job coaches also maintain relationships with employers and monitor the work environment to help identify the potential for new responsibilities or job upgrades which promote long-term employment through reduction of burnout as well as intervene pro-actively if changing conditions in the work setting are cause for potential risk of job loss. People from our community day services program who are employed receive on-going job coaching through Community Employment.

Employment Specialists participate in the Job Developers Network.

High school students receive job development through the school system and efforts are made to link employed students with an adult service provider at the end of their school eligibility if needed.

Employment Specialists participate as speakers at the Bi-Annual Transition Conference.

DSC and Community Choices also work in collaboration to provide information to employers about the benefits of hiring people with disabilities through the CCDDDB Employment First grant.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items and indirect cost method.*

**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** DSC uses an employment strategy that is unique to each person based on the Customized Employment model. The customized employment approach, which is recommended by the Office of Disability Employment Policy, the US Department of Labor, and the LEAD Center, sidesteps the traditional employment search strategy relying instead on a process that matches the strengths, needs, and interests of the person to the needs of an employer. Emphasis on time spent getting to know the person in environments the person is familiar with; development of an employment plan based on the person's strengths, interests, and a desired work environment; and job development efforts based on these variables has resulted in employment for many people with significant barriers to employment.

*Reviewer: Above is edited, details on customized employment and Department of Labor website and details on Griffin and Hammis training.*

**Evidence of Collaboration:** None, though the agency collaborates with Community Choices through subcontract for LEAP.

**Staff Credentials:** Staff receive training on introduction to people with developmental disabilities, human rights, and OIG through the DHS-mandated DSP training. Training on customized employment is planned for the upcoming fiscal year. Training is made available routinely due to staff turnover and evolution of progress in the field at the national level.

**Resource Leveraging: Other Pay Sources:** State funding is available for some people for this support. **Client Fees:** No.

**Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Timely notification of personnel changes*
- *Document efforts to bill services against HBS funds*
- *Consider mirroring DRS SE rate of \$40 per staff/ client hour for reimbursement (another possible reason to consider advance and reconcile contract method is that excess revenue in PY18 = \$43,754, in PY17 = \$1,369, in PY16 = \$27,384.)*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



# Draft PY2020 CCDDDB Program Summary

Agency: Developmental Services Center

Program: Connections

PY20 CCDDDB Funding Request: \$85,000  
PY20 Total Program Budget: \$85,266  
Current Year Funding (PY19): \$85,000  
Proposed Change in Funding - PY19 to PY20 = 0 %

Priority: Non-Work Community Life and Flexible Support

## Services and People Served

**Target Population:** Champaign County residents currently receiving day program services at DSC, interested in pursuing opportunities to enrich their lives through art, music, and other cultural experiences as well as non-traditional employment options available in the community. As people begin to recognize themselves as members of the community at large and explore the connections that fuel their interests, they begin to see their place in the community well beyond traditional day program services.

### Scope, Location, & Frequency of Services:

**Scope:** The focus of this application is part of our continued efforts to move toward more community-based services and non-traditional employment opportunities through funding of one FTE position, and rent and utilities and associated costs for the community site at 110 E. University Avenue in Champaign. Art remains a moderm for personal growth and life enrichment for many people. Painting is of particular interest to people who have expanded their exploration of painting styles to include pop art, folk art, still life, and landscapes. Artistic expression continues to expand as more community groups through our Community First Program use the site. Two people who are self-employed through their t-shirt printing business, Got You Covered, continue to use the space for printing orders with the help of DSPs and members of En-Abling Entrepreneurs, formerly the University of Illinois chapter of ENACTUS. Plans for the business component continue to move forward. We were recently selected by the University of Illinois Gies College of Business as a consulting project to develop a marketing strategy including product analysis. On a smaller scale, people participate in opportunities to showcase or sell their personal work through Ebert Fest and other community venues.

**Location:** Services occur at The Crow at 110, a community space that includes areas for art and classes as well as retail space.

**Frequency:** participation varies with new group schedules every four months.

*Reviewer: Scope of services unchanged from PY19. Details on Art work done at this location. Is the site used for people to sell their artwork from the downtown community location on more occasions than the Boneyard Arts Festival? How long do the groups last? How long do people receive these services? As with other services, the individual client need and preference for participation in this program should be determined through person centered plans, and care should be taken to avoid duplication of services offered through other programs to the same individuals.*

### Residency

Total Served	19 in PY2018	20 in PY2019 (first two quarters)
<b>Champaign Set</b>	7 (36.8%) for PY18	6 (30.0%) for PY19
<b>Urbana Set</b>	9 (47.4%) for PY18	9 (45.0%) for PY19
<b>Rantoul</b>	0 (.0%) for PY18	0 (.0%) for PY19
<b>Mahomet</b>	1 (5.3%) for PY18	1 (5.0%) for PY19
<b>Other Champaign County</b>	2 (10.5%) for PY18	4 (20.0%) for PY19

**Demographics:** Total Served in PY2018 = 19

### Age

Ages 19-59 ----- 19 (100.0%)

### Race

White -----	15 (78.9%)
Black / AA -----	4 (21.1%)
<b>Gender</b>	
Male -----	10 (52.6%)
Female -----	9 (47.4%)
<b>Ethnicity</b>	
Not of Hispanic/Latinx Origin -----	19 (100.0%)

## Program Performance Measures

**CONSUMER ACCESS:** People with I/DD who are interested in participating in developing their creative side are eligible for services. A documented I/DD diagnosis and enrollment in the PUNS database is required.

People learn about services through tours that include discussion of possible services and their availability, distribution of information at community service events like the disAbility Resource Expo, and attended art shows. Referrals are received from people and families; CCRPC ISC; high school vocational coordinators who have been unsuccessful in obtaining employment for a student nearing the end of their educational eligibility and other advocates of the person; the local DRS office when individuals with I/DD are in search of day program support; and employed people seeking additional connections to the art community. *Reviewer: Section is edited - details on eligibility.*

**Of those seeking assistance or referred 90% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 270 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services, on average, for:** no time limit. People participate until they are no longer interested in services.

**Additional Demographic Data:** Referral source and primary disability are also collected.

## CONSUMER OUTCOMES:

1. People will participate in artistic activities, classes or events at The Crow at 110.
2. Artists will make connections with the Champaign County art community through participation in art shows, Farmers' Market, etc.
3. New classes will be developed as people continue to define areas of interest. Record of classes and who attends will be documented.

### Data collected by:

1. Number of people participating in events at the site will be recorded.
2. Service hours for these events will be documented by support staff in CCDDDB service hour database and a contact note will be entered in the person's case record.
3. DSPs develop a format for new groups outlining instructional information to be shared each week. This information is kept in a central location that all DSPs can access in the event a substitute is needed to lead group. Service hours are documented in the CCDDDB service hour database as well as in a monthly contact note in the person's case record. Group schedule is maintained electronically for each trimester.

**Outcome gathered from all participants?** Yes.

**Anticipate 25 total participants for the year.**

**Will collect outcome information:** for every service contact.

**Is there a target or benchmark level for program services?** Yes, estimated from past outcomes in the program.

FY 19 Measure: At least 25 people will participate in artistic activities, classes, or events at The Crow at 110.

FY 19 Mid-Year Outcome: Twenty people have participated counting as TPCs.

FY 19 Measure: New creative exploration classes will be developed as program participants continue to define areas of interest. Record of classes and who attends will be documented.

FY 19 Mid-Year Outcome: At least six new classes have been developed.

### **Estimated level of change for each outcome:**

Outcome 1: 25 people will participate in events at The Crow at 110.

Outcome 2: Artists will engage in four community events.

Outcome 3: At least four new classes/groups will be developed.

*Reviewer: Lengthy wait from assessment to engagement in services. Is the Farmer's Market a regular opportunity for the artists? Can more local artists donate their time to build art skills, rather than charge for agency staff for this service?*



## UTILIZATION:

**Treatment Plan Clients (TPCs):** 25 people participating in DSC's Community First Program interested in pursuing their creative interests and talents at The Crow at 110.

**Non-Treatment Plan Clients (NTPCs):** 12 people participating in activities who are not receiving county funding.

**Service Contacts (SCs):** n/a

**Community Service Events (CSEs):** 4 The number of events either hosted or attended by program participants.

**Other:** n/a

*Reviewer: 25 people participate out of how many enrolled in Community Day Services, which seems like a small number. Connections is a service category in the online claims system. 1,115.75 Connections hours reported into online claims system for FY18. With 38% of this proposal associated with lease/rental costs, how many events will people participate in at the Crow? What is the difference between activities, classes, and events?*

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$85,000

**PY20 Total Program Budget:** \$85,266

**Current Year Funding (PY19):** \$85,000

**Proposed Change in Funding - PY19 to PY20 = 0.0%**

PY19 request was for \$85,000

PY18 request was for \$90,000 and award \$85,000

PY17 request was for \$87,550 and award \$87,550

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 100% of total program revenue. \$258 from DHS FFS and \$8 from Other Program Service Fees.**

**Expenses:** Personnel related costs (Salaries/Wages \$34,907, Payroll Taxes \$3,546, and Benefits \$6,501) are the primary expense charged to CCDDDB at 53% of \$85,000. Other expenses are: Professional Fees/Consultants \$154 (0%), Consumables \$1,588 (2%), General Operating \$630 (1%), Occupancy \$4,420 (5%), Conferences/Staff Development \$66 (0%), Local Transportation \$249 (0%), Equipment Purchases \$11 (0%), Lease/Rental \$32,115 (38%), Membership Dues \$156 (0%), and Miscellaneous \$657 (1%).

**Total Agency Budget shows a deficit of \$547,744, Total Program a deficit of \$3,831, and CCDDDB Budget balanced.**

*Reviewer: How can the agency continue to operate at such a high deficit? Rental cost seems high for minimal use of the space. Need to consider diversifying funding, should not solely rely on one funder. As with other applications (and in previous years), budget narrative identifies 3% salary increases, 10% increase in health benefit, and reference to staff shortage/hiring crisis.*

**Program Staff - CCDDDB Funds:** 0.00 FTE Indirect and 1.10 FTE Direct. Total CCDDDB = 1.10 FTEs

**Total Program Staff:** 0.00 FTE Indirect and 1.10 FTE Direct. Total Program = 1.10 FTEs.

*Reviewer: while a relatively simple contract, with 50% of one direct staff and 10% of another assigned, very small portions of the salaries of a high number (21) of indirect staff are charged to this contract, per indirect cost allocation traditionally used by this provider.*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities? Yes**

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** Existing and new program participants can access and participate in groups at The Crow at 110. People select groups every four months and group rosters are based on shared interests of the participants. Some people choose groups strictly based on area of interest while others also include the ability to spend time with particular friends in their selection process. New friendships are developed through time spent with each other. Groups occur at The Crow at 110, venues such as museums and art galleries, and art shows such as EbertFest.

*Reviewer: Only used the space for 1 art show open to the public last year, and one for April 2019. Building is located in the community, but not very often open to the community. Can the agency host one art show each month at this location? Details lacking on services to underserved/countywide.*

**Inclusion, Integration and Anti-Stigma:** Champaign County enjoys a robust art community as evidenced by events such as Boneyard Arts Festival. As people engage with the community through exploration of their creative interests, connections are made with like-minded people. Community and DSC artists co-hosted an open house during last year's Boneyard Arts Festival. The experience was so well received that one of last year's artists has requested that we do the same this year. Participation in art shows provides exposure to the community at large. The addition of a retail space in a growing area of downtown will establish our place in the revitalization of our community.

**Coordinated System:** n/a

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items and indirect cost allocation.*

**Person Centered Planning (PCP):** Yes, but make sure groups are documented in PCP.

## Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** According to the recent CCDDDB needs assessment of people with intellectual and developmental disabilities in Champaign County "recreation supports and transportation were the most frequent choices for services needed". Although the emphasis of the Employment First movement is equal access to employment for people with disabilities, inclusion of "that all citizens, including those with disabilities are capable of full participation in integrated employment and community life" in the Illinois definition of Employment First, validates the value of recreation for all people. Finally, according to the most recent PUNS summary for Champaign County, 357 people indicated the need for personal support.

**Evidence of Collaboration:** None

**Staff Credentials:** Training includes at least 120 hours of state mandated training and Employment First information. Program also benefits from talents and knowledge each staff person brings. Staff credentials include art and music teachers and an assortment of lifelong learning that DSPs share with people who have expressed an interest in artistic expression.

**Resource Leveraging: Other Pay sources:** None. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

*Reviewer: Above is lightly edited, includes link to CCDDDB September 2018 Board Packet with community needs assessment. No evidence of collaboration. Setting does not appear to be inclusive. Thoughtful idea but not an evidence-based model.*

## Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *timely reporting of personnel changes*
- *consider organizing the contract around # of events and activities, the content of which are identified by program participants*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



Draft PY2020 CCDDDB Program Summary
Agency: Developmental Services Center
Program: Employment First

PY20 CCDDDB Funding Request: \$80,000
PY20 Total Program Budget: \$80,313
Current Year Funding (PY19): \$80,000
Proposed Change in Funding - PY19 to PY20 = 0 %

Priority: Employment Services and Supports

Services and People Served

Target Population: People with I/DD and their families and other advocates; staff of service providers; and the business community of Champaign County. Collaborative effort between Community Choices and DSC to increase awareness of the various aspects of employment for people with ID/DD in Champaign County— supports available to the person looking for a job; the shift from in-center to community-based services for agency staff; and for the business community, the benefits of hiring people with disabilities and the support available to them upon hire.

Scope, Location, & Frequency of Services:

Scope: The central point of this application is to promote a change in culture surrounding people with disabilities and their contribution to Champaign County through employment. Staff of Community Choices and DSC funded by the program have focused on outreach to the three primary stakeholders:

- Informational/educational meetings for people with disabilities and people within their natural support network. Content of these meetings includes information pertinent to getting support in finding a job, the impact of employment on benefits; areas of question or concern in moving from school or day program toward employment, and other topics of interest.
•Trainings and in-services for provider agency staff on history and the “whys and hows” of moving toward more community based services and cutting edge employment practices around the country.
•Education for the business community on the inclusion of people with disabilities, especially in the realm of employment, through LEAP, an hour long presentation that results in certification of a business’s disability awareness. Relationships developed with these businesses provides opportunities for more in-depth dialog about employment opportunities for people with disabilities, introduction to specific people who may meet an expressed need, and ultimately employment for a person.
•Policymakers through communication and advocacy with representatives of various state agencies such as the Department of Rehabilitation Services (DRS) as well as continuing to research the national progress of the Office of Disability Employment Policy (ODEP) and the Association of People Supporting Employment First (APSE) to further employment opportunities for those with developmental disabilities.

Location/Frequency: LEAP trainings occur in the place of business or other community centers if the training includes multiple businesses. Family meetings typically occur at the Champaign Public Library.

Reviewer: Above is lightly edited. Three or four stakeholders? Scope of services largely unchanged from PY19. How are the program efforts towards changing culture measured?

Residency and Demographic Data Not Required or Reported in PY2018 or PY2019.

Program Performance Measures

CONSUMER ACCESS: All people with disabilities in Champaign County and people within their natural support network are invited and encouraged to attend the family informational meetings. All businesses in Champaign County who want to receive disability awareness certification through the LEAP training are eligible for the training at no charge. Businesses must be located in Champaign County as evidenced by their zip code. Information about family meetings is disseminated through Champaign County TPC, the Job Developer’s Network, the DisAbility Resource Expo; social media, IEPs, and other agency

communication. Businesses learn about LEAP through other employers, social media, CIB Magazine, and cold calls from staff supported by this grant.

**Of those seeking assistance or referred 100% will receive Services/Support.**

**Within 30 days from referral, 100% of those referred will be assessed.**

**Within 30 days of assessment, 100% of those assessed will engage in services.**

**People will engage in services, on average, for:** The training takes under two hours. Engagement or follow-up occurs three months later unless the company reaches out first.

**Additional Demographic Data:** Number of businesses participating in the certification process, zip code, number of employees attending sessions, and the business sector for each company.

### **CONSUMER OUTCOMES:**

1. Two informational family meetings will be held based on interests of participants.
2. Employment First will be included in DSP training.
3. Customized Employment training will be coordinated by LEAP Coordinator.
4. Fifteen LEAP trainings will be scheduled with interested employers.
5. Training for front-line staff for businesses will be created and conducted to inform about natural supports.
6. A quarterly newsletter including information about the disability community and employment of people with I/DD will be provided for employers.

#### Assessment/Data Collection:

1. Attendance will be taken at each informational family meeting. This information will be shared in quarterly reports.
2. Inclusion of Employment First information in monthly DSP training will be included in quarterly reports.
3. Customized Employment training will be coordinated for all service providers in Champaign County. Attendance will be documented and reported to CCDDDB via the quarterly reports.
- 4./5. LEAP and front-line staff training employer information including attendance, zip code, and business sector is maintained through a database that can be accessed by Community Choices and DSC staff responsible for this program. This information will also be included in the quarterly report.
6. Information shared in the quarterly newsletter will be reported to CCDDDB via the quarterly report.

**Outcome gathered from all participants?** Yes.

**Anticipate 15 total participants for the year.**

**Will collect outcome information:** about businesses including zip codes, number of participants, and type of business is gathered at each training.

**Is there a target or benchmark level for program services?** Yes. Targets/benchmarks are established from reviewing outcomes, targets, and progress annually.

**FY19 Measure:** A quarterly newsletter including information about the disability community and employment of people with I/DD will be provided for employers.

**FY19 Mid-year:** Quarterly newsletters have been distributed each of the first 2 quarters of the fiscal year.

**FY19 Measure:** One lunch and learn meeting will be arranged providing an opportunity for employers to learn from service providers as well as each other.

**FY19 Mid-year:** Lunch and learn was held October 29, 2019

**FY19 Measure:** Two informational meetings including panels will be provided for individuals currently participating in day program, on waiting list for services and those transitioning from high school. Families will be surveyed to determine what they know/need to know about services in Champaign County to assist in choosing meeting topics.

**FY19 Mid-year:** Surveys are being distributed via agency social media, TPC, and RPC. Meetings are planned for later in the fiscal year.

**FY19 Measure:** A community wide training on customized employment will be hosted.

**FY19 Mid-year:** A survey was distributed to Champaign County Job developers/coaches to identify training priorities.

Griffin and Hammis, the company who provides this training is not available until fall of 2019.

### **Estimated level of change for each outcome:**

Outcome 1: Fifty people will attend information meetings.

Outcome 4: Fifteen businesses will go through LEAP training.

Outcome 5: Five front-line staff trainings for businesses will be conducted.

*Reviewer: Above is edited. Lunch n' Learn date error. Will funds be returned since community-wide training was put on hold due to company availability? Program staff funded through CCDDDB should not be attending IEPs to distribute program information.*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 0

**Non-Treatment Plan Clients (NTPCs):** 50 people attending informational meetings.

**Service Contacts (SCs):** 0

**Community Service Events (CSEs):** 20 businesses that attend the LEAP training and are certified following the training as well as the number of businesses represented at front line staff training.

**Other:** n/a

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$80,000

**PY20 Total Program Budget:** \$80,313

**Current Year Funding (PY19):** \$80,000

**Proposed Change in Funding - PY19 to PY20 =** 0%

PY19 request was for \$80,000

PY18 request was for \$82,400 and award \$80,000

PY17 request was for \$80,000 and award \$80,000

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Although it is not exclusively stated, this is not a service funded through Medicaid waiver.

**CCDDDB request is for 100% of total program revenue.** Other revenue is from DHS Fee for Service \$304 and Program Service Fees – Other \$9. *Reviewer: not explained but in previous year applications, the small DHS fee for service is a portion allocated to all programs from state reimbursement for required trainings. The \$9 is mysterious.*

**Expenses:** Personnel related costs (Salaries/Wages \$41,152, Payroll Taxes \$4,124, and Benefits \$5,995) are the primary expense charged to CCDDDB at 63% of \$80,000. Other expenses are: Professional Fees/Consultants \$24,280 (30%), Consumables \$595 (1%), General Operating \$599 (1%), Occupancy \$448 (1%), Conferences/Staff Development \$277 (0%), Local Transportation \$1,060 (1%), Equipment Purchases \$13 (0%), Lease/Rental \$391 (0%), Membership Dues \$184 (0%), and Miscellaneous \$882 (1%).

**Total Agency Budget shows a deficit of 547,744. Total Program a deficit of \$233, and CCDDDB Budget is balanced.**

**Program Staff - CCDDDB Funds:** 0.13 FTE Indirect and 1.00 FTE Direct. Total CCDDDB = 1.13 FTEs.

**Total Program Staff:** 0.13 FTE Indirect and 1.00 FTE Direct. Total Program = 1.13 FTEs.

**Audit Findings:** *Audit in compliance. If funded, PY20 contract requires Audit completed by Independent CPA.*

*Reviewer: Cost of program appears very high to only have 15 businesses going through program.*

**CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities?** Yes

**Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** Information about family meetings is disseminated through Champaign County TPC; the Job Developer’s Network; the DisAbility Resource Expo; social media, and other agency communication. Program concentrates on culture change rather than individual people. Outreach for LEAP training is made to businesses in outlying communities as well as those in Champaign and Urbana. Although the emphasis of this grant is culture change rather than individual people, the intended outcome is to provide more employment opportunities for all people with I/DD in Champaign County through a change in how the business community views the potential contribution of people with disabilities in the world of employment. This program has affected people regardless of whether a person receives services from a local agency as one rural business hired a person with I/DD after going through the LEAP training that is not even working with a local agency.

**Inclusion, Integration and Anti-Stigma:** This program in tandem with the Community Employment Program, seeks to promote employment of people with disabilities. Through the LEAP training, employers are given examples of the benefits

that businesses have experienced when they hire people with disabilities. Real life examples from their colleagues dispel myths and provide examples of how their business has benefited from the addition of a person with a disability. Stories from employers of people with disabilities have been included in the quarterly newsletter, testimonial videos incorporated in the LEAP training, and personal experiences shared in an employer focus group. Employers who have become active partners in the inclusion of people with disabilities in the workforce have offered to speak with other business owners to answer any questions they may have about their experience with the hiring of a person with a disability and what it has meant for their business and work environment.

**Coordinated System:** There are no similar services in Champaign County. This grant is a collaboration between Community Choices and DSC.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items and indirect cost allocation. As with other DSC program proposals, very small portions of the salaries of many (21) indirect staff are charged (an acceptable and common – but sometimes confusing – approach.)*

**Person Centered Planning (PCP):** No

*Reviewer: Although the effort focuses on a culture shift, the number of jobs resulting from the LEAP training is also of interest; application includes a great success story.*

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** At a national level, ODEP and other entities provide resources for the business community on the employment of people with disabilities, including information that dispels questions or concerns raised by a lack of information. On a local level we have seen a growing “buy in” from the community. Locally-based employers have participated in LEAP training. Nationally-based businesses have found value in expanding their understanding of employment of people with disabilities. As participation grows, local media has recognized the value of this resource and has included multiple articles in the Central Illinois Business Magazine.

*Reviewer: section includes details on types of businesses completing LEAP training and certification.*

**Evidence of Collaboration:** Working agreement between Community Choices and DSC.

**Staff Credentials:** Staff need a unique blend of knowledge of the disability and business communities. They must be able to present information to employers in a manner that increases awareness of the employability of people with disabilities, addresses any misgivings or questions, and informs them about partnerships available with local agencies to support their efforts to hire people. As the traditional services model continues to evolve, staff must also have a pulse on the changing concerns and issues that arise from this transition.

