



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

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

Champaign County Developmental Disabilities Board (CCDDB) AGENDA

Wednesday, December 18, 2019, 8AM
Brookens Administrative Building
1776 E. Washington St., Urbana, IL 61802
John Dimit Conference Room

(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 Comments – Lynn Canfield
7. Approval of CCDDB Board Meeting Minutes* **(pages 3-8)**
Minutes from 11/20/19 are included. Action is requested.
8. New Business
 - A. Individual Mini-Grant Award Recommendations* **(pages 9-17)**
Included in the packet is a Decision Memorandum detailing the process and recommendations of the review committee and non-review staff. Board action is requested. Included for information are the committee's summary report and spreadsheet.
 - B. Unmet Need and Unspent Funding for Vocational Services* **(pages 18-22)**

Included in the packet is a Decision Memorandum detailing the results of efforts directed by the Board and staff recommendations for reallocation of PY2020 funds. Board action is requested.

C. Chicago Tribune Article (**pages 23-28**)

The Chicago Tribune article “Nearly 20,000 adults with developmental disabilities are waiting for help from the state to live on their own” is included for information only.

D. Board Direction

For board discussion of planning and funding. No action is requested.

E. 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.

9. Old Business

A. Meeting Schedules (**pages 29-31**)

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

B. Acronyms and Glossary (**pages 32-39**)

A list of commonly used acronyms is included for information.

10. CCMHB Input

11. Staff Reports (**pages 40-50**)

For information are reports from Kim Bowdry and Lynn Canfield

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 –November 20, 2019

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

DRAFT

8:00 a.m.

MEMBERS PRESENT: Gail Kennedy, Anne Robin, Sue Suter

MEMBERS EXCUSED: Deb Ruesch

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

OTHERS PRESENT: Danielle Matthews, Patty Walters, Annette Becherer, Heather Levingston, DSC; Becca Obuchowski, Hannah Sheets, Community Choices; Mary Rascher, Regional Planning Commission (RPC); Mel Liong, Jermaine Warren, PACE

CALL TO ORDER:

Dr. Kennedy called the meeting to order at 8:05 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.

DRAFT

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CITIZEN INPUT:

None.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

APPROVAL OF CCDDDB MINUTES:

Minutes from October 23, 2019 were included in the Board packet.

MOTION: Ms. Suter moved to approve the CCDDDB minutes from October 23, 2019. Dr. Robin seconded the motion. A voice vote was taken and the motion was passed.

FINANCIAL INFORMATION:

A copy of the claims report for two months was included in the Board packet for review and approval.

MOTION: Ms. Suter moved to accept the claims report as presented. Dr. Robin seconded the motion. A voice vote was taken and the motion passed.

NEW BUSINESS:

Board Direction:

No comments.

Successes and Agency Information:

An edited newsletter from Individual Advocacy Group (IAG) was included in the packet. Annette Becherer from DSC announced The Crow at 110 Open House generated \$750 in art sales. Becca Obuchowski from Community Choices reported on a job placement. Patty Walter from DSC announced the Tree of Hope event. Mel Liong from PACE reported on recent job placements.

UCP-LL Vocational Contract Unused Funds and Unmet Need:

A Decision Memorandum with options for redirection of unused funds was included in the packet.

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The CCDDDB PY2020 Vocational Services contract with UCP Land of Lincoln paid \$20,000 prior to contract termination. The total amount awarded for that program was \$60,000, through a fee for service contract. Our approach to fee for service is to 'advance and reconcile,' meaning that the first six monthly payments are each equal to 1/12 of the contract maximum and paid prior to services, and the second six payments are based on billings which have been submitted and approved; these payments also adjust for any 'overpayment' which may have occurred in the first six months. After receiving UCP-LL's 30-day notice terminating the program and contract, billings were reviewed and reconciled against the four months of advance payment, so that \$2,480 is to be returned to the CCDDDB, leaving \$42,480 unspent of the total amount awarded for agency allocations in May 2019. The Board has expressed an interest in innovative funding to support individuals who have I/DD. The return of unspent revenue presents an opportunity to develop and consider options.

Possible Options:

1. The remaining \$42,480 could be used to support the 20 PUNS-eligible people who were enrolled with UCP-LL's Vocational Services program. The Independent Service Coordination (ISC) unit is already involved with most of these individuals and could take on the rest under their PY2020 contract with the CCDDDB, helping these individuals find other services and supports for the remainder of this program year (to June 30, 2020). The amount of money available for the rest of the contract year equates to \$2,124 per person. Each could be offered the opportunity to direct the CCDDDB, with guidance from the ISC, to purchase services or supports on their behalf from an appropriate provider who agrees. With approval of the client and the ISC, the provider would contract with the CCDDDB and make necessary information available to CCDDDB and the County in order to receive payment for services.
2. If all of the individuals agreed to use one vocational provider, per their service plans with ISC support, and if the provider agreed to offer the indicated services, individual amounts could be combined for PY2020 contract of \$42,480 with that provider, with Board approval. CCDDDB staff have asked directors of Community Choices and DSC about their capacity to add any or all of the 20 people under their current contracts. DSC may have capacity within PY2020 Community Employment but would consider each individual's situation before offering services. Community Choices does not have capacity under the PY2020 Customized Employment program, but if all or a majority of the 20 individuals agreed to their services, the agency may be in a position to increase staff if the contract maximum were increased.
3. The Board might instead increase the mini-grant total amount, especially if eligible mini-grant applications exceed the \$55,460 set aside for allocation. As with Option 1 above, the individual mini-grant is meant to support self-determined services and individual budgeting, very new strategies for funding.
4. The Board might choose not to reallocate the unspent \$12,480 of the 2019 portion of this grant and instead allow it to increase the fund balance. During 2019, it was necessary to spend from fund balance and to borrow from the CCMHB, as tax revenue distributions occurred later than usual. The state's role in local tax determination was a factor, out of our control, and could again result in late payments and the need to spend fund balance.

If the board chooses Option 1 or 2, subsequent board action will be requested and based on recommendations developed with input from ISC staff, the individuals who had been served by UCP, and other agency service providers. If the board chooses Option 3, subsequent action will be requested through an increased total award amount for the current individual mini-grant application process.

If the board chooses Option 4, no additional board action will be required. The unspent 2019 amount (\$12,480) will go into fund balance, and the other \$30,000 reallocated in 2020.

Due to termination of the UCP-LL contract for Vocational Services, a total of \$42,480 is available, with \$12,480 to be spent during 2019 and up to \$30,000 during 2020. Given the timing, it is not very likely that the 2019 amount can be spent during 2019 if Option 1, 2, or 3; however, it is a very small amount compared to total Contributions and Grants amount budgeted for 2020, and the value of continuing the commitment to these individuals, through self-directed planning, is worth the risk.

Board members discussed the impact on the 20 individuals that are not receiving services from UCP. Kim Bowdry will organize a meeting with the ISC's to review the needs of the 20 individuals and keep services to them operating.

MOTION: Dr. Robin moved to approve the Executive Director and CCDDDB Staff to implement Option 1 as described in the memorandum. Ms. Suter seconded the motion. A roll call vote was taken. All members voted nay. The motion failed.

MOTION: Ms. Suter moved to approve the Executive Director and CCDDDB Staff to implement Option 2 as described in the memorandum with the following modification: Option 2--If all of the individuals agreed to use *more than* one vocational provider, per their service plans with ISC support, and if the provider agreed to offer the indicated services, individual amounts could be combined for PY2020 contract of \$42,480 with that provider, with Board approval. CCDDDB staff have asked directors of Community Choices and DSC about their capacity to add any or all of the 20 people under their current contracts. DSC may have capacity within PY2020 Community Employment but would consider each individual's situation before offering services. Community Choices does not have capacity under the PY2020 Customized Employment program, but if all or a majority of the 20 individuals agreed to their services, the agency may be in a position to increase staff if the contract maximum were increased. A roll call vote was taken. All members voted aye. The motion passed.



Individual Mini-Grant Update:

A Briefing Memorandum that summarized activities to date and next steps was included in the Board packet. Board and staff discussed the potential for additional funds to be allocated based on the number of requests and the dollar amount requested.

OLD BUSINESS:

CCDDB Three-Year Plan with FY2020 Objectives:

The final draft of the CCDDB Three-Year Plan was presented. A Decision Memorandum was included in the Board packet.

MOTION: Ms. Suter moved to accept the CCDDB Three-Year Plan with FY2020 Objectives as presented. Dr. Robin seconded the motion. A voice vote was taken and all members voted aye. The motion passed.

PY2021 CCDDB Allocation Priorities:

A CCDDB Decision Memorandum with proposed final draft of allocation priorities and decision support criteria for Program Year 2021 was included in the packet.

MOTION: Ms. Suter moved to accept the final draft of PY2021 CCDDB Allocation Priorities as presented. Dr. Robin seconded the motion. A voice vote was taken and the motion passed unanimously.

PY2021 CCMHB Allocation Priorities:

A Decision Memorandum on CCMHB Allocation Priorities for 2021 was included in the Board packet for information only.

First Quarter Program Reports:

Included in the Board packet for information only.

First Quarter Service Data:

Included in the Board packet for information only

Meeting Schedules:

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

Acronyms:

A list of commonly used acronyms was included in the packet.

CCMHB Input:

The CCMHB will meet later in the day.

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STAFF REPORTS:

Reports from Lynn Canfield, Kim Bowdry, Stephanie Howard-Gallo, and Shandra Summerville were included in the packet for review.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 9:05 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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





8.A.

