



Champaign County Developmental Disabilities Board (CCDDDB) Meeting Agenda

Wednesday, May 18, 2022, 9:00AM

*This meeting will be held **remotely**, with a required representative at*

The Shields-Carter Room, Brookens Administrative Building

1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81559124557> 312-626-6799

Meeting ID: 815 5912 4557

*Pursuant to the Governor's Executive Order establishing a pandemic disaster in the State of Illinois that covers the County of Champaign, and the CCDDDB President's determination that holding this meeting in person is not prudent at this time due to health concerns with COVID-19 cases and hospitalizations reported in the county, this meeting will be held **remotely** via zoom. Public comment also will be taken remotely. The public may watch the meeting live through this link or view it later in archived recordings at <https://www.co.champaign.il.us/mhbddb/MeetingInfo.php>*

Public Input: *All are welcome to attend the Board's meetings to observe and offer thoughts during "Citizen Input/Public Participation. For support, let us know how we might help by emailing stephanie@ccmhb.org. You may also communicate with the Board by emailing stephanie@ccmhb.org any written comments you would like read into the record. The time for each person's comments may be limited to 5 minutes.*

1. Call to Order
2. Roll Call
3. Zoom Instructions - <https://us02web.zoom.us/j/81559124557> (page 3)
4. Approval of Agenda*
5. Citizen Input/Public Participation
The chairperson may limit public participation to five minutes per person.
6. Chairperson's Comments – Dr. Anne Robin
7. Executive Director's Comments – Lynn Canfield
8. Approval of CCDDDB Board Meeting Minutes (pages 4-6)*
Minutes from the 4/20/22 board meeting are included. Action is requested.
9. Vendor Invoice List (page 7)*
A "Vendor Invoice List" of expenditures is included. Action is requested, to accept the list and place it on file.

10. New Business

A. Staff Recommendations for PY23 Agency Allocations (**pages 8-30**)*

A Decision Memorandum presents staff recommendations for allocation of PY23 funding to agencies, with Tier Sheet. Action is requested.

B. 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.

11. Old Business

A. Agency PY2022 3rd Quarter Program Activity Reports (**pages 31-48**)

Included for information only are copies of each program's submitted activity report.

B. PY2022 3rd Quarter Service Data Charts (**pages 49-62**)

For information only are 3rd Quarter service hours and activities reports.

C. 211 Quarterly Reports (**pages 63-75**)

Included for information are reports prepared by PATH, with data on Champaign County 211 calls during the quarter.

D. CCDDDB and CCMHB Schedules and CCDDDB Timeline (**pages 76-79**)

E. Acronyms and Glossary (**pages 80-87**)

A list of commonly used acronyms is included for information.

12. CCMHB Input

13. Staff Reports (**pages 88-108**)

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

14. Board Announcements

15. Adjournment

**Board action requested*

#3

Instructions for participating in Zoom Conference Bridge for CCDDDB Meeting May 18, 2022 at 9:00 a.m.

You will need a computer with a microphone and speakers to join the Zoom Conference Bridge; if you want your face broadcast you will need a webcam.

Go to Join Zoom Meeting

<https://us02web.zoom.us/j/81559124557>

Meeting ID: 815 5912 4557

One tap mobile

+13126266799,,81559124557# US (Chicago)

+16465588656,,81559124557# US (New York)

Dial by your location

+1 312 626 6799 US (Chicago)

+1 646 558 8656 US (New York)

+1 301 715 8592 US (Germantown)

+1 669 900 9128 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Meeting ID: 815 5912 4557

Find your local number: <https://us02web.zoom.us/u/kCrkmcope>

When the meeting opens, choose to join with or without video. (Joining without video doesn't impact your participation in the meeting, it just turns off YOUR video camera so your face is not seen. Joining without video will also use less bandwidth and will make the meeting experience smoother).

Join with computer audio.

Once you are in the meeting, click on "participants" at the bottom of the screen.

Once you've clicked on participants you should see a list of participants with an option to "Raise Hand" at the bottom of the participants screen. **If you wish to speak, click "raise hand" and the Chair will call on you to speak.**

If you are not a member of the CCDDDB or a staff person, **please sign in by writing your name and any agency affiliation in the Chat area.** This, like the recording of the meeting itself, is a public document. There are agenda items for Public Participation and for Agency Input, and we will monitor the 'raised hands' during those times.

If you have called in, please speak up during these portions of the meeting if you would like to make a contribution. If you have called in and therefore do not have access to the chat, there will be an opportunity for you to share your 'sign-in' information. If your name is not displayed in the participant list, we might ask that you change it, especially if many people join the call.

Members of the public should not write questions or comments in the Chat area, unless otherwise prompted by the Board, who may choose to record questions and answers there.

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#8

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

Minutes April 20, 2022

*This meeting was held with representation at the Brookens Administrative Center
and with remote access via Zoom.*

9:00 a.m.

MEMBERS PRESENT: Anne Robin, Deb Ruesch, Georgiana Schuster, Kim Wolowiec-Fisher

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

OTHERS PRESENT: Vickie Tolf, Annette Becherer, Nicole Smith, Heather Levingston, Jeff Martin, Patty Walters, Danielle Matthews, Laura Bennett, DSC; Becca Obuchowski, Hannah Sheets, Community Choices; Sherry Longcor, Mel Liong, PACE; Angela Yost, Jodi McIntosh, Elise Belknap, Regional Planning Commission; Brenda Eakins, LaShuna Mallett, GROW; Katie Difanis, Carle Addiction Recovery

CALL TO ORDER:

Dr. Robin called the meeting to order at 9:00 a.m. Executive Director Canfield was present at the Brookens Administrative Center as per the Open Meetings Act.

ROLL CALL:

Roll call was taken and a quorum was present.

ZOOM INSTRUCTIONS:

Instructions were included in the packet.

APPROVAL OF AGENDA:

The agenda was in the packet for review. Dr. Robin requested “Successes and Agency Information” be added at the end of the Board meeting. The agenda, including Dr. Robin’s request was approved unanimously by a roll call vote.

CITIZEN INPUT/PUBLIC PARTICIPATION:

None.

PRESIDENT’S COMMENTS:

Dr. Robin thanked staff for their work on the program summaries. She also reported on the CILA home sale.

Dr. Fisher recapped the County Board meeting where CCDDDB members spoke in support of using American Rescue Plan (ARP) funds to increase direct service provider (DSP) wages. A formal request will be made to the Champaign County Board at a future meeting. Ms. Schuster read out loud a statement from “We Deserve More”.

EXECUTIVE DIRECTOR’S COMMENTS:

Director Canfield made some brief comments regarding the application review process at today’s meeting.

APPROVAL OF MINUTES:

Minutes from the 3/23/2022 board meeting were included in the packet.

MOTION: Ms. Ruesch moved to approve the minutes from the March 23, 2022 meeting, with an edit on page 6 under the CILA motion regarding who made the motion. Dr. Fisher seconded the motion. A roll call vote was taken and the motion passed unanimously.

VENDOR INVOICE LIST:

The Vendor Invoice List was included in the Board packet.

MOTION: Dr. Fisher moved to accept the Vendor Invoice List as presented in the packet. Ms. Schuster seconded the motion. A roll call vote was taken and the motion passed unanimously.

NEW BUSINESS:

Characteristics of People Served PY21 and Share of Allocations per Priority PY21:

Included in the packet were charts of aggregate agency service data per demographic category and residency and a chart of allocated funds per PY21 priority. The information was requested by Dr. Fisher at a prior Board meeting.

Review of PY23 I/DD Funding Requests:

The Board packet contained a spreadsheet of funding requests and draft program summaries. Board members reviewed the program summaries organized by funding priority. Agency representatives were present to answer questions from Board members.

Successes and Other Agency Information:

Information was shared from Becca Obuchowski from Community Choices.

OLD BUSINESS:

CCDDB and CCMHB Schedules and CCDDB Timeline:

Meeting schedules were included in the Board packet.

Acronyms and Glossary:

A list of commonly used acronyms was included for information.

CCMHB Input:

The CCMHB will meet this evening.

Staff Reports:

None.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 11:25 a.m.

Respectfully Submitted by: Stephanie Howard-Gallo

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

Champaign County, IL

VENDOR INVOICE LIST



INVOICE P.O. INV DATE CHECK RUN CHECK # INVOICE NET DUE DATE TYPE STS INVOICE DESCRIPTION

1 CHAMPAIGN COUNTY TREASURER

Apr Admin Fee	04/01/2022	040122A	2837	32,952.00	04/01/2022	INV	PD	MHB/DDB Admin Fee
Apr DD22-078	04/01/2022	040122A	2835	25,957.00	04/01/2022	INV	PD	DD22-078 Decision Support

10094 C-U AUTISM NETWORK

Apr MHBDD-087	04/01/2022	040122A	2825	3,166.00	04/01/2022	INV	PD	DD22-087 Community Outrea
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10146 COMMUNITY CHOICES, INC

Apr DD22-075	04/01/2022	040122A	2858	13,889.00	04/01/2022	INV	PD	DD22-075 Self Determinati
Apr DD22-090	04/01/2022	040122A	2858	14,161.00	04/01/2022	INV	PD	DD22-090 Community Living
Apr DD22-095	04/01/2022	040122A	2858	16,750.00	04/01/2022	INV	PD	DD22-095 Customized Emplo

10170 DEVELOPMENTAL SERVICES CENTER OF

Apr DD22-080	04/01/2022	040122A	2871	35,754.00	04/01/2022	INV	PD	DD22-080 Individual and F
Apr DD22-081	04/01/2022	040122A	2871	38,003.00	04/01/2022	INV	PD	DD22-081 Community Living
Apr DD22-083	04/01/2022	040122A	2871	36,321.00	04/01/2022	INV	PD	DD22-083 Service Coordina
Apr DD22-084	04/01/2022	040122A	2871	14,500.00	04/01/2022	INV	PD	DD22-084 Clinical Service
Apr DD22-085	04/01/2022	040122A	2871	6,667.00	04/01/2022	INV	PD	DD22-085 Employment First
Apr DD22-091	04/01/2022	040122A	2871	30,114.00	04/01/2022	INV	PD	DD22-091 Community Employ
Apr DD22-092	04/01/2022	040122A	2871	7,083.00	04/01/2022	INV	PD	DD22-092 Connections

10424 PERSONS ASSUMING CONTROL OF THEIR ENVIRONMENT INC.

Apr DD22-079	04/01/2022	040122A	2944	2,022.00	04/01/2022	INV	PD	DD22-079 Consumer Control
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14 INVOICES

** END OF REPORT - Generated by Chris M. Wilson **



#10.A.



DECISION MEMORANDUM

DATE: May 18, 2022
TO: Members, Champaign County Developmental Disabilities Board (CCDDB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Recommendations for Allocation of PY2023 Funding

Purpose:

For consideration by the Champaign County Developmental Disabilities Board (CCDDB), this memorandum presents staff recommendations for funding for the Program Year (PY) 2023 (July 1, 2022 through June 30, 2023.) Decision authority rests with the CCDDB and their sole discretion and judgment concerning the most appropriate use of available dollars based on assessment of community needs, best value, alignment with decision support criteria, pricing, affordability, and reasonable distribution of funds across service intensity.