**Resource Leveraging: Other Pay sources:** None. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:  
- *timely reporting of personnel changes.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
United Cerebral Palsy Land of Lincoln

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> Staff will complete the required cultural competency training annually, including considerations for persons served, personnel, and other stakeholders in the following areas: culture, age, gender, sexual orientation, spiritual beliefs, socioeconomic status, and language. This will be completed on-line through the Relias Learning Management System.
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	Not included in plan. There is an agency wide Affirmative Action Policy that is evaluated.
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	The Relias system is evaluated for trends. There is not a clear plan about assessment or evaluation for cultural competence.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>Yes-</b> Individuals participate in the training and plan development.
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	There was not a clear plan of outreach and engagement other than working with clients at the office sites.
<i>Inter-Agency Collaboration</i>	<b>No</b>
<i>Language and Communication Assistance</i>	<b>No</b>
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes</b>

**Additional Comments:**

*It was not clear if UCP utilizes clients for plan development or the individuals of diverse backgrounds that work with the organization. There was a section missing about Language and Communication in the CLC Plan. UCP does not have any formal agreements and does not mention interagency collaboration with other organizations.*

(47)

**Draft PY2020 CCDDDB Program Summary**  
**Agency: United Cerebral Palsy Land of Lincoln**  
**Program: Vocational Services**

**PY20 CCDDDB Funding Request:** \$60,000  
**PY20 Total Program Budget:** \$60,000  
**Current Year Funding (PY19):** \$34,590  
**Proposed Change in Funding - PY19 to PY20 =** 73 %

**Priority:** Employment Services and Supports

**Services and People Served**

**Target Population:** People with a developmental disability, ages 18-55, living in Champaign County who require extended support services or vocational training to maintain successful employment, to become job ready and become financially stable.

**Scope, Location, & Frequency of Services:**

Scope: Provides employment training, job placement and support services, money management training and self-advocacy skills to 25 adults who want to become financially stable. Program meets with participants to identify barriers to employment and help them develop plans to overcome these barriers so they are job ready. Assists with job development and placement services and provides support services necessary to maintain success on the job. UCP will mentor the individuals on money management skills and provide the case management and job coach services necessary for them to find a job, maintain it and become self-sufficient.

*Reviewer: Application also offers details on collaboration with community financial partners, case management/extended job coaching, and serving people after closure from DRS supports. No change to population served, scope of services largely unchanged from PY19, however case management appears to be more of a focus. How much more service will be provided to clients due to increase? Large increase to serve only 8 more people.*

**Residency**

Total Served	17 in PY18	18 in PY19 (first two quarters)
<b>Champaign Set</b>	7 (41.2%) for PY18	8 (44.4%) for PY19
<b>Urbana Set</b>	6 (35.3%) for PY18	5 (27.7%) for PY19
<b>Rantoul</b>	3 (17.6%) for PY18	3 (16.6%) for PY19
<b>Mahomet</b>	0 (.0%) for PY18	0 (0%) for PY19
<b>Other Champaign County</b>	1 (5.9%) for PY18	2 (11.1%) for PY19

**Demographics: Total Served in PY18 = 17**

<b>Age</b>	
Ages 19-59 -----	17 (100.0%)
<b>Race</b>	
White -----	13 (76.5%)
Black / AA -----	3 (17.6%)
Asian / PI -----	1 (5.9%)
<b>Gender</b>	
Male -----	12 (70.6%)
Female -----	5 (29.4%)
<b>Ethnicity</b>	
Not of Hispanic/Latinx Origin -----	17 (100.0%)

**Program Performance Measures**

**CONSUMER ACCESS:**



Participants must be deemed developmentally disabled via PUNS testing and require extended support services or vocational training to maintain successful employment, become job ready and become financially stable. Participants must also reside in Champaign County. Participants must be willing to obtain employment and follow employment policies and procedures once hired. Referrals from: Division of Rehabilitation Services, CCRPC, schools and other community partners serving people with disabilities. Referrals will be assessed for eligibility into the program by meeting with the CCRPC Case Manager. Program candidates will be contacted by UCP staff within 7 days of receipt of referral and they will set up a schedule for candidates to start the intake process.

*Reviewer: Section edited. Only referrals from other organizations, no details on outreach.*

**Of those seeking assistance or referred 90% will receive Services/Support.**

**Within 7 days from referral, 100% of those referred will be assessed;**

**Within 7 days of assessment, 90% of those assessed will engage in services**

**People will engage in services, on average, for:** Varies depending on participant needs.

**Additional Demographic Data:** Type of Disability

### CONSUMER OUTCOMES:

1. UCP will provide extended job support services to 25 individuals with developmental disabilities.
2. UCP will provide vocational training/self-advocacy skills to 15 individuals with developmental disabilities.
3. 90% program participants will obtain employment.

Assessment Tools: O\*NET (Career Interests Inventory), Barriers to Employment Success Inventory, Vocational Questionnaire, ECDP Plan (Exploring Choices, Discovering Possibilities) and TABE test.

Individual Service Plan will be developed based on assessment results.

Data Collection: Task analysis sheets, daily notes and attendance tallied by the Job Development Supervisor. Data and information from customer surveys, complaints, immediate feedback and training evaluations is also collected in spreadsheets. Chronological and Time intervention notes will be completed to show hours of service for each individual. Attendance sheets and daily notes will track each person's progress to determine completion of the program.

**Outcome gathered from all participants?** Yes.

**Anticipate 25 total participants for the year.**

**Will collect outcome information** daily as determined by the participants' schedules.

**Is there a target or benchmark level for program services?** Yes. Participants are trained and supported to become as independent as possible and no longer requiring vocational and/or job supports from UCP. However, participants are aware that at any point in time if they require further services that can reenter the program at any time.

**Estimated level of change for this outcome:** 100% of participants are given a Customer Satisfaction Survey that includes questions regarding customer choice and satisfaction of services received. UCP's goal is that 100% of customers are involved in writing their ISP, creating their goals and are happy with the job they choose in the community.

*Reviewer: Application includes further info on ISPs and data collection. Outcomes #1 and #2 relate to process and the performance of the agency, but Outcome #3 is of interest and aligns well with Personal Outcomes of value (real work and community inclusion). Good detail on several relevant, specific Assessment and Data Collection tools.*

### UTILIZATION:

**Treatment Plan Clients (TPCs):** 25

**Non-Treatment Plan Clients (NTPCs):** 0. N/A

**Service Contacts (SCs):** 70, SCs include the intake process for new participants and any screenings of potential candidates who do not enter the program. This also includes potential program candidates and others met during community events.

**Community Service Events (CSEs):** 30 in-service trainings to the Division of Rehabilitation Services (DRS), CCRPC and other community agencies on how to identify potential candidates for the program. Other public presentations will be held for local disability groups and organizations, colleges and/or universities, high schools and advocacy groups.

**Other:** 6,250 Contact Hours. UCP's Employment Program will provide services to 25 new and existing individuals, 5 hours/week for 50 weeks. Contact hours will be a part of all job support services - job development, job placement, job coaching, case management, staffings, site visits, etc. The amount of contact hours might vary from individual to individual, depending on level of support needed. This is an estimated average of contact hours based on the number of people to be served.

*Reviewer: Above is edited. Service hours for TPCs will be reported into online reporting system.*

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$60,000

**PY20 Total Program Budget:** \$60,000

**Current Year Funding (PY19):** \$34,590

**Proposed Change in Funding - PY19 to PY20 =** 73.5%

PY19 request was for \$34,590

PY18 request was for \$34,590 and award \$34,590

PY17 request was for \$91,895 and award \$86,475

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB request is for 100% of total program revenue.**

**Expenses:** Personnel related costs (Salaries/Wages \$44,569, Payroll Taxes \$3,576, and Benefits \$4,715) are the primary expense charged to CCDDDB at 90% of total costs. Others are: Professional Fees/Consultants \$85 (0%), Consumables \$100 (0%), General Operating \$900 (2%), Occupancy \$75 (0%), Conferences/Staff Development \$80 (0%), Local Transportation \$2,000 (3%), and Lease/Rental \$2,454 (4%).

**Total Agency Budget has a deficit of \$903,894, Total Program a deficit of \$38,815, and CCDDDB Budget shows a surplus of \$1,446.**

*Reviewer: CCDDDB budget should be balanced – does the surplus result from an error? If the CCDDDB is the only funding source, Total Program and CCDDDB budgets should match. How can the agency continue to operate at such a high deficit?*

**Program Staff - CCDDDB Funds:** 0.10 FTE Indirect and 1.70 FTE Direct. Total CCDDDB-Funded staff = 1.80 FTEs.

**Total Program Staff:** 0.10 FTE Indirect and 1.70 FTE Direct. Total Program = 1.80 FTEs

*Reviewer: CCDDDB funds support a portion of the Employment Director, a portion of Job Development Supervisor, a portion of the Employment Specialist/Job Developer, and portions of five Job Coaches. In addition, very small portions of the salaries of 8 relevant indirect staff are allocated to this contract (an acceptable and common approach by larger agency providers.)*

**Audit Findings:** PY18 audit was not submitted by the deadline or by the extension deadline and is not in compliance with CCDDDB requirements; as a result payments have been suspended until the audit is revised to comply with CCDDDB funding guidelines and contract. PY19 contract requires an audit, as will PY20, if selected for funding.

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities?** Yes

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** All clients served by the program will be members of the population that are underserved or underrepresented and at risk. Participants who are interested in the program can work with staff regarding barriers and overcoming them. They will be served in local office, at their job sites as well as in their respective areas.

*Reviewer: PY18 data demonstrate some county-wideness and reach to underrepresented minority populations; engagement is enhanced by staff traveling to the clients' areas.*

**Inclusion, Integration and Anti-Stigma:** Program assesses and assists participants in identifying barriers to community access and inclusion and addresses those through job readiness coaching, budget development, money management skills, job readiness training including social interaction and communication and transportation training. UCP provides information, referral and resources on local community living options for those with housing needs. UCP provides training and necessary supports to employers working with participants to build natural supports within the participants' work place.

**Coordinated System:** UCP has developed a partnership with Rosecrance to assist those suffering from mental health disorders and individuals with developmental disabilities with job development, placement, maintenance as well as financial stability. UCP has also developed a relationship with Goodwill to support those with disabilities.

*Reviewer: Section lightly edited. No program outreach was noted in the application, only referrals from other organizations.*

**Budget and Program Connectedness:** Yes. *Budget Narrative offers adequate detail on relevant items, how they were calculated, and on the listed personnel's various responsibilities for this program.*

**Person Centered Planning (PCP):** Yes

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** UCP is accredited by the Commission of the Accreditation of Rehabilitation Facilities (CARF). UCP will use evidence-based Supportive Employment models as well as the Customized Employment to provide job supports to people with disabilities. *Reviewer: Section includes more information on CARF accreditation and Supportive Employment models.*

**Evidence of Collaboration:** None. *Although no evidence of collaboration was noted in this section, previous sections mentioned working with CCRPC and Rosecrance. These agencies have acknowledged their working relationship with this program, and the local UCP staff are well-regarded.*

**Staff Credentials:** The Employment Director has a four-year degree in human services, education, or a related field. All UCP vocational staff must complete online based training as well as job shadowing with a senior staff member prior to working with the participants. All UCP staff are also required to complete annual training to maintain employment.

**Resource Leveraging: Other Pay Sources** N/A. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

### **Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Written agreements with other agencies working collaboratively.*
- *Consider a fee for service structure for this contract, with rates similar to DHS-DRS and to other CCDDDB contracts for similar services.*
- *Agency board does not include a resident of Champaign County, required for contract with CCMHB/CCDDDB*
- *Agency audit was not delivered by the extended deadline; when submitted, the audit was not in compliance with CCDDDB contract requirements and funding guidelines. Payment is suspended until the corrections are made.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



Draft PY2020 CCDDE Program Summary
Agency: Developmental Services Center
Program: Apartment Services

PY20 CCDDDB Funding Request: \$442,757
PY20 Total Program Budget: \$511,336
Current Year Funding (PY19): \$429,861
Proposed Change in Funding - PY19 to PY20 = 3 %

Priority: Non-Work Community Life and Flexible Support

Services and People Served

Target Population: Champaign County residents with I/DD in need of support to live in the community and residing in an apartment/house of their choice or in DSC's supported apartment building. Program proposes to serve at least 56 people. New TPCs replace closing TPCs so the program maintains program capacity throughout the year. Funding supports movement in the program as needs of those receiving services increase or decrease. People interested in receiving services are referred to the CCRPC ISC to complete PUNS enrollment.

Scope, Location, & Frequency of Services:

Scope: The Apartment Services Program has three goals, all addressing maximizing independence.

- 1. Assist individuals in learning/maintaining skills within a safe environment;
2. Provide long-term, on-going support in areas that cannot be mastered;
3. Provide increased support for individuals as they lose skills due to aging, deteriorating health, or other chronic conditions that jeopardize their ability to maintain their independence.

Services are varied depending on level of support needed and may include:

- 1. Financial support and training: Balancing checkbooks, paying bills, serving as Representative Payee, budgeting, tax preparation, and banking.
2. Independent living skills training: Cooking, cleaning, hygiene, grocery shopping, dietary support, physical activity/exercise support, self-medication, technology, safety, and communication.
3. Community integration training and coordination: Social skills, community safety, riding the MTD/transportation, registering and planning for community events, self-advocacy, hobby exploration, securing and moving to a new apartment.
4. Medical support: Scheduling and attending medical/dental/eye appointments, sharing accurate information with medical providers and family members, securing/monitoring medications. Being responsive to acute and chronic health concerns within reason of someone living independently may be very intensive.

An Emergency Response System is available to all individuals in Apartment Services after hours and on the weekends. For those that live at C-U Independence, an Overnight Manager is on the premises to address emergencies between the hours of 10:00 p.m. and 8:00 a.m. nightly.

Location/Frequency: Services are provided in the community, or in the person's home, at times that fit the person's schedule. Service hours range from a few hours to 40 hours per month per person. Services are unique to each person and fluctuate based on personal circumstances and crisis. Family and natural support is encouraged and pursued when available.

Reviewer: Above is lightly edited. Details on supports and PUNS enrollment process. Scope of services unchanged from PY19. Some services are similar to those of DSC Service Coordination program and of other funded agency programs. How is duplication of effort avoided?

Residency

Table with 3 columns: Total Served, 59 in PY2018, 49 in PY2019 (first two quarters). Rows: Champaign Set, Urbana Set.

Rantoul	1 (1.7%) for PY18	1 (2.0%) for PY19
Mahomet	0 (0%) for PY18	1 (2.0%) for PY19
Other Champaign County	5 (8.5%) for PY18	3 (6.1%) for PY19

**Demographics**

**Total Served**

**Age**

Ages 19-59 -----	46 (78.0%)
Ages 60-75+ -----	13 (22.0%)

**Race**

White -----	50 (84.7%)
Black / AA -----	7 (11.9%)
Asian / PI -----	1 (1.7%)
Other (incl. Native American and Bi-racial)	1 (1.7%)

**Gender**

Male -----	32 (54.2%)
Female -----	27 (45.8%)

**Ethnicity**

Of Hispanic/Latinx Origin -----	1 (1.7%)
Not of Hispanic/Latinx Origin -----	58 (98.3%)

**Program Performance Measures**

**CONSUMER ACCESS:** People with I/DD on the PUNS list. Outreach includes: the Champaign County Transition Planning Committee Roundtable, disAbility Expo and DSC website. Responsive to requests, such as meeting with Mahomet Seymour CUSD #3 Special Education department.

**Of those seeking assistance or referred, 75% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 90 days of assessment, 90% of those assessed will engage in services.**

**People will engage in services, for as long as a person has a need.**

**Additional Demographic Data:** disability and referral source are included in the intake process.

**CONSUMER OUTCOMES:**

Outcome 1: Individuals will maintain/make progress toward their defined outcomes. Program activities are expected to support people to live in the community rather than a more restrictive setting while achieving self-identified outcomes.

Outcome 2: Individuals will be given opportunities to explore and/or participate in new activities or hobbies.

*Data collected by:*

Outcome 1: A person-centered plan detailing strengths, needs and wants is developed using assessments and requests for support expressed by the individual. Progress made on these personal outcomes identified in this plan are reviewed quarterly. Information collected via staff report in monthly reviews and contact notes.

Outcome 2: A list of new hobbies and participation in new activities/events is maintained via staff and participant report.

**Outcome gathered from all participants?** No

Outcome 1: Fifteen outcomes will be randomly selected for review on a quarterly basis.

Outcome 2: Reported new hobbies and participation in new activities are recorded.

*Reviewer: From monthly and annual program reviews with all program participants, more outcome data may be available, from which a sample could be reviewed and reported on. Is this practical? As a Council on Quality and Leadership accredited agency, the Personal Outcomes Measures system developed with CQL support would also be of interest. The identified outcomes make sense for the program and relate to quality of life. What are the opportunities that allow people to participate in new hobbies? Is this linking people with supports to investigate new hobbies, supporting people in hobby exploration? Given that program staff work from 8 to 4:30, often the same hours program participants work or engage in day activities, after hours and off-site (apartment or community) appointments may accelerate success in identifying and linking to such resources.*

**Anticipate 56 total participants for the year.**

**Will collect outcome information monthly:** Progress toward meeting outcomes is reviewed monthly through program reviews and contact notes.

**Is there a target or benchmark level for program services?** Yes. Benchmarks and targets for outcomes are compared between fiscal years within this program.

FY 19 Measure: Individuals will maintain/make progress toward defined goals.

FY 19 Target: 80%

FY 19 Mid-Year Outcome: 84%

FY 19 Measure: People will be given opportunities to explore and/or participate in new activities or hobbies.

FY 19 Target: 35 opportunities

FY 19 Mid-Year Outcome: 27 opportunities

**Estimated level of change for these outcomes:**

Outcome 1: 85% of the individuals will maintain/make progress toward their defined outcomes.

Outcome 2: 40 new opportunities.

*Reviewer: specific consumer outcomes are defined by participants, supporting choice and self-determination; person-centered planning process is central.*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 56 people receiving Apartment Services Program supports funded by the CCDDDB

**Non-Treatment Plan Clients (NTPCs):** 0

**Service Contacts (SCs):** 8 Individuals screened for Apartment Services support.

**Community Service Events (CSEs):** 0

*Reviewer: Hours of service are reported into the online claims system. Why is the program proposing to serve fewer clients in FY20 than total served in FY18, but asking for a 3% increase in funds?*

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$442,757

**PY20 Total Program Budget:** \$511,336

**Current Year Funding (PY19):** \$429,861

**Proposed Change in Funding - PY19 to PY20 =** 3.0%

PY19 request was for \$429,861

PY18 request was for \$429,865 and award \$417,341

PY17 request was for \$417,341 and award \$417,341

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB request is for 87% of total program revenue.** Other revenue is from United Way \$30,000 (6%), DHS Fee for Service \$34,618 (7%), DHS FFS Training \$3,883 (1%), and Program Service Fees – Other \$78 (<1%).

*Reviewer: Projections are based on PY19. Not explained in application, but known from previous years, is that the DHS Fee for Service consists of state waiver funding (individuals not charged to this contract but receiving similar services, from the same staff team) and an allocated amount of reimbursement the agency receives from the state for conducting required trainings.*

**Expenses:** Personnel related costs (Salaries/Wages \$305,971, Payroll Taxes \$34,391, and Benefits \$52,957) are the primary expense charged to CCDDDB at 89% of \$442,757. Other expenses are: Professional Fees/Consultants \$1,481 (0%), Consumables \$3,309 (1%), General Operating \$5,790 (1%), Occupancy \$4,628 (1%), Conferences/Staff Development \$708 (0%), Local Transportation \$21,341 (5%), Equipment Purchases \$104 (0%), Lease/Rental \$4,145 (1%), Membership Dues \$1,409 (0%), and Miscellaneous \$6,523 (1%).

**Total Agency Budget shows a deficit of \$547,744, Total Program a deficit of \$2,223, and CCDDDB budget balanced.**

**Program Staff - CCDDDB Funds:** 0.42 FTE Indirect and 7.91 FTE Direct. Total CCDDDB = 8.33 FTEs

**Total Program Staff:** 0.56 FTE Indirect and 9.10 FTE Direct. Total Program = 9.66 FTEs

*Reviewer: How can the agency continue to operate at such a high deficit? Direct staff funded by CCDDDB include 1 Community Living Coordinator, 7 Apartment Services Case Managers, a portion of the Program Director, and a portion of the RN Coordinator. Per indirect cost allocation, very small portions of 21 indirect staff are also assigned to this contract (this is an acceptable and common strategy, though somewhat confusing in the*

Personnel form). A 3% salary increase is planned, along with 10% health insurance cost increase – standard across DSC applications and previous year requests.

**Audit Findings:** Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.

## CCDDB PY20 Priorities and Decision Support Criteria

Does the plan align with one or more CCDDB Priorities? Yes

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** Referrals received by ISC, self or family member referrals, and other community partners. Participation in community activities: Champaign County Transition Planning Committee Roundtable, disAbility Expo, website and social media provide awareness and information about DSC services. Services are provided in the person's home regardless of location or in a community location identified by him/her. Referrals are accepted throughout Champaign County, including rural areas. Rural residents tend to relocate to Champaign/Urbana to have access to affordable housing, employment, social opportunities, and public transportation, ultimately maximizing independence with opportunity.

**Inclusion, Integration and Anti-Stigma:** In addition to agency efforts to reach members of underserved/underrepresented populations, increased awareness occurs naturally as community access/engagement is realized by people receiving services.

*Reviewer: Above is edited. Details on businesses frequented. Missing information on inclusion, integration, and Anti-Stigma.*

**Coordinated System:** Community Choices offers a Community Living Program. DSC will continue to partner with Community Choices to coordinate Personal Outcome Measures (POMs) training and implementation and collaborate on trainings that are useful to this specific service.

*Reviewer: Above is edited, with more detail on Community Choices program and past POMs trainings.*

**Budget and Program Connectedness:** Yes. Budget Narrative covers all associated items adequately.

**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** Results were shared by CCMHB/DDB from the Intellectual/Developmental Disability Survey. Specific to "Residential services or support for independent community living", 14% of the 23 respondents and 21 caregivers indicated services were needed but not received. According to the December 2018 PUNS report, 182 individuals in Champaign County had requested residential services with 94 people indicating a need for less than 24-hour supports. John Fallon, Corporation for Supportive Housing, recently presented during a study session for CCMHB/DDB demonstrating an effort at the state level to broaden independent living.

**Evidence of Collaboration:** DSC will formalize its relationship with Community Choices and the Department of Aging by implementing a written working agreement. Additional collaboration with community partners include: service linkage to MTD, para-transit registration, and C-U Special Recreation, as well as LIHEAP, SNAP benefits, Medicaid, and Social Security. Outreach efforts are made to identify services the Department of Aging may have to offer those who meet age requirements.

**Staff Credentials:** Staff receive 80 hours of classroom and 40 hours of on the job training per the DHS-state mandated training in addition to training specific to each person receiving services.

**Resource Leveraging: Other Pay sources:** Funding from United Way funds less than one FTE. People receiving state funding for services are not reflected in the service reporting for this grant. As state funding through Home-Based Support monies becomes available, an individual is no longer considered for services funded by CCDDB, which in turn provides opportunities for another individual interested in services. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes. *Reviewer: Other pay sources – seems like some of these services are reimbursable by other payers.*

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Timely reporting of personnel changes.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



# Draft PY2020 CCDDDB Program Summary

Agency: Developmental Services Center  
Program: Clinical Services

**PY20 CCDDDB Funding Request:** \$174,000  
**PY20 Total Program Budget:** \$174,541  
**Current Year Funding (PY19):** \$174,000  
**Proposed Change in Funding - PY19 to PY20 = 0 %**

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

### Services and People Served

**Target Population:** Children and adults with intellectual and developmental disabilities (I/DD) who reside in Champaign County, who may or may not be seeking services from DSC.