DECISION MEMORANDUM

DATE: December 18, 2019
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Kim Bowdry, Lynn Canfield
SUBJECT: Individual Mini-Grant Award Recommendations

Background:

With over 200 Champaign County residents enrolled in PUNS and underserved, the CCDDB created a grant opportunity for those people to identify and request specific assistance to support their needs. This opportunity was made available to people who qualify for but are not receiving a state-waiver service or ongoing CCDDB or CCMHB funded service, who have a need or preference which can be met by one-time specific assistance, and who are not related to a CCDDB or CCMHB member or staff person. A NOFA was announced in the News-Gazette, on our application site, and distributed broadly through provider and stakeholder networks and email lists. Staff mailed application forms to the 246 eligible individuals in our database. Two were not County residents. We worked with the ISC on the 15 returned with 'address unknown,' updating our data.

A total of 56 applications were received by the deadline, with requests totaling \$153,268.30.

Non-review staff found the following applications to be ineligible, and they were not considered by the review committee. The requests total \$22,867.56:

Table with 3 columns: ID #, Requested, Ineligible reason (staff follow-up in parentheses). Rows include IDs 1, 3, 10, 36, 47, 50, 52, 53, 54 with corresponding amounts and reasons like 'enrolled in IDHS waiver-funded program'.

De-identified applications were distributed to review committee members: Sue Suter and Anne Robin, CCDDB Members; Mark Driscoll and Shandra Summerville, CCDDB Staff; and Linda Tortorelli, community member/family advocate.

The committee met three times for discussion and forwarded the following recommendations back to non-review staff, for the preparation of this memorandum for full Board review and approval. The review committee asked non-review staff questions about rules, process, and budget. While they

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did not direct any questions to applicants, several recommendations for CCDDDB staff include follow up with the applicants, which may result in referrals to programs, application for scholarships, or purchase of less expensive options. Attached is a full report from the committee regarding their work, recommendations, and suggestions for future 'mini-grant' application processes. The committee's spreadsheet has been incorporated into the body of this memorandum.

While the total initial amount approved for this individual award process was \$55,640, the CCDDDB discussed, during their November meeting, authorizing a higher total amount due to available funds.

Review Committee Recommendations:

The review committee recommends funding a total of \$67,308.02 of the requests, including some partial and some conditional, as follows:

<u>ID #</u>	<u>Requested</u>	<u>Recommended</u>	<u>ToPurchase (staff follow-up in parentheses)</u>
4	\$135	\$300	television
5	\$4,516.17	\$2,500	jacuzzi tub, shower fixture, partial fence (with applicant input); no installation
6	\$4,990.91	\$2,000	basketball court, deck, up to \$300 for Smart TV; no trampoline or X-box
7	\$5,000	\$2,500	service dog; fundraise the balance
8	\$5,000	\$2,000	toward MacBook Pro, fitness membership, iPhone 11 Pro, interview clothes; no CDL training
9	\$154.56	\$155	forearm crutches
11	\$6,598	\$2,000	various musical instruments, lessons
12	\$5,040.52	\$2,000	toward bicycle trailer; (seek camp scholarship)
16	\$5,221	\$5,000	two hearing aids
17	\$2,220	\$2,000	ONLY IF no scholarship, respite weekend & summer camp (Camp New Hope)
18	\$919.99	\$920	laptop and support animal, supplies
19	\$649.99	\$650	iPad
20	\$649.99	\$650	iPad
21	\$2,255	\$1,000	clothes, personal hygiene items, up to \$300 for TV; no xbox with subscription, no cable with internet
22	\$5,000	\$1,000	up to 20 sessions with reading tutor
23	\$2,356	\$1,400	\$650 for iPad; Larkin's Place, YMCA swim lessons ONLY IF scholarship is denied; no CUSR Summer Camp
24	\$1,148.99	\$1,149	laptop, router, orthopedic shoes
25	\$3,500	\$2,250	dental work through Familia Dental; up to \$650 for iPad
26	\$2,877.19	\$1,350	up to \$700 for iPhone, up to \$650 for iPad; no Segway
27	\$4,565.94	\$2,500	toward video equipment and laptop (with applicant input)
28	\$2,577.93	\$1,159	Apple watch, c-pen reader, up to \$650 for iPad; no scale or security camera
29	\$1,062	\$1,062	YMCA membership ONLY IF scholarship is denied
30	\$4,044	\$2,024	\$100 boots, up to \$650 for iPad, \$500 bike, \$325 mattress, \$149 window, up to \$300 for TV; no door, dryer, X-box, food, or rent

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31	\$4,627.88	\$2,315	one of two requested car seats (seek family input on options)
32	\$3,254.87	\$1,500	single trike bike; no Terra Trike tandem (seek family input)
33	\$5,000	\$2,500	with request #34, \$5,000 for bathroom remodel materials
34	\$5,000	\$2,500	with request #33, total \$5,000 (above)
35	\$2,174.67	\$1,685	\$519 laptop, \$488 bed w/ desk, \$240 bike, \$240 Planet Fitness membership, \$198 sewing machine/kit; no to hoverboard and driving school due to no documentation (inform family that Marion Joy Hospital will assess person's capacity to drive)
37	\$3,750	\$1,000	cooking class (suggest they consider a less expensive option)
38	\$5,000	\$2,500	materials for accessible bathroom remodel; no installation
39	\$818.33	\$818.33	laptop, GoTalk9, GoTalk overlay software, Bear Hug vest, Snug earmuffs protectors
40	\$553.15	\$844	up to \$650 for iPad, screen protector, case, TouchChat app
42	\$1,025.98	\$1,025.98	laptop with finger print reader
44	\$4,880	\$1,840	camp, respite weekends; no to speech therapy and Bowflex
45	\$340.71	\$340.71	Kindle Fire tablet with kid-proof case, noise canceling headphones, beanbag chair
46	\$3,322.99	\$2,000	gas and car expenses and lunch while traveling for doctor and therapy, Schwinn bike, computer, clothing, shoes, weight machine, karate school and uniform, dental work (solicit client and family input on purchases and travel expense to be paid with award)
48	\$3,750	\$2,500	materials for accessible bathroom; no installation
49	\$5,000	\$2,000	shower chair, detachable showerhead, reclining beauty chair, blood pressure machine, stethoscope, Zinus Night Therapy Cooling memory foam, weighted blankets, wall padding, keyboard – piano, TV, DVD player, stereo headphones, (solicit client and family input on purchases from items listed to be paid from award)
51	\$6,680.34	\$2,500	fence materials; no installation
55	\$650	\$650	driving lessons (inform family that Marion Joy Hospital will assess person's capacity to drive)
56	\$2,460	\$1,220	afterschool program "Kids Plus" and computer (seek Park District scholarship)

The review committee recommends denying a total of \$24,507.20 for the following requests:

<u>ID #</u>	<u>Requested</u>	<u>ToPurchase (staff follow-up in parentheses)</u>
2	\$3,000	services (refer applicant to relevant provider/s)
13	\$5,000	tuition for National Lewis University
14	\$5,000	day program services from Piatt County provider
15	\$5,000	automobile
41	\$1,273.20	rent and water bill assistance
43	\$5,234	automobile

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Next Steps:

For those applicants not receiving an award, staff will send a follow-up letter and, where appropriate, provide information about an existing support or program, which may help the applicant meet their stated need.

CCDDB staff will contact those receiving partial or full funding of their request. CCDDB staff and applicant will complete a formal agreement, identify vendor and best value, and meet any conditions (identified above) per CCDDB approval. Conditions such as scholarship application may require case management support. CCDDB staff will complete each purchase and request that the applicant submit a brief report on the impact, 3 months after the purchase has been made.

Several promising suggestions for any future similar grant opportunity have been made by review committee members and CCDDB members and staff. Because this is our first project focused on self-directed supports in this way, we do not yet know what to expect of the next steps and therefore hesitate to recommend terms of a future mini-grant process at this time.

If, during the negotiation of an agreement or the identification of vendor and best value, we discover that the award cannot be completed as recommended, we will inform the Board and seek further guidance.

Decision Section:

Motion to approve funding as recommended by the Review Committee in this memorandum:

- Approved
- Denied
- Modified
- Additional Information Needed

Motion to authorize the CCDDB Executive Director and Staff to implement the next steps as described in this memorandum:

- Approved
- Denied
- Modified
- Additional Information Needed

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CCDDB Mini-Grant Review Committee Report

Members: Dr. Anne Robin (Chairperson), Sue Suter, Linda Tortorelli, Shandra Summerville, Mark Driscoll (Secretary)

Purpose: To review all eligible applications submitted under the mini-grant RFP and prepare recommendations for individual awards, and as appropriate, provide feedback on the process for future consideration.

The Mini-Grant Review Committee met three times:

November 19, 2019 – Organizing meeting with discussion of how to proceed with the review process, guidelines for completing the reviews, and assignment of lead reviewers. Some feedback on the process were identified. Question of whether additional funds may be released due to the volume of requests was deferred as the CCDDB was expected to discuss this matter at its meeting on November 20, 2019 (The CCDDB did acknowledge if Committee recommendations exceeded initial allocation, additional funds could be reallocated to this purpose).

November 26, 2019 – Lead reviewers presented observations on assigned applications with funding recommendations. All forty-seven eligible applications were discussed, initial recommended awards identified. Where a full request was not approved, approved items within requests were noted. Five applications were denied with no amount recommended.

December 3, 2019 – Initial mark-up of recommendations discussed at November 26, 2019 meeting were reviewed. Some notes on the recommendations including questions and other observations were discussed and resolved. Committee agreed on final recommendations. See Recommendations spreadsheet for details on funding recommendations. All decisions were by consensus.

Guidance to staff on approved items or services is included on the spreadsheet. It is also recommended where possible, purchases of like items be negotiated to obtain the best price. And that an evaluation of the awards be made to determine how effective or beneficial the grant was to the person. Staff are asked to establish the process and conduct the evaluation.