Statutory Authority:

The Illinois Community Care for Persons with Developmental Disabilities Act (50 ILCS 835/ Sections 0.05 to 14) is the basis for CCDDB funding policies. All funds are allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The recommendations described in this memorandum are based on staff assessment of how closely applications align with statute, CCDDB funding policies, approved decision support criteria and priorities, and Board discussion. Best and Final Offers may be sought as part of the contract negotiation process. The CCDDB reserves the right to refrain from making an award when such action is deemed to be in the best interest of the County.

Background and Policy Considerations

The text of the "PY2023 Allocation Priorities and Decision Support Criteria" document, as approved by the CCDDB in December 2021, appears below with references to the Intergovernmental Agreement with the Champaign County Mental Health Board (CCMHB) and previous funding commitments. In addition to these, community input shapes the requests under consideration and the staff recommendations for PY23 funding.

- Intergovernmental Agreement and CCMHB Commitment to Intellectual/Developmental Disabilities (I/DD) Services and Supports.
The Intergovernmental Agreement (IGA) with the CCMHB requires integrated planning concerning Intellectual and Developmental Disabilities (I/DD) allocation decisions and includes a specific CCMHB set-aside commitment. CCMHB funding for I/DD increases by the percentage increase in the Board's current fiscal year

property tax levy extension. The PY2022 total was \$768,521, with \$718,521 for agency contracts and \$50,000 'credit' for CILA (see below). Applying an adjusted increase of 3.6% results in PY2023 total of \$796,188, comprised of \$50,000 'credit' to CILA and \$746,188 for agency contracts. For PY2023, the CCMHB maintains its interest in services for very young children and their families, and one of the two PY22 CCMHB contracts for these services has a two-year term so that a decision is not required for continuation. Each board will consider recommendations for the remaining CCMHB I/DD allocation.

- Community Integrated Living Arrangement (CILA).
In addition to planning and agency allocations, the Boards share a commitment to a Community Integrated Living Arrangement (CILA) project, which from 2015 to 2021 enabled the operation of two small group homes, consistent with the terms of the Ligas Consent Decree and Olmstead decision of the Americans with Disabilities Act. The Boards' intergovernmental agreement was updated in 2019 and in 2020 to allow for the CCMHB to pay the mortgage early, to guide related future actions (including sale of the homes, and to transfer titles to the CCDDDB on advice of attorneys for each board. The CCDDDB has contributed \$50,000 each year and will do so until their contribution matches that of the CCMHB. The homes have been sold, and consideration will be given regarding how to continue providing for people with complex needs and difficulty securing local residential services.
- Flexibilities for recovery from the COVID-19 pandemic. Introduced in all PY21 and continued in PY22 agency contracts was a provision allowing agencies to request a change in scope of services and budget during the contract year if related to COVID-19. The global pandemic continues to have profound impacts on people with I/DD and the direct support professional (DSP) workforce, further endangered by low pay. The service systems' existing vulnerabilities were magnified, and solutions will take substantial resources and time.
- Advocacy and Service Data. Input from DSPs and people with I/DD should influence systems advocacy and our own planning. During 2021, the CCDDDB and CCMHB staff completed a community needs assessment report with input from self-advocates, family members, and professionals and which did inform a new three-year strategic plan and the funding priorities which follow. That report is available at: https://www.co.champaign.il.us/mhbddb/PDFS/Full_2021_Community_Needs_Report_ENGLISH.pdf and https://www.co.champaign.il.us/mhbddb/PDFS/Full_2021_Community_Needs_Report_ESPANOL.pdf.
In addition to learning from focus groups, survey responses, Board discussions, environmental scans, and individual preference and needs data, we take into account the results of PY21 funded programs. Staff analysis of service claims is found here: https://www.co.champaign.il.us/mhbddb/agendas/ddb/2022/220323_Meeting/220323_Agenda.pdf, and program performance outcomes reports are aggregated here: <https://www.co.champaign.il.us/mhbddb/PDFS/CCDDDB%20PY21%20Performance%20Measure%20Outcome%20Report.pdf>

(This section is copied from funding priorities and decision support criteria approved December 15, 2021.)

Program Year 2023 CCDDB Priorities:

Priority: Self-Advocacy

Nationally most care is provided by family, friends, and community rather than by the formal service system. In addition, parents and self-advocates improve the formal system and non-traditional resources and raise awareness of disabilities and of how the system works or fails. Self-advocacy and peer support organizations, especially those governed by people who have I/DD and their families or supporters, may:

- improve others' understanding of the personal experience of I/DD and the rights of people with disabilities;
- offer peer mentoring and networking to support other family- or self-advocates;
- navigate the service system or share information on helpful current resources; and
- engage in or define system advocacy at the local, state, and federal levels.

Priority: Linkage and Coordination

The CCDDB will support efforts to connect people who have I/DD to appropriate benefits, state/federal funding, and resources. Agencies qualified to perform linkage, coordination, and planning support may provide these to people with I/DD who are eligible for but not receiving state Medicaid-waiver funding:

- Conflict-free Case Management (CFCM) and Person-Centered Planning (PCP) aligned with federal standards for all Home and Community Based Services, without risk of conflict of interest; and
- intensive case management or coordination of care, guided by a Person-Centered Plan, for people with complex support needs, whether those are related to aging, physical or behavioral health condition, loss of a family member or caregiver, or other traumatic experience.

Priority: Home Life

People who have disabilities should have options for housing of their choice, in their own communities, with people they choose, and with supports appropriate to their needs and preferences. Individualized supports may include:

- assistance for finding, securing, and maintaining a home;
- preparing to live more independently or with a different set of people; and
- given the limitations of community residential options through the state/federal partnership (i.e., Medicaid-waiver), creative approaches for those who qualify for but do not receive these services.

Priority: Personal Life and Resilience

Delivered in the least segregated environments and selected by the person, supports for personal success and resilience are across a broad range:

- assistive and/or adaptive technology and other accessibility supports;
- training in how to use technology, including electronic devices, apps, virtual meeting platforms, social media, Internet access, and online privacy/security;
- speech or occupational therapy;
- respite or personal support in the individual's home;
- personal care in other settings;

- training toward increased self-sufficiency in personal care;
- transportation assistance; and
- strategies to improve physical and mental health.

Priority: Work Life

Community employment opportunities have increased for people with I/DD, and with experience and exposure, people may find even better opportunities. Proposed programs should incorporate recommended or innovative practices and focus on people’s aspirations and abilities, in the most integrated community settings possible, and help them achieve their desired outcomes. Programs may offer:

- job development, job matching, and job coaching;
- use of technology to enhance a person’s work performance and reduce on-site coaching/training;
- job skills training conducted in the actual community work settings;
- community employment internships, initially paid by the program rather than the employer, especially for people who have relied on traditional sheltered day program;
- support for a path to self-employment or business ownership;
- education of employers about the benefits of working with people who have I/DD which results in work for people with I/DD; and
- other innovative employment supports.

Priority: Community Life and Relationships

Flexible support for people with I/DD can stabilize home and community life in person-centered, family-driven, and culturally appropriate ways, and should emphasize social and community integration, including digital spaces. Of interest would be:

- facilitation of social and volunteer or mentoring opportunities;
- support for development of social and communication skills, including through technology;
- connection to opportunities which are available to community members who do not necessarily have I/DD, both in-person and in digital spaces; and
- access to preferred recreation, hobby, leisure, or worship activities, including in digital spaces.

Priority: Strengthening the I/DD Workforce (possible collaboration with the CCMHB)

To address this long-standing, deepening existential threat to the I/DD system, agencies may propose strategies to strengthen and stabilize the workforce, with an immediate focus on those direct support professionals performing “essential” services. Such strategies would strive to maintain the current service capacity, improve workforce knowledge of technology access and use for the benefit of those with whom they work, and allow it to grow to meet the needs of all eligible residents of Champaign County. Agencies may collaborate on a joint application proposing system-wide solutions.

Priority: Young Children and their Families (collaboration with the CCMHB)

Services and supports not covered by Early Intervention or under the School Code, for young children with developmental and social-emotional concerns, include:

- coordinated, home-based services addressing all areas of development and taking into consideration the needs of the family;

- early identification of delays through consultation with childcare providers, pre-school educators, medical professionals, and other service providers;
- education, coaching, and facilitation to focus on strengthening personal and family support networks; and
- identification and mobilization of individual and family gifts and capacities, to access community associations and learning spaces.

Through the Boards’ intergovernmental agreement, the Champaign County Mental Health Board (CCMHB) has funded programs which complement those addressing the behavioral health of very young children and their families, and for which service providers collaborate as a System of Care for children and families. For PY2023, the CCMHB may continue this priority area as a demonstration of their continued commitment to people with I/DD.

Overarching Considerations:

Underserved/Underrepresented Populations and Countywide Access

Applications (proposals for funding) should describe how the program will promote access for historically underinvested populations as identified in the 2001 Surgeon General’s Report on Mental Health: Culture, Race, and Ethnicity and the federal Substance Abuse and Mental Health Services Administration (SAMHSA). Because members of racial and ethnic minority groups encounter disparities in access and quality of care related to I/DD, applications should address earlier, accurate identification of I/DD in minority children, as well as reduction of racial disparities in the utilization of services across all ages. Members of these groups, people living in rural areas, and those with limited English language proficiency should have access to quality services; engagement strategies should be identified which overcome barriers related to stigma and infrastructure and reach even those who are seeking support for the first time. A Cultural and Linguistic Competence Plan (CLCP) is required of each organization applying for funding. The online system includes a CLCP form which is consistent with requirements of Illinois Department of Human Services and which applies the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (CLAS Standards.)

Inclusion, Integration, and Anti-Stigma

Applications should promote the fullest possible community integration, including in digital spaces. People are most safe when they have routine contacts with other people, whether co-workers, neighbors, members of a faith community, acquaintances at fitness or recreation centers, or social clubs/networks. Community involvement helps decrease stigma. Stigma limits people’s participation, inhibits economic self-sufficiency, and increases vulnerability. It may even be a driver of declining State and Federal support for community-based services. Stigma harms communities and individuals, especially those who are underserved or underrepresented due to sexuality, gender, race, ethnicity, immigrant/refugee/asylee status, preferred or first language, or disability. The CCDDDB has an interest in building resilience, community awareness, and inclusion, as well as directly challenging negative attitudes and discriminatory practices. Fullest inclusion aligns with standards established in Home and Community Based Services rules, Workforce Innovation and Opportunity, and Department of Justice Americans with Disabilities Act/Olmstead findings. Although complicated, the paradigm shift these represent is clear.

Outcomes

Applications should identify measures of access for people seeking to participate in the program and outcomes expected to result from this participation. Because defining and measuring outcomes of value can be challenging, the Board offers support through a research team from University of Illinois at Urbana-Champaign's Department of Psychology, with training and technical assistance on 'theory of change' logic modeling, a consultation 'bank', workshops on reporting, and a template for year-end reports. Agencies using these resources may gain an advantage when competing for other funding. Applicant organizations already reporting on outcomes to other funders may include those outcomes, if relevant, in the application for CCDDDB funding.

The Council on Quality and Leadership and the National Core Indicators share a focus on:

- *Personal Outcomes* – improve people's positive **relationships**, increase personal **satisfaction**, allow them to exercise **choice** in decisions made about/for/with them, support **self-determination**, support real **work**, and increase people's **inclusion** in their community.
- *Family Outcomes* - support **involvement** of family members of people who have I/DD, offer them opportunities for **connection**, reliable resources for **information**, **planning**, **access**, and **support**, give them **choice and control**, and maximize **satisfaction**.