### Scope, Location, & Frequency of Services:

Scope: Psychological assessments (approximately 4% of current FY 19 budget); Counseling assessment and planning; individual, family, couples and group counseling; crisis response, short-term, and long-term counseling (approximately 68% of current FY19 budget); Initial and annual psychiatric assessment, medication review, and crisis intervention (approximately 28% of current FY19 budget); Interdisciplinary Team consultation with Clinical Consultants (included as a component of consultants' billed service).

Location: Services occur at licensed clinicians' offices, at DSC, and in instances of emergency need, at area hospitals, individual's homes, or locations such as a hotel in emergency situations, such as homelessness.

Frequency: Determined by contracted licensed clinical consultants and coordinated by DSC's Clinical Coordinator.

*Reviewer: Above is edited, scope of services unchanged from FY19. Details on why service might be needed/requested.*

### Residency

Total Served	73 in PY2018	67 in PY2019 (first two quarters)
<b>Champaign Set</b>	41 (56.2%) for PY18	35 (52.2%) for PY19
<b>Urbana Set</b>	25 (34.2%) for PY18	25 (37.3%) for PY19
<b>Rantoul</b>	4 (5.5%) for PY18	4 (6.0%) for PY19
<b>Mahomet</b>	1 (1.4%) for PY18	1 (1.5%) for PY19
<b>Other Champaign County</b>	2 (2.7%) for PY18	2 (3.0%) for PY19

### Number of People receiving each service in PY2018

- 43 Coordination of Mental Health Services
- 54 Counseling/Therapy/Physical/Mental Health Appointments (includes Psychological assessments)
- 23 Nursing Services
- 23 Psychiatry
- 69 Reporting/Planning Time

### Demographics: Total Served in PY2018 = 73

#### Age

Ages 13-18 -----	2 (2.7%)
Ages 19-59 -----	63 (86.3%)
Ages 60-75+ -----	8 (11.0%)

#### Race



White -----	58 (79.5%)
Black / AA -----	13 (17.8%)
Asian / PI -----	2 (2.7%)
<b>Gender</b>	
Male -----	41 (56.2%)
Female -----	32 (43.8%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	2 (2.7%)
Not of Hispanic/Latinx Origin -----	71 (97.3%)

**Program Performance Measures**

**CONSUMER ACCESS:** People with I/DD, who are PUNS eligible and seeking clinical support are eligible for services. People hear about the program through the disAbility Expo, the Champaign County Transition Planning Committee’s Round Table presentation, support group referrals, physician and interagency referrals, DSC website, Facebook, outreach events, brochures, and other informational materials.

*Reviewer: Above is edited, includes Illinois DHS-DDD definition of eligibility.*

**Of those seeking assistance or referred, 85% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 30 days of assessment, 90% of those assessed will engage in services.**

**People will engage in services, on average, for:** counseling engagement 6-18 months, psychiatry 12-36 months.

**Additional Demographic Data:** Disability and referral source are also collected at time of intake.

**CONSUMER OUTCOMES:**

- 1) Requisite psychological assessments to enable individuals to qualify for I/DD services regardless of DSC affiliation, or lack thereof. This psychological assessment is critical for individuals with intellectual and developmental disabilities to document their eligibility for a wide array of supports funded by federal, state, and local entities.
- 2) Planning and support guidance based on assessment in regard to the assessed individual with I/DD, regardless of DSC affiliation or lack thereof. The planning and support guidance gleaned from assessments performed by our consulting psychologist can be significantly helpful in realizing positive outcomes for the individual.
- 3) Counseling support for I/DD individuals residing in Champaign County, regardless of DSC affiliation or lack thereof. While consulting counselors practice strict confidentiality, very positive outcomes have been presented in the vast majority of our counseling recipients.
- 4) Psychiatric support for I/DD individuals participating in DSC services. DSC’s psychiatric and behavioral supports are provided in a manner that is sensitive to each individual’s cognitive and communication abilities. We are extremely fortunate to have the Pavilion’s Behavioral Health Clinical Director as our consulting psychiatrist.

Outcome 1: Clinical Coordinator will conduct quarterly reviews regarding the assessment, progress, and frequency of appointments for all people receiving counseling support.

Outcome 2: DSC Psychiatric Practice will review patient progress on a regular basis and attempt to reduce the number and dosage of psychotropic medications when deemed clinically appropriate and document such attempts in the psychiatric notes.

Assessments:

- 1) In most cases, DSC’s consulting psychologist administers the Wechsler Adult Intelligence Scale (WAIS).
- 2) Based on our consultant’s psychological assessment, support interventions may be recommended by our psychologist.
- 3) Counseling clients are assessed by assigned counselors who determine the number of sessions appropriate for circumstance. A quarterly recommendation by clinician regarding continued sessions or termination of services is submitted to DSC’s Clinical Coordinator.
- 4) Each psychiatric client served by our consulting psychiatrist undergoes an initial assessment to determine the appropriate intervention for each specific mental health or behavioral concern. Thereafter, each patient meets with the psychiatrist as deemed necessary/appropriate by the consulting psychiatrist.

Data collected by:

Outcome 1: Quarterly reviews are maintained by the Clinical Coordinator.

Outcome 2: Psychiatric notes are maintained by the Clinical Coordinator.

**Outcome gathered from all participants? Yes.**

**Anticipate 65 total participants for the year.**

**Will collect outcome information:** as deemed necessary by clinical consultants or on a quarterly basis.

**Is there a target or benchmark level for program services?** Yes. Targets/benchmarks are estimated from past outcomes in the program.

**FY 19 Measure:** Clinical Coordinator will conduct quarterly reviews regarding the assessment, progress, and frequency of appointments for all people receiving DSC/DDB funded counseling support.

FY 19 Target: 100%

FY 19 Mid-Year Outcome: 100%

**FY 19 Measure:** DSC Psychiatric Practice will review patient progress on a regular basis and attempt to reduce the number and dosage of psychotropic medications when deemed clinically appropriate and document such attempts in the psychiatric notes.

FY 19 Target: 100%

FY 19 Mid-Year Outcome: 100%

**Estimated level of change for this outcome is:** Ideally, enhanced mental health will be realized by all clinical services recipients. However, that determination must be assessed over an extended period of time to insure lasting recovery and well-being. We strive to realize enhanced mental health in all Clinical Services recipients, however, life circumstances sometimes interfere with client progress. Targets for both outcomes = 100%.

#### **UTILIZATION:**

**Treatment Plan Clients (TPCs):** 65 individuals with case records and Individual Service Plans (ISP) funded by CCDDDB.

**Non-Treatment Plan Clients (NTPCs):** 5 individuals with service and support records but no formal Individual Service Plans who are funded by CCDDDB.

**Service Contacts (SCs):** 10 Phone and face-to-face contacts with people who may or may not have open cases in a given program – including information and referral contacts, initial screenings/assessments, and crisis services.

**Community Service Events (CSEs):** 2 Contacts/meetings to promote the program, including public presentations, consultations with community groups, or caregivers, and small group workshops.

*Reviewer: TPC service hours documented in online reporting system.*

#### **Financial Analysis**

**PY20 CCDDDB Funding Request:** \$174,000

**PY20 Total Program Budget:** \$174,541

**Current Year Funding (PY19):** \$174,000

**Proposed Change in Funding - PY19 to PY20 = 0.0%**

PY19 request was for \$174,000

PY18 request was for \$178,986 and award \$174,000

PY17 request was for \$178,986 and award \$178,986

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes, CCDDDB should be payer of last resort. *Reviewer: given that the psychiatrist under contract is Clinical Director for a medical provider which bills insurance, it would seem that eligible individuals should be seen there rather than through the DSC subcontract. Are there advocacy or eligibility issues which should be addressed?*

**CCDDDB request is for 100% of total program revenue.** Other revenue is \$541 from DHS Fee for Service (\$525) and Program Service Fees – Other (\$16). *Presumably \$525 is a portion of training reimbursements (allocated to all programs); \$16 not explained.*

**Expenses:** Personnel related costs (Salaries/Wages \$71,078, Payroll Taxes \$6,973, and Benefits \$8,053) are the primary expense charged to CCDDDB at 50% of \$174,000. At 47%, Professional Fees/Consultants (\$81,836) covers licensed professional consultant subcontracts. Other expenses are: Consumables \$399 (0%), General Operating \$929 (1%), Occupancy \$1,048 (1%), Conferences/Staff Development \$134 (0%), Local Transportation \$870 (1%), Equipment Purchases \$24 (0%), Lease/Rental \$948 (1%), Membership Dues \$317 (0%), and Miscellaneous \$1,391 (1%).

**Total Agency Budget deficit of \$547,744, Total Program Budget deficit of \$448, and CCDDDB Budget balanced.**

**Program Staff - CCDDDB Funds:** 0.20 FTE Indirect and 1 FTE Direct. Total CCDDDB = 1.20 FTEs.

**Total Program Staff:** 0.20 FTE Indirect and 1 FTE Direct. Total Program = 1.20 FTEs.

*Reviewer: How can agency continue to operate at such a high deficit? A 3% salary increase is planned, along with 10% health insurance cost increase – standard across DSC applications and previous year requests. CCDDDB funds support a portion of the Vice President, a portion of the Program Director, and a portion of the Clinical Coordinator. Per indirect cost allocation, very small portions of 21 indirect staff are also assigned to this contract (this is an acceptable and common strategy, though somewhat confusing in the Personnel form).*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## **CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities?** Yes

### **Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** Clinical Services occur at licensed clinicians' offices, at DSC, and in instances of emergency need, at area hospitals, individual's homes, confidential community location, or another location deemed appropriate in a crisis situation. Program currently serves people from underserved and underrepresented minority populations and being responsive to individual or family request regarding cultural and/or religious preferences and considerations.

**Inclusion, Integration and Anti-Stigma:** DSC community outreach efforts remain consistent regardless of a person's ethnicity or the area in which they might live. Given the nature of the supports and the inherent need for confidentiality, the program is limited in how it can promote inclusion, etc. However, the program's clinical intent and interventions serve to enhance personal growth, strength and well-being. It is with these attributes a member "of underserved or underrepresented minority populations" may respond to or deflect stigma or discrimination, and access his/her community with confidence.

*Reviewer: Above sections were lightly edited; need more details on service to Underserved/underrepresented population.*

**Coordinated System:** Family Service of Champaign County provides limited counseling support for this targeted population. Rosecrance has limited resources for those that are dually-diagnosed. Collaboration occurs on behalf of those jointly served. When appropriate, DSC's Clinical Coordinator will refer individuals to the Family Service of Champaign County. DSC and Rosecrance meet routinely and collaborate on behalf of individuals that receive support from both agencies.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides descriptions of associated items and indirect cost allocation methods.*

**Person Centered Planning (PCP):** No

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** Among the successful treatment methods utilized by DSC's Counseling Consultants, Adapted Dialectical Behavior Therapy (DBT) has been found to be very effective with an array of individuals with a variety of intellectual and developmental disabilities.

*Reviewer: Above is edited, provided websites for DBT.*

**Evidence of Collaboration:** Providers listed. Collaboration with Family Service and Rosecrance.

**Staff Credentials:** Consultants under contract with DSC include one Licensed Clinical Psychologist, three Licensed Clinical Social Workers, five Licensed Clinical Professional Counselors, and one Psychiatrist.

**Resource Leveraging: Other Pay Sources:** When possible, people are referred to service providers who accept Medicare, Medicaid, or private insurance. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes.

### **Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

*- Timely reports of personnel changes.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



Draft PY2020 CCDDDB Program Summary
Agency: Developmental Services Center
Program: Community First

PY20 CCDDDB Funding Request: \$822,970
PY20 Total Program Budget: \$4,653,489
Current Year Funding (PY19): \$799,000
Proposed Change in Funding - PY19 to PY20 = 3 %
Priority: Non-Work Community Life and Flexible Support

Services and People Served

Target Population: Adults with I/DD receiving community and site-based services without current Medicaid funding and enrolled in PUNS.

Reviewer: Above is edited: details on Employment First movement and transition from CCDDDB funding to DHS-DDD waiver funding. Below is edited: details on various groups chosen by participants and on providing the types of support each person needs/wants, based on resources.

Scope, Location, & Frequency of Services:

Scope: Community connection through participation in recreational activities, social events, educational groups, self-advocacy, volunteering, and other areas of interest that bring personal fulfillment. Program supports a wide range of people with numerous interests, abilities, and needs. Thirty-five varying groups are offered weekly. Some participants have personal needs that impede their ability to spend extended periods of time in the community, physical limitations and need regular personal care support, physical issues affecting mobility and stamina, or behavioral or emotional challenges that affect the ability to be in unfamiliar or crowded environments for extended periods of time.

Location/Frequency: Various community locations. New groups are chosen every four months based on areas of interest expressed by participants. Some groups are very popular and are repeat offerings. Participation ranges from one to five days per week, depending on the number of groups requested and availability of space in a specific group.

Residency

Table with 3 columns: Residency Category, PY2018 Data, PY2019 Data. Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County.

Demographics: Total Served in PY2018 = 48

Table with 2 columns: Demographic Category, PY2018 Data. Rows include Age (19-59, 60-75+), Race (White, Black/AA, Other), Gender (Male, Female), and Ethnicity (Not of Hispanic/Latinx Origin).

## Program Performance Measures

**CONSUMER ACCESS:** People with I/DD and enrolled in PUNS interested in participating in their community with staff support are eligible for services. People learn about services through tours and distribution of information at community service events. Referrals are received from people/families; high school vocational coordinators, and other advocates; CCRPC-ISC; DRS; and employed people who are seeking additional connections.

*Reviewer: Applicant also provided details on eligibility and PUNS enrollment, tours, service options, and community service events.*

**Of those seeking assistance or referred 90% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 180 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services:** until they are no longer interested in services or are selected from PUNS.

**Additional Demographic Data:** disability and referral source information at time of intake.

## CONSUMER OUTCOMES:

1. People try new things
2. People assume a leadership role in what they do
3. People explore employment as they make community connections

Program continues to support people in making a greater connection with community through groups and community activities at a level that meets the needs of each person. For some people that may mean community participation may alter from day to day based on their ability to enjoy/endure various environments. For other people we provide support in gaining more autonomy in their life. During the initial phase of this program, we helped people become more comfortable with participating in activities outside the traditional day program. People struggled with identifying areas of interest outside what they had known for years.

### Assessment Tools:

1. DSPs develop a format for new groups that is stored electronically. Group rosters are established at the beginning of each trimester noting the group, the leader, and the group participants.
2. Co-leaders will be included in the group format developed for each group. Documentation is also noted as in #1 above.
3. Documentation of formal program participation will be documented by movement form in the person's clinical file.

**Outcome data gathered from all participants.** Yes

**Anticipate 55 total participants for the year.**

**Will collect outcome information:** Group participation information is gathered via daily sheets and entered in monthly contact notes. Outcome data is collected quarterly.

**Is there a target or benchmark level for program services?** Yes. Targets/benchmarks are estimated from past outcomes in the program.

FY19 Measure: Eight new groups will be offered based on interests of program participants.

FY19 Mid-Year Outcome: Two new groups were offered.

FY19 Measure: Four people in the program will be formally opened in Community Employment Program for active job exploration.

FY19 Mid-Year Outcome: One person has formally been opened in Community Employment Program.

**Estimated level of change for this outcome is:**

1. Measure: Thirty-five people will participate in at least one new group.
2. Measure: Five people will become a co-leader for a group.
3. Measure: Five people will be opened in Community Employment for active job exploration.

*Reviewer: Section lightly edited. Current mid-year outcomes are below target. As a Council on Quality and Leadership accredited agency, the Personal Outcomes Measures system developed with CQL support would also be of interest for this large program serving people with diverse support needs and preferences. The outcomes relate to quality of life, identified with input from program participants. Choices should also be clearly indicated in an individual's person centered plan. Service hours are entered into online claims system. Why are only 4 people opened in Community Employment program? Should aim for 50-75% of clients meeting this goal. Consumer Outcome #1: 'People try new things' could be more clear.*

## UTILIZATION:

**Treatment Plan Clients (TPCs):** 55 Champaign County residents with I/DD participating in the program without state funding for these services.

**Non-Treatment Plan Clients (NTPCs):** 40 Peers who accompany the TPCs for activities and events.

**Service Contacts (SCs):** 5 Meetings with prospective participants and tours of the program by those interested in services.

**Community Service Events (CSEs):** 4 Informational meetings or tours requested by parents, teachers, and other professionals as well as formal presentations to organizations, civic groups, and other community entities.

**Other:** n/a

*Reviewer: How many people does the program serve overall? NTPCs are presumably those who have state funding for day services.*

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$822,970

**PY20 Total Program Budget:** \$4,653,489

**Current Year Funding (PY19):** \$799,000

**Proposed Change in Funding - PY19 to PY20 = 3%**

PY19 request was for \$799,091

PY18 request was for \$807,605 and award \$799,090

PY17 request was for \$905,441 and award \$905,441

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 18% of total program revenue.** Other sources are: FCMHB \$20,617 (0%), DHS Fee for Service \$1,842,273 (40%), DHS FFS – Training \$8,821 (0%), Program Service Fees – Other \$518 (0%), and Sales of Goods and Services \$1,958,290 (42%).

*Reviewer: Projections are based on PY19. Not explained but presumed due to previous applications and experience are that the very small DHS amount is allocated portion of reimbursement for trainings, and the largest is state waiver funding for participants in the larger program (some are NTPCs here). Sales of Goods and Services could relate to contracts for work done in the workshop setting.*

**Expenses:** Personnel related costs (Salaries/Wages \$415,116, Payroll Taxes \$40,287, and Benefits \$65,960) are the primary expense charged to CCDDDB at 63% of \$822,970. Other expenses are: Professional Fees/Consultants \$4,773 (1%), Client Wages/Benefits \$27,739 (3%), Consumables \$9,726 (1%), General Operating \$80 (0%), Occupancy \$34,501 (4%), Local Transportation \$35,784 (4%), Equipment Purchases \$713 (0%), Lease/Rental \$34,510 (4%), Membership Dues \$372 (0%), Cost of Production \$143,717 (17%), and Miscellaneous \$9,692 (1%).

**Total Agency Budget has a deficit of \$547,744, Total Program a deficit of \$177,629, and CCDDDB Budget balanced.**

**Program Staff - CCDDDB Funds:** 0.42 FTE Indirect and 12.97 FTE Direct. Total CCDDDB = 13.39 FTEs

**Total Program Staff:** 2.57 FTE Indirect and 72.05 FTE Direct. Total Program = 74.62 FTEs

*Reviewer: A 3% salary increase is planned, along with 10% health insurance cost increase – standard across DSC applications and previous year requests. Staff shortage/hiring crisis is mentioned in the budget narrative. How can the agency continue to operate at such a high deficit? CCDDDB funds portions of the following direct positions: 27 Developmental Instructors (plus \$7,500 of overtime), 12 Employment Counselors, 4 Production Workers (1 more to be hired), 1 Maintenance Technician, 1 Maintenance Manager, 7 Drivers (1 more to be hired and \$3,600 in overtime), 1 Program Manager, 1 Training Coordinator, 7 Production Crew Leaders, 3 Program Directors, 2 Developmental Training Managers, 1 Operations Manager, 1 Transportation Coordinator, 1 Vice President (one more to be hired), 1 Vocational Supervisor, 1 COTA, 3 Developmental Training Coordinators, 1 Case Coordinator (1 more to be hired). With regard to this program, what are the roles of the 7 crew leaders and the 2 case coordinators? Do Production staff go through the state's Direct Support Professional training? If they are not DSPs, what is their relationship to this program?*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities? Yes**

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** DSC provides information to rural communities through transition events. Referrals are accepted throughout Champaign County, including rural areas. Assistance is given in accessing transportation from outlying areas when needed. Groups are based on area of interest and occur in various community

locations based on the natural setting for that group. They take place throughout Champaign County, creating opportunities for people to participate in a range of activities and visit a variety of locations/communities to enhance their experience.

*Reviewer: Section edited by staff. Services are not provided in rural areas, but groups may travel to rural towns for the different group activities. Application included the detail that people relocate to CU for affordable housing, employment, etc. and the types of visits different groups have gone on in rural communities. The question of how are rural/underserved/underrepresented people served in the program seems to have been missed. Details on group offerings and previous group activities.*

**Inclusion, Integration and Anti-Stigma:** Program promotes the development of hobbies, increased knowledge in areas of interest, passion for community giving, and access to the community in order to fulfill these. Through group opportunities, the people they meet in the community gain experiences with people with disabilities who share common interests and passions.

*Reviewer: Section edited. Program activities promote community inclusion, relationships based on interest, developing sense of value to others.*

**Coordinated System:** Community First groups are involved in activities through the Champaign Park District, the Urbana Park District, Stephens Family YMCA, and the Forum Fitness Center in Rantoul. MTD personnel have met with people to determine unmet needs of potential riders. *Reviewer: Edited: details on specific activities through each agency/business,*

**Budget and Program Connectedness:** Yes. *Budget Narrative provides details on associated items and indirect cost allocation.*

**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** The emphasis of the Employment First movement is equal access to employment for people with disabilities, inclusion of “that all citizens, including those with disabilities, are capable of full participation in integrated employment and community life” in the Illinois definition of Employment First, validates the value of recreation for all people. *Reviewer: reference to CCDDDB Community Needs Assessment and link to document and PUNS data and link to DHS website.*

**Evidence of Collaboration:** *No written agreement, agency hosted interns from University of Taiwan through U of I Dept. of Kinesiology and Community Health.*

**Staff Credentials:** DSC staff have received at least 120 hours of state mandated training, including Employment First training.

**Resource Leveraging: Other Pay Sources:** None. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

*- Timely reporting of personnel changes.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



# Draft PY2020 CCDDDB Program Summary

Agency: Developmental Services Center  
Program: Individual and Family Support

**PY20 CCDDDB Funding Request:** \$416,561  
**PY20 Total Program Budget:** \$513,472  
**Current Year Funding (PY19):** \$404,428  
**Proposed Change in Funding - PY19 to PY20 = 3%**

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

## Services and People Served

**Target Population:** Children and adults with I/DD residing in Champaign County. Priority consideration given to people with significant behavioral, medical, training, or support needs. Program model reflects the expressed needs of the people/families, providing flexible and choice-driven services to individuals and families in a variety of community-integrated settings. People in crisis are given priority consideration for Intermittent Direct Support (IDS, formerly Respite). Special consideration is given to people whose support needs are so substantial as to limit their participation in other DSC day services as well as services provided by other agencies offering more restrictive environments.

### Scope, Location, & Frequency of Services:

**Scope:** Supports provided in a variety of integrated and community-based, choice-driven methods. People choosing DSC as a provider for day-time supports are served by full-time IFS staff. People receiving evening and weekend supports are served by part-time contract employees (including family members) who are identified by the person and family, or upon request, identified by staff, and then hired by DSC upon appropriate vetting and training. The services requested by individuals and families have included but are not limited to: assessment and planning; direct staff support; intermittent direct support – scheduled and emergency; funding for camps, after school programs, YMCA and fitness club memberships; day program and community activities throughout Champaign County and beyond, that in the past have included Tae Kwan Do classes, horseback riding lessons, overnight trips to art conferences, zoos, and museums; social skills/social thinking training support; funds for home modification by an independent contractor; therapy/sensory/accessibility equipment not funded by insurance; enhanced independent living skills training.

**Location/Frequency:** Day program activities occur in the community, at DSC, and in the person’s home. Day program is open Monday thru Friday and supports people with varying schedules ranging from two hours per week to thirty hours per week.