Feedback for consideration if mini-grant RFP process were to be repeated:

- Question of capital improvement to residence/property as an eligibility activity be addressed;
- Is transportation related request eligible, if so provide parameters;
- Recommend lower cap be established for total request;
- Multiple items and /or services within a request be prioritized by the applicant, and;
- Documentation of denied scholarship to programs or organizations be required before grant award.

Individual award recommendations are included on the spreadsheet.

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Client ID	Request	Fund: Yes/No	Recommendation	Review Committee: Guidance to staff on recommendations
2	\$ 3,000.00	N		request denied to pay for services. Recommend staff refer applicant to provider for intake.
4	\$ 135.00	Y	\$ 300.00	TV allowance up to \$300
5	\$ 4,516.17	Y	\$ 2,500.00	purchase of materials not installation: jacuzzi, shower fixture, fence (partial). solicit client input on purchase materials
6	\$ 4,990.91	Y	\$ 2,000.00	No trampoline, no X-box; solicit client input on purchases for basketball court, deck, and TV allowance up to \$300
7	\$ 5,000.00	Y	\$ 2,500.00	fundraise balance needed to acquire service dog
8	\$ 5,000.00	Y	\$ 2,000.00	CDL training not approved; solicit client input on purchases: Apple MacBook Pro plus other purchases.
9	\$ 154.56	Y	\$ 155.00	forearm crutches
11	\$ 6,598.00	Y	\$ 2,000.00	purchase of instruments or lessons
12	\$ 5,040.52	Y	\$ 2,000.00	funds offset cost of trailer; pursue scholarship for camp.
13	\$ 5,000.00	N		request denied to pay for tuition
14	\$ 5,000.00	N		request denied to pay for services from out of county provider for day program services
15	\$ 5,000.00	N		request denied to purchase automobile
16	\$ 5,221.00	Y	\$ 5,000.00	purchase two hearing aids
17	\$ 2,220.00		\$ 2,000.00	Camp New Hope respite weekend and summer camp. Request scholarship first.
18	\$ 919.99		\$ 920.00	laptop and support animal

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19	\$	649.99	\$	650.00	IPAD allowance up to \$650
20	\$	649.99	\$	650.00	IPAD allowance up to \$650
21	\$	2,255.00	\$	1,000.00	Y: clothes, personal hygiene items, TV allowance up to \$300. N: xbox, no internet.
22	\$	5,000.00	\$	1,000.00	Y: reading tutor, up to 20 sessions
23	\$	2,356.00	\$	1,400.00	Y: IPAD allowance up to \$650, apps, Larkin's Place, YMCA swim lessons (Request scholarship first). CUSR Summer Camp denied
24	\$	1,148.99	\$	1,149.00	Laptop, router, orthopedic shoes
25	\$	3,500.00	\$	2,250.00	Dental work (Familia Dental), and IPAD allowance up to \$650
26	\$	2,877.19	\$	1,350.00	Allowance for phone purchase (\$700) and IPAD allowance up to \$650. Segway item denied
27	\$	4,565.94	\$	2,500.00	Solicit client input on purchase of video equipment/laptop
28	\$	2,577.93	\$	1,159.00	yes: purchase of watch, c-pen reader, and IPAD allowance up to \$650; Scale and security camera denied
29	\$	1,062.00	\$	1,062.00	must first apply for scholarship YMCA/Larkin's Place. Purchase if denied.
30	\$	4,033.00	\$	2,024.00	Y: boots (\$100), IPAD allowance up to \$650, bike (\$500), mattress (\$325), window (\$149), TV allowance up to \$300; N: door, dryer, X-Box, food, rent
31	\$	4,627.88	\$	2,315.00	Purchase one car seat; May ask for more information from family on car seat choices/options.
32	\$	3,254.87	\$	1,500.00	purchase single trike bike; no tandem. May ask for more information from family on choices/options.
33	\$	5,000.00	\$	2,500.00	Combined application (#33+#34), total award \$5000 for purchase of materials;
34	\$	5,000.00	\$	2,500.00	See above
35	\$	2,174.67	\$	1,685.00	Y: laptop (\$519), bed w/ desk (\$488), bike (\$240), PF membership (\$240), Sewing machine/kit (\$198); N: hover board, driving school (no supporting documentation). Inform family Marion Joy Hospital will assess person's capacity to drive

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37	\$	3,750.00	Y	\$	1,000.00	Suggest applicant consider other less expensive cooking class options.
38	\$	5,000.00	Y	\$	2,500.00	purchase of materials not installation.
39	\$	818.33	Y	\$	818.33	request approved as submitted
40	\$	553.15	Y	\$	844.00	IPAD allowance up to \$650, plus other requested items
41	\$	1,273.20	N			request denied for rent and water bill assistance
42	\$	1,025.98	Y	\$	1,025.98	laptop with finger print reader
43	\$	5,234.00	N			request denied to purchase automobile
44	\$	4,880.00	Y	\$	1,840.00	Y: camp, respite weekends. N: speech therapy, bowflex
45	\$	340.71	Y	\$	340.71	request approved as submitted
46	\$	3,322.99	Y	\$	2,000.00	solicit client/family input on purchases and travel expense to be paid with award
48	\$	3,750.00	Y	\$	2,500.00	purchase of materials not installation.
49	\$	5,000.00	Y	\$	2,000.00	solicit client/family input on purchases from items listed in application to be paid from award
51	\$	6,680.34	Y	\$	2,500.00	purchase of fence materials, not installation. Offsets portion of total expense
55	\$	650.00	Y	\$	650.00	purchase of driving lessons. Inform family Marion Joy Hospital will assess person capacity to drive
56	\$	2,460.00	Y	\$	1,220.00	purchase of afterschool program "Kids Plus" and computer. Apply to Park District for scholarship as request denied.
Requested:	\$	153,268.30	Recommended:	\$	67,308.02	
Available:		\$55,640	Difference	\$	11,668.02	Difference between total recommendations and total funds available

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Ineligible					
1	\$	4,470.00			
3	\$	1,080.78			
10	\$	4,000.00			
36	\$	220.00			
47	\$	3,898.78			
50					
52	\$	4,599.00			
53	\$	2,399.00			
54	\$	2,200.00			
	\$	22,867.56			

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S.B.

DECISION MEMORANDUM

DATE: December 18, 2019
TO: Members, Champaign County Developmental Disabilities Board (CCDDDB)
FROM: Lynn Canfield, Kim Bowdry
SUBJECT: Unmet Need and Unspent Funding for Vocational Services

Background:

The CCDDDB paid \$20,000 to UCP Land of Lincoln for Vocational Services prior to contract termination. The total amount awarded for the program had been \$60,000, through a fee for service contract. Billings were reviewed and reconciled against the four months of advance payment, so that \$2,480 is to be returned to the CCDDDB, leaving \$42,480 unspent of the total amount awarded for agency allocations in May 2019. We have sent letters about this issue and the need for a FY2019 audit to both the UCP leadership and to the director of SPARC, which acquired the agency.

At their November 20th board meeting, the CCDDDB discussed four options which had been developed by staff, declining to pursue three of them and modifying one to place more control over future services into the hands of the individuals who had been served by UCP-LL and incorporating the discretion of two other agencies currently funded to provide similar services. The CCDDDB requested more information regarding unmet individual needs and agency capacity to serve.

Unmet Individual Needs:

The CCDDDB-funded CCRPC Decision Support Person-Centered Planning program, through the Independent Service Coordination (ISC) Unit is currently providing conflict free case management to 17 former UCP participants. The ISC staff consulted with each about their future support needs and desires. Of those 17 people, six are currently seeking employment. Eleven are employed throughout the community and in need of varying vocational supports at this time.

One person noted that they would prefer to move forward with Community Choices as their employment service provider. The remaining 16 people did not express a preference of provider.

Six of the 17 people requested general case management (figuring out insurance issues, purchasing orthopedic shoes, coordinating repairs on their home, finding rent assistance, etc.) in addition to employment supports. All 17 will continue working with CCDDDB funded ISCs, unless they choose to discontinue those services. Two people requested transportation supports. Four people expressed an interest in Home-Based Support Services, a state-funded program.

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Four people are also currently working with the CCDDDB-funded Rosecrance Coordination of Services DD/MI program, one with the CCDDDB-funded DSC Service Coordination program, and one with the Illinois Department of Human Services Division of Rehabilitation Services (DRS). Another has requested and has been referred to DRS.

In short, some of the service and support preferences identified by these individuals may be available through existing agency capacity and other resources.

Agency Capacity to Serve:

CCDDDB staff also worked with agency representatives on the question of whether former UCP clients could be served through DSC's Community Employment program or Community Choices' Customized Employment program. Responses were requested by December 6 in order to bring actionable items to the CCDDDB.

Attached is a proposal from Community Choices, to work with 9 of the people identified from the UCP service roster. Customized Employment supports would be made available on a first-come, first-served basis. The total request would add staff capacity to meet those needs. The total is \$19,116 for six months of service.

DSC responded to the request with a plan to consider each case individually through their intake process, prior to offering services.

Recommendations:

CCDDDB staff recommend approving the submitted proposal for additional funding to serve 9 former UCP clients with supports as identified. The PY2020 Customized Employment contract #DDB20-095 would be amended by \$19,116, increasing the contract maximum to \$118,016. (Annualized, this maximum would be \$137,132.)

A total of \$42,480 is available. If the CCDDDB approves Community Choices' request, \$23,364 remains unallocated. A portion could be directed to pay for specific assistance awarded through the mini-grant process. While this would benefit a different group of people, their eligibility and preferences for support have been identified and reviewed. Staff recommend directing \$4,248 for this purpose, holding the other \$19,116 for the PY2021 agency allocation process.