Coordinated System

Toward a more inclusive, efficient, and effective local system, applications should include evidence of collaboration and should acknowledge other resources and how they are linked. The CCDDDB values partnership and collaboration, not only to avoid overserving and overspending but also to reach our least connected residents. Of interest are: combined efforts of providers and schools, support groups, hospitals, advocates, etc.; a commitment to updating information in resource directories and databases; participation in trainings, workshops, or council meetings with other providers of similar services; and partnerships which go further to make sure that all who have a need are reached and that those needs are met. While the CCDDDB cannot pay for services which are covered under the School Code or are the responsibility of other service systems (e.g., medical, law enforcement, justice system), activities may include collaborative planning, linkage, training, and similar as appropriate to the proposed service and people to be served. Written working agreements should include details of coordinated services, referral relationships, and other partnerships. Applications for funding should acknowledge these relationships.

A joint application may be submitted by two or more agencies proposing services and supports consistent with their shared mission. This could include shared infrastructure (physical, data systems, professional services, etc.) to support organizations' common goals and improve administrative functions such as bookkeeping and reporting. Another critically important area appropriate for collaboration would be a joint application proposing strategies to strengthen and stabilize the direct support workforce. An application could propose to coordinate internet access and use efforts with other local broadband infrastructure projects, to increase the efficiency and effectiveness of all.

Budget and Program Connectedness

Applications include a Budget Narrative which should explain the relationship between anticipated costs and program components. Clarity about what the Board is buying includes the relevance of all expenses, direct and indirect. Per Funding Guidelines, calculation and rationale should be explicit as to the relationship between each expense and the value of the program. Programs offering services billable to Medicaid or other insurance should identify non-billable activities for which the costs may be charged to the CCDDDB. While these funds should not pay for service activities or supports billable to another payor, the Board has an interest in programs taking advantage of multiple resources in order to secure long-term sustainability and to ensure that CCDDDB funding does not supplant other public funding.

Person Centered Planning (PCP)

Every person who will participate in a proposed program should have the opportunity to direct their services and supports. The Person-Centered process seeks a balance between what is important TO a person and what is important FOR a person and includes strengths, preferences, clinical and support needs, and the person's desired outcomes. CCDDDB funding should be associated with people rather than programs. All services and supports should be documented in a plan directed by the person and consistent with Illinois Department of Human Services – Division of Developmental Disabilities' guidelines for PCP.

In a self-determined, integrated system:

- *people control their day*, what they do and where, and with whom they interact;
- *people build connections* to their community as they choose, for work, play, learning, and more, in the same places and times used by other community members;
- *people create and use networks of support* consisting of friends, family, community members with similar interests, and allies/associates they choose; and
- *people advocate for themselves*, make informed choices, control their own service plans, and pursue their own aims.

Applications should describe how specific services relate to what people have indicated that they want and need. For PY2023, funded programs will report on individuals' service activities in simple categories, as full hours, to capture whether the service happens with the individual or on their behalf (in their absence) and whether the service is delivered in the community (including the person's home) or at an agency office. Benchmarks may be developed to promote fullest inclusion. Previous years' aggregate reports have demonstrated the complicated service mix and widely varying utilization patterns and costs.

Added Value and Uniqueness

Applications should identify specific, even unique, features of the approach, the staff, and the funding mix.

- Approach/Methods/Innovation: Cite the recommended, promising, evidence-based, or evidence-informed practice and address fidelity to the model under which services are to be delivered. In the absence of such an approach to meet defined community need, clearly describe the innovative approach, including method of evaluation, to be considered.
- Staff Credentials: Highlight staff credentials and specialized training.

- Resource Leveraging: While ‘leveraging’ is interpreted as local match for other funding, describe all approaches which amplify CCDDDB resources: state, federal, and local funding; volunteer or student support; community collaborations. If CCDDDB funds are to be used to meet a match requirement, reference the funder requiring match and identify the match amount in the Budget Narrative.

Process Considerations:

Priority areas and overarching considerations will be used as discriminating factors which influence final allocation decision recommendations. The CCDDDB uses an online system for agencies applying for funding. An agency must complete the one-time registration process, including an organizational eligibility questionnaire, before receiving access to online application forms. *Note: During 2021, agencies who registered several years earlier are required to submit a new organizational eligibility questionnaire prior to the application deadline.*

Criteria described in this memorandum are to be used as guidance by the Board in assessing applications for funding. They are not the sole considerations in final funding decisions. Other considerations include the judgment of the Board and staff, evidence of the provider’s ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCDDDB funds, applications must reflect the Board’s stated goals, objectives, operating principles, and public policy positions; downloadable versions of these Board documents are available on the public page of the online application and reporting system, at <http://ccmhdbrds.org>. Final decisions rest with the CCDDDB and their judgment concerning the most appropriate and effective use of the fund, based on assessment of community needs, equitable distribution across disability support areas, and alignment with decision support criteria.

The Intergovernmental Agreement between the CCDDDB and the Champaign County Mental Health Board (CCMHB) establishes that a portion of CCMHB funding be reserved for allocation to I/DD services and supports. These allocation decisions are aligned with CCDDDB priority areas as defined in this document. Recommendations will be made by the CCDDDB and staff, which are then considered and acted upon by the CCMHB, resulting in contracts between the CCMHB and I/DD service providers.

The CCDDDB allocation of funding is a complex task and not a request for proposals (RFP). Applicants are not responding to a common set of specifications but rather are seeking funding to address a wide variety of support needs of people who have I/DD. The nature and scope of applications may vary widely and may include treatment and early intervention models. A numerical rating/selection methodology is not relevant or feasible. Our focus is on what constitutes a best value to the community, in the service of those who have I/DD, and is therefore based on a combination of cost and non-cost factors, reflecting an integrated assessment of the relative merits of applications using criteria and priorities approved by the CCDDDB. If applications are not sufficiently responsive to the criteria and priorities described in this memorandum, the CCDDDB may choose to set aside funding to support RFPs with prescriptive specifications to address the priorities. The CCDDDB may also choose to identify requests, including for capital and infrastructure projects, which are

appropriate for an award of funding to be issued during the Program Year 2023 but later than July 1, 2022, in the event of greater than expected Board revenue.

Caveats and Application Process Requirements:

- Submission of an application does not commit the CCDDDB to award a contract or to pay any costs incurred in the application preparation or to pay for any other costs incurred prior to the execution of a formal contract.
- During the application period and pending staff availability, technical assistance will be limited to process questions concerning the use of the online registration and application system, application forms, budget forms, application instructions, and CCDDDB Funding Guidelines. Support is also available for CLC planning.
- Applications with excessive information beyond the scope of the application format will not be reviewed and may be disqualified from consideration.
- Letters of support are not considered in the allocation and selection process. Written working agreements with other agencies providing similar services should be referenced in the application and available for review upon request.
- The CCDDDB retains the right to accept or reject any application, or to refrain from making an award, when such action is deemed to be in the best interest of the CCDDDB and residents of Champaign County.
- The CCDDDB reserves the right to vary the provisions set forth herein at any time prior to the execution of a contract where the CCDDDB deems such variances to be in the best interest of the CCDDDB and residents of Champaign County.
- Submitted applications become the property of the CCDDDB and, as such, are public documents that may be copied and made available upon request after allocation decisions have been made and contracts executed. Submitted materials will not be returned.
- The CCDDDB reserves the right, but is under no obligation, to negotiate an extension of any contract funded under this allocation process for up to a period not to exceed two years, with or without an increased procurement.
- If selected for contract negotiation, an applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services agreeable to both parties. Failure to submit required information may result in disallowance or cancellation of contract award.
- The execution of final contracts resultant of this application process is dependent upon the availability of adequate funds and the needs of the CCDDDB.
- The CCDDDB reserves the right to further define and add application components as needed. Applicants selected as responsive to the intent of this online application process will be given equal opportunity to update proposals for the newly identified components.
- To be considered, proposals must be complete, received on time, and responsive to the application instructions. Late or incomplete applications will be rejected.
- If selected for funding, the contents of a successful application will be developed into a formal contract. Failure of the applicant to accept these obligations can result in cancellation of the award for contract. The CCDDDB reserves the right to withdraw or reduce the amount of an award if the application has misrepresented the applicant's ability to perform.

- The CCDDDB reserves the right to negotiate the final terms of any or all contracts with the selected applicant, and any such terms negotiated as a result of this process may be renegotiated and/or amended in order to meet the needs of Champaign County. The CCDDDB reserves the right to require the submission of any revision to the application which results from negotiations conducted.
- The CCDDDB reserves the right to contact any individual, agency, or employee listed in the application or to contact others who may have experience and/or knowledge of the applicant's relevant performance and/or qualifications.

(End of funding priorities and selection criteria memorandum approved December 15, 2021.)

Overview of Agency Requests for PY2023 Funding:

Fifteen applications proposing I/DD supports and services were submitted for the Board's consideration. These requests total **\$4,424,962** and have been evaluated by the CCDDDB and staff. A sixteenth I/DD program is funded by the CCMHB by a two-year contract so that this program does not require a funding decision but constitutes an additional commitment of \$596,522. The PY23 application most aligned with the CCMHB priority for Young Children and their Families has also been reviewed by the CCMHB.

In their applications for PY2023 funding, agencies identified priority categories as follows:

- **Self-Advocacy:** no applications
- **Linkage and Coordination:** 2 agencies, 2 applications, totaling \$856,271
- **Home Life:** 2 agencies, 2 applications, totaling \$739,000
- **Personal Life and Resilience:** 2 agencies, 3 applications, totaling \$601,367
- **Work Life:** 2 agencies, 3 applications, totaling \$737,500
- **Community Life and Relationships:** 2 agencies, 3 applications, totaling \$1,113,658
- **Strengthening the I/DD Workforce:** 1 agency, 1 application, totaling \$227,500
- **Young Children and Their Families (CCMHB focus):** 2 agencies, 1 application + 1 multi-year contract, totaling \$943,757. The application includes mental health services and developmental services and can be split based on anticipated need and affordability. The CCMHB will allocate \$746,188 for I/DD services. CCMHB decisions are coordinated with the CCDDDB decisions and will be finalized at a CCMHB meeting.

Recommended Allocations and Decision Section:

The staff recommendations are based on decision support criteria and other factors outlined above. For additional information, refer to Program Summaries presented at the April 20, 2022 CCDDDB meeting. These recommendations continue a commitment to fund as much agency capacity as is reasonable and to prepare for more flexibility during the contract year, as service needs and relevant circumstances change. The services support the board's mission to enhance the lives of our neighbors with I/DD and their families.