**Reviewer:** Applicant also included details on 2018 CCDDDB Needs Assessment and PUNS data (respite as an unmet need in Champaign County) and further details on specific services. Scope of services largely unchanged from PY19. Financial support for camps and Intermittent Direct Support (respite) occur on the request of the person/family and dependent upon resources available. If a client doesn’t attend a class/lesson that was paid for, is there a refund to the program?

### Residency

<b>Total Served</b>	60 in PY2018	52 in PY2019 (first two quarters)
<b>Champaign Set</b>	28 (46.7%) for PY18	24 (46.2%) for PY19
<b>Urbana Set</b>	14 (23.3%) for PY18	13 (25%) for PY19
<b>Rantoul</b>	0 (0%) for PY18	0 (0%) for PY19
<b>Mahomet</b>	4 (6.7%) for PY18	4 (7.7%) for PY19
<b>Other Champaign County</b>	14 (23.3%) for PY18	11 (21.2%) for PY19

### Demographics: Total Served = 60 in PY2018

#### Age

Ages 0-6 -----	9 (15%)
Ages 7-12 -----	17 (28.3%)
Ages 13-18 -----	11 (18.3%)



Ages 19-59 -----	17 (28.3%)
Ages 60-75+ -----	6 (10%)
<b>Race</b>	
White -----	47 (78.3%)
Black / AA -----	5 (8.3%)
Asian / PI -----	6 (10%)
Other (incl. Native American and Bi-racial) -----	2 (3.3%)
<b>Gender</b>	
Male -----	42 (70%)
Female -----	18 (30%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	2 (3.3%)
Not of Hispanic/Latinx Origin -----	58 (96.7%)

## Program Performance Measures

**CONSUMER ACCESS:** Eligible persons are children and adults residing in Champaign County who are eligible for/enrolled in PUNS. Evidence of I/DD diagnosis; medical, psychological, and school documentation presented during the intake process, as well as residency documentation is obtained. PUNS enrollment is verified.

People in the target population learn of the program through other families, the disAbility Expo; the Champaign County TPC Round Table presentation, support group referrals, physician and interagency referrals, DSC website, Facebook, outreach events, brochures, and other informational materials.

**Of those seeking assistance or referred 75% will receive Services/Support.**

**Within 30 days from referral, 90% of those referred will be assessed.**

**Within 180 days of assessment, 75% of those assessed will engage in services.**

**People will engage in services, on average, for:** from one event/day to decades. Appropriate measure is years.

**Additional Demographic Data:** Disability and referral source are collected at time of intake.

*Reviewer: Why is the wait for services so long, and how long do people remain on waiting list for services?*

### CONSUMER OUTCOMES:

Outcome 1: All individuals receiving day services and requesting community activities, will participate on a weekly basis.

Outcome 2: All receiving Intermittent Direct Support will be satisfied with services.

#### Assessments/Data Collection:

Outcome 1: Documentation of those requesting community activities and the date and location of activities will be maintained by the program manager.

Outcome 2: A survey will be provided to all families receiving Intermittent Direct Support. Surveys will be evaluated by the Director of Program Assurance and the Director and/or Manager of Individual and Family Support.

**Outcome gathered from all participants? Yes.**

**Anticipate 54 total participants for the year.**

**Will collect outcome information as:** Progress toward meeting outcomes is reviewed monthly through program reviews and contact notes. Data is reviewed quarterly.

**Is there a target or benchmark level for program services? Yes.** Benchmarks and targets for outcomes are compared between fiscal years within this program.

**FY 19 Measure:** All individuals receiving day services and requesting community activities, will participate on a weekly basis.

FY 19 Target: 80%

FY 19 Mid-Year Outcome: 85%

**FY 19 Measure:** All receiving Intermittent Direct Support will be satisfied with services.

FY 19 Target: 90%

FY 19 Mid-Year Outcome: Survey data is collected in fourth quarter.

#### **Estimated level of change for each outcome:**

Outcome 1: 85%

Outcome 2: 90%

*Reviewer: the outcome for consumer satisfaction with services is more relevant than program participation; ideally outcomes based on consumer choice, connection to community, and pursuit of individual interests would also be identified and surveyed. Are the accrediting organization (Council on Quality and Leadership) Personal Outcome Measures applicable to this program?*

## UTILIZATION:

**Treatment Plan Clients (TPCs):** 18 people with case records and Individual Service Plans (ISP) funded by CCDDDB.

**Non-Treatment Plan Clients (NTPCs):** 36 individuals with service and support records but no formal Individual Service Plans who are funded by CCDDDB.

**Service Contacts (SCs):** 5 Phone and face-to-face contacts with consumers who may or may not have open cases in a given program – including information and referral contacts, initial screenings/assessments, and crisis services.

**Community Service Events (CSEs):** 2 Contacts/meetings to promote the program, including public presentations, consultations with community groups, or caregivers, and small group workshops.

**Other:** 0 n/a

*Reviewer: Why is the program requesting more funds to serve fewer people?*

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$416,561

**PY20 Total Program Budget:** \$513,472

**Current Year Funding (PY19):** \$404,428

**Proposed Change in Funding - PY19 to PY20 = 3%**

PY19 request was for \$404,428

PY18 request was for \$395,055 and award \$392,649

PY17 request was for \$387,428 and award \$387,428

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 81% of total program revenue.** Other revenue is from DHS Fee for Service \$94,441 (18%), DHS FFS-Training \$2,389 (<1%), and Other Program Service Fees \$81 (<1%).

**Expenses:** Personnel related costs (Salaries/Wages \$297,135, Payroll Taxes \$13,427, and Benefits \$20,584) are the primary expense charged to CCDDDB at 79% of \$416,561. Other expenses are: Professional Fees/Consultants \$1,435 (0%), Client Wages/Benefits \$974 (0%), Consumables \$8,352 (2%), General Operating \$2,992 (1%), Occupancy \$9,536 (2%), Conferences/Staff Development \$562 (0%), Local Transportation \$16,888 (4%), Specific Assistance \$24,338 (6%), Equipment Purchases \$125 (0%), Lease/Rental \$12,017 (3%), Membership Dues \$1,327 (0%), and Miscellaneous \$6,869 (2%).

**Total Agency Budget shows a deficit of \$547,744, Total Program a deficit of \$2,958, and CCDDDB Budget balanced.**

**Program Staff - CCDDDB Funds:** 1.16 FTE Indirect and 6.56 FTE Direct. Total CCDDDB = 7.72 FTEs.

**Total Program Staff:** 1.38 FTE Indirect and 8.10 FTE Direct. Total Program = 9.48 FTEs

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities? Yes**

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** DSC has been represented at the Champaign County TPC for many years. The Individual and Family Support Program currently provides services to rural residents of Tolono, Sidney, Mahomet, Fisher, St. Joseph, Ludlow, Ogden, and Sadorus. The IFS program has received many referrals for these rural and medically underserved residents from school personnel, Champaign County TPC members and presentations, disAbility Expo attendees, parents, and medical professionals. Day program activities occur in the community, at DSC, and in people's home. Rural Intermittent Direct Support participants support occurs in their home communities, in their family homes, and on occasion, at DSC. Referrals are received from CCRPC-ISC, self or family member referrals, medical professionals, and other community partners. Participation in a variety of community activities.

**Inclusion, Integration and Anti-Stigma:** Goal of the IFS program is to promote community access for participants. We believe that continuous access and exposure to community events and businesses serves to educate members of the greater community who have not necessarily had the opportunity to engage with people with I/DD.

**Coordinated System:** Community Choices and CUSR provide community-based opportunities/activities. Their services compliment the IFS program as their schedule and activities occur primarily in the evening and on weekends and the IFS day program provides similar activities during the day when many parents are at work. We have and will continue to provide financial support to children and adults who are diagnosed with an intellectual and/or developmentally disability, and reside in Champaign County, to attend CUSR camps and activities which provide invaluable opportunities for those participating. These opportunities serve a dual purpose by giving the caregiver/family much needed short-term relief from the stress associated with caring for a loved one with significant support needs.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items, indirect cost allocation method, notes on 3% salary increase, 10% health insurance cost increase, staff shortage/hiring crisis; audit cost is not mentioned.*

**Person Centered Planning (PCP):** Yes

*Reviewer: Above it edited. Details on TPC reach and TPC Transition Conference. Program goal to promote community access.*

## Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** Upon the initial availability of CCDDDB funds, DSC realized the opportunity to serve people previously on our waiting lists, with a support model that individuals and families felt would provide the choice and flexibility necessary to best serve their loved one. Based on the Needs Assessment outlined in CCDDDB Briefing Memorandum, the need for a service model such as the Individual and Family Support program was and remains a critical need in our community. *Reviewer: Applicant included links to various sites, including the CCDDDB Needs Assessment and PUNS data.*

**Evidence of Collaboration:** The IFS program currently has a written agreement with St. Andrew's Lutheran Church to provide cleaning services for which IFS participants receive work experience and are paid for their work.

**Staff Credentials:** IFS staff members supporting individuals in day services receive 80 hours of classroom and 40 hours of on the job training per the DHS-state mandated training in addition to training specific to each person receiving services. The training modules include: Introduction to Developmental Disability, Human Rights, Human Interaction and Communication, Service Planning and Reporting, Basic Health & Safety, First Aid/CPR, OIG – Abuse & Neglect.

**Resource Leveraging: Other Pay sources:** Other payment sources for day program component is state funding. There are not any other current payment sources for Intermittent Direct Support. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** Yes.

## Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *timely reporting of personnel changes.*

- *consider expansion of this program's capacity for individual direct support, to reduce waiting list and address unmet needs*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB

**PACE**

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined in CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> Board of Directors, Administration will ensure that training is completed annually. The Board will allocate resources.
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	CLC Plan does not outline a clear plan for recruiting diverse backgrounds and workforce.
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>No-</b> No information was provided about a cultural competence assessment/evaluation.
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>Yes-</b> The Board allocates 8 hours for training. There is a Diversity Committee that annually looks at the CLC Plan and reviews and updates the information.
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	In the program plan Part 1, there is a lot of outreach mentioned for persons that are at schools and attending fairs. There are also referrals by word of mouth to learn about the services that PACE has to offer.
<i>Inter-Agency Collaboration</i>	<b>Yes-</b> They have written agreements with organizations and PACE noted that improvements can be made with the partnerships that they have signed agreements with.
<i>Language and Communication Assistance</i>	<b>Yes-</b> PACE maintains an updated list and language policy to ensure clients have
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes -</b> The Actions were matched with the National CLAS Standards.

**Additional Comments:**

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PACE provides services to people with many different abilities and provides services at schools in rural areas to ensure that clients do not have to travel to get services in Champaign-Urbana. The CLC Plan was completed, and the updated template was submitted.



# Draft PY2020 CCDDDB Program Summary

Agency: PACE, Inc.

Program: Consumer Control in Personal Support

**PY20 CCDDDB Funding Request:** \$23,721  
**PY20 Total Program Budget:** \$23,721  
**Current Year Funding (PY19):** \$21,000  
**Proposed Change in Funding - PY19 to PY20 = 13%**

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

## Services and People Served

### Target Population:

People who are either; seeing their first job as a Personal Support Work (PSW) for consumers with I/DD, or for those who have previously been/currently are PSWs, and want to be employed by other consumers. This target population tends to fall into at least one of the following categories: people who are underemployed/unemployed, have worked in healthcare/teaching, have a personal connection to I/DD, or are looking for a job that makes a difference. Most of the PSWs recruited through the program, will more than likely be matched (through a process described later) with consumers that utilize SDA.

*Reviewer: What is the 'process to be described later' mentioned above?*

### Scope, Location, & Frequency of Services:

Scope: Program provides PSW orientations and the associated services, to people seeking work as a PSW, or to current PSWs seeking more work. Potential/current PSWs are added to employment registry upon completion of orientation, post-orientation quiz, and entry onto the Healthcare Registry. This contract would support PACE to: recruit PSWs, present orientations to potential PSWs, maintain PSW database, and follow-up on background updates of PSWs. Staff completing these tasks will also be responsible for matching consumers with PSWs. Because these are services to consumers (and not the PSWs), these services will be funded through other funding sources.

Location/Frequency: PSW orientations are provided in the PACE offices and occur at least every other month. Recruitment of PSWs takes place primarily online (Facebook, Twitter, job boards, etc), and also utilizes word-of-mouth advertising. Update calls and emails will primarily be completed at the PACE offices. As will follow-up on PSW backgrounds.

*Reviewer: Scope of services largely unchanged from PY19; section includes more details on process.*

<b>Residency</b>	34 in PY19 (first two quarters)
<b>Champaign Set</b>	7 (20.6%) for 2019
<b>Urbana Set</b>	2 (5.9%) for 2019
<b>Rantoul</b>	1 (2.9%) for 2019
<b>Mahomet</b>	0 (0%) for 2019
<b>Other Champaign County</b>	24 (70.6%) for 2019

### Demographics: Total Served in PY19 (first two quarters)

<b>Age</b>	
Ages 19-59 -----	7 (20.6%)
Ages 60-75+ -----	1 (2.9%)
Not Available Qty -----	26 (76.5%)
<b>Race</b>	
White -----	5 (14.7%)
Black / AA -----	1 (2.9%)
Asian / PI -----	1 (2.9%)
Not Available Qty -----	27 (79.4%)

**Gender**

Male -----	2 (5.9%)
Female -----	11 (32.4%)
Not Available Qty -----	21 (61.8%)

**Ethnicity**

Not of Hispanic/Latinx Origin -----	13 (38.2%)
Not Available Qty -----	21 (61.8%)

**Program Performance Measures**

**CONSUMER ACCESS:**

Potential PSWs must meet eligibility criteria to be on healthcare registry, be seeking work in Champaign County, complete datasheet and orientation, and maintain up-to-date contact information. Services are advertised on agency website and social media pages, online job boards, word-of-mouth, through agency partners, publically posted flyers and brochures, and potentially advertised in local newspapers.

**Of those seeking assistance or referred, 60% will receive Services/Support.**

**Within 30 days from referral, 85% of those referred will be assessed;**

**Within 60 days of assessment, 85% of those assessed will engage in services.**

**People will engage in services, on average, for xx time-unit: 180 (unit of time was not provided)**

**Additional Demographic Data:** Addition to the demographic data above such as consumer name, address, phone number, disability status, referral source, veteran status, and voter registration status will also be collected.

*Reviewer: Above, unclear what 180 means.*

**CONSUMER OUTCOMES:**

Outcomes for this program will be reported on at different points throughout the year, and will reflect several key measures of this program's success:

1. Number of Potential/actual Personal Support Workers (PSWs) who went through orientation and attended other CSEs - Quarterly
2. Number of PSWs hired through our referral program – Other
3. As a measure of impact, we will also show the number of people utilizing PACE's PSW referral service (although any time spent from this side will be paid for by other funding)

Data Collection/Assessments:

1. Sign in sheets at orientations, and estimated/actual NTPCs receiving information about program at other CSEs.
2. This number will be tracked in the Consumer Service Records of these TPCs being served with funds provided by DHS.
3. This number will also be tracked in the Consumer Service Records of these TPCs being served with funds provided by DHS. This number may be higher than that of the measure above (the number above measures people hiring PSWs, while this only measures people getting information).

**Outcome gathered from all participants? Yes.**

**Anticipate 12 total participants for the year.**

**Will collect outcome information 4 times in a year.** PACE facilitators notes contact/facilitation notes during each visit.

They meet least quarterly to review/update goals pursuant to consumer needs.

**Is there a target or benchmark level for program services? No**

**Estimated level of change for this outcome is:** No changes from last FY

*Reviewer: These outcomes are associated with the agency's performance and not directly with the consumer/family outcomes identified in the Board's priorities: positive relationships, personal satisfaction, the exercise of choice, self-determination, real work, community inclusion, family involvement and social connection, and resources for information, planning, access, and support. Agency anticipates 12 total participants for year, unclear where 12 came from. How many people/families have hired PSWs as a result of the PACE database?*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 0 because the PSWs may/may not have disabilities, we are unable (under Federal Law) as a Center for Independent Living to have full consumer files on persons without disabilities. Therefore, the potential/existing PSWs cannot be TPCs. Thus, our TPC numbers will always be 0 within this program. However, we will report in our outcomes at the end of the fiscal year on the number of persons with I/DD receiving services from PSWs from our list.

**Non-Treatment Plan Clients (NTPCs):** 150 people receiving information about/services in this program, but who are not determined PUNs eligible.

**Service Contacts (SCs):** 200 individual contacts we have with TPCs or NTPCs

**Community Service Events (CSEs):** 12 Events PACE provides to the community where information about the PSW program and CCDDDB are shared.

**Other:** 100 service hours provided

*Reviewer: SCs are counted as contacts with TPCs and NTPCs, although 0 TPCs are expected for the program. Will we ever really know how many PSWs are enrolled in the database, since they aren't really tracked in any of the categories specified above? NTPCs in PY19 were the PSWs, which seemed to make sense. It seems like the NTPC definition from above would actually fit better as the SC definition. Can TPCs (number of people hiring PSWs through PACE's program) be kept as a count only? Agency states that number of persons with I/DD receiving services from PSW list, why can't these be reported as TPCs throughout the year as they occur?*

## Financial Analysis

**PY20 CCDDDB Funding Request:** \$23,721

**PY20 Total Program Budget:** \$23,721

**Current Year Funding (PY19):** \$21,000

**Proposed Change in Funding - PY19 to PY20 = 13%**

PY19 request was for \$22,800 – a NEW program in PY19

**Does the application clearly explain what is being purchased by the CCDDDB?** No. *If funded, several sections will need to be more clearly defined.*

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB request is for 100% of total program revenue.**

**Expenses:** Personnel related costs (Salaries/Wages \$10,140, Payroll Taxes \$1,014, and Benefits \$5,503) are 70% of CCDDDB costs. Others are: Professional Fees/Consultants \$395 (2%), Consumables \$316 (1%), General Operating \$118 (0%), Occupancy \$492 (2%), Conferences/Staff Development \$16 (0%), Local Transportation \$145 (1%), Lease/Rental \$1,758 (7%), Membership Dues \$24 (0%), and Miscellaneous \$3,800 (16%).

**Total Agency Budget shows a surplus of \$15,428, Total Program a deficit of \$1,702, and CCDDDB budget is balanced.**

*Reviewer: CCDDDB is the only funder of this program, so the Total Program and CCDDDB budgets should match. Professional Fees mentions other contractual assistance but lacks more detail (e.g., accountant/payroll services, audit expense, etc.) Indirect is in Miscellaneous Expense but should be in General Operating. Why is an increase of funds asked from the CCDDDB when the agency shows a surplus of \$15,428? CCDDDB funds support a portion of an Independent Living Specialist.*

**Program Staff - CCDDDB Funds:** 0 FTE Indirect and 0.38 FTE Direct. Total CCDDDB-funded staff = 0.38 FTEs

**Total Program Staff:** 0 FTEs Indirect and 0.38 FTE Direct. Total Program = 0.38 FTEs

**Audit Findings:** N/A. The program was not funded during PY18. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.

## CCDDDB PY20 Priorities and Decision Support Criteria

**Does the plan align with one or more CCDDDB Priorities?** Yes

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** PACE's plan includes diversity-enhancing goals related to outreach to board members, staff, and consumers. Additionally, use of a diversity mailing list and advisory is integrated into long-range plans and annual goals and objectives. PACE staff perform outreach by providing presentations to diverse groups; in return we ask that other agencies educate our staff and consumers about their organization through staff/peer counseling in-services.

**Inclusion, Integration and Anti-Stigma:** PACE's plan includes diversity-enhancing goals related to outreach to board members, staff, and consumers. Additionally, use of a diversity mailing list and advisory is integrated into long-range plans and annual goals and objectives. PACE staff perform outreach by providing presentations to diverse groups; in return we ask that other agencies educate our staff and consumers about their organization through staff/peer counseling in-services.

*Reviewer: Missing information on inclusion, integration, and anti-stigma. See CLC Plan Review for further details.*

**Coordinated System:** Community Choices, DSC. PACE will partner with other organizations through outreach opportunities which will provide for other organizations to learn and evaluate the PSW program at PACE. The other organizations will be encouraged to refer prospective consumers in the that are looking into being PSW employers in to come to PACE so we can assist them during the selections and hiring process. The perspective PSW employers will closely work with PACE facilitator during the matching process by communicating their specific needs. Upon request, PACE will also assist the other organizations by providing prospective PSW names that has completed the PSW orientation at PACE.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides sufficient detail on associated items though some are incorrectly categorized.*

**Person Centered Planning (PCP):** No

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** The purpose of this innovative program is to build long-term relationships between the consumer and the PSW. The purpose of the topics outlined as being part of the orientation, are to assist the PSW in assisting the consumer in developing the self-advocacy and independent living skills which will aid the consumer in being a full participant in the rights and responsibilities of society.

**Evidence of Collaboration:** Department of Rehabilitation Services (DRS)

**Staff Credentials:** Program staff has a Bachelors in Psychology, is a Qualified Intellectual Disabilities Professional (QIDP), and has worked in the field for 20+ years.

**Resource Leveraging: Other Pay Sources:** When the persons utilizing the PSWs require services, we will currently be providing that under our Independent Living Unit contract. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

*Reviewer: Although not listed in the evidence of collaboration section, CCRPC ISC and Community Choices are identified elsewhere as programs working collaboratively with PACE.*

### **Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Several parts of application are unclear and will need to be rewritten.*
- *Errors in financial forms should be revised.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending





Draft PY2020 CCDDDB Program Summary
Agency: Champaign County Head Start/Early Head Start DDB
Program: Social-Emotional Development Svcs

PY20 CCDDDB Funding Request: \$112,004
PY20 Total Program Budget: \$112,004
Current Year Funding (PY19): \$73,605
Proposed Change in Funding - PY19 to PY20 = 52%

Priority: Comprehensive Services and Supports for Young Children

Services and People Served

Target Population: Low-income children 6 weeks to kindergarten entry age enrolled in Champaign County Head Start/Early Head Start (CCHS) who: score above the cutoff on the Ages and Stages Questionnaire Social-Emotional screening tool and/or are referred by their parent or teacher for behavioral or social-emotional developmental concerns and for whom a behavior support plan is indicated.

Scope, Location, & Frequency of Services:

Scope: CCHS provides child development, health, and family support services to income-eligible Champaign County families. The goal of services is to ensure children are developmentally and health-ready for kindergarten and families are ready to support their child in school. CCHS screens newly enrolled children for social-emotional concerns using the Ages and Stages Questionnaire Social-Emotional (ASQ-SE) screening instrument. The Social-Emotional Development Specialist (SEDS) receives referrals from teachers for children with high ASQ-SE scores. SEDS conducts an individual observation for classrooms needing support for a child with challenging behaviors or with a high ASQ-SE score. Observations help with analyzing the setting, interactions, and operations to identify additional classroom support or teacher training needs. Parents and teachers complete the Devereux Early Childhood Assessment (DECA), which measures the child's ability to use independent thought and action to meet needs, express emotions, manage behaviors in healthy ways, and promote and maintain mutual, positive connections with other children and significant adults. The SEDS analyzes the data and utilizes the findings to create support goals. With permission and support of the parents, the SEDS determines if a support plan is warranted. The support plan includes agreed-upon strategies to teach coping skills and help the child engage in the classroom environment successfully. The plan may also include a referral to a family doctor, developmental pediatrician, local agencies, early intervention, or school district for further screening or assessment. The SEDS provides ongoing reflective consultation to teaching staff who are working to support the success of children in their classroom. The SEDS provides reflective supervision to the Social Skills and Prevention Coaches who deliver ongoing positive behavior support to identified children and prevention strategies in the classroom.