Budget Impact:

Due to termination of the UCP-LL contract for Vocational Services, a total of \$42,480 is available for the current agency contract year (Program Year 2020).

Increasing the Community Choices Customized Employment contract by \$19,116 does not change the total amount allocated for services and supports for the PY2020 period. This additional service capacity would cost \$38,232 for a full year.

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Adding \$4,248 to what can be spent toward mini-grant requests in 2020 does not impact the total amount allocated for services during PY2020 and does not decrease what might be allocated for PY2021 contracts.

Because the program year bridges the CCDDB's fiscal year, funds which were meant to be spent during 2019 may be requested from fund balance to spend during 2020, if necessary.

Decision Section:

Motion to approve amending the PY2020 Community Choices Customized Employment contract as described in this memorandum and in the attached proposal:

- Approved
- Denied
- Modified
- Additional Information Needed

Motion to approve increasing the amount of funding available for allocation through the 'mini-grant' process as described in this memorandum:

- Approved
- Denied
- Modified
- Additional Information Needed

COMMUNITY CHOICES PROPOSAL TO SUPPORT UCP PARTICIPANTS – FY20

Context: It is our understanding that there are between 17 and 20 individuals that had been receiving support from UCP to find or maintain their employment. These individuals have since been left without support following UCP's exit from the community. Of these individuals it seems that 6 are seeking employment and 11 are employed and in need of some level of ongoing support.

Intent: Community Choices would like to support as many of the UCP clients as is feasible given the overall capacity of the organization. At this time, we would be willing to increase the number of overall Employment Department staff by .5 FTEs (Full Time Employees) to serve these individuals.

Proposal: Because the support needed by people at different points in the employment process varies, we have broken down the support we are able to provide into three categories – Support to Job Seekers, Job Coaching Support, and Ongoing Support.

Support to Job Seekers: Support will be made available to 3 Individuals Seeking Jobs

Job Coaching Support: Support will be made available to 1 Individual in active Job Coaching (i.e. needing more than 25% one-on-one job coaching support while at work).

Ongoing Support: Support will be made available to 5 Individuals Maintaining Jobs.

With the increase in staff by .5 FTEs we believe that we will be able to provide prompt support to these 9 people. Because of the different types of supports needed at different phases of the overall employment process, we feel that differentiating between these groups of individuals will ensure that we are able to provide robust support to those involved.

Support Explanation: The support we would provide to these individuals would match as closely as possible the support that we provide to others working with us. Individuals supported as part of this proposed agreement would be asked to agree to the expectations of anyone who chooses to use our services.

Support Summary:

For Job Seekers, we will start by using our Discovery process to determine the direction of the job search depending on the interests, environment, and activities that are desired and would be the best possible match for the person. We would engage with their family or team as part of Discovery and in development of their Employment Plan. Job development would then include support identifying, resume building, applying for, and interviewing with employers. Though we do feel that there is great value in the Discovery process, if the person already is actively applying for or has job leads, we would support them in following up on those.

For Job Coaching, we will be with the person on the job for 25-100% of the time they are working for a period of time determined by their support need. In general, we work to fade our supports back as the person gains skills and is able to rely on their co-workers and supervisors for guidance if needed. This schedule of fade-back is determined on a person by person basis.

For individuals who are employed, we would start by determining what type of support they are in need of, developing rapport, and connecting with their employers. It is difficult to say beyond this exactly what support will be needed, given that we do not yet know the persons involved. Some of the supports

that could be offered would mirror those available to any individuals working with us when employed. This could include: Job coaching, developing tools to support on the job, supporting the person to develop natural supports at work, being a touchstone and resource to employers and supervisors, collaborating with families to work out logistics, and being available to answer questions about work's impact on benefits.

Access: We are currently not able to support all of the individuals once supported by UCP, but we hope to be equitable in the process of determining those who we can serve. **To do this we will use a first come first served basis to fill the 9 proposed openings** (3 for job seekers, 1 for those needing job coaching, and 5 for those maintaining employment). We will be in communication with the staff at the CCDDDB and the Independent Service Coordinators (ISCs) who are available to support these individuals to identify service providers.

Individuals interested in working with us would be asked to come to a meeting to ensure that they understand how our supports work. If they choose to move forward with us, we would have them go through our normal intake process to gather necessary documentation. Services would then be able to start with their Employment Specialist.

Any individuals who come to us after we have filled these 9 openings will be welcome to join our general Employment waiting list. From here they will be served in order of entry.

Budget: To provide support to these 9 individuals we would request **\$19,116 to cover the last 6 months of FY20**. This amount would cover the salary of a .5FTE for 6 months along with taxes, benefits, and some operating costs (Phone, Transportation, Training Expenses, etc). When broken down this amount comes to the Fee-for-Service amount of \$2,124 per person served as described in the Briefing Memo from the 11/20/19 CCDDDB Meeting.

Timeline: We are currently in the process of hiring and would expect have a staff person start in January.

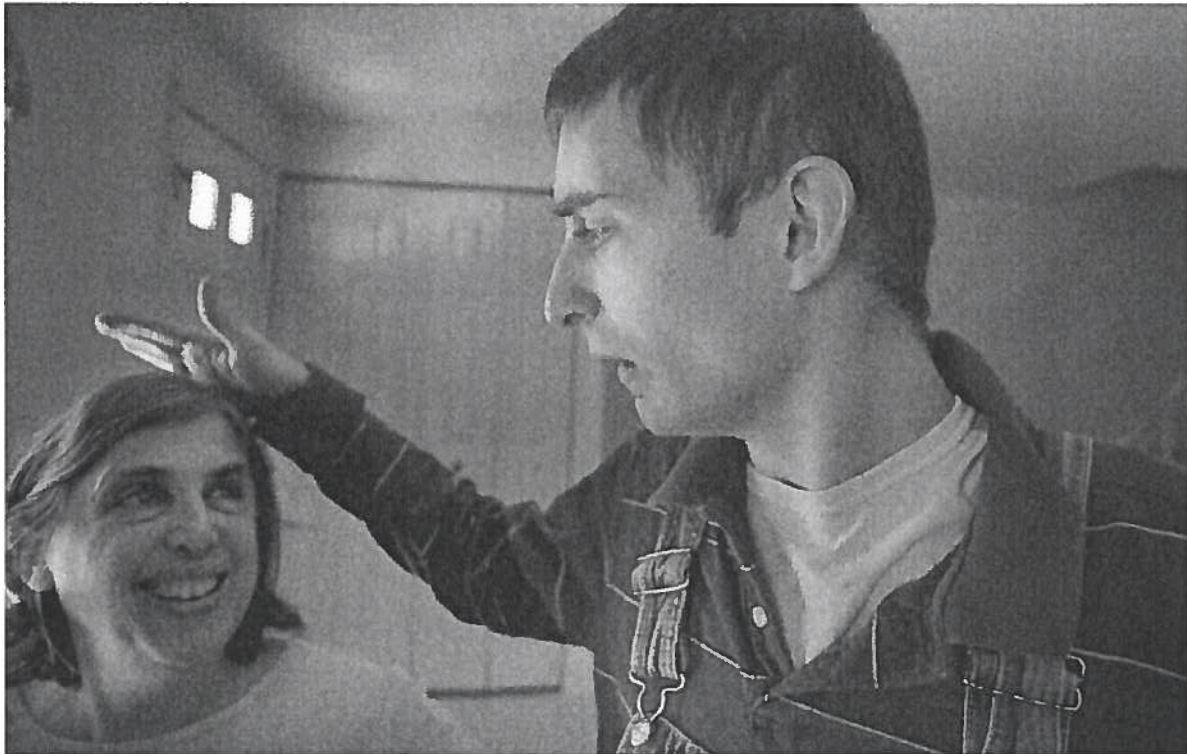
Summary: For \$19,116 we can provide support to 9 individuals previously served by UCP for the remaining 6 months of FY20. Of these 9 people, 3 openings would be for Job Seekers and 1 for those needing Job Coaching and 5 for those Maintaining Employment.

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8.C.

Nearly 20,000 adults with developmental disabilities are waiting for help from the state to live on their own.

By MARIE FAZIO
CHICAGO TRIBUNE |
DEC 03, 2019 | 7:22 AM



Susie Redfern and her son, Nick, who has autism, at their Aurora home on Nov. 13, 2019. The Redferns have been on the Prioritization for Urgency of Need for Services list, a waitlist for disabilities services in Illinois for years. (Antonio Perez / Chicago Tribune)

Nick Redfern, diagnosed with autism, filled his school days with lessons and field trips that taught him skills he needs for a life on his own.

But that all changed when he turned 22.

Aging out of the state's public special education system, Nick now stays at home, where his mother worries he is becoming more and more isolated and losing what he has learned. She wants to get him into adult programs funded by the state that would continue his training and maybe even set him up in a group home.

Susie Redfern has been waiting for a spot to open for three years. Her son is now 25.

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“I’m hoping he’ll have activities and work every day and get the support he needs to basically have a life that’s more than just me and my husband,” Redfern said. “Because we’re not going to be here forever.”

Nick is among nearly 20,000 disabled adults in Illinois who are on a waiting list to get into adult programs. Many of them come from families who don’t have a way to pay for home care, job coaches or other services.

Most wait an average of seven years before they are selected, despite a court order in 2011 that Illinois shrink the list and do other things to improve how it serves developmentally disabled adults.

One family told the Tribune they signed up their child when he was just 5 and he still did not get a spot when he turned 22 this year.



Nick Redfern, 25, at home in Aurora on Nov. 13, 2019. He has been on a waitlist for disabilities services in Illinois for several years. (Antonio Perez / Chicago Tribune)

At a hearing in October, U.S. District Judge Sharon Johnson Coleman said the state was still not complying with the order. As a result, she said people have “suffered substantially” and called the current situation “for lack of a better phrase, messed up.” Experts in the field say parents are quitting jobs to take care of their children and even moving to other states.