The following are recommended for funding:

CCRPC-Community Services – Decision Support PCP

\$388,271

- Supports conflict-free case management and person-centered planning, transition from high school to adult life, identification of desired supports (for future system planning), and new program component for PY23 - case management services for dually diagnosed adults.
- Updated Preference Assessment developed with UIUC Evaluation Capacity team.
- Provider has significant role in the state’s system for assessment, planning, referral, monitoring. The only local provider under contract with the state to perform this role, uses same Discovery and Personal Plan tool as required for state waiver funded Independent Service Coordination services.
- Two outcomes relate to each person’s service plan, the other to the program’s performance, with implied value to the consumer and system.
- **Retain PY2022 special provisions for:** any excess revenue is based on 4th quarter reports; notify CCDDDB staff of persons selected from PUNS; online service claims reporting; collaborate with providers to move toward conflict-free case management for each participating TPC, with plans clarifying specific service needs and preferences; inform CCDDDB staff of any TPCs in which current program placement is not appropriate; work directly with other case management programs toward the best interests of people served and document these collaborative efforts in quarterly service activity report comments section; distribute other CCDDDB funded program brochures at IEPs and PUNS enrollment.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$388,271 for CCRPC-Community Services – Decision Support PCP subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Community Choices, Inc. – Customized Employment

\$217,500

- Long running program, continues to evolve to meet needs of participants.
- Well-defined, measurable consumer outcomes and appropriate evaluation strategies, including Griffin & Hammis assessment.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide brochures to ISC for distribution; provide ISC with list of participants for PCP completion; online service claims reporting; collaborate with providers of similar

service; provide CCDDDB staff with Discovery process tools, copies of interagency agreements, and list of clients enrolled in waiver funded services; training efforts in natural settings.

- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$217,500 for Community Choices, Inc. – Customized Employment subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Community Choices, Inc. – Inclusive Community Support

\$203,000

- Formerly Community Living
- Consumer outcomes for each program component are well-developed and measurable; uses CQL Personal Outcome Measures.
- Includes a 4-phased model of transitional support for independent community living, sustained community support for those with more complex need, and 8-session classes on related topics.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** contract will be prorated until new program staff is hired; collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide brochures to ISC for distribution; provide ISC with list of participants for PCP completion; online service claims reporting; collaborate with providers of similar service; provide CCDDDB staff with copies of interagency agreements, and list of clients enrolled in waiver funded services; training efforts in natural settings.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$203,000 for Community Choices, Inc. – Inclusive Community Support subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Community Choices, Inc. – Self-Determination Support

\$171,000

- Outcomes are well defined, relevant, and measurable. The program’s outcome evaluation would be even further strengthened by structuring Outcome 3 to be more reflective of a consumer outcome rather than a staff output/activity.
- Program continues to serve large portion of rural residents.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit; revise Program Plan Parts 1 & 2 to correct Service Contacts target mismatch.
- **Retain PY2022 special provisions for:** provide brochures to ISC for distribution; collaborate with providers of similar service; provide CCDDDB staff with sample PCP documents, copies of interagency agreements, and list of clients enrolled in waiver funded services; training efforts in natural settings.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$171,000 for Community Choices, Inc. – Self-Determination Support subject to the caveats as presented in this memorandum:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information needed

DSC – Clinical Services

\$184,000

- Will continue offering training on co-occurring mental health issues for DSPs.
- Two measurable outcomes relate to staff/program activity, align with responsible behavioral health supports. The third measures positive impact on the Consumer (i.e., improved sense of well-being).
- Improves access to behavioral healthcare, collaborates with other providers, and buffers vulnerable people from changes in the health care delivery and payment systems and helped meet behavioral health needs despite low provider capacity.
- **Required prior to contract:** update Program Plan Part 1 to remove mention of programs no longer available; copies of subcontracts; letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** provide ISC with list of participants for PCP completion; provide brochures to ISC for distribution; document efforts to use community alternatives, including providers who bill insurance/other payers to create capacity for others in this program; provide list of clients enrolled in waiver funded services; online service claims reporting; monthly personnel change report.
- **New special provisions:** provide CCDDDB staff with sample of assessment tools; contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$184,000 for DSC – Clinical Services subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

DSC – Community Employment

\$435,000

- Three Consumer Outcomes measure participation in the program. A fourth measures the total of consumers claiming satisfaction with the program, by the results of an annual survey.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide ISC with list of participants for PCP completion; provide brochures to ISC for distribution; online service claims reporting; collaborate with providers of similar service; provide CCDDDB staff with Discovery process tools, copies of interagency agreements and list of clients enrolled in waiver funded services; training efforts in natural settings; monthly personnel change report.
- **New special provisions:** explicit approval of use of the funds as match for another grant; contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$435,000 for DSC – Community Employment subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

DSC – Community First

\$847,658

- Consumer Outcomes relate to quality of life and use input from participants; connect to consumer choice.
- Focus is transformation from shelter-based services to meaningful community life. For those with significant support needs, who often have state funding, large group settings are still the norm, partially due to delays in state system transformation.
- The per person cost associated with TPCs in this program is very close to the state's rate for Community Day Services, but payment is value-based rather than reimbursed. Performance benchmarks (continued from PY22 contract) for each

quarter relate to volume and type of service: a six-month minimum of 10,000 total service hours and subsequent quarterly minimum of 5,000 total service hours associated with qualifying TPCs; a minimum of 60% (6,000 and 3,000) of those service hours in direct (virtual or in-person) contact with TPCs engaging in activities they have identified in person-centered plans; and a minimum of 50% (3,000 and 1,500) of these direct contact service hours delivered in community settings or the person's home. If benchmarks are not met during a quarter, the following quarter's payments will be pro-rated. Fourth quarter data will inform the final payment.

- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS, and on PCPs for each Treatment Plan Client reported; provide ISC with list of participants for PCP completion and brochures for distribution; provide CCDDDB staff with list of clients enrolled in waiver funded services and monthly personnel change reports; online service claims reporting; training efforts in natural settings; continue virtual service options and repeat survey on client/family preferences for staying connected; include number of people on program wait list and average wait time in quarterly report; benchmarks determine payments; no dual program enrollment with Individual and Family Support, without CCDDDB approval.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$847,658 for DSC – Community First subject to the caveats as presented in this memorandum:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information needed

DSC – Community Living

\$536,000

- Formerly Apartment Services.
- Outcomes relate to consumers/quality of life and are measurable, continued attention to specific outcome measures and further development of Outcome 2 assessment strategies is recommended.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide ISC with list of participants for PCP completion and brochures for distribution; provide CCDDDB staff with list of clients enrolled in waiver funded services and monthly personnel change report; online service claims reporting; collaborate with providers of similar service; training efforts in natural settings.

- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$536,000 for DSC – Community Living subject to the caveats as presented in this memorandum:

_____Approved
 _____Denied
 _____Modified
 _____Additional Information needed

DSC – Connections

\$95,000

- Three outcomes relate to program performance, one new outcome relates to participant satisfaction.
- Consider organizing the contract around # of events and activities, the content of which are identified by program participants; the related Consumer Outcome could be developed along these lines as well.
- For people participating in this program while also in other funded programs, interests and preferences addressed by the program should be demonstrated in the Person Centered Plan.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide ISC with list of participants for PCP completion; provide brochures to ISC for distribution; provide list of clients enrolled in waiver funded services; online service claims reporting; training efforts in natural settings; monthly personnel change report; allow outside artists to participate in community art shows; allow outside artists to participate in program when feasible.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$95,000 for DSC - Connections subject to the caveats as presented in this memorandum:

_____Approved
 _____Denied
 _____Modified
 _____Additional Information needed

DSC/Community Choices – Employment First

\$85,000

- Features a continued collaboration toward transforming employment services.

- Includes development of Champaign County Directory of Disability-Inclusive Employers.
- **Required prior to contract:** copy of subcontract; letter of engagement with CPA; revise Program Plan Narrative to include an outcome which connects the program to a positive, measurable impact experience by the 'consumer'.
- **Retain PY2022 special provisions for:** report zip codes of LEAP certified businesses; collaborate with ISC; share complete list of businesses LEAP certified; share details on number of jobs directly resulting from LEAP trainings; monthly personnel change report.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$85,000 for DSC/Community Choices – Employment First subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

DSC – Individual and Family Support

\$390,000

- Significant decrease in request related to loss of staff position due to PUNS selections and decreased need.
- Outcome for consumer satisfaction with services is more relevant than program participation; ideally outcomes based on consumer choice, connection to community, and pursuit of individual interests would also be identified and surveyed.
- **Required prior to contract:** copies of subcontracts; letter of engagement with CPA.
- **Retain PY2022 special provisions for:** collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; collaborate with Illinois Respite Coalition, and Envision Unlimited for state-funded Respite; work with PACE Consumer Control Program to help families find Personal Support Workers; provide ISC with list of participants for PCP completion and brochures for distribution; provide CCDDDB staff with list of clients enrolled in waiver funded services and monthly personnel change reports; online service claims reporting; collaborate with providers of similar service; training efforts in natural settings; require proof of scholarship denial before providing specific assistance; no dual program enrollment with Community First, without CCDDDB approval.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$390,000 for DSC- Individual and Family Support subject to the caveats as presented in this memorandum:

- _____ Approved

_____ Denied
_____ Modified
_____ Additional Information needed

DSC – Service Coordination

\$468,000

- Two outcomes measure a person’s participation in their own service planning, and another measures a person’s progress toward self-identified goals. There is implicit connection between the measures and their value to the person.
- Risk of conflict of interest regarding assessment, service planning, referral and advocacy, and service monitoring. Many other valued service activities are identified.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit; update Program Plan Part 1 to remove mention of programs no longer available.
- **Retain PY2022 special provisions for:** for CCDDDB contract files, share copies of template individual service plan and assessment forms (if any are used beyond ISC forms); collaborate with ISC when enrolling new people into the program, with consideration for length of time on PUNS; provide ISC with list of participants for PCP completion and brochures for distribution; online service claims reporting; collaborate with providers of similar service; training efforts in natural settings; provide CCDDDB staff with Implementation Strategy/Plan tools, list of clients enrolled in waiver funded services, monthly personnel change reports, and report on service needs otherwise unmet, avoid activities which risk conflict of interest.
- **New special provisions:** contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$468,000 for DSC- Service Coordination subject to the caveats as presented in this memorandum:

_____ Approved
_____ Denied
_____ Modified
_____ Additional Information needed

DSC – Workforce Development and Retention

\$227,500

- A NEW request, for a two-year contract (\$227,500 for PY23 and \$227,500 for PY24)
- Request includes purchase of membership to NADSP for staff trainings, new employee bonus after completion of trainings, and three staff retention bonuses throughout the year.
- Outcomes include process measures and positive impact on hiring and retention.
- **New special provisions:** if a two-year term, any 1st year excess revenue cannot be spent in 2nd year; provide CCDDDB staff with list of DSPs receiving bonuses and documentation of trainings selected from NADSP; contribute information to

advance enhancing independence through online technology training and access for staff; and report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$227,500 for PY2023 and \$227,500 for PY2024 for DSC – Workforce Development and Retention subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Persons Assuming Control of Their Environment (PACE) – Consumer Control in Personal Support

\$27,367

- Recruits and trains personal support workers (PSWs) and maintains a PSW registry; the program has successfully matched 23 PSWs with people with I/DD seeking support since the program began.
- Outcomes associated with agency performance rather than clients.
- **Required prior to contract:** letter of engagement with CPA for PY22 audit; revise Program Plan Part 1 to include relation of program to CIL philosophy, update outcomes, and remove information about a program no longer in operation; update Parts One and Two so that Other (utilization category) is increased to achieve more ‘Successful Matches’ between People with I/DD and their families and potential PSWs; revise financial form discrepancies to reflect proposed part time position.
- **Retain PY2022 special provisions for:** continue to work closely with ISC, DSC, Illinois Respite Coalition, and Envision Unlimited on behalf of those seeking PSWs for HBS and/or state-funded Respite workers; provide brochures to ISC for distribution; online service claims reporting; collaborate with providers of similar service; document number of people with I/DD utilizing PSWs.
- **New special provisions:** fee for service contract, with payment of \$130 per PSW registry entry, \$160 per Successful PSW match, and QIDP hourly rate (update to match state rate) for Reporting/Planning and Program Promotion; contribute information to advance enhancing independence through online technology training and access for staff and clients; report demographics of agency Board to CCDDDB.