Location/Frequency: The Social-Emotional Development Specialist provides services throughout program options with the support of the Social Skills and Prevention Coaches. Based on each child's individual needs, the SEDS creates plans and activities to increase their developmental skills. Depending on the families' needs, the services are provided in classrooms, homes, or community setting. Best practice is meeting where the families are.

Reviewer: Above is edited. Services largely unchanged from PY19. Includes supervision of Social Skills and Prevention Coaches and use of DECA.

Residency

Table with 3 columns: Residency, PY18, PY19. Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County 1.

**Demographics:** Total Served in PY18 = 45

<b>Age</b>	
Ages 0-6 -----	45 (100.0%)
<b>Race</b>	
White -----	11 (24.4%)
Black / AA -----	27 (60%)
Asian / PI -----	2 (4.4%)
Other (incl. Native American and Bi-racial) -	5 (11.1%)
<b>Gender</b>	
Male -----	24 (53.3%)
Female -----	21 (45.6%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	4 (8.8%)
Not of Hispanic/Latinx Origin -----	41 (91.1%)

**Program Performance Measures**

**CONSUMER ACCESS:** Children are eligible for services if they score above the cut-off on the ASQ-SE screening and/or if parents or staff refer. SEDS determines eligibility through individual observation, functional behavioral assessment, and data collection from families and staff. Information is gathered by completing an individual observation, functional behavioral assessment, and parent/teacher data collection. Findings are discussed with parents and support staff and a determination is made on how to support the child. CCHS recruits throughout Champaign County at local libraries, elementary schools, door to door, grocery/convenience stores, town/village events, community agencies, and other locations. CCHS has outreach at community events such as the annual Disability Expo, Read Across America, Week of the Young Child and local school district child-find activities. CCHS shares information about the social-emotional services provided by the SEDS at parent meetings, brochures and the parent handbook. SEDS provides parent education trainings pertaining to trauma informed care, social-emotional development, and strategies to reduce challenging behaviors and increase social-emotional skills.

**Of those seeking assistance or referred, 90% will receive Services/Support.**

**Within 14 days from referral, 95% of those referred will be assessed;**

**Within 14 days of assessment, 90% of those assessed will engage in services.**

**People will engage in services, on average, for 9 months.**

**Additional Demographic Data:** information about a family's structure, income, language, education, employment, military status, marital status, and housing status such as homeowner, renter, or homeless.

**CONSUMER OUTCOMES:**

1. Children with behavior goals or support plans will have a reduction in frequency and duration of challenging behavior.
2. Children will demonstrate improvement in social skills related to resilience such as: Self-Regulation, Initiative, Relationship building/Friendship skills, Emotional Literacy, and Problem-Solving

1. Data on challenging behavior is collected in a variety of ways. We document antecedent-behavior-consequence, duration, frequency of behavior on behavior collection charts, behavior incident reports.
2. Pre and post resilience related social skills are assessed using the Ages and Stages Questionnaire: Social-Emotional (ASQ-SE) and the DECA-P2 and DECA I/T. The ASQ-SE and the DECA are completed by teachers and parents. Throughout the school year continuous documentation is collected by teachers in teaching strategies GOLD regarding social emotional skills and evaluated during Fall, Winter, and Spring checkpoints.

**Outcome gathered from all participants:** Yes.

**Anticipate 130 total participants for the year.**

**Will collect outcome information as follows:** ASQ:SE completed in fall and spring; GOLD assessments in fall, winter, spring, summer, and DECA Assessments in fall and spring.

**Is there a target or benchmark level for program services?** Yes. Through the GOLD Outcomes Assessment, CCHS sets a program goal that at least 90% of the Head Start children aging out of the program are developmentally, socially, emotionally and health ready for Kindergarten. CCHS anticipates that at least 85% of all enrolled children will make age-appropriate progress in social-emotional development. For children remaining in the program, CCHS sets a goal of 50% of children who receive services for the full period of engagement (9 or 12 months depending on the child's enrollment option) will not require a continuation of services.

**Estimated level of change for this outcome:** Children enter classrooms at different developmental stages, skills, and areas of need, which makes estimating a rate of change difficult. Data is collected at three separate checkpoints using Teaching Strategies GOLD. These evaluations determine if skills are below, matches, or exceeds the “widely held standards” of social-emotional development. This allows us to see growth overtime for all of our students. Children, receiving social-emotional services, are evaluated for growth using the DECA Assessment. Goal is to see favorable outcomes evidenced by a reliable change in a positive direction and lower scores in the challenging behavior domain.

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 70 (new) children who receive individual observations, DECA assessments, support plans, child studies, and functional behavioral analysis.

**Non-Treatment Plan Clients (NTPCs):** 60 (new) children who need ASQ:SE reviews, IEP reviews, referrals for services, brief, one-time consultation, and in depth informational consultation.

**Service Contacts (SCs):** 700 service contacts = Social-Emotional Classroom Observations, ASQ-SE screenings of children, individual child observations, parent and/or teacher conferences to discuss concerns, functional behavior assessment interviews, Individual Success Plan meetings, positive behavior coaching, teacher mentoring, contact to support external referrals, parent support groups, and parent trainings.

**Community Service Events (CSEs):** Birth to 6 Council meetings, Mental Health Advisory Committee, Health Advisory meetings, and Infant Mental Health meetings, Champaign Community Coalition meetings, collaboration with other agencies.

**Other:** 10 = mass screening events, staff training, social-emotional information for teachers to add to parent newsletters, reflective consultation, management meetings, case management and coordination, and program development.

*Reviewer: Above counts do not reflect 10 Continuing TPCs and 10 Continuing NTPCs noted on the Part 2 form. CSEs don't fit with the standard definition but seem important, especially for coordination across providers and improving the supports available.*

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$112,004

**PY20 Total Program Budget:** \$112,004

**Current Year Funding (PY19):** \$73,605

**Proposed Change in Funding - PY19 to PYPY =** 52.2%

PY19 request was for \$73,605

PY18 request was for \$55,645 and award for \$55,645

PY17 request was for \$55,645 and award for \$55,645

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB request is for 100% of total program revenue.**

**Expenses:** Personnel related costs (Salaries/Wages \$69,451, Payroll Taxes \$6,825, and Benefits \$4,955) are the primary expense charged to CCDDDB at 72% of \$112,004. Others are: Consumables \$1,000 (1%), General Operating \$978 (1%), Occupancy \$26,565 (24%), Conferences/Staff Development \$550 (0%), and Local Transportation \$1,680 (1%).

*Reviewer: Indirect costs are included in Occupancy. This approach is approved by GATA: 45% on 85% of salaries, for benefit time and staff related overhead, is recorded under 'Occupancy' expense line. Other RPC uses 45% on 100% of salaries, per Illinois DCEO approved rate.*

*CCDDDB funds a portion of the Child Development Manager and one Social Emotional Development Specialist.*

**Total Agency Budget, Total Program Budget, and CCDDDB Budget are balanced.**

**Program Staff - CCDDDB Funds:** 0 FTE Indirect and 1.11 FTE Direct. Total CCDDDB-funded staff = 1.11 FTEs

**Total Program Staff:** 0 FTE Indirect and 1.11 FTE Direct. Total Program = 1.11 FTEs

**Audit Findings:** PY18 audit not yet available. PY19 contract (with the CCMHB, per agreement with CCDDDB) requires an audit. If funded for PY20, this will again be required, to be included in the Champaign County audit.

**CCDDDB PYPY Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities?** Yes

**Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** CCHS offers children and families center-based options in Champaign, Rantoul, Savoy, and Urbana. Home-based option that provides all services to families in their home and meets the needs of those in rural areas. Children enrolled in the family child care provider home collaboration, receive health, dental, education, and family services. CCHS collaborates with Courage Connection.

**Inclusion, Integration and Anti-Stigma:** CCHS recruits and enrolls all children who meet the eligibility requirements for the program, including children who have developmental delays and challenging behaviors. HS embraces the least restrictive environment and offers this model in the classrooms and family child care homes. Head Start annually completes ADA assessments of all facilities. HR Director and managers provide diversity and inclusion training during new staff orientation as well as an annual refresher training. Trainings aim to increase understanding of diversity and inclusion, increase awareness of own biases and perceptions and reduce them, learn skills to communicate and interact respectfully with people without biases or misperceptions, recognize and appreciate differences, experiences, perspectives, ideas, and backgrounds of co-workers and families, and learn strategies to address conflict.

**Coordinated System:** HopeSprings provides outpatient therapy that works with individual children and their families. Local school district Pre-K programs work with at-risk preschool age children, offering preschool education and disability services. Child and Family Connections links families to early intervention services for infants and toddlers who have developmental delays. CCHS collaborates with all of the community providers listed in this application to enhance social-emotional support services to enrolled children and families. SEDS completes referrals and seeks additional services for children identified as needing intervention. Referrals are completed when children need intensive services. CCHS has agreements with HopeSprings, five Champaign County school districts, and Child and Family Connections to decrease duplication of services, improve child find through screenings, and provide and coordinate services to children (birth through age 5 years) diagnosed with a disability.

**Budget and Program Connectedness:** Yes. *Budget Narrative includes sufficient detail on associated items.*

**Person Centered Planning (PCP):** Yes

## Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** CCHS utilizes several evidenced and researched based models to develop children's social and emotional development. Those used include: Center of Early Childhood Mental Health Consultation, the Illinois Association Infant Mental Health, Center on the Developing Child, Pyramid Model, and Conscious Discipline.

*Reviewer: Above is edited, details and websites for evidence-based models listed above.*

**Evidence of Collaboration:** CCHS has working agreements with HopeSprings, five Champaign County school districts, and Child and Family Connections. CCHS is in the process of creating a Memorandum of Understanding with CU Trauma and Resilience Initiative Committee to provide case coordination for children and families impacted by trauma.

**Staff Credentials:** SEDS has a Master's in School Counseling, Doctorate in Counselor Education and Supervision, is a nationally certified counselor and has received specialized training in restorative practices and conflict mediation, Practice Based Coaching, the Pyramid Model, and early childhood mental health services. SEDS is also a member of the CU Trauma and Resilience Initiative steering committee.

**Resource Leveraging: Other Pay Sources:** CCHS seeks assistance from community providers who accept Medicaid prior to using the Developmental Disabilities and Mental Health grant funds. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No

## Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- Continue to coordinate with providers of similar services and copies of MOU once obtained.
- Fourth quarter financial reports will be used to determine whether excess revenue is to be returned.
- Revise financial forms to reflect new funding from other sources and, if relevant, to support a portion of the services proposed.
- This program is funded in PY19 by the Champaign County Mental Health Board, as recommended by the CCDDDB.

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



Draft PY2020 CCDDDB Program Summary
Agency: Developmental Services Center
Program: Family Development Center

PY20 CCDDDB Funding Request: \$579,148
PY20 Total Program Budget: \$770,550
Current Year Funding (PY19): \$562,280
Proposed Change in Funding - PY19 to PY20: = 3 %

Priority: Comprehensive Services and Supports for Young Children

Services and People Served

Target Population: Infants, toddlers, and young children, age birth to five years, with or at risk of developmental disabilities and their families, in Champaign County. Children, birth to age three years who reside in Champaign County are eligible to receive a developmental screening. If the screening results indicate a developmental concern, children are then referred for further evaluation. To be eligible for state-funded services, children must be under three years of age, have a 30% delay in one or more developmental areas and/or an identified qualifying disability. These same services and enhanced services for children through age five are provided with CCDDDB funds for children deemed "at-risk" but ineligible for state funding through the early intervention system. While many children are at-risk for developmental delays, waiting lists for early intervention services remain because of shortages of qualified therapists. The Family Development Program (FD) maximizes state funds to eligible children. State reimbursement for Early Intervention is limited and represents only 20% of FD's operating budget. Local funding represents 80%, as children and families move seamlessly between funding sources for uninterrupted, comprehensive services, optimizing the child and family's potential for success.

Scope, Location, & Frequency of Services:

Scope: FD responds to the needs of young children and their families with culturally responsive, innovative, evidence-based services that fill gaps left by insufficient state reimbursement and strict eligibility criteria. FD reaches underserved children through established collaborative relationships with urban and rural community agencies. Early detection and prompt, appropriate intervention can improve developmental outcomes for children with delays and disabilities and children living in at-risk environments. Family-centered intervention maximizes the gifts and capacities of families to provide responsive intervention within familiar routines and environments. FD services are responsive to the needs of families within this community and promote a coordinated system of care. Developmental screenings occur in a variety of community settings, primarily the home, and in collaboration with a range of community agencies that serve underrepresented populations. State funded early intervention does not fund developmental screening. Comprehensive intervention services provided are Developmental Therapy, Speech Therapy, Comprehensive Evaluation, Developmental Play Groups, Parent Support Groups, Child Care Consultation, and PLAY Project. FD promotes parent/caregiver advocacy by "meeting families where they are at" and empowering them as the decision-maker in their child's intervention.

Location/Frequency: The home visiting model is fundamental to service provision in the natural environment and is critical in rural areas where families are often isolated from services. FD program screening occurs at child care centers, community centers, and rural public schools. Services vary from weekly to monthly based on need.

Reviewer: Scope of services unchanged from PY19. CCDDDB funds allow more children access to services.

Residency

Table with 3 columns: Residency, PY2018, and PY2019 (first two quarters). Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County.

**Demographics: Total Served in PY2018 = 669**

<b>Age</b>	
Ages 0-6 -----	669 (100.0%)
<b>Race</b>	
White -----	419 (62.6%)
Black / AA -----	117 (17.5%)
Asian / PI -----	31 (4.6%)
Other (incl. Native American and Bi-racial) -	102 (15.2%)
<b>Gender</b>	
Male -----	407 (60.8%)
Female -----	262 (39.2%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	116 (17.3%)
Not of Hispanic/Latinx Origin -----	553 (82.7%)

**Program Performance Measures**

**CONSUMER ACCESS:** Children, birth through age 5, and their families who are Champaign County residents and have or at-risk of disabilities or a developmental delay, with service need determined by an assessment are eligible for services. Families learn about program services through collaborations with local hospitals and health clinics, child care centers, Crisis Nursery, local prevention initiative programs, and other agencies, as well as annual outreach events, such as, Read Across America, disAbility Expo, the Autism Walk, and the Buddy Walk. Additionally, Child and Family Connections makes referrals to the FD therapists. *Reviewer: Applicant provided details on eligibility for state-funded services. Outreach is good. Participates in an effective collaboration.*

**Of those seeking assistance or referred 100% will receive Services/Support.**

**Within 7 days from referral, 100% of those referred will be assessed.**

**Within 7 days of assessment, 90% of those assessed will engage in services.**

**People will engage in services, on average, for:** Children may participate for a one-time screening or for up to three years in the therapy program.

**Additional Demographic Data:** language spoken, primary disability, and referral source.

**CONSUMER OUTCOMES:**

Outcome 1: Families will identify progress in child functioning in everyday life routines, play and interactions with others.

Outcome 2: Children will progress in goals identified on their Individualized Family Service Plan (IFSP).

Assessments/Data Collection:

Outcome 1: Child functioning will be assessed in a variety of ways. First, quarterly file review will assess parent report regarding the child’s functional skills, play skills, and interactions as recorded on the home visit contact note. Second, family surveys will be mailed to families when they exit the program and for continuing children, at the end of the fiscal year. Survey questions are based on evidence-based best practice as defined by the Division of Early Childhood of the Council for Exceptional Children and includes feedback on program principles of child-centered, family-focused intervention, culturally responsive interactions. Questions also include parent perception of their child’s functioning in every day routines, play and interactions with others. Parent input and feedback is also sought during each home visit and incorporated in future planning.

Outcome 2: Program services are designed in collaboration with families based on initial and ongoing evaluation. Each child’s Individualized Family Service Plan (IFSP) outlines goals and strategies for services as well as outcome measures. Children are evaluated using appropriate standardized tests (DENVER II, Battelle Developmental Inventory II, Infant Toddler Developmental Assessment, Preschool Language Scale, Rossetti Infant Toddler Language.

**Outcome gathered from all participants?** No. Fifteen files will be reviewed quarterly. Files are chosen randomly among children who received a service during that quarter.

**Anticipate 655 total participants for the year.**

**Will collect outcome information quarterly.**

**Is there a target or benchmark level for program services?** Yes. The program has followed a Program Evaluation Process consisting of outcomes and targets for many years. Past outcomes and results assist in establishing current targets/benchmarks.

FY19 Measure: Families will identify progress in child functioning in everyday life routines, play and interactions with others.

FY19 Target: 90%

FY19 Mid-Year Outcome: 90%

FY19 Measure: Children will make progress in goals identified by families on the IFSP.

FY19 Target: 90%

FY19 Mid-Year Outcome: 90%

**Estimated level of change for each outcome:** Progress for the two outcomes is defined as any level of progress as perceived by the family or proven by an assessment. For both outcomes, the quantity is 90% of those reviewed.

*Reviewer: Consumer Outcomes relate to children's progress toward success, as identified by families and team members. Are outcomes collected from all participants and only 15 are reviewed or is the program only collecting outcomes from 2% of those served? Program is proposing to serve fewer clients in FY20 than served in FY18 yet requests a 3% increase in funding.*

#### UTILIZATION:

**Treatment Plan Clients (TPCs):** 655 children receiving FD program services, living in Champaign County.

**Non-Treatment Plan Clients (NTPCs):** 0 n/a

**Service Contacts (SCs):** 200 developmental screenings conducted by the screening coordinator. The screening coordinator continually builds new and maintains ongoing relationships with agencies serving underrepresented groups, including the Rantoul Multicultural Community Center, the Champaign Urbana Public Health District, DCFS, the Center for Youth and Family Solutions Intact Families program, Illinois State Board of Education Prevention Initiative Programs, and others. While the screening coordinator may screen children at a large resource event, most developmental screenings are conducted in the child's home with the parent present.

**Community Service Events (CSEs):** 300 Community Service Events provide opportunities to increase awareness of the importance of early identification and early intervention, reduce stigma, and promote community-based solutions. The FD program regularly participates in the Down Syndrome Network Buddy Walk, the DisAbility Expo, Read Across America, Ready Set Grow, Latino Partnership Events, and the CUPHD fair. In addition, consultation to child-care centers and preschools for children enrolled in FD program services continues. FD staff participates in community groups including the Birth-to-3 council, Infant Mental Health Learning Group, Home-Visiting Task Force, and the Kindergarten Readiness group.

**Other:** 0 - n/a

*Reviewer: Hours of service are reported as claims in online reporting system.*

#### Financial Analysis

**PY20 CCDDDB Funding Request:** \$579,148

**PY20 Total Program Budget:** \$770,550

**Current Year Funding (PY19):** \$562,280

**Proposed Change in Funding - PY19 to PY20 = 3.0%**

PY19 request was for \$562,280

PY18 request was for \$579,150 and award \$562,280

PY17 request was for \$562,280 and award \$562,280

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB/CCMHB request is for 75% of total program revenue.** Other revenue is from CC United Way Allocation \$47,500 (6%), DHS FFS Training \$3,788 (<1%), Program Service Fees – Early Intervention \$140,000 (18%), and Other Program Service Fees \$114 (<0%).

**Expenses:** Personnel related costs (Salaries/Wages \$386,824, Payroll Taxes \$35,126, and Benefits \$47,663) are the primary expense charged to CCDDDB at 81% of \$579,148. Other expenses are: Professional Fees/Consultants \$1,861 (0%), Consumables \$4,685 (1%), General Operating \$7,518 (1%), Occupancy \$32,509 (6%), Conferences/Staff Development \$2,535 (0%), Local Transportation \$17,862 (3%), Equipment Purchases \$290 (0%), Lease/Rental \$31,622 (5%), Membership Dues \$2,328 (0%), and Miscellaneous \$8,325 (1%).

**Total Agency Budget has a deficit of \$547,744, Total Program a deficit of \$7,902, and CCDDDB Budget is balanced.**

*Reviewer: Agency should seek more diversified funding for these services. How can the agency continue to operate at such a high deficit?*

**Program Staff - CCDDDB Funds:** 1.54 FTE Indirect and 6.86 FTE Direct. Total CCDDDB = 8.40 FTEs.

**Total Program Staff:** 2.13 FTE Indirect and 9.15 FTE Direct. Total Program = 11.28 FTEs.

*Reviewer: CCDDDB funds a portion of four Child Development Specialists, a portion of the office manager, a portion of the Training Coordinator, a portion of a Speech Language Pathologist, a portion of the Vice President, a portion of a Screening Coordinator, a portion of the Child Development Therapist, and a portion of two Program Directors. Per indirect cost allocation, very small portions of 21 indirect staff are also assigned to this contract (this is an acceptable and common strategy, though somewhat confusing in the Personnel form.)*

**Audit Findings:** *Audit is in compliance. PY19 contract requires audit by Independent CPA firm. If funded, PY20 will also require an audit.*

## CCDDDB PY20 Priorities and Decision Support Criteria

Does the plan align with one or more CCDDDB Priorities? Yes

### Overarching Decision Support Criteria

**Underserved Populations and Countywide Access:** Families in rural Champaign County constitute 42% of the total population. CCDDDB funds allow enhanced access to rural populations, with regular ongoing services in 30 different towns and villages. Program screenings occur in homes (natural environment), child care centers, and community centers. Therapies occur in the child's home. Group services may be held at homes, local daycare centers, and churches. Program collaborates with rural public schools, child care centers, churches, food pantries, and health centers to link families to services and fill gaps in services due to limited state funding. Outreach efforts and collaboration builds access for children from underrepresented groups. *Reviewer: Good details provided on Underserved/ Countywide access, staff travel to people in their preferred settings county-wide.*

**Inclusion, Integration and Anti-Stigma:** Once engaged in the program, families shape decisions regarding the resulting goals and services, including the intensity, duration, and location of services. Access to culturally responsive services begins by building relationships with each family that honors diverse customs, viewpoints, and languages as assets. Cultural competence is a process of communication between families and providers with a goal of building cultural reciprocity – understanding and open-mindedness regarding diversity. Process is embedded within the initial referral process and assessment through intervention planning and implementation. Children may participate for a one-time screening or for up to three years in the therapy program, depending on the age of child at entry. Natural supports and strengths are maximized by coaching parents and caregivers in intervention strategies and by including extended family, medical and faith-based community resources, and peer groups.

**Coordinated System:** No services similar to developmental therapy services and Play Project in Champaign County. Limited private speech therapy options which a family would have to pay for through insurance if covered or out of pocket. The Place for Children with Autism, a new program in the area, provides similar services, but they are not the same since they take an Allied Behavior Analysis (ABA) approach. We coordinate our services with The Place for Children with Autism, consult with them, share information/resources and plan together for the children we both serve. Program Director participates in Cradle to Career to further collaborate with community partners.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail on associated items and indirect cost allocation. As with most other applications from DSC, proposes a 3% salary increase, 10% increase in health insurance cost, staff shortage/ hiring crisis; audit cost is not mentioned.*

**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** The Play (Play and Language for Autistic Youngsters) Project is an evidence-based autism intervention devoted to helping parents develop a better connection with their child through play, and helping the child improve. *Reviewer: application also offered details on The PLAY Project, including website, and on the benefits of EI programs.*

**Evidence of Collaboration:** Yes, DSN, CFC, Multicultural Center Migrant/Seasonal Head Start, PLAY Project License, and Unitarian Universalist Church in Urbana for playgroups.

**Staff Credentials:** Staff include developmental therapists, a speech therapist and a developmental screening coordinator. Staff qualifications include five with Master's degrees and one with a Bachelor's degree in relevant educational fields; five are licensed and credentialed by the State of Illinois early intervention program, three developmental therapists are currently trained and certified to provide the PLAY Project, one is a certified evaluator and trainer in the DENVER Developmental training tool.