“The truth of the matter is, we’re in the midst of a crisis,” said Rebecca Clark, CEO of the Anixter Center, which provides day programming, residential group homes and other services for people with disabilities. “Keeping people engaged in programs is so critical because it allows them to continue to move forward toward their independence and meaningful lives and potentially job experiences.”

A gap in services can cause “magnificently terrible” setbacks, she added.

‘Paying lip service’

The Illinois Department of Human Services provides funding for a variety of services for people with disabilities, from small group housing to larger facilities with nine or more residents, sometimes hundreds. It also offers home-based services that include day programs in the community, adaptive equipment and job training.

Fifteen years ago, a federal lawsuit accused the department of failing to provide community and home-based services to those who wanted them. It said the agency used an “antiquated system of serving people with developmental disabilities that relies heavily on large public and private institutions.”

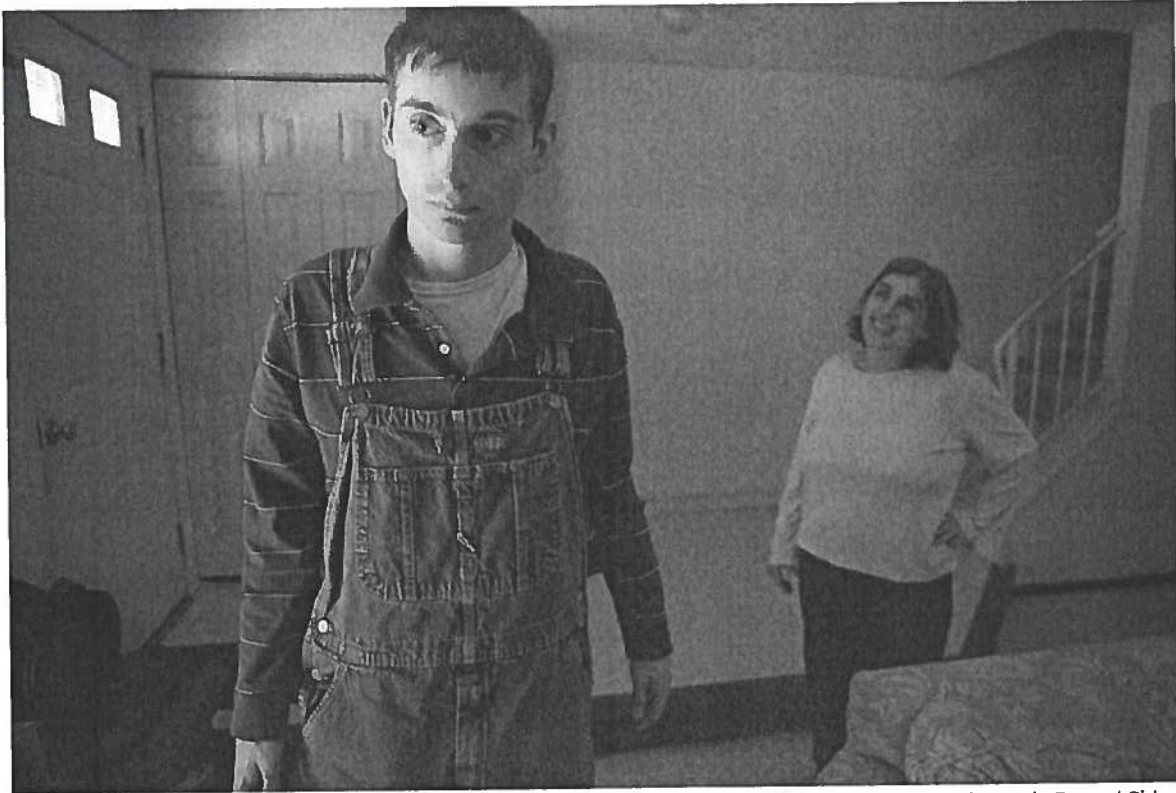
The lawsuit estimated that 6,250 people lived in these larger institutions, which it described as “segregated and isolated from the rest of society,” where the residents are denied “experiencing the dignity and freedom of living in the community as normally as possible.”

“While paying lip service to the value of community-based programs, defendants have made paltry efforts to reduce the state’s reliance on large institutions or to expand Illinois’ community-based programs,” the lawsuit added.

A federal judge agreed, and in 2011 issued a consent decree requiring the state to provide such programs to those who requested them. It gave the state six years to provide individuals living in large institutions with community based living arrangements, if they wanted them, and give community services to an additional 3,000 people who were waiting at home. After that, the state agreed to move people off the list “at a reasonable pace.”

The list is a statewide database known as Prioritization for Urgency of Need for Services. The department uses this data to select people as funding becomes available. The agency says its selection is based on length of time on the list, urgency of need and where the person lives, but confusion about the process is common among those who are waiting. As of Nov. 15, the Human Services Department said 19,474 people were currently on the list. Ronnie Cohn, a monitor appointed by the court, told the Tribune the state has met numerical benchmarks for the first six years of the consent decree, but it’s too soon to tell whether people are being served at a reasonable pace. She said there is definite room for improvement both in terms of the number of people served and the quality of resources available.

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Nick Redfern, who has autism, with his mother Susie Redfern at their Aurora home on Nov. 13, 2019. (Antonio Perez / Chicago Tribune)

'Perpetual motion machine'

Nick has been on the waiting list for seven years. The last time his mother checked with the department, she was told he may be selected in the spring but there was no guarantee. Redfern isn't too hopeful. She's met families whose children are in their 30s or 40s and have been on the list for more than 10 years.

"It's difficult unless you have the resources yourself," Redfern said. "It may take a while but right now ... because we've not been picked, we don't have any support from anybody on trying to figure this out and getting him moving forward."

Redfern said Nick has increasingly been displaying behavioral issues and anxiety because he lacks regular interaction with peers and ways to build skills. She calls her son a "perpetual motion machine."

In her Aurora home recently, an eclectic collection of pop music drifted down the stairs from Nick's room as a lunch of cheddar cheese, marinara sauce and toast sat waiting at the kitchen table. He thrives on routine, so she prepares this meal almost every day.

Nick sat down at the table and asked his mother for water and more cheese using his limited vocabulary. These days, Nick's activities include working occasionally at a greenhouse in West Chicago, swim lessons once a week or trips to the doctor. Nick and his mother sometimes walk in the neighborhood or drive to the mall.

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"The more you go without structured activities on a daily basis, the more you can have behaviors, partly out of boredom," Redfern said. "His whole mindset is different now after three and a half years."

Nick has been deemed unsuitable for several job programs, so Redfern said she's hoping to create a customized employment program, like lining up special jobs for him.

But the family can't pay for the one-on-one attention Nick needs. "He wants to be helpful, do things and be productive," Redfern said. "There just isn't that much that I can get going for him and it's frustrating for me and I think it is for him too."

'Completely heartbreaking'

Josh Long, principal of Southside Occupational Academy, said fewer than 5% of his students have been selected from the list after they age out of his school.

"People lose all the skills they've established over the years," he said. "It's completely heartbreaking. We're very powerless in this situation."

Southside Occupational specializes in preparing people with developmental disabilities for the transition into the adult world. When students begin at the school, Long makes sure they're on the state list. He estimated that 40% of students' families were unaware of its existence, which likely means the number of people in need of adult services far exceeds 20,000.

"We should walk you hand in hand to adult services, but what happens is we're pushing you off a cliff," Long said. "We don't do this to any other group of people."

When his students leave school, some move into group community homes or receive job offers through internships. But others go from an active lifestyle filled with social interaction to "sitting on the couch, waiting for funding," he said.

"It's absolutely essential," he said of getting into adult programs. "(It's) the gateway to opportunity in terms of being an adult with disabilities. It's an all or nothing thing."

Tonia Stigger's son, Pierre, has been diagnosed as being on the autism spectrum. He attended Southside Occupational until his 22nd birthday this summer. Stigger placed her son on the list when he was 5, meticulously keeping his application up to date each year. He still has not been selected.

"Everything I can do for Pierre to continue to grow and continue to live and be happy, I will," Stigger said. "And I'm not waiting on (the list) to make sure I can do that."

Even when Pierre does get chosen, Stigger worries that there won't be programs that match his needs.

Minimum pay

Many providers have a hard time finding and keeping skilled staff for group homes and other programs, according to filings in the case. The state reimburses providers less than the minimum wage for workers, forcing organizations to skimp on staffing or make up the difference in wages themselves.

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During a four month period in 2019, one Chicago-based agency turned away 46 referrals for services, citing safety concerns due to a lack of adequate staff, according to court documents. The same agency reported a 41% turnover rate for employees in its community group homes, which contributed to the agency operating at a \$2 million deficit in 2019.

At Anixter, the difference between state reimbursement and what the organization pays employees creates a deficit of about \$580,000 in wages, Clark said.

The Illinois attorney general's office, in a recent filing, said the staffing problems have resulted in "restrictions in community integration opportunities, overworked staff and significant overtime being paid."

The office specifically criticized the Human Services Department for being late in implementing a 3.5% rate increase for community-based providers. The raise is not scheduled to go into effect until January and will be retroactive to July of this year. But even if the increase is entirely applied to workers' pay, as recommended, it will barely equal the minimum wage in Chicago.

"We are asking minimum wage workers to be highly skilled and to understand behavior and disability and we can't pay them for that expertise," Clark said. "If they think \$13 an hour will solve the problem, I'm worried the system will collapse on itself."