Motion to approve CCDDDB funding of \$27,367 for Persons Assuming Control of Their Environment (PACE) – Consumer Control in Personal Support subject to the caveats as presented in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Additional I/DD programming is recommended for funding by the CCMHB:

CC Head Start/Early Head Start – MH Services

- The PY2023 application again combines Head Start’s mental health and DD services into one request, for \$347,235. (This was done at the request of the CCMHB.)
- The portion of this contract dedicated to developmental services will be \$149,666, to be fully funded by the CCMHB.
- Serves children who are enrolled in HS/EHS and for whom a need has been identified through observation or scheduled screenings. Collaborates with other funded programs toward a trauma-informed system of care approach.
- Consumer outcomes relate to changes in children’s behavior and skills.
- **Required prior to contract:** revise financial forms (to reflect ISBE-funded Social Skills and Prevention Coach, demonstrating that the total program is supported by other revenue) and plan narrative, to justify 43% for developmental supports.
- **Retain PY2022 special provisions for:** excess revenue based on Q4 report; inform families of PUNS and CCRPC ISC; online service claims reporting; report on other funding sought.
- **New special provisions:** if a two-year term, any 1st year excess revenue cannot be spent in 2nd year; contribute information to advance enhancing independence through online technology training and access for staff and clients; and report demographics of agency Board to CCDDDB.
- Staff recommendation is that the Champaign County Mental Health Board (CCMHB) fund the full request of **\$347,235 for Champaign County Head Start/Early Head Start** (application combining DD and MI services) and that, in alignment with the Boards’ intergovernmental agreement, **\$149,666** of that award will support I/DD services within this program. A two-year term should be offered.

Motion to advise the Champaign County Mental Health Board to provide funding in the amount of \$149,666 to support the developmental services portion of the CC Head Start/Early Head Start – MH Services program subject to the caveats as presented in this memorandum and pending approval by the CCMHB:

- _____Approved
- _____Denied
- _____Modified
- _____Additional Information needed

Contract Negotiations and Special Notifications:

Many recommendations offered above are contingent on completion of contract negotiations, application form revisions, resolution of compliance issues, and hiring of program staff. Awards may be adjusted by the cost of a staff vacancy and amended when that vacancy is filled. An applicant may be required to revise program or financial forms to align with CCDDDB planning, budget, and policy specifications. An applicant may be asked for more information prior to contract execution, to reach terms that are agreeable to both parties. If requirements are not met prior to completion of the contract, a later contract start

date will be established and the award reduced commensurate with the shorter term. Failure to submit required information shall result in cancellation of the contract award.

Motion to authorize the executive director to conduct contract negotiations as specified in this memorandum:

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information needed

Special Notifications Concerning PY2023 Awards

Recommendations are based on revenue estimates not finalized until the Champaign County Board approves budgets in November or December of 2022. For this reason, all PY2023 CCDDDB contract maximums will be subject to reductions to compensate for any CCDDDB revenue shortfall. These reductions will be documented by contract amendment at the discretion of the Executive Director, with every effort made to maintain the viability and integrity of prioritized contracts. All PY2023 contracts will include the following provision:

Obligations of the Board will cease immediately without penalty or further payment being required if, in any fiscal year, the tax that is levied, collected, and paid into the "Developmental Disabilities Fund" is judged by the CCDDDB executive director not to be sufficient for payment as delineated in the terms and conditions under this Contract.

Language was added to PY2021 contracts to support agencies' mid-contract year responses to impacts of COVID-19. As these evolve, and as state and federal funding and service delivery systems may respond with opportunities, all PY2023 contracts will include the following provision:

This contract shall be subject to realignment, reconfiguration, or redirection in scope of services, financial presentation, and/or contract maximum, as deemed necessary by the Board to respond to the COVID-19 pandemic or other declared natural or man-made disasters.

A new provision is recommended, to clarify that the terms of an agency's contract may supersede a specific provision of the funding guidelines, if the particular exception is deemed to be in the best interest of the CCDDDB and Champaign County.

The CCDDDB Requirements and Guidelines for Allocation of Funds is attached hereto and incorporated into this contract by reference, except this contract will control should there be an inconsistent/contrary provision in the aforesaid Requirements and Guidelines. If the contract and funding guidelines are not in agreement, the contract shall prevail. For example, if the provider will incur higher cost for an audit, review, or compilation than allowed per the Funding Requirements and Guidelines, a formal written request may be made for the greater amount to be allowed.

Motion to authorize the executive director to implement contract maximum reductions as described in this memorandum:

- Approved
- Denied
- Modified
- Additional Information needed

Motion to include in all PY2023 contracts the COVID-19 provision described in this memorandum:

- Approved
- Denied
- Modified
- Additional Information needed

Motion to include in all PY2023 contracts the provision for specific exceptions to Funding Requirements and Guidelines, as described in this memorandum:

- Approved
- Denied
- Modified
- Additional Information needed

I/DD Program Funding Recommendations for PY2023

July 1, 2022 thru June 30, 2023

Agency	Program Name	Current Awards		PY22		PY23		Recommendations	
		DDB Award	DDB Amended	PY22	MHB	PY23	DDB	MHB	PY23
<i>Priority: Self-Advocacy</i>									
CU Autism Network	Community Outreach Programs	\$38,000	n/a	n/a				n/a	n/a
<i>Priority: Linkage and Coordination</i>									
CCRPC - Community Services	Decision Support PCP	\$311,489	n/a	n/a			\$388,271		n/a
DSC	Service Coordination	\$435,858	n/a	n/a			\$468,000		n/a
Rosecrance Central Illinois	Coordination of Services: DD/MI	\$35,150	\$8,787.50				n/a		n/a
<i>Priority: Home Life</i>									
Community Choices, Inc.	Inclusive Community Support (formerly Community Living)	\$201,000	\$155,381				\$203,000		n/a
DSC	Community Living (formerly Apartment Services)	\$456,040	n/a				\$536,000		n/a
<i>Priority: Personal Life and Resilience</i>									
DSC	Clinical Services	\$174,000	n/a				\$184,000		n/a
DSC	Individual & Family Support	\$429,058	n/a				\$390,000		n/a
PACE	Consumer Control in Personal Support	\$24,267	n/a				\$27,367		n/a
<i>Priority: Work Life</i>									
Community Choices, Inc.	Customized Employment	\$201,000	n/a				\$217,500		n/a
DSC	Community Employment	\$361,370	n/a				\$435,000		n/a
DSC/Community Choices	Employment First	\$80,000	n/a				\$85,000		n/a
<i>Priority: Community Life and Relationships</i>									
Community Choices, Inc.	Self-Determination Support	\$162,000	\$160,251				\$171,000		n/a
DSC	Community First	\$847,659	n/a				\$847,658		n/a
DSC	Connections	\$85,000	n/a				\$95,000		n/a
<i>Priority: Strengthening the I/DD Workforce</i>									
DSC	Workforce Development and Retention	\$0	n/a				\$227,500		n/a
<i>Priority: Young Children and their Families (CCMHB focus)</i>									
DSC	Family Development		n/a				n/a		\$596,522
CC Head Start/Early Head Start	Early Childhood Mental Health Svs (MH & DD)								
	PY22 total = \$326,369, PY23 request = \$347,235		n/a				\$121,999		\$149,666
	TOTAL	\$3,841,891		\$718,521		\$4,275,296			\$746,188
		total PY2022 = \$4,560,412		total PY2023 requests = \$5,021,484		MHB will cover \$746,188			

#1/A.

PY2022

3rd Quarter

Service Activity

Reports

for I/DD programs funded by
the Champaign County Developmental Disabilities Board
and Champaign County Mental Health Board

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Community Choices, Inc. DDB**
- # Board **Developmental Disabilities Board**
- # Program **Customized Employment (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/28/2022 02:13 PM
Submitted By CCCOOP

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Quarterly Data (NEW Clients)	1	502	2	667
	Annual Target			

32

CSE: 3/31/22 - Case Manager's Round Table - discussed all CC Programs.

SC: Service contacts are reported via the online reporting system. 502 in Q3.

TPC: Adults with I/DD who participated in the Customized Employment Program. 2 new in Q3.

Other = Direct hours spent supporting people with I/DD and their employment goals. These hours were reported using the online claims reporting system. 667 in Q3

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports\)](#)

- # Agency **Community Choices, Inc. DDB**
- # Board **Developmental Disabilities Board**
- # Program **Community Living (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/28/2022 02:13 PM
Submitted By CCCOOP

33

Community Service Events Service / Screening Contacts (CSE)	4	32	5	6	99
NON-Treatment Plan Clients (NTPC)					
Treatment Plan Clients Other (TPC)					
Annual Target					

CSEs:
 2/22/22 - Inclusive Community Support Informational Meeting
 3/3/22 - Inclusive Community Support Informational Meeting
 3/7/33 - Inclusive Community Support Informational Meeting
 3/31/22 - Case Manager Round Table - discussed all CC programs

Comments SC: Service contacts are recorded for non-treatment plan clients in personal development classes, 32 in Q3. Claims for treatment plan clients (242) are reported via the online reporting system.

NTPC: Non-treatment plan clients include participants in personal development classes, 5 new in Q3.

TPC: 6 new treatment plan clients in Q3.

Other: Direct hours are recorded for NTPCs in personal developmental classes - 99. Direct hours for TPCs (326) are reported via the online reporting system.

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Community Choices, Inc. DDB**
- # Board **Developmental Disabilities Board**
- # Program **Self-Determination Support (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/28/2022 02:13 PM
Submitted By CCCOOP

34

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

Quarterly Data (NEW Clients)	Annual Target	(CSE)	(SC)	(NTPC)	(TPC)	Other
3	545	2	0	0	341.5	

CSE = Speaking to U of I Social Work Class - Sexuality and Disability on 3/8/22
Speaking to U of I SPED Characteristics of Disability Class on 3/10/22
Case Manager Round Table (All CC programs) on 3/31/22

545 Service Contacts in Q3 (412 with Members with Disabilities, 133 with Family Members)

Comments

2 new participants in Q3 (1 member with a disability, 1 family member)

0 treatment plan clients in the self-determination program

Other = 341.5 direct hours in Q3

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- # Agency **CCRPC - Community Services**
- # Board **Developmental Disabilities Board**
- # Program **Decision Support PCP (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/26/2022 02:12 PM
Submitted By AYOOST

35

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	40	300	220	0
Quarterly Data (NEW Clients)	6	290	46	70
Comments				

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports \)](#)

- # Agency **CU Autism Network**
- # Board **Developmental Disabilities Board**
- # Program **Community Outreach Programs (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/27/2022 01:18 PM
Submitted By JPALERMO

36

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

Annual Target	25
Quarterly Data (NEW Clients)	7

This Quarter we held/attended:

We provided various advocacy/parent support via phone calls, emails, and zoom meetings. Presentations of Autism Lesson through the Community Outreach Education Program. We continue to provide updated disability/covid 19 information on social media under our virtual CUAN cares program as well as our CUAN Community Spotlight.