**Resource Leveraging: Other Pay sources:** None. **Client Fees:** No. **Sliding Scale:** No. **Willing to participate in DD waiver programs?** No.

### Process Considerations & Caveats



**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Timely reporting of personnel changes*
- *Continued collaboration with other providers of children's services.*
- *This program is funded for PY19 by the Champaign County Mental Health Board on the recommendation of the CCDDDB.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
C-U Able

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>Yes-</b> Board Members of CU-Able will complete annual CLC Training.
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	<b>No</b>
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>No</b>
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>No</b>
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	<b>Yes-</b> C-U Able will engage and serve people who are members of underserved or underrepresented minority populations by targeting schools to educate these groups of minorities.
<i>Inter-Agency Collaboration</i>	<b>No</b>
<i>Language and Communication Assistance</i>	<b>Yes-</b> Contact 3 new resources or providers for needed accommodations, such as language interpreters.
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>Yes-</b>

**Additional Comments:**

*C-U Able is a peer support organization that is working to expand the value of Cultural Competence within their organization.*

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## Draft PY2020 CCDDDB Program Summary

Agency: CU Able, NFP Inc.

Program: CU Able Community Outreach

**PY20 CCDDDB Funding Request:** \$15,275

**PY20 Total Program Budget:** \$24,575

**Current Year Funding (PY19):** \$15,285

**Proposed Change in Funding - PY19 to PY20 =** -0.1%

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

### Services and People Served

**Target Population:** Caregivers and professionals affected by all disabilities offering networking, education, and social opportunities to other caregivers and professionals in Champaign County affected by any disability. Free monthly meetings are open to the public. Members attending meetings and participating in online discussions include family members or caregivers of people with disabilities, professionals who work with people with disabilities, teachers, and University of Illinois and Parkland students. Online community allows people to connect and ask any questions or suggestions of other members any time of day/night. We have a specific interest in being completely inclusive and providing support to all families no matter what their diagnosis is. Important to provide a supportive environment allowing caregivers to network and connect with others. Emphasis on reaching out to families in rural areas and those from culturally diverse backgrounds and underserved populations.

### Scope, Location, & Frequency of Services:

**Scope:** CU Able provides resource information, meetings, networking and educational opportunities for anyone wanting to learn more about the Champaign County disability community. Through volunteer support and partnership with other organizations, we work to increase community awareness and acceptance about all disabilities. We advocate for families and individuals by providing phone, email, online discussion, and in-person support. This past year CU Able has been able to record and sometimes live stream events such as CCDDDB board meetings. All recorded events will be posted with closed captioning soon after the event has ended.

- CU Able holds 12 regular meetings throughout the year. The support meetings allow caregivers the opportunity to share resources, educational opportunities, activities, and personal challenges in a supportive environment. To support caregivers being able to attend the meetings, we hold meetings at the Stephens Family YMCA to allow for parents to utilize child watch. Child watch is available for children 6 weeks to 9 years of age.
- CU Able holds 4 educational meetings throughout the year to help families and individuals with disabilities on member selected topics such as IEPs, safety, long term planning, etc.
- CU Able organizes a Moms Retreat each year. The Moms Retreat provides an opportunity for respite for female caregivers of individuals with disabilities to come together for networking, relaxation, and educational opportunities. By attending caregivers can recharge and be better equipped to manage the stressors that come with providing care to an individual with a disability. Each caregiver is charged a nominal fee to attend the conference. To assist with the financial burden, we offer scholarships for families in need. In 2020 we would like to offer scholarships for all participants located in Champaign County to attend. Those scholarships would be funded by the CCDDDB.
- To facilitate networking opportunities CU Able maintains an active Facebook community. A paid administrator responds to emails and monitors our Facebook community daily. This position would be funded by the CCDDDB.
- In addition to networking opportunities, CU Able maintains a website that will be a resource for all caregivers, professionals and individuals to use in Champaign County. Users are able to locate needed resources, educational and social opportunities in a quick and efficient manner. Caregivers can access our calendar and find out about social and educational opportunities in Champaign County in addition to locating needed resources.

**Location/Frequency:** The proposed service activity will take place in the community and will occur at minimum monthly. The online community occurs every day, with participants being actively engaged at all hours of the day.

Reviewer: Is the scholarship for the Mom's Retreat based on need or for everyone, regardless of need? What is the cost of the Retreat? Who is providing the resource information, meetings, and networking? Are they credentialed? Do they volunteer? How is paid staff administering the Facebook page monitored?

**Residency**

Total Served	54 in PY18	16 in PY19 (first two quarters)
<b>Champaign Set</b>	19 (5.2%) for PY18	8 (50.0%) for PY19
<b>Urbana Set</b>	6 (11.1%) for PY18	5 (31.3%) for PY19
<b>Rantoul</b>	1 (1.9%) for PY18	0 (0%) for PY19
<b>Mahomet</b>	0 (0%) for PY18	0 (0%) for PY19
<b>Other Champaign County</b>	28 (51.9%) for PY18	3 (18.8%) for PY19

**Demographics: Total Served in PY18 = 54**

**Age**

Ages 0-6 -----	23 (42.6%)
Ages 7-12 -----	22 (40.7%)
Ages 13-18 -----	3 (5.6%)
Ages 19-59 -----	4 (7.4%)
Not Available Qty -----	2 (3.7%)

**Race**

White -----	41 (75.9%)
Black / AA -----	11 (20.4%)
Other (incl. Native American and Bi-racial) -	1 (1.9%)
Not Available Qty -----	1 (1.9%)

**Gender**

Male -----	32 (59.3%)
Female -----	22 (40.7%)

**Ethnicity**

Of Hispanic/Latinx Origin -----	1 (1.9%)
Not of Hispanic/Latinx Origin -----	53 (98.1%)

**Program Performance Measures**

**CONSUMER ACCESS:** Eligible members provide care to a person with a disability or be a person with a disability. Target population learns about services through CU Able Facebook group, word of mouth, Disability Resource Expo, monthly parent network meetings, CU Able website

Reviewer: above is edited.

**Of those seeking assistance or referred, 85% will receive Services/Support.**

**Within 3 days from referral, 100% of those referred will be assessed;**

**Within 3 days of assessment, 100% of those assessed will engage in services.**

**People will engage in services, on average, for multiple years.**

**Additional Demographic Data:** For some events, we might ask if their child/family member is on the PUNS list.

**CONSUMER OUTCOMES:** Facebook and surveys serve as an informal tool in assessing mood, satisfaction and needs among the members. Satisfaction surveys will be used for educational events, Moms retreat, and the website.

FY 2020 Measurable goals/outcomes are as follows:

1. CU Able will hold 12 regular meetings
2. CU Able will hold 4 educational opportunities annually
3. CU Able will reach 30 new TPC and 30 new NTPC
4. CU Able will plan 2 family events annually
5. CU Able will organize and host 1 moms retreat annually with at least 35 participants and 50% of them being located in Champaign County.
6. 90% of the Moms Retreat attendees will plan to attend a future retreat and learn something new at the 2020 retreat.
7. CU Able will record and post 7 events with closed captioning on the Facebook page and website, with virtual participants finding the recordings to be helpful.

We will use the feedback we got last year from surveys and informal messages/comments on Facebook in planning the 2020 Moms Retreat.

#### Data Collection

1. Attendance sheets with demographic info included, filled out by participants
2. Attendance sheets with demographic info included, filled out by participants
3. Attendance sheets with demographic info included, filled out by parent/caregiver participants
4. Online sign-ups and Facebook event comments, completed by participants
5. Demographic information collected at registration, completed by participants
6. Satisfaction survey on the last day of the retreat, completed by participants
7. Facebook/YouTube viewer counts as well as messages/comments indicating the level of helpfulness, data provided by viewers that were unable to attend the events in person

**Outcome gathered from all participants?** No. Information will be gathered by those who choose to participate in the surveys or give feedback in other ways.

**Anticipate 425 total participants for the year.**

**Outcome information** will be collected at each event.

**Is there a target or benchmark level for program services?** No

**Estimated level of change for this outcome is** N/A

*Reviewer: Some measures relate to performance rather than personal/family 'consumer' outcomes. Surveys and social media comments are most likely to measure outcomes of value to people: relationships; personal satisfaction; the exercise of consumer choice; self-determination; rewarding, real work; community inclusion; family involvement; social connection; and resources for information, planning, access, and support.*

#### **UTILIZATION:**

**Treatment Plan Clients (TPCs):** 150 (120 continuing + 30 new) Persons with a disability.

**Non-Treatment Plan Clients (NTPCs):** 125 (95 continuing + 30 new) Family members of someone with a disability.

**Service Contacts (SCs):** 150 Facebook group members

**Community Service Events (CSEs):** 16 All events (whether support, networking/social, or educational) that CU Able hosts

**Other:** N/A

*Reviewer: Above is edited. What survey is being used, who designed the survey and how is it aligned with outreach/advocacy services? Have the 16 events already been planned? Is there a current schedule of events?*

#### **Financial Analysis**

**PY20 CCDDDB Funding Request:** \$15,275

**PY20 Total Program Budget:** \$24,575

**Current Year Funding (PY19):** \$15,285

**Proposed Change in Funding - PY19 to PY20:** = -0.1%

PY19 request was for \$15,285

PY18 request was for \$13,802; award was for \$13,802 – A NEW program in PY18

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes

**CCDDDB is 62% of the total program revenue.** Other revenue is from Special Events/Fundraising \$2,000 (8%), Sales of Goods/Services \$2,400 (10%), and In-Kind Contributions \$4,900 (20%).

**Expenses:** Personnel-related costs of \$6450 are the primary expense charged to CCDDDB at 42% of \$15,275. Other expenses are: Professional Fees/Consultants \$900 (6%), Consumables \$2,750 (18%), General Operating \$3,325 (22%), Specific Assistance \$350 (2%), and Lease/Rental \$1,500 (10%).

**Total Agency Budget is balanced; Total Program Budget shows a surplus of \$9,300; CCDDDB Budget is balanced.**

*Reviewer: CU Able should include the recently awarded "Champaign Outdoors" grant revenue in Total Agency budget. Total Agency and Total Program budgets should match. Payroll service should be charged to Professional Fees rather than General Operating, and Miscellaneous should be charged to Specific Assistance.*

**Program Staff - CCDDDB Funds:** 0 FTE Indirect and 0.25 FTE Direct. Total CCDDDB Staff = 0.25 FTEs

**Total Program Staff:** 0 FTE Indirect and 0.25 FTE Direct. Total Program = 0.25 FTEs

**Audit Findings:** *An audit was not required for PY18 or PY19. If funded in PY20, a compilation completed by an Independent Certified Public Accountant, will be required due to total agency revenue of less than \$30,000.*

## **CCDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDB Priorities? Yes**

### **Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** Rural residents will be served either in Champaign/Urbana in regards to family dinners. Educational opportunities and possibly support group meetings via the internet to provide additional access to rural residents. CU Able will continue to record CCDDB meetings so rural residents can virtually attend those or watch the recordings at a later time. Members of underserved or underrepresented minority populations will be engaged/served through efforts targeting schools to educate these groups.

**Inclusion, Integration and Anti-Stigma:** CU Able provides a safe environment for sharing and collaboration. Facebook community has policies in place. Family dinners and outings allow families to get out in the community in safe way to build confidence and reduce isolation.

*Reviewer: Facebook group provides networking for many families who otherwise wouldn't have the opportunity.*

**Coordinated System:** Similar caregiver organizations in Champaign County include the Down Syndrome Network and CU Autism Network. We will work with these organizations to promote their events and we will promote our events with their members. We may also look into co-hosting events as well.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate detail.*

**Person Centered Planning (PCP): No**

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** It is extremely important for caregivers to get support and help from other caregivers, gain knowledge and learn about resources, and practice self-care.

*Reviewer: application also includes details on self-care website.*

**Evidence of Collaboration:** No written working agreements with any organizations. We make verbal connections but there are no formal agreements.

**Staff Credentials:** Part time staff has a child with a disability, helps her to connect and understand the perspectives of the families we serve.

**Resource Leveraging:** No Other Pay Sources, Client Fees, or Sliding Scale. Not willing to participate in waiver programs.

### **Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Survey tools used to measure outcomes.*
- *Include the recently awarded "Champaign Outdoors" grant revenue in Total Agency budget.*
- *Revise financial forms as described above, under Financial Analysis.*
- *Consider an additional amount of funding for a one-time project: developing list of resources other than waiver or DDB/MHB funded.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

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2020 Summary Analysis of Applicant's Cultural and Linguistic Competence Activities  
CCMHB/DDB  
Champaign County Down Syndrome Network

**CLC Plans submitted with FY2020 applications are reviewed for the following areas:**

<b>Required Benchmark by CCMHB/DDB</b>	<b>Summary of Actions outlined CLC Plan</b>
<i>Annual Cultural Competence Training</i>	<b>No</b>
<i>Recruitment of Diverse backgrounds and skills for Board of Director and Workforce</i>	<b>None Noted</b>
<i>Cultural Competence Organizational or Individual Assessment/Evaluation</i>	<b>No</b>
<i>Implementation of Cultural Competence Values in Policy and Procedure</i>	<b>No</b>
<i>Outreach and Engagement of Underrepresented and Marginalized Communities and target population defined in the criteria</i>	<b>"We make all our events open to our group and we always ask for people attending so if we find out ahead of time that there is a special need from someone, we work to get the need accommodated."</b>
<i>Inter-Agency Collaboration</i>	<b>No Information provided.</b>
<i>Language and Communication Assistance</i>	<b>"We are working to go through our current library and the new parent packets to make sure, we have material, so they are in English and Spanish."</b>
<i>Matched Actions with National Culturally and Linguistic Appropriate Services (CLAS) Standards in Health and Health Care.</i>	<b>All the actions were not completed in the CLC Plan.</b>

**Additional Comments:**

*Champaign County Down Syndrome Network is a support group for people who have a family member with Down Syndrome. They work with family members across the county who attend their events. There is no clear plan of engagement outside of a person attending their support group. The CLC Plan was incomplete, and additional technical assistance will be provided if the organization is funded.*

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Draft PY2020 CCDDDB Program Summary
Agency: Champaign County Down Syndrome Network
Program: Champaign County Down Syndrome Network

PY20 CCDDDB Funding Request: \$15,000
PY20 Total Program Budget: \$47,000
Current Year Funding (PY19): \$15,000
Proposed Change in Funding - PY19 to PY20 = 0 %

Priority: Self-Advocacy and Family Support Organizations

Services and People Served

Target Population: Families who have a member with Down syndrome. DSN offers support to families by providing current information for parents, professionals, and the general public.

Scope, Location, & Frequency of Services:

Scope: DSN offers support to families, people with Down syndrome, the community and professionals by being a source of the most current information as it pertains to the various aspects of Down syndrome.

Location/Frequency: NA

Reviewer: Scope of services unchanged from PY19. How does Agency ensure that funds are used for Champaign County residents only? How many workshops/presentations are held each year?

Residency

Table with 2 columns: Residency Category and PY18/PY19 Data. Rows include Total Served, Champaign Set, Urbana Set, Rantoul, Mahomet, and Other Champaign County.

Demographics: Total Served in PY18 = 193

Table with 2 columns: Age Group and Percentage. Rows include Ages 0-6, 7-12, 13-18, 19-59, and 60-75+.



<b>Race</b>	
White -----	153 (79.3%)
Black / AA -----	19 (9.8%)
Asian / PI -----	19 (9.8%)
Other (incl. Native American and Bi-racial) --	2 (1.0%)
<b>Gender</b>	
Male -----	76 (39.4%)
Female -----	117 (60.6%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	30 (15.5%)
Not of Hispanic/Latinx Origin -----	163 (84.5%)

**Program Performance Measures**

**CONSUMER ACCESS:** We access all situations and act accordingly to the needs of the individual within the limits of our organization. Participation is open to anyone affected by Down syndrome or wishes to help us support them. DSN provides support to families by distributing information about our parent support group at local hospitals, schools, places of employment, community agencies, and churches. DSN also has an up-to-date website with contact information for the group and other Down syndrome organizations. We belong to two national organizations, The National Down Syndrome Society (NDSS) and the National Down Syndrome Congress (NDSC), and our local contact information is listed on both national websites. The DSN provides local hospitals with new parent packets that contain valuable information to new parents.

**Of those seeking assistance or referred 75% will receive Services/Support.**

**Within 10 days from referral, 100% of those referred will be assessed.**

**Within 10 days of assessment, 50% of those assessed will engage in services.**

**People will engage in services, on average, for 10 days.**

**Additional Demographic Data:** None

**CONSUMER OUTCOMES:** Our programs help to improve the lives of those affected by Down syndrome in practical ways whether by education, support, advocacy or community awareness.

**Outcome gathered from all participants.** Yes

**Anticipate 5 total participants for the year.**

**Will collect outcome information monthly.**

**Is there a target or benchmark level for program services?** No

**Estimated level of change for this outcome is** N/A

*Reviewer: There are no measurable access or consumer outcomes or means to measure them. Personal/family 'consumer' outcomes are: relationships; personal satisfaction; the exercise of consumer choice; self-determination; rewarding, real work; community inclusion; family involvement; social connection; and resources for information, planning, access, and support. Although precise measures are a challenge, some method for documenting along these lines should be included.*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 145 TPCs will be reported as Down syndrome members & their families attending regular meetings & events (not the Buddy Walk since it is primarily a fundraiser & community awareness event). Members are considered active if they attend at least one event per year.

**Non-Treatment Plan Clients (NTPCs):** 50 NTPCs will be considered therapeutic, support or educational professionals attending training workshops, etc. intended to provide services to DSN members & their families.

Non-duplicated TPCs & NTPCs will be reported quarterly.

**Service Contacts (SCs):** 0

**Community Service Events (CSEs):** 20

*Reviewer: Unclear why TPCs are 145 and NTPCs are 50, but only 5 total participants are expected, in Consumer Outcomes section above. Error? (E.g., does this mean 5 new and 140 continuing TPCs)?*

**Financial Analysis**

**PY20 CCDDB Funding Request:** \$15,000

**PY20 Total Program Budget:** \$47,000

**Current Year Funding (PY19):** \$15,000

**Proposed Change in Funding - PY19 to PY20 = 0%**

PY19 request was for \$15,000

PY18 request was for \$15,000 and award \$15,000

PY17 request was for \$15,000 and award \$15,000

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB is 32% of total program revenue.** Other revenue is from Contributions \$2,000 (4%) and \$30,000 Special Events/Fundraising (64%).

**Expenses:** No personnel related costs are charged to CCDDDB. Professional Fees/Consultants \$1,300 (9%), Consumables \$300 (2%), General Operating \$3,300 (22%), Conferences/Staff Development \$7,600 (51%), and Fund Raising Activities \$2,500 (17%).

**Total Agency Budget is balanced. Total Program Budget is balanced. CCDDDB Budget is balanced.**

**Program Staff - CCDDDB Funds:** N/A – volunteers

**Audit Findings:** *This program has not been required to submit an audit. If funded for PY20, a Financial Review, completed by an Independent Certified Public Accountant, will be required.*

**CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities? Yes**

**Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** All DSN events are open to our group and we always ask for people attending so if we find out ahead of time that there is a special need from someone we work to get the need accommodated. DSN events are held in Champaign/Urbana.

**Inclusion, Integration and Anti-Stigma:** We try to host events in different venues throughout the area so people have the chance to attend something at place they might not normally go.

*Reviewer: Noted in Scope of Services above, the Buddy Walk is an event that promotes inclusion and awareness.*

**Coordinated System:** CU Autism Network & CU Able, we also work closely with DSC. Regular communication to work hand in hand with them to be able to help as many families as we possibly can.

**Budget and Program Connectedness:** Yes. *Budget Narrative provides sufficient detail.*

**Person Centered Planning (PCP):** No

**Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** NA

**Evidence of Collaboration:** NA

**Staff Credentials:** NA

**Resource Leveraging:** Other Pay Sources: NA. Client Fees: No. Sliding Scale No. Willing to participate in DD waiver programs? No.

**Process Considerations & Caveats**

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Application forms and CLCP should be completed; technical support available from CCDDDB staff.*
- *Coordinate with CCRPC-ISC.*
- *Consider an additional amount of funding for a one-time project: developing list of resources other than waiver or DDB/MHB funded.*
- *Professional Fees expense should include an amount to cover cost of independent financial review.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



**Draft PY2020 CCDDDB Program Summary**

**Agency: Community Choices, Inc. DDB**  
**Program: Self-Determination Support**

**PY20 CCDDDB Funding Request: \$138,000**  
**PY20 Total Program Budget: \$159,200**  
**Current Year Funding (PY19): \$116,000**  
**Proposed Change in Funding - PY19 to PY20 = 19 %**

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

**Services and People Served**

**Target Population:** Adults with I/DD wishing to expand social networks and capital, build familiarity resources and opportunities available in our community, and build leadership skills. Family members of adults with I/DD wishing to learn how the I/DD service system works, about community resources, connect and learn with other families, and building capacity to advocate for adult children/family members with I/DD.

**Scope, Location, & Frequency of Services:**

Scope: Family Support and Education: educating families on the service system, helping them support each other, and to advocate for improved services. Quarterly meeting about resources, best practices and options, community parties where families gather informally, and family support group aimed at providing strategies and community connection. Provides direct support to families during times of transition or challenge.

Building Community: Options for adults with disabilities to become engaged with others, including: Social Opportunities (dinner, sports, trivia, video-gaming, concerts, etc. with significant participant input in planning), Co-op Clubs (organically sustained friendships, groups of 3-5, based on shared interest), Togethering/Open Champaign (one-on-one support to assist people with I/DD to connect with community groups. Staff support people to identify a group, build natural supports, and then fadeout staff support).

Leadership and Self-Advocacy: Opportunities for adults with I/DD to learn and demonstrate self-determination and self-advocacy through a Leadership Class, a Community Advisory Board, and opportunities to mentor youth with disabilities in partnership with the CU 1:1 Mentoring program.

Location/Frequency: Services occur at community locations and at participants' homes.

*Reviewer: Above is edited. Scope of services unchanged from PY19. Some meetings are office based.*

**Residency**

Total Served	166 in PY2018	146 in PY2019 (first two quarters)
<b>Champaign Set</b>	90 (54%) for PY18	76 (52%) for PY19
<b>Urbana Set</b>	32 (19%) for PY18	31 (21%) for PY19
<b>Rantoul</b>	4 (2%) for PY18	0 (0%) for PY19
<b>Mahomet</b>	10 (6%) for PY18	9 (6%) for PY19
<b>Other Champaign County</b>	30 (18%) for PY18	30 (21%) for PY19

**Demographics: Total Served in PY2018 = 166**

**Age**

Ages 13-18 -----	3 (1.8%)
Ages 19-59 -----	152 (91.5%)
Ages 60-75+ -----	11 (6.6%)

**Race**

White -----	140 (84.3%)
Black / AA -----	15 (9%)

Asian / PI -----	7 (4.2%)
Other (incl. Native American and Bi-racial)	4 (2.4%)
<b>Gender</b>	
Male -----	71 (42.7%)
Female -----	95 (57.2%)
<b>Ethnicity</b>	
Of Hispanic/Latinx Origin -----	2 (1.2%)
Not of Hispanic/Latinx Origin -----	164 (98.7%)

## Program Performance Measures

**CONSUMER ACCESS:** Eligibility: 18+ years of age, with I/DD, enrolled in PUNS, a member of CC, and motivated to share the responsibility of working towards the outcomes and life they want. Formal and informal outreach within the Champaign-Urbana community and Champaign County. Program referrals come from schools and through word of mouth. Referrals to and from DSC, CCRPC, Rosecrance, UCP, TAP, and PACE. Informal outreach through events (Disability Expo and Northern Champaign County Community Resource Fair).