Kathy Carmody, CEO of the Institute on Public Policy for People with Disabilities, traces the problems to years of political decisions by both parties. "This is an Illinois issue," she said. "There is a decades long history of decay and neglect, but we have to start righting the ship to ensure that the community services remain an option for people."

For Redfern, that option means setting up her son to live a fulfilling life. "What plan do we create, and how do we make that happen, so at some point for the rest of his life he's interacting with peers, he's doing stuff, he's working, he's starting to get a life?"

Until then, she waits.

<https://www.chicagotribune.com/news/breaking/ct-waitlist-disability-funding-20191203-i3ktc2udvbg2he3prayolglwdq-story.html>

*This story was featured in our Daywatch newsletter. **[Sign up here to start your day with our top stories.](#)***

*It was also featured in our smart speaker briefing. **[Here's how to listen on your device.](#)***

mfazio@chicagotribune.com

Marie Fazio

CONTACT

Marie Fazio is the 2019 Don Wycliff fellow at the Chicago Tribune. A recent University of Notre Dame graduate, she has previously written for the Florida Times-Union, based in her hometown of Jacksonville, Fla., and the Pittsburgh Post-Gazette.

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CCDDB 2019-2020 Meeting Schedule

Board Meetings

8:00AM except where noted

Brookens Administrative Building

1776 East Washington Street, Urbana, IL

December 18, 2019 – John Dimit Conference Room (8AM)

January 22, 2020 – Lyle Shields Room (8AM)

February 19, 2020 – Lyle Shields Room (8AM)

March 18, 2020 – Lyle Shields Room (8AM)

April 22, 2020 – Lyle Shields Room (8AM)

May 20, 2020 – Lyle Shields Room (8AM)

June 17, 2020 – Lyle Shields Room (8AM)

July 22, 2020 – Lyle Shields Room (8AM)

August 19, 2020 – Lyle Shields Room (8AM)

September 23, 2020 – Lyle Shields Room (8AM)

October 21, 2020 – John Dimit Conference Room (8AM)

November 18, 2020 – John Dimit Conference Room (8AM)

December 16, 2020 – Lyle Shields Room (8AM)

This schedule is subject to change due to unforeseen circumstances.

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

DRAFT

July 2019 to June 2020 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 2020. 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 2021 (July 1, 2019 – June 30, 2020) and deadlines related to current (PY2020) agency contracts.

07/10/19	Regular Board Meeting (Lyle Shields Room) Election of Officers
08/30/19	<i>Agency PY2019 Fourth Quarter and Year End Reports Due</i>
09/18/19	Regular Board Meeting (Dimit Conference Room)
10/23/19	Regular Board Meeting (Dimit Conference Room) Draft Three Year Plan 2019-2021 with 2020 Objectives Release Draft Program Year 2021 Allocation Criteria
10/25/19	<i>Agency PY2020 First Quarter Reports Due</i>
10/28/19	<i>Agency Independent Audits, Reviews, or Compilations Due</i>
11/20/19	Regular Board Meeting (Dimit Conference Room) Approve Three Year Plan with One Year Objectives Allocation Decision Support – PY21 Allocation Criteria
12/08/19	<i>Public Notice to be published on or before this date, giving at least 21-day notice of application period.</i>
12/18/19	Regular Board Meeting (Dimit Conference Room) Mini-grant award recommendations
01/03/20	<i>CCMHB/CCDDDB Online System opens for Agency Registration and Applications for PY21 Funding.</i>
01/22/20	Regular Board Meeting
01/31/20	<i>Agency PY2020 Second Quarter and CLC Progress Reports Due</i>
02/07/20	<i>Agency deadline for submission of applications for PY2021 funding. Online system will not accept forms after 4:30PM.</i>



02/19/20	Regular Board Meeting List of Requests for PY21 Funding
03/18/20	Regular Board Meeting
04/15/20	<i>Program summaries released to Board, copies posted online with the CCDDDB April 22, 2020 Board meeting agenda</i>
04/22/20	Regular Board Meeting Program Summaries Review and Discussion
04/24/20	<i>Agency PY2020 Third Quarter Reports Due</i>
05/13/20	<i>Allocation recommendations released to Board, copies posted online with the CCDDDB May 20, 2020 Board meeting agenda.</i>
05/20/20	Regular Board Meeting Allocation Decisions Authorize Contracts for PY2021
06/17/20	Regular Board Meeting Approve FY2021 Draft Budget
06/24/20	<i>PY21 Contracts completed/First Payment Authorized</i>
08/28/20	<i>Agency PY2020 Fourth Quarter Reports, CLC Plan Progress Reports, and Annual Performance Measures Reports Due</i>
10/28/20	<i>Agency Independent Audits, Reviews, or Compilations Due</i>

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9.B.

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.

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

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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

LGTBQ – 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

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, PY18 is July 1, 2017 to June 30, 2018. 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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Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – December 2019

CCDDDB Reporting: I am working on entering claims in the online system for participants in any of the programs who also have IDHS-DDD waiver funding. 1st Quarter reports are due on January 31, 2020

MHDDAC: I participated in the November meeting of the Mental Health and Developmental Disabilities Agencies Council Meetings. There will be no meeting held in December.

Learning Opportunities: Tamela Milan-Alexander, MPPA presented, “The Importance of Connection and Support,” on December 5, 2019. Ms. Milan-Alexander received great feedback from attendees. Multiple people in attendance have expressed interest in Ms. Milan-Alexander providing follow-up presentations for their organizations. Certificates of Completion and CEU certificates were completed and mailed to participants.

The next presentation is scheduled for February 6, 2020. John Lafond, Land of Lincoln Legal Aid will provide a presentation on guardianship.

NACBHDD: I participated in monthly I/DD committee calls.

ACMHAI: I participated in the ACMHAI I/DD committee call.

Disability Resource Expo: I participated in Steering Committee meetings for the 13th Annual Disability Resource Expo. The Expo is scheduled for Saturday, March 28, 2019 from 9:00 am until 2:00 pm at The Vineyard Church.

Other activities: I participated in the following webinars: *The Flip Side of Rejection Sensitive Dysphoria: How to Tap into ADHD Energy and Motivation*; *Get the School Year Back on Track: Strategies for Overcoming Your Student’s Toughest Daily Challenges*; *All About ABLE Accounts*; *Speak Up and Speak Out in Springfield: Disability Advocacy and the FY2020 Illinois Legislative Session*; and *Understanding the Pathological Demand Avoidance Profile of the Autism Spectrum*.

I participated in monthly Race Relations planning meetings at the Bahai’ Center.

I also attended a planning meeting for the New American Welcome Center.

Community Learning Lab: The group of Social Work students that I have been working with this semester gave their final presentation on Monday, December 9, 2019. In attendance for this presentation were representatives from the United Way, the Disability Resource Expo, CCMHB staff, and UIUC. The students presented on problems or concerns they found with local online resources (Disability Resource Expo and 211). During the semester the students viewed two different closed loop online resource directories used in other counties and provided feedback on what they found most useful during their final presentation.

PUNS Reports: The updated “PUNS Summary by County and Selection Detail for Champaign County” and the “Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS) Summary of Total and Active PUNS by Zip Code” reports are attached. These documents were updated by IDHS on November 15, 2019 and give a glimpse into the number of Champaign County residents waiting on the PUNS database for Medicaid waiver funded services.

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

November 15, 2019

County: Champaign

Reason for PUNS or PUNS Update	927
New	49
Annual Update	348
Change of Category (Seeking Service or Planning for Services)	24
Change of Service Needs (more or less) - unchanged category (Seeking Service or Planning for Services)	20
Person is fully served or is not requesting any supports within the next five (5) years	197
Moved to another state, close PUNS	20
Person withdraws, close PUNS	25
Deceased	17
Individual Stayed in ICF/DD	1
Individual Moved to ICF/DD	2
Individual Determined Clinically Ineligible	6
Unable to locate	44
Submitted in error	2
Other, close PUNS	172
CHANGE OF CATEGORY (Seeking Service or Planning for Services)	452
PLANNING FOR SERVICES	171
EXISTING SUPPORTS AND SERVICES	407
Respite Supports (24 Hour)	10
Respite Supports (<24 hour)	14
Behavioral Supports (includes behavioral intervention, therapy and counseling)	150
Physical Therapy	44
Occupational Therapy	105
Speech Therapy	140
Education	188
Assistive Technology	46
Homemaker/Chore Services	4
Adaptions to Home or Vehicle	6
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.)	59
Medical Equipment/Supplies	32
Nursing Services in the Home, Provided Intermittently	5
Other Individual Supports	161
TRANSPORTATION	455
Transportation (include trip/mileage reimbursement)	127
Other Transportation Service	297
Senior Adult Day Services	1
Developmental Training	100
"Regular Work"/Sheltered Employment	76
Supported Employment	90
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	65
Other Day Supports (e.g. volunteering, community experience)	29
RESIDENTIAL SUPPORTS	83
Community Integrated Living Arrangement (CILA)/Family	3
Community Integrated Living Arrangement (CILA)/Intermittent	5
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	32
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People	1
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	2
Skilled Nursing Facility/Pediatrics (SNF/PED)	5
Supported Living Arrangement	9

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

November 15, 2019

Shelter Care/Board Home	1
Children's Residential Services	4
Child Care Institutions (Including Residential Schools)	7
Children's Foster Care	1
Other Residential Support (including homeless shelters)	14
SUPPORTS NEEDED	417
Personal Support (includes habilitation, personal care and intermittent respite services)	372
Respite Supports (24 hours or greater)	23
Behavioral Supports (includes behavioral intervention, therapy and counseling)	147
Physical Therapy	45
Occupational Therapy	80
Speech Therapy	99
Assistive Technology	55
Adaptations to Home or Vehicle	15
Nursing Services in the Home, Provided Intermittently	4
Other Individual Supports	80
TRANSPORTATION NEEDED	370
Transportation (include trip/mileage reimbursement)	310
Other Transportation Service	332
VOCATIONAL OR OTHER STRUCTURED ACTIVITIES	291
Support to work at home (e.g., self employment or earning at home)	6
Support to work in the community	255
Support to engage in work/activities in a disability setting	105
Attendance at activity center for seniors	3
RESIDENTIAL SUPPORTS NEEDED	137
Out-of-home residential services with less than 24-hour supports	68
Out-of-home residential services with 24-hour supports	83
Total PUNS:	56,170