Participated in community planning of the 2022 CUAN Walk and Resource Fair and promoted on TV and Radio with always promoting Autism Awareness and Acceptance.

Participated in the Rantoul Village Autism proclamation.
Collaborated with the UMS Sensory Area Task force Community Team of the outdoor sensory area.
Collaborated with the Carle Foundation Autism Initiative Program.
Attending various meetings: including CCDDDB,CCDDDBCC, CAN

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Clinical Services (2022 Quarter 1)**
- # Period **2022 - First Quarter PY22**

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

Date Submitted 10/23/2021 01:51 PM

Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	10	4	61
Quarterly Data (NEW Clients)	0	0	0	0
Continuing from Last Year (Q1 Only)			3	57

37

Community Service Events: None were possible due to COVID-19 restrictions and public outreach events on hold at this time.

Individual Information: Six individuals received two types of clinical services. Two individuals were closed from Clinical Services as met counseling goals.

Service/Screening Contacts: There were no screening contacts this quarter. An individual who receives DSC supports reached out to one of our counselors on his own and set up private pay for his counseling.

Update: Most practitioners are back to in-person sessions with the option of telehealth if preferred.

Extra Reporting Time: 7.5 hours total this quarter. 6 hours of clinical time for billing, reporting, scheduling, quarterly summaries, and discussions regarding psychiatry and counseling practices. 1.5 hours discussing a newly acquired home and psychiatry/counseling service needs of those residents. All are connected with providers established from previous agency so no formal requests for Clinical Services at DSC at this time.

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports\)](#)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Community Employment (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/26/2022 09:44 AM
Submitted By VICKIE2010

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other Clients
Annual Target	2	15	70	
Quarterly Data (NEW Clients)	2	4		3

38

Comments The third quarter of FY22 has proven to be successful for both job seekers and those currently employed in the community. Job seekers have benefitted from the increased need on the part of employers for entry-level employees in a variety of industries. In this quarter alone, one long time job seeker became employed in the community while another who was employed at a DSC supported job reached her goal of being employed by the job site directly.

The first individual became a job seeker in December 2019, due to the COVID-19 pandemic his job development was placed on hold as shelter-in-place mandates prohibited the majority of employment seeking activities. In mid-2021, this individual became involved in a Community First project wherein he assisted in a park beautification project. This individual was especially suited for this type of work as his attention to detail was highlighted. Over time, this individual met regularly with his Employment Specialist and together they found a seasonal job at a well-known attraction. Again, this individual's attention to detail served him in his duties of cart collecting, product organization, and general cleaning. There was a stall in the job search as a resurgence of COVID occurred, but recently this individual has been hired by a major drug store chain to complete their day-shift maintenance and cleaning. Honing in on an individual's preferences and skills, despite the obstacles (in this case the pandemic), will lead to the right job fit. This individual will be working in a position that does not require frequent customer interaction (a preference) and utilizes his attention to detail (a skill).

The second individual has been employed at a DSC job site (Carle Hospital) since January 2007; she started in the dish room and since moved to the Grub Hub/fo-go- orders portion of the cafeteria while it was under construction in approximately 2021. This individual had a self-stated goal for many years to be employed by Carle Hospital, however no such jobs existed for her area of expertise. Recently, the new cafeteria opened at Carle Hospital and large hiring drive took place; this individual took the initiative to approach her Carle supervisor in order to get further information regarding positions she might be eligible for and how to apply. After completing applications with the assistance of her Employment Specialist, this individual shared with pride, "I did it! This is what I have been working towards for 12 years!" This individual is now an employee of Carle Hospital and learning new tasks in her new position.

Individuals being supported this quarter who are already employed have enjoyed the option to increase their shifts and hours as well as the opportunity to learn new tasks on-the-job. Employment Specialists are supporting individuals in scheduling their work hours through the use of online platforms, both on individuals' phones

and their computers. In many cases this requires ongoing training in the form of one-on-one hands on learning, list/task reminders, or verbal prompts. Additionally, individuals are supported in the use of the MTD and ADA transportation systems which have route changes as well as changes in scheduling requirements. For individuals who have training requirements as part of their employment, Employment Specialists provide support by coordinating the training, reminding individuals of the training, and/or participating in the training alongside the individual either at the worksite or in the community; using a laptop computer or platform preferred by the employer.

Supported Employment:

- One new TPC was opened this quarter and began working with the support of our Employment Specialist.
- Thirteen individuals were supported in their jobs this quarter, with one individual resuming employment after having been out of the workforce for the fiscal year.
- One TPC began participating in Job Club, which met in-center, as well as in the community to explore employment-related topics.
- Two TPCs lost their long-term employment as a result of the financial pressures each business faced when minimum wage increased on January 1st, 2022. Fortunately, our ES was able to find each person new employment opportunities that they were excited to start, both with comparable hours to their previous jobs. Each worker also had the opportunity to learn job skills associated with their new jobs that were different from their previous positions, thereby adding accomplishments to their resumes.

39

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Community First (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/26/2022 01:46 PM
Submitted By VICKIE2010

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

Annual Target	3	5	50	55
Quarterly Data (NEW Clients)	2	1	11	1

40

Third quarter held some exciting events. The first of many was the Advocacy Community Leaders presenting to local high school students their successes and accomplishments in life. The students were thrilled to see them thriving and enjoying lives as leaders in the community. In January, the Advocates' presentation "How We Impact Our Agency's Hiring Process" was selected as a session at the 75th Annual Arc of Illinois Convention. The team has been preparing for the convention that is scheduled for Wednesday, April 13th 2022. In addition to their long list of contributions to the program and community, they organized a panel designed to further the person centered process of group selections. This took place on February 9th and was a huge success. Each person who attended the panel was able to voice their preferences for groups to be offered the next session beginning in April 2022.

Many program participants used this platform to let us know that they would like to see cooking classes offered. From this, we were able to make connections with both the Hope Center in Urbana and the Stephen's Family YMCA. The Hope Center has offered their space to us to provide people an instructional class on how to prepare foods for lunches and dinners they can prepare at home. Similarly, the YMCA's partnership will include their registered dietitian leading a group of people with an instructional follow-a-long healthy meal approach.

Comments Groups continued exploring interests as well as assisting participants in fostering relationships with peers and community members. A few examples include: Fan Club, Video Game Group, Men's Group, Space Group, Paranormal Group, and Fantasy Sports. It was noted on several occasions that people in these groups value being able to share interests with each other. Health and wellness groups continued to be offered, many taking place at the YMCA and Champaign Park District's Leonhard Center. Health Matters is a group that continues to hold its popularity. Many people participating in groups at the Leonhard Center have built relationships with building staff and regulars including a person who has begun to play basketball with a community member. Volunteers returned to both Salt and Light and I.D.E.A Stores. Some of these group members expressed interest in joining the Career Readiness Program on a path to employment and will be considered for community Supported Employment Opportunities based on their interest.

For those requiring more support, four individuals participated in groups that were new to them and visited 11 places they had never been to before including new restaurants, stores, a nature center, art gallery, and library.

Instructions

Quarterly Program Activity / Consumer Service Report

(Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Community Living (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

Status Submitted [Change Status] to Submitted

Date Submitted 04/25/2022 08:06 AM
Submitted By VICKIE2010

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

Annual Target	8	0	56
Quarterly Data (NEW Clients)	3	0	3

Staff provide education, resources, assistance and support resulting in a safe and independent home environment. Service hours range significantly from a few hours to over forty hours per person with support unique to each person.

This quarter, staff assisted with an emergency situation. Jim lived with his parents and had expressed an interest in moving to his own place in the summer. Staff initiated services after assessing his skills. At first Jim was very private and did not want staff to enter his parents' home so meetings and training were conducted in the community. As trust was established and the winter weather approached, Jim shared that his family members were now staying in a hotel and he remained living in the home with no heat. Because of the emergency situation, Jim decided to move into an apartment earlier than planned as his parents sought safer housing also. Jim is now receiving the enhanced support and services needed to be successful. He now has affordable housing, is receiving needed medical care and is maintaining full-time employment.

Instructions

Quarterly Program Activity / Consumer Service Report [\(Return to Quarterly Reports\)](#)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Connections (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/25/2022 04:13 PM
Submitted By VICKIE2010

42

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	3	12	25	
Quarterly Data (NEW Clients)	3	1	1	

The Crow this quarter was delighted to support some of its artists in participating in two art shows. The first of two shows was the Arc of Illinois' 72nd convention Art Exhibit. Four artists entered this show which was available for viewing on their website. The second show was the Champaign Park District's Town and Country Art Show. Six people entered this show had their works on display at the Springer Cultural Building in Champaign. A virtual walkthrough was available and posted on their website.

Comments Groups at the Crow continued to offer a variety of content for those whose interest is art. The candle making group continued on the heels of last quarter's impressive sales- creating, testing, and designing new scents for the spring and summer months. The soap making group also continued to prepare their stock for our upcoming spring and summer art/craft shows. Also continuing this quarter were: Music Jam, Music Intro, Art expression, poetry, and a variety of painting opportunities. The Zine group continued as well with a program participant as a co leader. This person was instrumental in assisting group members in coming up with content for their Zine.

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Employment First (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/25/2022 07:56 AM
Submitted By VICKIE2010

43

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

Annual Target 25

Quarterly Data (NEW Clients) 3

- o Employer Training
 - LEAP trainings were provided to:
 - Anchor Church: 61822; Lead Pastor attended a virtual 4th Thursday session
 - The Mark Waldhoff Team at Keller-Williams Realty: 61822; Four people attended a virtual session Frontline Staff training was provided to:
 - The Mark Waldhoff Team at Keller-Williams Realty: 61822; Four people attended a virtual session
 - o Impacts of the LEAP Program for Q3

Comments
 The Place for Children with Autism made first contact with DSC through the LEAP Coordinator, resulting in a job being carved for a DSC jobseeker in Q3.
 Schnucks (Urbana) went through LEAP training in 2019. Since then, they hired DSC jobseekers in 2019 and 2020, and have just hired another one this quarter.
 Champaign Park District went through LEAP Training in 2017. Since then, they hired DSC jobseekers in 2018, 2019, and 2020, and have just hired a Community Choices jobseeker this quarter at Champaign-Urbana Special Recreation.
 o Program Development
 112 people in Champaign County were introduced to the LEAP program this quarter via e-mail, virtual meetings, and in-person events in an attempt to solicit participation in the trainings.

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Developmental Services Center**
- # Board **Mental Health Board**
- # Program *Family Development*
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/24/2022 03:46 PM
Submitted By VICKIE2010

44

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	15	200	0	655
Quarterly Data (NEW Clients)	4	33	0	67

Weekly play group resumed March 3rd and occurs every Thursday at the Champaign Public Library. DSC's developmental screening specialist partnered with WILL's literacy outreach program for monthly pop-up outreach events at Urbana's Salt & Light location. This occurs the third Wednesday of each month (beginning March 2022) and families can access information regarding resources, referrals, and receive free developmental screenings for children ages birth-five years. The first Parent Advisory Committee meeting was held March 25th with three families participating. A second meeting is scheduled for the beginning of June.