**Of those seeking assistance or referred 95% will receive Services/Support.**

**Within 14 days from referral, 90% of those referred will be assessed.**

**Within 0 days of assessment, 100% of those assessed will engage in services.**

**People will engage in services, on average, 1 year.** Membership lasts 1 year, then people can renew which includes updating paperwork and eligibility.

**Additional Demographic Data:** RIN numbers, PUNs eligibility, and medical insurance information. Information about involvement with other service providers will also be collected to ensure supports are not duplicated.

*Reviewer: Above section was edited.*

## CONSUMER OUTCOMES:

Program Outcome: Participation with CC leads to greater supportive networks and connections.

**GOALS:** Members with I/DD: 70% indicate that they made a friend and 60% of those friendships defined as somewhat close. 75% will indicate that CC provides a supportive community. Family Members: 55% indicate that they connected with another family member and 45% were meaningful connections. 75% will indicate CC provides a supportive community.

Family Support & Education: Members support each other and gain knowledge of the DD service system

**GOAL:** 5 Co-Op meetings offered and 45 people reached. 4 Family Parties held, ~20 members at each. 6 Family Support Group Sessions held, 16 family members participating. 100% of Support Group participants indicate a strategy/resource learned or an increased connection with others

Building Community: Members engage with others and community-based groups/opportunities.

**GOAL:** 48 opportunities offered. 5 coop clubs supported. 17 members with I/DD participating. 2 Open Champaign Events held. 12 members with I/DD build connections. 5 members with I/DD build 1:1 community connections. All people building facilitated connections will self-indicate a minimum of one additional connection on the Circles of Support tool.

Leadership & Self Advocacy: People with Disabilities build leadership skills to better direct services, shift mindsets in the broader community and service system.

**GOAL:** 1 course will be offered - 80% of participants will indicate an increase or example of a leadership skill or mindset that they gain. 10 people with I/DD will have opportunities to demonstrate their leadership growth by participating in Mentoring, Advisory Board, and Media Engagement activities

*Reviewer: Section is lightly edited. Each outcome is relevant to the people participating in the program. People define success and give feedback. The agency is accredited by Council on Quality and Leadership and has participated in UIUC Evaluation Capacity Project, both of which supported the focus on personal outcomes of value.*

## Assessment Tools:

Program Outcome: Annual Member Survey (presented to all participants and their families)

Family Support & Education: Number and attendance rate of quarterly Co-Op meetings, Family Parties, Support Groups tracked. Pre/post course evaluation.

Building Community: Number and attendance rate of social opportunities, co-op clubs, and Open Champaign Activities recorded. Pre/post model assessment.

Leadership & Self Advocacy: Number and attendance rate of leadership/self-advocacy events. Assessment measuring leadership skills.

**Outcome gathered from all participants?** No. Outcome information presented to all members and participants either in the form of the overall participant survey. Specific activity evaluation will be given those who involved.

**Anticipate 145 total participants for the year.**

**Will collect outcome information** Annually or following specific activities/events.

**Is there a target or benchmark level for program services?** No

**Estimated level of change:** Outcome goals are specific to the different assessment and activities. See specific goals above.

*Reviewer: Above sections edited. Data collection includes surveys, assessments, pre/posttest, attendance records, and questionnaires. Surveys, evaluations, and assessment for feedback from participants are appropriate efforts to measure personal and family outcomes of value, such as social connection, relationships, self-determination, and resources.*

#### **UTILIZATION:**

**Treatment Plan Clients (TPCs):** 0

**Non-Treatment Plan Clients (NTPCs):** 145 Co-Op Members with I/DD will be counted. Involved family members will be counted as well as family members/individuals from the broader community who attend our public events will be counted.

Goals: 70 NTPCs with I/DD and 75 NTPCs without I/DD (Family/Community Members)

**Service Contacts (SCs):** 1,994 direct interactions with a participant or activity directly related to their support. Goals:

Community Building: 1229 Total Service Contacts (SCs)

Social Opportunities: 384 SCs

Co-Op Clubs: 250 SCs

Togethering/Open Campaign: 245 SCs

Informal Support/Screening/Referral: 350 SCs

Leadership and Advocacy: 360 Total Service Contacts

Leadership Class: 80 SCs

Mentoring, Advisory Board, Media: 280 SCs

Family Support and Education: 405 Total Service Contacts

Co-Op Meetings: 115 SCs

Family Support Group: 70 SCs

Family Parties: 100 SCs

Informal Support and Consultation: 120 SCs

**Community Service Events (CSEs):** 4 outreach events to organizations, community groups, area service providers and other events

**Other** 1,523 Hours worked directly with a person or on activity directly related to their support. Goals:

Community Building: 1030 TOTAL Direct Hours (DHs)

Social Opportunities: 300 DHs

Co-Op Clubs: 200 DHs

Togethering/Open Campaign: 320 DHs

Informal Support/Screening/Referral: 230 DHs

Leadership and Advocacy: 257 TOTAL Direct Hours

Leadership Class: 40 DHs

Mentoring, Advisory Board, Media: 217 DHs

Family Support and Education: 216 TOTAL Direct Hours

Co-Op Meetings: 24 DHs

Family Support Group: 42 DHs

Family Parties: 60 DHs

Informal Support and Consultation: 60 DHs

#### **Financial Analysis**

**PY20 CCDDDB Funding Request:** \$138,000

**PY20 Total Program Budget:** \$159,200

**Current Year Funding (PY19):** \$116,000

**Proposed Change in Funding - PY19 to PY20 = 19.0%**

PY19 request was for \$116,000

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PY18 request was for \$115,000 and award \$96,000  
PY17 request was for \$70,000 and award \$70,000

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**  
**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 87% of total program revenue.** Other revenue is from Contributions \$17,000 (10.7%), Special Events/Fundraising \$3,000 (1.9%), Private Pay \$1,200 (<1%).

**Expenses:** Personnel related costs (Salaries/Wages \$104,377, Payroll Taxes \$8,182, Benefits \$10,000) are the primary expense charged to CCDDDB at 89% of \$138,000. Other expenses are: Professional Fees/Consultants \$5,541 (4%), Consumables \$2,300 (2%), General Operating \$2,000 (1%), Occupancy \$3,500 (3%), Conferences/Staff Development \$700 (1%), and Local Transportation \$1,400 (1%).

**Total Agency Budget shows a surplus of \$1,941, Total Program a surplus of \$277, and CCDDDB budget is balanced.**

**Program Staff - CCDDDB Funds:** 0.20 FTE Indirect and 2.70 Direct FTE. Total CCDDDB = 2.90 FTE.

**Total Program Staff:** 0.40 FTE Indirect and 2.90 FTE Direct. Total Program = 3.30 FTE.

*Reviewer: CCDDDB funds a portion of the Executive Director, a portion of two Connect Coordinators, and a portion of a Membership Coordinator.*

**Audit Findings:** PY18 audit in compliance. Audit required for PY19 and for PY20, if selected for funding.

## **CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities? Yes**

### **Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** Participation in outreach events attended by a broad scope of people in Champaign County. Services and supports are included in many resource lists and databases (Expo, 211, DRS). Strong relationships with other organizations where underrepresented or underserved groups might be connected and referred from, includes RPC, DRS, churches, NCCRC, Champaign County Healthcare Consumers and others. Upon service initiation, CC helps build natural support networks.

*Reviewer: from PY18 data on residency and demographics of participants, it appears that this program does well with county-wide reach and could improve engagement of members of minority populations, though many are represented.*

**Inclusion, Integration and Anti-Stigma:** Through our educational, community building, and leadership/self-advocacy efforts, program directly works to support people with I/DD to see themselves as important and valuable members of the community. Work done with parents through support group to learn to see, communicate with, and advocate for their family members as adults with adult hopes and desires for their lives. Finally, we work to build the capacity of our external community by actively engaging with groups to welcome and fully include people with I/DD. We push them to consider the perspectives and experience of people with I/DD when making decisions about how they operate and interact with clients, members, or participants. This is done through mentoring program, advisory board, media outreach, and through direct 1:1 connections between people with I/DD and community groups and organizations. Mindsets are changed when you approach providing services with an expectation that people with I/DD can and should be fully included members of the community.

**Coordinated System:** Some providers offer social events and parent groups, none provide these services with emphasis on genuine natural supports and full community inclusion. CC's unique cooperative model offers membership in established community, whose objectives and processes explicitly support people's full participation within the organization and the community at large. PACE, DSC, CUSR, CU Able, and others do provide some aspects of these supports/services.

Through our support and educational efforts, Community Choices shares information about the scope of resources available in our community. *Reviewer: due to the large coop, which includes family members and people with disabilities, this program has provided the CCDDDB and CCMHB with information useful to their strategic planning processes.*

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate descriptions of associated items.*

**Person Centered Planning (PCP):** Yes.

### **Technical Criteria and Secondary Considerations**

**Approach/Methods/Innovation:** Both of the populations (People with I/DD and their families) for this program are at risk to experience social isolation and increased stress. However, research suggests that opportunities for cooperation with other parents and social support have positive impacts on parents' stress. For people with disabilities, studies also indicate that social

supports and opportunities for increased self-awareness provide positive outcomes and protection from such negative states such as loneliness. To accomplish this work, Community Choices has developed a number of innovative practices including our Open Champaign Model that works to build inclusive communities and change broad mindsets through partnership with non-disability focused groups, an assumption of leadership by people with I/DD, and fun public events. We have also established legitimate opportunities for people with I/DD to be community leaders as mentors, writers, and advocates.

*Reviewer: above and below edited. Sources cited. Below: CCDDDB approved \$19,000 to be reserved as matching funds.*

**Evidence of Collaboration:** CC does not have a well-established system of written agreements with other organizations, though it is a process we are working to develop. Strong working relationships and informal partnerships with: DSC (formalized); PACE; RACES; Champaign Urbana Public Health; CU 1:1 Mentoring; Urbana Park District; Promise Healthcare; Champaign County Healthcare Consumers; The Autism Program; and CCRPC.

**Staff Credentials:** Staff have a broad range of experience that informs their work. This includes a master's level recreational therapist, staff with 10+ years' experience supporting people with I/DD, K-12 educational experience, and community focused non-profit work.

**Resource Leveraging: Other Pay sources:** No other payment sources are available for these supports at this time. CC has approached the CCDDDB about reserving \$19,000 of the SDS grant for matching funds to support an ICDD grant.

**Client Fees:** Yes. **Sliding Scale:** Yes. **Willing to participate in DD waiver programs?** No, waiver programs do not support this model of services.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Sample PCP documents and copies of written agreements once they are obtained.*
- *Financial forms will be revised to include the grant from IL Council on DD, if successful, lowering the contract maximum amount.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



## Draft PY2020 CCDDDB Program Summary

Agency: PACE, Inc.

Program: Opportunities for Independence

**PY20 CCDDDB Funding Request:** \$55,640  
**PY20 Total Program Budget:** \$55,640  
**Current Year Funding (PY19):** \$49,000  
**Proposed Change in Funding - PY19 to PY20 = 14 %**

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

### Services and People Served

**Target Population:** There are two somewhat distinct populations of consumers receiving services from the program: 1) Rural Champaign County high school students receiving Independent Living Philosophy and Advocacy focused training within the school setting, 2) persons with I/DD coming to PACE's offices for varied combinations of CIL core services. Those receiving services in rural Champaign County schools are offered an array of topics designed to extend beyond the development of hard-skills such as budgeting, laundry, shopping, etc. (which the schools focus on), and focuses on the development of soft-skills like advocacy, self-empowerment, and locating/connecting with resources. Applying the term "Independent Living" in the context of these soft-skills means that PACE is not duplicating educational services required under Article 14, and therefore avoids any prohibitions on using CCDDDB money to supplant educational funds. Those receiving services in PACE's office work on Independent Living goals.

*Reviewer: Section was edited.*

### Scope, Location, & Frequency of Services:

**Scope:** The core services of Information and Referral, Individual and Systemic Advocacy, Independent Living Skills Training, Peer Support, and Transition services will be utilized with the target populations cited above. General services are provided in group and individual meetings and primarily at PACE's offices. Services can best be fit into two categories—Independent Living Skills, and Job-Readiness. School services will be delivered through an Independent Living Philosophy-focused program conducted at rural Champaign County schools. PACE works with students and teachers to develop a customized program. PACE utilizes general state funding for students ineligible for CCDDDB services.

**Location/Frequency:** Proposed service activities will take place either at PACE offices or within rural Champaign County high schools. Services at PACE occur as often as the consumer prefers to meet with staff. High school services occur monthly.

*Reviewer: Above was edited, scope of services is largely unchanged from PY19. Includes details on specific program skills and topics covered.*

### Residency

Total Served	35 in PY18	13 in PY19 (first two quarters)
<b>Champaign Set</b>	7 (20.0%) for PY18	2 (15.3%) for PY19
<b>Urbana Set</b>	7 (20.0%) for PY18	1 (7.6%) for PY19
<b>Rantoul</b>	0 (0%) for PY18	0 (0%) for PY19
<b>Mahomet</b>	0 (0%) for PY18	0 (0%) for PY19
<b>Other Champaign County</b>	21 (60.0%) for PY18	10 (76.9%) for PY19

### Demographics: Total Served in PY18 = 35

#### Age

Ages 13-18 -----	11 (31.4%)
Ages 19-59 -----	21 (60.0%)
Ages 60-75+ -----	3 (8.6%)

#### Race

White -----	29 (82.9%)
Black / AA -----	3 (8.6%)



Asian / PI ----- 2 (5.7%)  
Other (incl. Native American and Bi-racial)- 1 (2.9%)

**Gender**

Male ----- 20 (57.1%)  
Female ----- 15 (42.9%)

**Ethnicity**

Of Hispanic/Latinx Origin ----- 1 (2.9%)  
Not of Hispanic/Latinx Origin ----- 34 (97.1%)

*Reviewer: PY19 staff LOA could contribute to low numbers. Large rural population served.*

**Program Performance Measures**

**CONSUMER ACCESS:**

People are served in the order they seek services, contact is made by staff within 3 working days and Intake and Information and Referral (I&R) forms are filled out at initial meeting. A needs assessment is completed for each consumer. A verification of I/DD, as defined by the CCDDDB checklist, is also used to verify eligibility. Consumers will also be asked if they are and/or have been served under Medicaid and in what way. Screening for Medicaid eligibility will be part of the CCDDDB checklist for eligibility. Consumer information is given to CCRPC's ISC division once release is obtained for final eligibility determination.

NTPCs—People learning about OIP who do not qualify for PUNS

TPCs—People who qualify for PUNS, and open a TPC with PACE facilitator

*Reviewer: Definition of NTPCs does not match what was defined below. What is the CCDDDB checklist? Unclear, but the expectation should be that families contact the ISC to determine PUNS eligibility, not the other way around. Services promoted through TPC, Expo, social media, and through service providers.*

**Of those seeking assistance or referred, 90% will receive Services/Support.**

**Within 10 days from referral, 85% of those referred will be assessed;**

**Within 20 days of assessment, 90% of those assessed will engage in services**

**People will engage in services, on average, for Three years.**

**Additional Demographic Data:** Voter registration, veteran status, medical insurance type(s), annual income, disability type(s), date of onset, emergency contact, social security number (last four digits).

**CONSUMER OUTCOMES:**

In FY18, the following outcomes were obtained:

Know Civil Rights (4), Increase Advocacy Assertiveness (23), Acquire Advocacy Services (19), Improve Communication in Social Situations (19), Increase Advocacy to Get and Keep a Job (8), Understand Financial Opportunities (19), Learn to Manage Personal Funds (19), Learn About Personal Safety (16), Learn About Basic Hygiene (17), Learn How to Use Memory Cue Options (16), Learn How to Follow Self Care Routines (11), Eat as Independently as Possible (17), Learn How to Apply Problem Solving and Decision Making Skills (28), Develop Goal Setting Skills (19), Learn How to Get Desired Transportation (4), Acquire Desired Transportation (4), Increase Youth Education and Advocacy Skills (13), Participate in Youth with Disabilities Group (27).

Total outcomes achieved in FY18: 283

Outcomes represent a person completing goal. All outcomes are tallied at the end of the fiscal year. These represent the number of people completing each goal.

**Outcome gathered from all participants?** No. Outcomes are only collected by consumers achieving goals

**Anticipate 72 total participants for the year.**

**Will collect outcome information** at any time after a consumer achieves a goal, but collected and reported annually.

**Is there a target or benchmark level for program services?** Yes

Targets are those listed in Program Plan Part II, and outlined in different sections of this part of the Program Plan.

**Estimated level of change for this outcome is:**

TPC - -37.1%

NTPC - +66.7%

SC - +20%

CSE - 0

Other/Service Hours - -10%

*Reviewer: the process for tracking consumer outcomes reflects the program/agency strong focus on individualized services and consumer choice. Many successful outcomes for FY18 relate to self-determination, personal satisfaction, connection, etc.*

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 22 people already receiving services from CCDDDB or deemed eligible for services by the ISC following referral by PACE staff.

**Non-Treatment Plan Clients (NTPCs):** 50 people: those believed to be eligible for CCDDDB services and referred to the ISC for eligibility determination; the parents/guardians of a consumer who is believed to be eligible for CCDDDB services who are told about PACE's programs and services; a teacher/service provider who contacts with those believed to be eligible.

**Service Contacts (SCs):** 200 distinct contacts which PACE Staff has with TPCs.

**Community Service Events (CSEs):** 25 events which PACE conducts or participates in where consumers believed to be eligible for CCDDDB services, their families/friends, or service providers are provided with information about the Opportunities for Independence program.

**Other:** 500 Service Hours: The amount of time PACE staff spend providing services to TPCs and NTCPs

*Reviewer: Conflicting definitions of NTPC from above, unclear which definition agency is using. The CSE definition interprets 'events' as contacts in which information is shared, rather than as community awareness/education events at which the program does a presentation (the traditional definition). Large decrease in target TPCs from PY19, why? If awarded funding, definitions must be clear. How does program project to double the number of clients from FY18 to FY20?*

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$55,640

**PY20 Total Program Budget:** \$55,640

**Current Year Funding (PY19):** \$49,000

**Proposed Change in Funding - PY19 to PY20 = 13.6%**

PY19 request was for \$49,000

PY18 request was for \$40,546 and award for \$40,546

PY17 request was for \$54,546 and award for \$40,546

**Does the application clearly explain what is being purchased by the CCDDDB? Yes**

**Does the application warrant that CCDDDB funding will not supplement Medicaid? Yes**

**CCDDDB request is for 100% of total program revenue.**

**Expenses:** Personnel costs (Salaries/Wages \$27,664, Payroll Taxes \$2,766, and Benefits \$7,148) are 68% of CCDDDB costs. Other expenses are: Professional Fees/Consultants \$842 (2%), Consumables \$901 (2%), General Operating \$289 (1%), Occupancy \$1,667 (3%), Conferences/Staff Development \$735 (1%), Local Transportation \$1,044 (2%), Lease/Rental \$4,364 (8%), Membership Dues \$53 (0%), and Miscellaneous \$8,167 (15%).

**Total Agency Budget shows a surplus of \$15,428, Total Program a deficit of \$3,013, and CCDDDB Budget balanced.**

*Reviewer: CCDDDB is the only funder of this program, so the Total Program and CCDDDB budgets should match.*

**Program Staff - CCDDDB Funds:** 0 FTE Indirect and 0.95 FTE Direct. Total CCDDDB-funded staff = 0.95 FTEs

**Total Program Staff:** 0 FTE Indirect and 0.95 FTE Direct. Total Program = 0.95 FTEs

*Reviewer: CCDDDB funds support a portion of an Independent Living Specialist.*

**Audit Findings:** PY18 audit in compliance. PY19 not yet due. PY20 requires audit completed by Independent CPA.

**CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities? Yes**

**Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** PACE attends local info fairs and expos where members of these populations may attend and seek information. These populations have a higher representation in rural areas, PACE hopes to reach these members in the same ways/locations mentioned above. PACE relies on word of mouth by current and

successfully closed consumers to reach potential consumers and their families who may not have otherwise sought out assistance. People are served at PACE or local high schools. Youth centers, may be considered if an opportunity arose. *Reviewer: PY18 residency data show strong engagement with residents of rural areas; PY18 demographic data show room for improvement in service to underrepresented minority populations.*

**Inclusion, Integration and Anti-Stigma:** PACE started Advocates for Access many years ago to improve community access, reduce stigma, and promote inclusion. It has monthly meetings and is attended by community members and PACE staff. Consumers of OIP are encouraged to attend throughout the year.

**Coordinated System:** Some consumers seek services at Community Choices and CUSR, however the services are more social in nature and are not offered by PACE. We encourage all consumers at PACE to seek out any and all community resources which might benefit them, adding to their ability to self-advocate. PACE has a written agreement with Community Choices to provide job readiness training for those in need and PACE refers people to Community Choices in need of a job coach. With regard to the high schools, PACE is very careful not to provide any services already being provided. *Reviewer: a demonstration of this claim might involve comparison of program service activities with those which are the responsibility of schools, per Article 14 of the School Code.*

**Budget and Program Connectedness:** Yes. *Budget Narrative offers adequate detail on associated items but no mention of audit expense.*  
**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** PACE services aids students in the concepts of Independent Living and self-advocacy becoming more ingrained.

**Evidence of Collaboration:** PACE has written MOUs with 3 local rural high schools and Community Choices.

**Staff Credentials:** Program staff has a Master of Science degree in Rehabilitation Counseling and has been a nationally Certified Rehabilitation Counselor since 2008.

**Resource Leveraging: Other Pay Sources:** Services could be provided under the Independent Living Unit funding which we receive from the state. However, if moved under this funding, time for serving those with I/DD would need to be split with all other services funded by that contract. **Client Fees:** No. **Sliding Scale:** Yes. **Willing to participate in DD waiver programs?** No

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *Sample person-centered planning documents*
- *Evidence of MOUs with schools and RPC*
- *“CCDDB Eligibility Checklist” should no longer be used by the agency and should be removed from the Plan Narrative, as it does not ensure eligibility or support the process of establishing eligibility.*
- *Consider fee for service or fee for event; as a unique program within a relatively small agency, services cease when the primary staff person is unavailable. Rather than collect excess revenue associated with stopping services, an advance and reconcile FFS contract structure would support continuing to fund this program without risk of overpayment.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending



**Draft PY2020 CCDDDB Program Summary**

**Agency: Community Choices, Inc. DDB**  
**Program: Community Living**

**PY20 CCDDDB Funding Request: \$81,000**  
**PY20 Total Program Budget: \$133,500**  
**Current Year Funding (PY19): \$72,500**  
**Proposed Change in Funding - PY19 to PY20 = 12 %**

**Priority:** Expansion of Independent Community Residential Opportunities

**Services and People Served**

**Target Population:** Adults with I/DD living in Champaign County. Program focuses on those with mild to moderate I/DD, who, with minimal staff support and development of natural supports, can and wish to live independently in the community.

**Scope, Location, & Frequency of Services:**

Scope: Community Transitional Support: 2 year, four-phase model to support those with I/DD to move into the community.

1. **PLANNING STAGE:** assessments, observations, financial discussions, identifying where person stands in core skill areas.
  2. **MOVE OUT STAGE:** establishing schedules and working on life skill areas with support in the community-based home.
  3. **REACHING OUT:** participants work on community connections and finding meaningful activities and relationships.
  4. **CONSULTATION:** informal supports and check-ins. Option to pair with those in earlier phases as supportive mentors.
- Personal Development Training: Small classes and 1-on-1 instruction to build skills and confidence. Eight sessions of hands-on, interactive instruction focused on different topics, including: finances, community safety, technology, sexuality and relationships, communication, and cooking.