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**Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS)
Summary of Total and Active PUNS by Zip Code**

Updated 11/15/19

Zip Code	Active PUNS	Total PUNS	
60949 Ludlow	1	3	
61801 Urbana	40	86	
61802 Urbana	64	116	
61815 Bondville (PO Box)	1	1	
61816 Broadlands	2	3	
61820 Champaign	48	89	
61821 Champaign	89	186	
61822 Champaign	52	102	
61840 Dewey	0	2	
61843 Fisher	8	11	
61845 Foosland	1	1	
61847 Gifford	1	1	
61849 Homer	0	5	
61851 Ivesdale	1	2	
61852 Longview	1	1	
61853 Mahomet	40	65	
61859 Ogden	4	13	
61862 Penfield	1	2	
61863 Pesotum	1	2	
61864 Philo	5	11	
61866 Rantoul	30	87	
61871 Royal (PO Box)	--	--	no data on website
61872 Sadorus	2	2	
61873 St. Joseph	15	26	
61874 Savoy	10	16	
61875 Seymour	2	3	
61877 Sidney	4	10	
61878 Thomasboro	0	2	
61880 Tolono	8	26	
Total	431	874	

http://www.dhs.state.il.us/OneNetLibrary/27897/documents/DD%20Reports/PUNS/PUNS_Sum_by_Zip-Code.pdf

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Executive Director's Report – Lynn Canfield, December 2019

Background - Strategic Plan Goals:

Champaign County Mental Health Board Current Three-Year Plan Goals (to update 1/2020)

1. Support a **continuum of services** to improve the quality of life experienced by individuals with mental or emotional disorders, substance use disorders, or intellectual and/or developmental disabilities and their families residing in Champaign County.
2. Sustain commitment to addressing health disparities experienced by **underrepresented and diverse populations**.
3. Improve **consumer access to and engagement** in services.
4. Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDDB).
5. Building on progress achieved through the six Year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB), **sustain the SAMHSA/IDHS system of care model**.
6. **Divert from the criminal justice system**, as appropriate, persons with behavioral health needs or intellectual/developmental disabilities.
7. In conjunction with the Champaign County Sheriff's Office and other community stakeholders pursue a continuum of services as an **alternative to incarceration and/or overutilization of local Emergency Departments** for persons with behavioral health needs or developmental disabilities.
8. Support **interventions for youth** who have juvenile justice system involvement to reduce contact with law enforcement or prevent deeper penetration into the system.
9. Address the need for **acceptance, inclusion and respect** associated with a person's or family members' mental illness, substance use disorder, intellectual and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.
10. Engage with other local, state, and federal stakeholders on **emerging issues**.

Champaign County Developmental Disabilities Board Current Three-Year Plan Goals (to update 1/2020)

1. Support a **continuum of services** to meet the needs of people with intellectual and/or developmental disabilities (I/DD), along with their families, residing in Champaign County.
2. Sustain the commitment to improving outcomes for members of **underrepresented and underserved populations**.
3. Improve **access to and engagement in services** through increased coordination among providers, community stakeholders, people with I/DD, their families, and other key supporters.
4. Encourage high-quality **person-centered planning** and follow-through for people served by funding from the CCDDDB and, through the Intergovernmental Agreement, from the CCMHB.
5. Continue the collaborative working relationship with the Champaign County Mental Health Board (CCMHB).
6. Identify children at-risk of developmental delay or disability, and support **early intervention services and family supports**.
7. Support **access to services and programs** for youth and adults with I/DD, with a preference for evidence-based practices to increase positive outcomes.
8. Promote **inclusion and respect** of people with I/DD, through broad based community education efforts.
9. Stay abreast of **emerging issues** affecting service and support systems and access to services, and be proactive through concerted **advocacy efforts**.

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Activities of Staff and Board Members:

To support CCMHB goals 1-8 and CCDDDB goals 1-7, much time is spent in the processes for allocation and monitoring of agency contracts deemed to be of value for eligible residents. In the Board budgets, these agency service contracts appear as Contributions & Grants, the largest expenditure lines. Important, but a far smaller share of total costs, are non-agency activities which also support individuals, families, agencies, systems, and community. These are associated with Personnel, Professional Services, Expo, Public Relations, and Non-Employee Training costs; some are through independent contractors, and many are in partnership with other organizations: 211/PATH; Alliance for Inclusion and Respect; disABILITY Resource Expo; Mental Health First Aid; Monthly Provider Workshops; UIUC Community Learning Lab and Community Engagement projects; Evaluation Capacity Project; and many collaborations referenced in staff reports.

Anti-Stigma and Community Awareness:

(MHB goals 1, 3, 4, and 9 and DDB goals 1, 3, 5, and 8)

211 features call-based and online information about programs and resources; for Champaign County, PATH's management of 211 and data services is co-funded with United Way through a Memorandum of Understanding and at annual cost to the CCMHB/CCDDDB of \$18,066. We have met with stakeholders regarding the possibility of supplementing the call service, possibly with a mobile app. Kim Bowdry and I supervised a Community Learning Lab group whose project started with the idea of a 'redirectory' website to all online resource guides and led to exploration of other online platforms and recommendations for enhancement of 211/PATH and Expo site.

Alliance for Inclusion and Respect (AIR, formerly Anti-Stigma Alliance) initially focused on Ebertfest anti-stigma films, events, and marketing. Building on the exposure the festival offers us in April, we maintain year-round anti-stigma messaging, support for artists and entrepreneurs, and promotion of member organizations. Throughout 2019, Stephanie Howard-Gallo has coordinated a presence in International Galleries, featuring a new artist each month. During November, December, March, and April, we are hosting a booth at the weekly indoor Market IN the Square, for use by various AIR entrepreneurs. All artist/entrepreneur activities, as well as anti-stigma messaging and the missions of the collective AIR and its organizational partners, are promoted through cards and brochures created by staff, an accessible website, and facebook, twitter, and Instagram now managed by an AIR author.

disABILITY Resource Expo #13 preparation is done through networking and community building by staff, providers, volunteers, and leaders from the disability community. Our staff are most active in Marketing/Sponsorship, Children's Room, Volunteer Coordination, and Steering Committees. Independent contractors coordinate all committees and contribute content to the ADA compliant Expo website with searchable resource guide along with daily facebook, twitter, and Instagram posts. There is growing interest in developing short videos to promote the event and to provide resource information year-round.

CCMHB/CCDDDB CILA:

(MHB goal 4 and DDB goals 1 and 5)

During 2019, the CCMHB paid the CILA mortgage loan in full, and the CCDDDB made its annual contribution to the CILA project fund; the intergovernmental agreement between the Boards will guide budgeting and future decisions. Sale of the two houses or purchase of additional houses for use as CILAs would require further Board consideration. We have reviewed the existing

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agreements with Joel Ward Homes, property manager, Individual Advocacy Group, provider of services, and Dan Walsh, attorney, and received additional information from IAG to guide development of new lease agreements. The agency has taken steps to strengthen its position locally and can show annual losses associated with this project. Given the terms of the 2014 RFP, the evidence that circumstances in Illinois have not improved much since 2014, and the financial details provided by the provider agency, there appears to be a basis for decreasing the lessee's financial obligation. We are also waiting for estimates on the cost of additional insurance coverage related to the homes. I hope to bring a request to each board to authorize general terms of new agreements related to the CILAs, and we will continue working to strengthen the project and to benefit current and prospective new residents.

One-Time Mini-Grant Process:

(MHB goals 1, 3, 4, and 9 and DDB goals 1, 4, 5, and 8)

Beginning with \$55,640 not successfully negotiated of the total approved PY2020 agency allocations, the CCDDDB established a process for individual awards to those Champaign County residents who are eligible for state or locally funded agency programs but underserved, have a one-time support need specific to their circumstance, and seek to exercise choice as a consumer. A review committee has completed its work and delivered recommendations, which the Board will review on December 18. After awards are made, staff will work with recipients on purchasing and develop a short outcomes report for later. There has been enthusiasm around this project, with many recommendations for a future similar initiative, so once we understand all of the activities required in its implementation, we will report back to the Board.

Support for Agency Programs:

(MHB goals 1, 3, 5, 7, and 8 and DDB goals 1, 2, 3, and 7)

Cultural and Linguistic Competence training and technical assistance are offered by Shandra Summerville. Local providers have an advantage as other funders have begun requiring CLC Plans and conformity with the National CLAS standards.

Independent Contractors: EMK offers technical support for agency users of our online application and reporting system; John Brusveen, CPA, reviews agency audits, offers support to agencies, and suggests improvements in accountability and financial management; ChrispMedia maintains the AIR and Expo websites and will develop 'vlogs' to host short videos on the sites.

Mental Health First Aid: With certification in Adult, Youth, and Public Safety MHFA, Shandra Summerville offers trainings, with priority to agencies, board members, and public officials. A network of trainers in the region intend to cover all interested groups and areas. A Community Learning Lab student project has recommended MHFA for rural groups (this is happening!) as well as for UIUC students and staff. Ms. Summerville will learn about the new project, Teen MHFA, a training for teenagers conducted by young adult trainers; this component may be helpful in local schools or after school programs.