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports\)](#)

- # Agency **Developmental Services Center**
- # Board **Developmental Disabilities Board**
- # Program **Individual and Family Support (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Date Submitted 04/25/2022 02:21 PM
Submitted By VICKIE2010

45

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	2	32	17	
Quarterly Data (NEW Clients)	2	0	1	

The Individual and Family Support Program continues to provide services and support to individuals and families in the following ways: direct staff support; personal care; developing daily living skills; behavior management; social and communication skills; as well as integrating individuals to an array of community activities.

Comments The Intermittent Direct Support (IDS) component part of the program assisted someone to attend TKD and helped provide some items for someone who moved into an apartment for the first time. Families have been reaching out more to get more providers signed up and support requests have increased since the COVID-19 outbreak.

One NTPC transferred to TPC, now receiving day program services also. One new person to program opened as TPC.

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency Developmental Services Center
- # Board Developmental Disabilities Board
- # Program Service Coordination (2022 Quarter 3)
- # Period 2022 - Third Quarter PY22

Status Submitted [Change Status] to Submitted

Date Submitted 04/25/2022 01:44 PM
Submitted By VICKIE2010

46

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

Annual Target	2	75	36	280
Quarterly Data (NEW Clients)	2	6	1	6

Coordinates services by creating pathways to needed services and working with the team to integrate care; Facilitates delivery of services; Linkage and referral to community resources; Establishing and maintaining benefits: SNAP, Medical, and Social Security; Shelter Plus Care Coordination; 24 hour emergency response team participation and supervision; Social Security Representative Payee services; Medical appointment coordination and intermittent direct support with Medical; Continual Strong Advocacy to Doctor s/nurses to ensure a person's voice is heard and respecting they retain their rights; Assistance with housing needs, resources, and advocacy-working hard to prevent homelessness; Assisting with urgent financial circumstances (benefits and employment, etc); Assisting with linkage for legal support and providing advocacy and support to people with legal concerns/police/court; Assisting in transitions from services when deemed necessary and helping to make that a smooth comfortable transition when it is oftentimes hard for people to go through, Grocery shopping and nutrition guidance; Increase individual's ability for self-management and decision-making; Documentation management; Actively supports measures that prioritize the individual's needs and promotes the effective use of resources; Intervenes by arranging for services, and by providing psychosocial support to the individual and their family; Provides individual/family advocacy; Strives to maximize continuity of care; Communicates with providers who are delivering care and services for the purpose of maintaining the quality of care; Coordinate case conferences as needs arise to help support people the best we can; Increase individuals ability for self-management and decision making; Review Implementation Strategy Ongoing Supports and provide monthly summaries of services; Ensuring agency policies and procedures are being followed; Working to coordinate a smooth transition from county to state funding with the ISC when pulled from PUNS.

Instructions

Quarterly Program Activity / Consumer Service Report (Return to Quarterly Reports)

- # Agency **Champaign County Head Start/Early Head Start MHB**
- # Board **Mental Health Board**
- # Program **Early Childhood Mental Health Svs (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

Status Submitted

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

Date Submitted 04/29/2022 04:33 PM

Submitted By BELKNAP

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients Other (TPC)
Annual Target	5	3000	400
Quarterly Data (NEW Clients)	1	797	33
Treatment Plan Clients (TPC)			12
80 New Treatment Plan Clients:			14
These clients are children, parents, or staff members who receive ongoing support or consultation which requires goal setting, planning, and follow up.			4

47

Comments
 5 Community Service Events (CSE): These events include community trainings and workshops that share information about our social-emotional services.
 Service Contacts (SC)
 3,000 Service Contacts: These service contacts meetings and observations regarding children, Practice Based Coaching with education staff, Social-Emotional Committee Meetings. Reflective Consultation with staff and caregivers. Screenings and assessments. Other direct and indirect services with or on behalf of TPC and NTPC's.
 Other
 12 Other services: Psycho-educational workshops, trainings, professional development efforts with staff and parents.

Instructions

Quarterly Program Activity / Consumer Service Report

[\(Return to Quarterly Reports \)](#)

- # Agency **PACE, Inc.**
- # Board **Developmental Disabilities Board**
- # Program **Consumer Control in Personal Support (2022 Quarter 3)**
- # Period **2022 - Third Quarter PY22**

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

Status Submitted

Date Submitted 04/20/2022 02:07 PM

Submitted By SHERRY

48

	Community Service Events Service / Screening Contacts (CSE)	NON-Treatment Plan Clients (NTPC)	Treatment Plan Clients (TPC)	Other
Annual Target	12	200	30	0
Quarterly Data (NEW Clients)	5	75	7	0

PACE offered orientations via zoom and 1:1 appointments at PACE's office during this quarter to recruit PSWs. Due to the decrease inquiries of potential PSWs, we are currently running PSW Indeed job postings, Facebook postings and attending community events to attempt to recruit PSWs.

PACE would like to note that during this quarter recruiting efforts were affected by potential PSWs not completing paperwork. As a result, for this quarter there were two (2) potential PSWs that were not successfully added to the PSW registry due the reasons above and are not reflected to the number reported above.

No TPCs due to people being served through this funding are people seeking employment as PSWs and not consumers with I/DD. Continued collaboration is taking place with IRC, DSC and CCRPC-ISC, in that they are referring individuals with I/DD and their family to PACE to hire a PSW that was oriented and put onto a registry through this funding.

Comments PACE continues to reach out and attempt to collaborate with the parent group at Community Choices, IRC and DSC.

PACE continues to offer quarterly PSW advisories to provide an extra opportunity for consumers and PSWs to get connected and discuss topics about the PSW program. The last online PSW advisory occurred on, Friday, March 4, 2022.PACE also participated in CCDDDB: Case Managers' Roundtable on Thursday, March 31, 2022.

For the Third Quarter PY22, PACE has sent out three(3) PSW referrals

#11.B.

PY2022
3rd Quarter
Service
Data
Charts

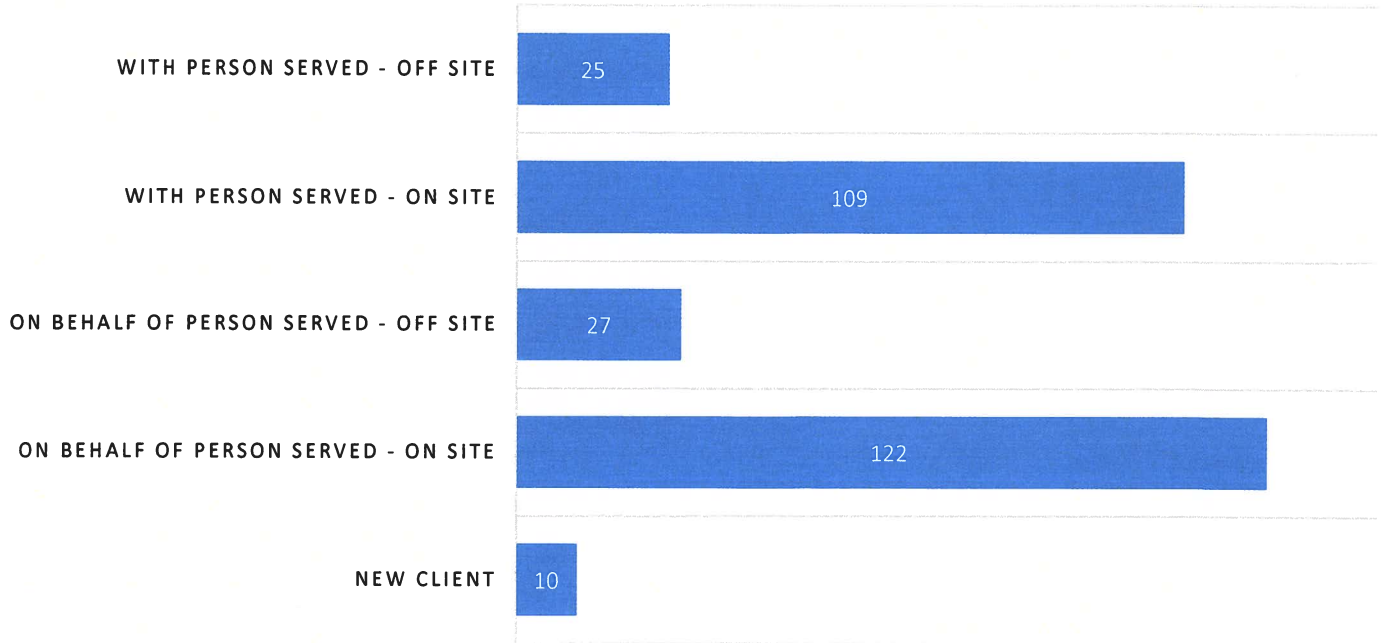
CCRPC - Community Services

Decision Support Person \$77,872

PY22 Q3

159 people were served, for a total of 1,048 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



50

CCRPC - Head Start/Early Head Start

Early Childhood Mental Health Svs \$30,499 PY22 Q3 DDB & MHB

21 people were served, for a total of 138 hours

PARTICIPANTS PER SERVICE ACTIVITY

SUPERVISION/STAFF TRAINING (STAFF HOUR)

17

WITH PERSON SERVED (ON SITE)

11

HOURS PER SERVICE ACTIVITY

SUPERVISION/STAFF TRAINING (STAFF HOUR)

98

WITH PERSON SERVED (ON SITE)