Home Based Support Self-Direction Assistance (SDA): Those with state-funded Home-Based Services (HBS) may choose a Self-Direction Assistant to aid in the management of the waiver services. Paid for through state funding.

Location/Frequency: Staff meet with participants in their homes or at community locations preferred by participants.

Class locations vary depending on the topic. Locations have included people’s homes, community locations (bus terminal or transit plazas), the Champaign Public Library, local churches, or the Community Choices conference room.

*Reviewer: Above is edited, scope of services unchanged from FY19.*

**Residency**

<b>Total Served</b>	18 in PY2018	18 in PY2019 (first two quarters)
<b>Champaign Set</b>	13 (72%) for PY18	15 (83%) for PY19
<b>Urbana Set</b>	3 (17%) for PY18	1 (6%) for PY19
<b>Rantoul</b>	1 (6%) for PY18	1 (6%) for PY19
<b>Mahomet</b>	0 (0%) for PY18	0 (.0%) for PY19
<b>Other Champaign County</b>	1 (6%) for PY18	1 (6%) for PY19

**Demographics: Total Served in PY2018 = 18**

**Age**

Ages 19-59 -----	18 (100%)
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**Race**

White -----	13 (72%)
Black / AA -----	3 (17%)
Asian / PI -----	1 (6%)
Other (incl. Native American and Bi-racial)	1 (6%)

**Gender**

Male -----	15 (83%)
Female -----	3 (17%)

## Ethnicity

Not of Hispanic/Latinx Origin ----- 18 (100%)

## Program Performance Measures

**CONSUMER ACCESS:** People at least 18 years old with a I/DD, enrolled in PUNS, and possessing the ability and willingness to ultimately live on their own, or with minimal support within one year. Those meeting general eligibility who are interested in gaining skills can participate in Personal Development classes. Staff meets with those requesting services to determine if the Community Transitional Support Program is a good fit for their needs and goals. Formal and informal outreach within the Champaign-Urbana community and Champaign County. Referrals from area schools and through word of mouth. Referrals to and from DSC, CCRPC, Rosecrance, UPC, TAP, and PACE. Informal outreach through outreach events (Disability Expo and Northern Champaign County Community Resource Fair).

**Of those seeking assistance or referred, 95% will receive Services/Support.**

**Within 14 days from referral, 95% of those referred will be assessed.**

**Within 60 days of assessment, 95% of those assessed will engage in services.**

**People will engage in services, on average, for 2-3 years.** Support is designed to last 2-3 years, but can increase with changes in circumstances. Classes are 8 weeks.

**Additional Demographic Data:** RIN numbers, PUNs eligibility, and medical insurance information. Information about involvement with other service providers will also be collected to ensure supports are not duplicated.

*Reviewer: Timelines are estimates of internal intake process.*

## CONSUMER OUTCOMES:

**Program Outcome:** With planning and support, individuals with I/DD can live in community based locations and build social connection.

**GOAL:** 75% of participants will report that participation supported their efforts to live independently. 70% will indicate that participation helped them to connect with others and community.

**Planning Outcome:** People with I/DD plan and develop community-based living options.

**GOALS:** 4 people develop person-centered goals focusing on a move-out plan and skills they would like to work on. 4 individuals successfully complete the planning phase by moving into a community-based living situation of their choice.

**Move-Out Outcome:** People with I/DD develop the skills needed to live independently.

**GOALS:** 5 people successfully complete the Move-Out phase by: meeting their self-determined goals; improving their POM score in at least one area; showing the ability to complete critical areas for independence on the Independent Living Skills Checklist. Plans and goals updated annually.

**Reaching-Out Outcome:** People with I/DD develop connections to people and community.

**GOALS:** 6 people successfully complete the Reach-out phase by: meeting their self-determined goals; improving their initial POM score in at least 2 areas; and regularly engaging in 1 new activity in the community

**Personal Development Class Outcome:** People with I/DD will develop their independent living skills.

**GOALS:** 15 people with I/DD will participate. 5 courses will be offered. People can participate in multiple courses. 100% of participants will indicate growth or identify a new skill, based on the course assessment.

## Assessment Tools:

**Program Outcome:** Annual Member Survey (presented to all participants and their families),

**Planning Outcome:** Personal Outcome Measures and Independent Living Skills Checklist

**Move-Out Outcome:** Regular meetings with participants will serve as a formative assessment on progress toward goals.

**Reach-Out Outcome:** Regular meetings with participants will serve as formative assessment on progress goals.

**Personal Development Class Outcome:** Courses and attendance rate will be recorded. Pre/post course assessment designed to be accessible for and completed by people with I/DD will be used to measure the skill growth by participants.

*Reviewer: Above and below are edited. Personal Outcome Measures developed by Council on Quality and Leadership (accreditor of the agency). POMs renewed annually. Data collection includes surveys and assessments.*

**Outcome gathered from all participants? Yes.**

**Anticipate 15 total participants for the year.**

**Will collect outcome information once a year.** Formal assessments will be completed annually. Formative Assessment on self-determined goals will occur at least monthly.

**Is there a target or benchmark level for program services? No**

**Estimated level of change:** Participants should improve their POM scores in at least 2 areas, show the ability to complete critical tasks from the Independent Living Skills Checklist (critical tasks are determined according to the individual's context), have met self-determined goals, and regularly engage in one or more activities/groups/connections in the community.

**UTILIZATION:**

**Treatment Plan Clients (TPCs):** 15 adults with I/DD participating in the Community Transitional Support Program.

**Non-Treatment Plan Clients (NTPCs):** 15 adults with I/DD participating in Personal Development Classes.

**Service Contacts (SCs):** 1,420 Service contacts, recorded as Claims through the online service reporting system. SCs include activities directly working with people in the program as well as activities directly connected to providing support (including connecting to resources, collaborating with families and natural supports, and documenting the support provided). SCs for NTCPs reported in the traditional format (total count of contacts). Community Transitional Support: 1170 SCs; Personal Development Classes: 250 Service Contacts.

**Community Service Events (CSEs):** 2 outreach events to organizations, community groups, area service providers and other events meant to support the community's knowledge of these programs as well as the importance of people with I/DD having the opportunity to live in the community.

**Other:** 1,602 direct hours by staff supporting people with I/DD. For TPCs these hours will be recorded via the Claims online reporting system. For NTCPs, these will be recorded and reported in the traditional format. Community Transitional Support: 1482 Direct Hours; Personal Development Classes: 120 Direct Hours.

*Reviewer: TPC hours documented in online reporting system.*

**Financial Analysis**

**PY20 CCDDDB Funding Request:** \$81,000

**PY20 Total Program Budget:** \$133,500

**Current Year Funding (PY19):** \$72,500

**Proposed Change in Funding - PY19 to PY20:** = 12%

PY19 request was for \$72,500

PY18 request was for \$66,000 and award \$63,000

PY17 request was for \$63,000 and award for \$63,000

**Does the application clearly explain what is being purchased by the CCDDDB?** Yes

**Does the application warrant that CCDDDB funding will not supplement Medicaid?** Yes, SDA services through HBS.

**CCDDDB request is for 61% of total program revenue.** Other revenue is from Contributions \$7,000 (5%), Special Events/Fundraising \$4,000 (3%), State DDD \$40,000 (30%), and Private Pay \$1,500 (1%).

**Expenses:** Personnel related costs (Salaries/Wages \$54,305, Payroll Taxes \$4,234, and Benefits \$8,200) are the primary expense charged to CCDDDB at 82% of \$81,000. Others are: Professional Fees/Consultants \$5,100 (6%), Consumables \$1,550 (2%), General Operating \$1,961 (2%), Occupancy \$2,450 (3%), Conferences/Staff Development \$600 (1%), and Local Transportation \$2,600 (3%).

**Total Agency Budget shows a surplus of \$1,941, Total Program a surplus of \$940, and CCDDDB Budget is balanced.**

**Program Staff - CCDDDB Funds:** 0.20 FTE Indirect and 1.30 FTE Direct. Total CCDDDB = 1.50 FTEs

**Total Program Staff:** 0.30 FTE Indirect and 2.30 FTE Direct. Total Program = 2.60 FTEs

*Reviewer: CCDDDB funds a portion of the Executive Director, a portion of the Community Support Specialist, and a portion of the Community Life Coordinator.*

**Audit Findings:** PY18 audit in compliance; required for PY19. If funded, PY20 contract will require audit by independent CPA.

**CCDDDB PY20 Priorities and Decision Support Criteria**

**Does the plan align with one or more CCDDDB Priorities?** Yes

**Overarching Decision Support Criteria**

**Underserved Populations and Countywide Access:** Participation in outreach events attended by a broad scope of people in Champaign County. Services and supports are included in many resource lists and databases (Expo, 211, DRS). Strong relationships with other organizations where underrepresented or underserved groups might be connected and referred from, includes RPC, DRS, churches, NCCRC, Champaign County Healthcare Consumers and others. Upon service initiation, CC helps build natural support networks.

**Inclusion, Integration and Anti-Stigma:** Program creates clear and concrete plan for adults with I/DD to develop sustainable community living situations of their choosing, through individualized planning, skill training, and by supporting each person to set up a home or apartment that will work for them. Participants are supported to identify and use community resources and natural supports. This process allows members to be fully integrated and included in the community. Not only are they supported to benefit from the type of living arrangements that those without disabilities access, but the communities they wish to be a part of also benefit from their participation as full and included members of our broader culture.

**Coordinated System:** DSC's Apartment Services program provides similar services without the phase-based approach. PACE offers some classes but their target population and topics tend to vary from those that CC offers. DSC's Case Management Department offers SDA support to their clients with waiver services. CC encourages people to use services from multiple service providers to best meet their needs and desires. However, due to similarities in the supports offered, people are asked to choose between CC services and those which are similar.

*Reviewer: Above is edited. People are eligible to participate in CC classes, as well as classes at other organizations (PACE).*

**Budget and Program Connectedness:** Yes. *Budget Narrative provides adequate descriptions of associated items.*

**Person Centered Planning (PCP):** Yes

### Technical Criteria and Secondary Considerations

**Approach/Methods/Innovation:** Program aims to create real supportive housing options for people with I/DD in Champaign County. Agency believes that that each person has the right (generally and supported by the Supreme Court's Olmstead decision) to live in their own homes in fully integrated settings of their choosing. Using the principals of Supported Housing, we work with people to find housing that meets needs financially and environmentally, and then provide supports to ensure that living situation is sustainable. Research also supports Supportive Housing and Living models as cost-effective methods which are more, supportive of participant choice, community access, and social integration.

*Reviewer: Above is edited, details on evidence-based approach, sources/websites.*

**Evidence of Collaboration:** CC does not have a well-established system of written agreements with other organizations, though it is a process we are working to develop. Strong working relationships and informal partnerships with: DSC (formalized); PACE; RACES; Champaign Urbana Public Health; CU 1:1 Mentoring; Urbana Park District; Promise Healthcare; Champaign County Healthcare Consumers; The Autism Program; and CCRPC.

**Staff Credentials:** Current staff DSP and QIDP trained and hold undergraduate degrees in human-service related fields. All have 10+ years' experience supporting adults with I/DD.

**Resource Leveraging: Other Pay Sources:** Some SDA supports are billed through the state. **Client Fees:** No. **Sliding Scale:** Yes. **Willing to participate in DD waiver programs:** Yes, SDA currently.

### Process Considerations & Caveats

**Contracting Considerations:** If this application is approved for funding, the applicant may be required to respond to or submit the following for staff review and approval prior to execution of the final PY2020 contract:

- *written agreements if obtained.*

**Applicant Review and Input:** Applicant is encouraged to review this document upon receipt and notify the CCDDDB Executive Director in writing if there are factual errors which should be corrected prior to completion of the award process.

**Recommendation:** Pending

### **Agency and Program acronyms**

CC – Community Choices  
CCDDDB – Champaign County Developmental Disabilities Board  
CCHS – Champaign County Head Start, a program of the Regional Planning Commission  
CCMHB – Champaign County Mental Health Board  
CCRPC – Champaign County Regional Planning Commission  
DSC - Developmental Services Center  
DSN – Down Syndrome Network  
FDC – Family Development Center  
PACE – Persons Assuming Control of their Environment, Inc.  
RCI – Rosecrance Central Illinois  
RPC – Champaign County Regional Planning Commission  
UCP – United Cerebral Palsy

### **Glossary of Other Terms and Acronyms**

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

AAC – Augmentative and Alternative Communication

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

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

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

ADA – Americans with Disabilities Act

ADD – Attention Deficit Disorder

ADHD – Attention Deficit/Hyperactivity Disorder

ADL – Activities of Daily Living

ASD – Autism Spectrum Disorder

ASL – American Sign Language

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

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

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BD – Behavior Disorder

BSP – Behavior Support Plan

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

CARF- Council on Accreditation of Rehabilitation Facilities

CC – Champaign County

CDS – Community Day Services, formerly “Developmental Training”

CFC – Child and Family Connections Agency

CFCM – Conflict Free Case Management

C-GAF – Children’s Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CLC – Cultural and Linguistic Competence

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

CNA – Certified Nursing Assistant

COTA – Certified Occupational Therapy Assistant

CP – Cerebral Palsy

CQL – Council on Quality and Leadership

CSEs - Community Service Events. A category of service measurement on the Part II Utilization form. Activity to be performed should also be described in the Part I Program Plan form-Utilization section. It relates to the number of public events (including mass media and articles), consultations with community groups and/or caregivers, classroom presentations, and small group workshops to promote a program or educate the community. Activity (meetings) directly related to planning such events may also be counted here. Actual direct service to clientele is counted elsewhere.

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

CY – Contract Year, runs from July to following June. For example, CY18 is July 1, 2017 to June 30, 2018. May also be referred to as Program Year – PY. Most contracted agency Fiscal

Years are also from July 1 to June 30 and may be interpreted as such when referenced in a Program Summary e.g. FY18.

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

DD – Developmental Disability

DDD – Division of Developmental Disabilities

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

DHS – (Illinois) Department of Human Services

DOJ – (US) Department of Justice

DRS – (Illinois) Division of Rehabilitation Services

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training, now “Community Day Services”

DT – Developmental Therapy, Developmental Therapist

Dx – Diagnosis

ED – Emotional Disorder

EI – Early Intervention

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

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

ED – Emergency Department

ER – Emergency Room

FAPE – Free and Appropriate Public Education

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

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FOIA – Freedom of Information Act.

FQHC – Federally Qualified Health Center

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

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

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

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

HCBS – Home and Community Based Services

HI – Hearing Impairment or Health Impairment

Hx – History

ICAP – Inventory for Client and Agency Planning

ICDD – Illinois Council for Developmental Disabilities

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ID – Intellectual Disability

IDEA – Individuals with Disabilities Education Act

IDOC – Illinois Department of Corrections

IDPH – Illinois Department of Public Health

IDT – Interdisciplinary Team

IEP – Individualized Education Plan

IFSP – Individualized Family Service Plan

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

Illinois Administrative Code Section 600.400: Certified Local Health Department Code Public Health Practice Standards. The essential elements of IPLAN are:

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

I&R – Information and Referral

ISBE – Illinois State Board of Education

ISC – Independent Service Coordination

ISP – Individual Service Plan, Individual Success Plan

ISSA – Independent Service & Support Advocacy

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LD – Learning Disability

LGBTQ – Lesbian, Gay, Bi-Sexual, Transgender, Queer

LPC – Licensed Professional Counselor

LPN – Licensed Practical Nurse

MCO – Managed Care Organization

MDC – Multidisciplinary Conference

MDT – Multidisciplinary Team

MH – Mental Health

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

MI – Mental Illness

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

MSW – Master of Social Work

NCI – National Core Indicators

NOS – Not Otherwise Specified

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

OMA – Open Meetings Act.

OT – Occupational Therapy, Occupational Therapist

OTR – Registered Occupational Therapist

PAS – Pre-Admission Screening

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

PCI – Parent Child Interaction groups.

PCP – Person Centered Planning, Primary Care Physician

PDD – Pervasive Developmental Disorders

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

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

PSH – Permanent Supportive Housing

PT – Physical Therapy, Physical Therapist

PTSD – Post-Traumatic Stress Disorder

PUNS – Prioritization of Urgency of Need for Services. PUNS is a database implemented by the Illinois Department of Human Services to assist with planning and prioritization of services for individuals with disabilities based on level of need. An individual's classification of need may be emergency, critical, or planning.

PY – Program Year, runs from July to following June. For example, PY20 is July 1, 2019 to June 30, 2020. May also be referred to as Contract Year (CY) and is often the Agency Fiscal Year (FY).

QIDP – Qualified Intellectual Disabilities Professional

QMHP – Qualified Mental Health Professional, a Master’s level clinician with field experience who has been licensed.

RCCSEC – Rural Champaign County Special Education Cooperative

RD – Registered Dietician

RN – Registered Nurse

RT – Recreational Therapy, Recreational Therapist

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

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

SCs - Service Contacts/Screening Contacts. The number of phone and face-to-face contacts with eligible persons who may or may not have open cases in the program. Can include information and referral contacts or initial screenings/assessments or crisis services. May sometimes be referred to as a service encounter (SE). It is a category of service measurement providing a picture of the volume of activity in the prior program year and a projection for the coming program year on the Part II form, and the activity to be performed should be described in the Part I Program Plan form-Utilization section.

SEDS – Social Emotional Development Specialist

SEL – Social Emotional Learning

SF – Service Facilitation, now called “Self-Direction Assistance”

SH – Supportive Housing

SIB – Self-Injurious Behavior

SIB-R – Scales of Independent Behavior-Revised

SLI – Speech/Language Impairment

SLP – Speech Language Pathologist

SPD – Sensory Processing Disorder

SSA – Social Security Administration

SSDI – Social Security Disability Insurance

SSI – Supplemental Security Income

SST – Support Services Team

SUD – Substance Use Disorder

SW – Social Worker

TIC – Trauma Informed Care

TPC – Transition Planning Committee

TPCs - Treatment Plan Clients - service recipients with case records and treatment plans. It is a category of service measurement providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II Utilization form, and the actual activity to be performed should also be described in the Part I Program Plan form -Utilization section. Treatment Plan Clients may be divided into two groups: Continuing TPCs are those with treatment plans written prior to the first day of July and actively receiving services within the first quarter of the new program year (the first quarter of the program year is the only quarter in which this data is reported); New NTPCs are those newly served, with treatment plans, in any quarter of the program year.

VI – Visual Impairment

VR – Vocational Rehabilitation

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

WIOA – Workforce Innovation and Opportunity Act



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## CCDDB 2019 Meeting Schedule

### Board Meetings

8:00AM except where noted

Brookens Administrative Building

1776 East Washington Street, Urbana, IL

January 23, 2019 – Lyle Shields Room (8AM)

February 20, 2019 – Lyle Shields Room (8AM)

March 20, 2019 – Lyle Shields Room (8AM)

*March 27, 2019 – Lyle Shields Room (5:30PM) – study session*

April 24, 2019 – Lyle Shields Room (8AM)

May 22, 2019 – Lyle Shields Room (8AM)

June 26, 2019 – Lyle Shields Room (8AM)

July 17, 2019 – John Dimit Conference Room (8AM)

September 18, 2019 – John Dimit Conference Room (8AM)

October 23, 2019 – Lyle Shields Room (8AM)

October 30, 2019 – Lyle Shields Room (5:30PM) Joint Study Session

November 20, 2019 – John Dimit Conference Room (8AM)

December 18, 2019 – John Dimit Conference Room (8AM)

*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**

**July 2018 to June 2019 Meeting Schedule with Subject and Allocation Timeline**

The schedule provides the dates and subject matter of meetings of the Champaign County Developmental Disabilities Board through June 2019. 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; topics will be based on issues raised at meetings, brought by staff, or in conjunction with the Champaign County Mental Health Board. Regular meetings of the CCDDDB are usually at 8AM; study sessions at 5:30PM. Included with meeting dates are tentative dates for steps in the funding allocation process for Program Year 2020 (July 1, 2019 – June 30, 2020) and deadlines related to current (PY2019) agency contracts.

07/25/18	<b>Regular Board Meeting (Dimit Conference Room)</b> Election of Officers
08/31/18	<i>Agency PY2018 Fourth Quarter and Year End Reports Due</i>
09/26/18 – 8AM	<b>Regular Board Meeting (Dimit Conference Room)</b>
10/24/18 – 7:30AM	<b>Regular Board Meeting (Dimit Conference Room)</b> Draft Three Year Plan 2019-2021 with FY19 Objectives Release Draft Program Year 2020 Allocation Criteria
10/26/18	<i>Agency PY2019 First Quarter Reports Due</i>
10/31/18	<i>Agency Independent Audits Due</i>
11/14/18 – 8AM	<b>Regular Board Meeting (Lyle Shields Room)</b>
11/28/18 – 5:30PM	<b>Study Session – Housing (John Dimit Room)</b>
12/12/18	<i>Public Notice to be published on or before this date, giving at least 21-day notice of application period.</i>
12/19/18 – 7:30AM	<del><b>Regular Board Meeting</b></del> <i>cancelled</i> <del>Approve Three Year Plan with One Year Objectives</del> <del>Allocation Decision Support – PY20 Allocation Criteria</del>
01/04/19	<i>CCMHB/CCDDDB Online System opens for Agency Registration and Applications for PY20 Funding.</i>
01/23/19	<b>Regular Board Meeting</b>
1/25/19	<i>Agency PY2019 Second Quarter Reports Due</i>
02/08/19	<i>Agency deadline for submission of applications for PY2020 funding. Online system will not accept forms after 4:30PM.</i>

02/20/19	<b>Regular Board Meeting</b> List of Requests for PY20 Funding
02/20/19	<b>Study Session, 5:30PM</b> Navigating the Online Application and Reporting System
03/20/19	<b>Regular Board Meeting</b>
04/17/19	<i>Program summaries released to Board, copies posted online with the CCDDDB April 24, 2019 Board meeting agenda</i>
04/24/19	<b>Regular Board Meeting</b> Program Summaries Review and Discussion
04/26/19	<i>Agency PY2019 Third Quarter Reports Due</i>
05/15/19	<i>Allocation recommendations released to Board, copies posted online with the CCDDDB May 22, 2019 Board meeting agenda.</i>
05/22/19	<b>Regular Board Meeting</b> Allocation Decisions Authorize Contracts for PY2020
05/23/19-06/05/19	<i>Contract Negotiations</i>
06/26/19	<b>Regular Board Meeting</b> Approve FY2020 Draft Budget
06/27/19	<i>PY20 Contracts completed/First Payment Authorized</i>



## CCMHB 2019 Meeting Schedule

First Wednesday after the third Monday of each month--5:30 p.m.  
Brookens Administrative Center  
Lyle Shields Room  
1776 E. Washington St., Urbana, IL (unless noted otherwise)

*January 23, 2019*

*January 30, 2019 – SPECIAL MEETING and study session*

*February 20, 2019*

*February 27, 2019 – study session*

*March 20, 2019*

*March 27, 2019 – study session (optional, re: online review)*

*April 17, 2019*

*April 24, 2019 – study session*

*May 1, 2019 – TENTATIVE study session*

*May 15, 2019 – study session*

*May 22, 2019*

*June 19, 2019*

*July 17, 2019 – John Dimit Conference Room*

*September 18, 2019 – John Dimit Conference Room*

*September 25, 2019 – study session*

*October 23, 2019*

*October 30, 2019 – study session*

*November 20, 2019 – John Dimit Conference Room*

*December 18, 2019 (tentative) – John Dimit Conference Room*

*\*This schedule is subject to change due to unforeseen circumstances. Please call the CCMHB-CCDDB office to confirm all meetings.*