Monthly Provider Trainings, coordinated by Kim Bowdry, are free of charge and offer CEUs. November's topic was Social Security Disability and Returning to Work (Laura Gallagher Watkin). December's was The Importance of Connection and Support (Tamela Milan-Alexander). While the primary audience is case managers from funded programs, school social workers, family advocates, and other providers also attend.

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UIUC Evaluation Capacity Project consults with agencies with CCMHB and now CCDDDB funded programs through ‘theory of change’ logic model workshops, consultation bank, and intensive support to pilot programs each year. This year’s pilot programs are Community Choices Community Living, DSC Apartment Services, Crisis Nursery Beyond Blue, Head Start/Early Head Start Early Childhood MH Services, and UP Center.

Members of our team are involved in many other collaborations, sometimes described in staff reports and board to board reports. Examples are the Champaign County Transition Planning Committee, the Continuum of Service Providers to the Homeless, Champaign County Community Coalition, Champaign County Reentry Council, Coalition Race Relations Subcommittee, Human Services Council, the New American Welcome Center, CUPHD I-Plan Behavioral Health Committee, etc.

Executive Director Activities:

The following lists my regular meetings, events, and partnerships related to the strategic plans of the Boards. Activities not listed: discussions with staff and board, providers, stakeholders, and County officials; update of documents, websites, financials, budgets; personnel, office, employment policy, statutes, consultant meetings and contracts; and similar.

Intergovernmental/Interagency Collaborations:

(MHB goals 1, 4, 9, and 10 and DDB goals 1, 5, 8, and 9)

Champaign County Department Heads: a meeting of County Executive and Department Heads focused on budgets, staff benefits and policies, Enterprise Resource Planning (ERP) development, supervision, and facilities.

Local Funders Group: a subset of the full group has met regarding 211/PATH; other ongoing efforts by members of this group related to early childhood programming, families in crisis, trauma-training, and homelessness.

Mental Health and Developmental Disabilities Agency Council: monthly meetings of agency representatives, not all funded by the CCMHB/CCDDDB, with agency activities, state budget and federal/state system news, special topics, and announcements.

Metropolitan Intergovernmental Council: Quarterly meetings of governmental units, with topics of interest and updates from members; November topic was weather event preparedness.

Regional Champaign-Vermilion Executive Committee: monthly conference calls (to be bimonthly now) and periodic in-person meetings. This partnership of public and private entities shares an obligation for community needs assessments and strategic plans every three years. Because the CU Public Health District I-Plan has identified behavioral health as a high priority for three cycles, partnering is efficient; the committee has a growing interest in assessing the needs of people with I/DD and other disabilities. A coordinator reports on all needs assessment activities and coordinates meetings, surveys, collection of data, etc. MHFA trainings and community awareness events were very popular topics this year.

UIUC School of Social Work and College of Media: this fall we started with two Community Learning Lab projects, run by Kim Bowdry and Shandra Summerville with me as backup, and a third was added mid-semester in response to concerns expressed by the CCMHB during study session (on burnout in the social services). The groups presented their final reports, which are

available electronically and contain findings useful to our ongoing work. Our student project regarding online resources evolved into a collaboration with faculty and research assistants from the School of Information Sciences/College of Media, who have suggestions not only for online platforms but also for the broader anti-stigma education events. We have met with representatives of the expanded Community Engagement programs, including Community Learning Lab, and while we do not normally take on student projects during the Spring, there may be useful partnerships – more details to come.

Partnerships related to Underrepresented Populations and/or Justice System:
(MHB goals 1, 2, 5, 6, 7, 8, and 10 and DDB goals 1, 2, 3, and 7)

Champaign Community Coalition: monthly Executive Team and Goal Team meetings; discussions with various stakeholders, especially regarding trauma-informed system work and the planning of interventions meant to decrease community violence and mitigate the harm.

Coordinated Crisis and Recovery Response: providers, law enforcement, hospital administrators, government officials, and citizens are pursuing local solutions such as a central location for triage, peer supports, crisis stabilization, and coordinated response. Some local peer supporters are working toward state-certification. A regional group of funders and providers have reached out to lawmakers and state association for help in restoring adequate state funding for crisis services; a future meeting will include school districts and other interested parties.

Crisis Intervention Team Steering Committee: bimonthly meetings of representatives of local law enforcement agencies, EMS, hospital, behavioral health, providers serving the homeless and those at risk, advocacy groups, and other stakeholders to promote CIT and related trainings, to review data analyzed by City of Urbana, and to share updates and announcements.

Drug Court: following Drug Court graduation, spoke with leadership regarding concerns and successes; Moral Reconciliation Therapy is highly regarded by stakeholders.

New American Welcome Center: due to the student project obligation, I was unable to attend most monthly meetings of Health & Well-Being Working Group; Ms. Bowdry covered these.

Rural Outreach and Engagement: continued promotion of Mental Health First Aid as an outreach strategy; I met with Farm Bureau staff and a board member to learn more about local farm communities' experience of increasing financial (and other) stress and low access to care.

Youth Assessment Center Advisory Committee: quarterly meetings of representatives of law enforcement, Court Services, State's Attorney, service providers, and school districts for discussion of the program, review of referral and service data, and updates. The director of Cunningham Children's Home reported on Parenting Model reviews and final recommendation to the CCMHB (which they approved); this led to discussion of how this group might eventually expand to serve as a Youth Behavioral Health Coordinating Council, if that is needed.

State and National Associations and Advocacy:
(MHB goal 10 and DDB goal 9)

Association of Community Mental Health Authorities of Illinois (ACMHAI): conference calls of Executive, Legislative, Medicaid/Managed Care, and I/DD Committees. Intermittently, members discuss issues such as: property taxes and local government consolidation, impact of

state budget and systems, agency contracting and monitoring, board/staff policies, legal opinions, budget processes, and community awareness. Government Strategy Associates, our legislative liaison, updates us on: Medicaid and rates, minimum wage and direct support professional wage increases, planned use of anticipated revenue related to cannabis, Mental Health First Aid in schools, etc. They collected and scanned all available records of Illinois General Assembly debates (1960s to 2013) of the statutes establishing our boards, to clarify the intent of the Acts.

National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD): I attended the Fall Board meeting in Chicago; *session notes were shared in a separate document.* The association forwards articles and announcements on research, legislative activity, innovations, and more. Monthly I/DD committee calls feature presentations from other organizations and roundtable discussions of state budgets, compliance with federal rules, workforce, corrective action plans, consent decrees, and more. I co-chair monthly calls of the Behavioral Health committee, now merged with Justice Committee; we are launching a pilot project to test various outcomes and will host a webinar series on various states' Medicaid programs. During 2020, I will serve as the Association board's secretary.

National Association of Counties (NACO): monthly Health Steering Committee calls; quarterly Stepping Up Innovator County calls; and Data Driven Justice Initiative webinars.

Special Projects for Future Consideration:

In addition to the projects above, we may find other ways to strengthen the local systems. If other special projects are of interest, they can be developed for future board discussion.

Workforce Retention Initiatives:

Student Loan Repayment; Retention Payments; Assistance with Tuition or Certification and Licensure Fees; Paid Training Series. Workforce recruitment and retention challenge service systems across the country; this is true in Champaign County in spite of local resources. A student loan repayment program could attract and retain new psychiatrists and other qualified providers, or could fill in the gaps of existing loan repayment programs. Where the workforce shortage currently prevents funded programs from serving people with critical needs, recruitment and retention incentives could be developed for other behavioral health, case management, and direct support, including multilingual providers. A model launched in Iowa offers direct support professionals a lump sum payment for completing a series of trainings in best practices for their field; this could professionalize the workforce while improving the pay without supplementing Medicaid. Recommendations of a student project echo the above and add detail about the costs of certifications and licenses, especially for people at the beginning of their careers.

Branding and Marketing:

Develop logo(s) and brief messages about the boards or special projects; explore new marketing approaches and promotions. Our national and state associations are developing informational brochures to better convey the value of this work. Describing our efforts in summary form is important but challenging, and any personal testimonials should be handled with care, especially where people who use services are fearful or vulnerable to exploitation. Because younger people respond to media differently, we are exploring new approaches to promotion of the Expo and AIR events (see above). We might consider similar strategies for MHFA, provider workshops, and other special initiatives of the Boards. After some failed attempts, a new CCMHB/CCDDB logo is in the works and due to be introduced early in 2020.

Shared Infrastructure:

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Develop a pilot project to strengthen funded organizations by sharing business office and contract compliance functions or technology 'infrastructure'. Where small local organizations may be well-positioned to meet local needs, they may be too small to manage requirements, such as bookkeeping, data collection, performance evaluation, or fundraising. Total costs might be lower if shared by a group of agencies. A pilot project may show how this is best accomplished. With a different focus (underserved and rural residents) is a related partnership idea which is referenced in the CCMHB funding priorities for PY2021 and was (coincidentally) taken on by a group at a December "Health Make-a-thon" combining various provider services into a mobile clinic to reach underserved communities.

Parkland College Foundation:

Establish a scholarship fund for people who have MI, SUD, or I/DD, Champaign County residency, financial need, and an interest in participating in Parkland programs. Parkland Foundation would apply contributed funds to each scholarship recipient's account and return unused funds to the CCMHB. To identify scholars, and taking care to avoid stigmatizing people or sharing private health information, we would establish a review committee, a process and timeline, a method for promoting the opportunity publicly, and maximum award amounts. Due to school timelines, review of scholarship applications might coincide with review of agency funding requests. The total amount to be awarded could vary each year, allowing the board to use funds beyond those budgeted for agency contracts, consultants, staff, or administrative needs. Per statute, mental health boards may make scholarships, and for some people, direct assistance of this kind may be more appropriate than agency supports and services.