40

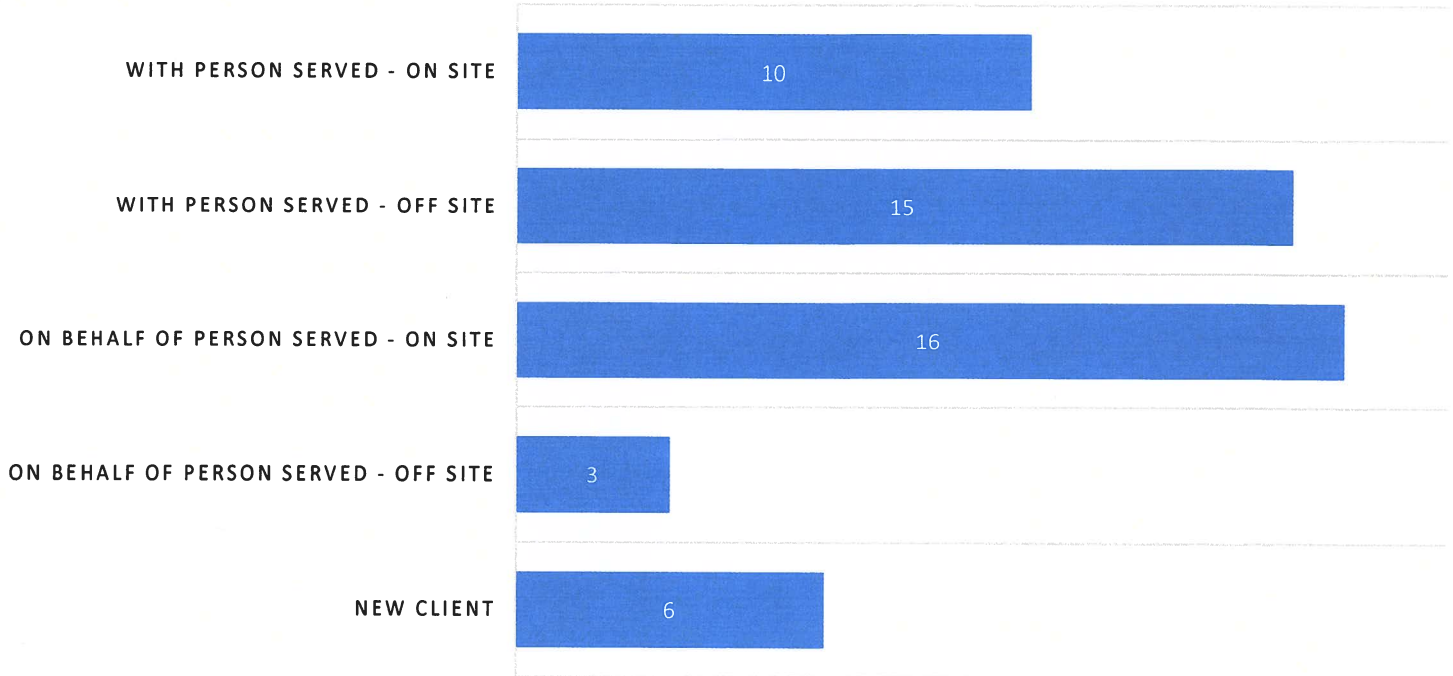
Community Choices

Community Living \$38,845

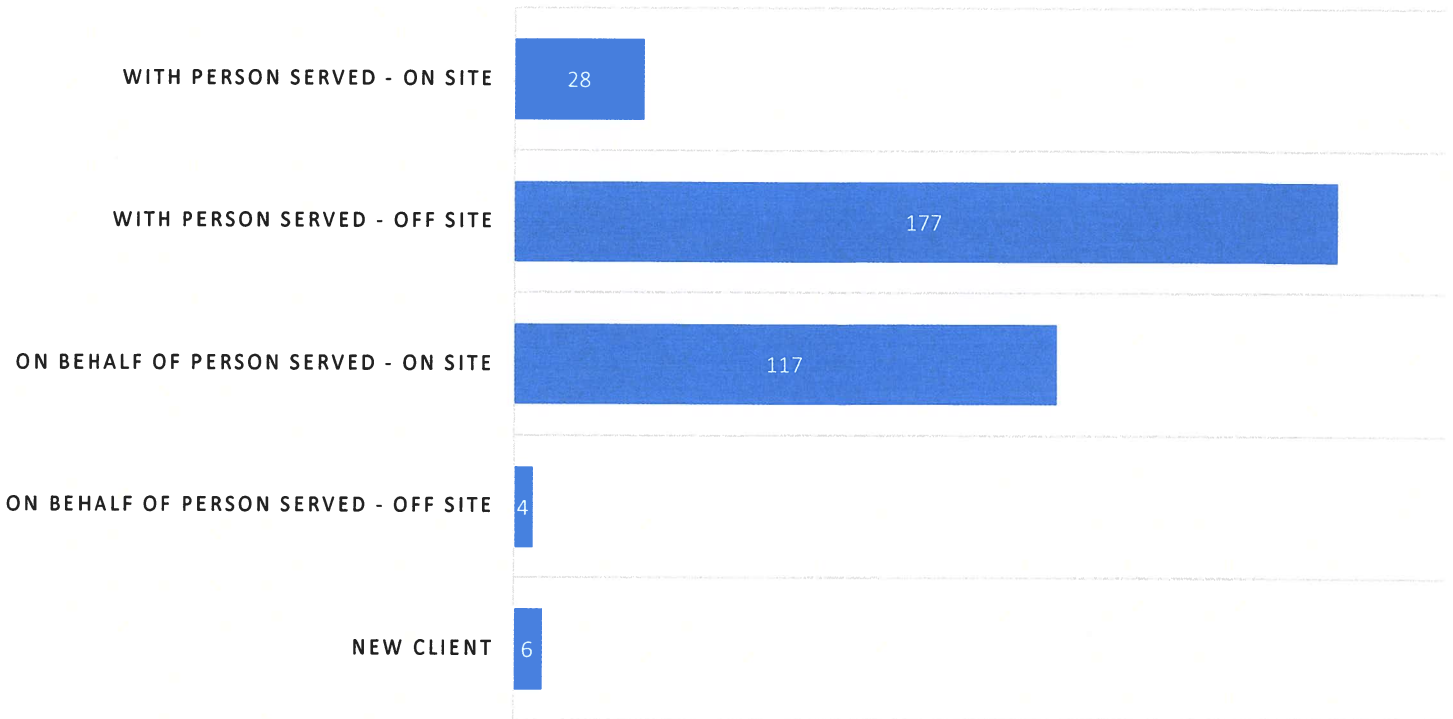
PY22 Q3

19 people were served for a total of 332 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



53

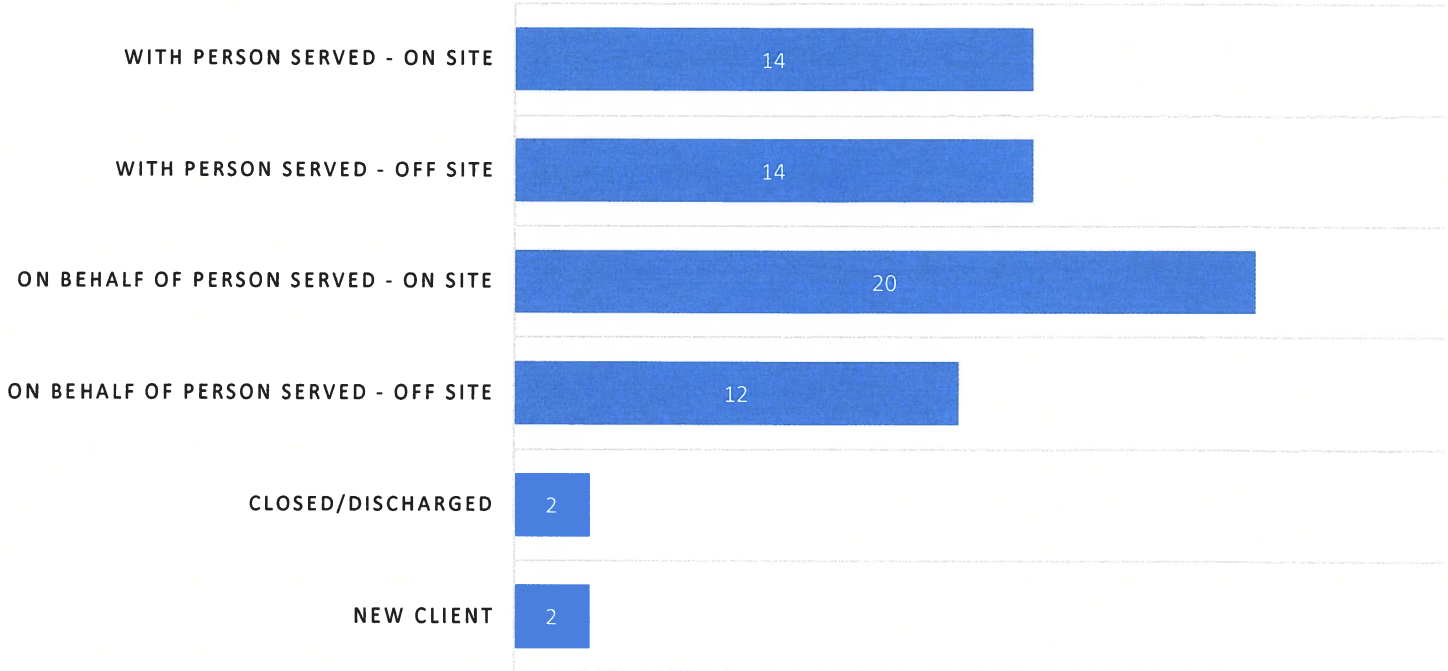
Community Choices

Customized Employment \$52,500

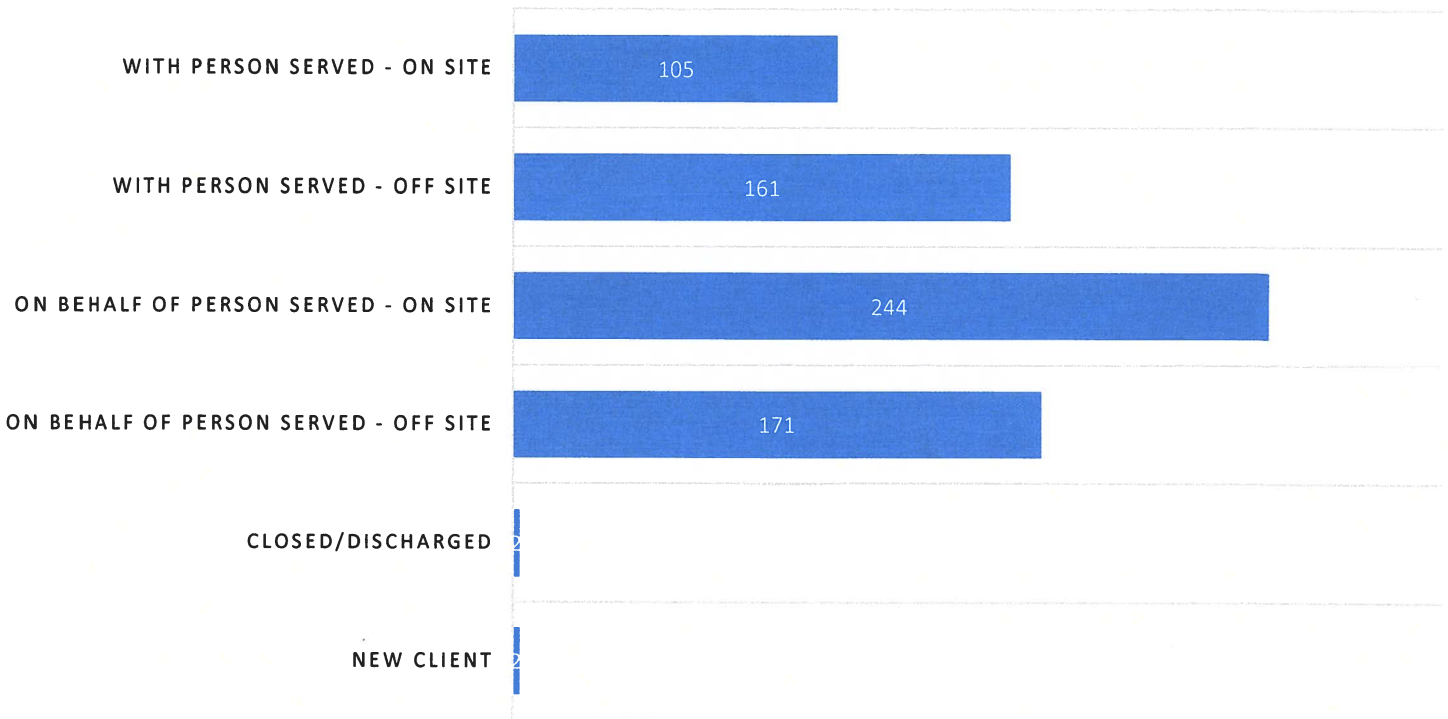
PY22 Q3

24 people were served for a total of 685 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



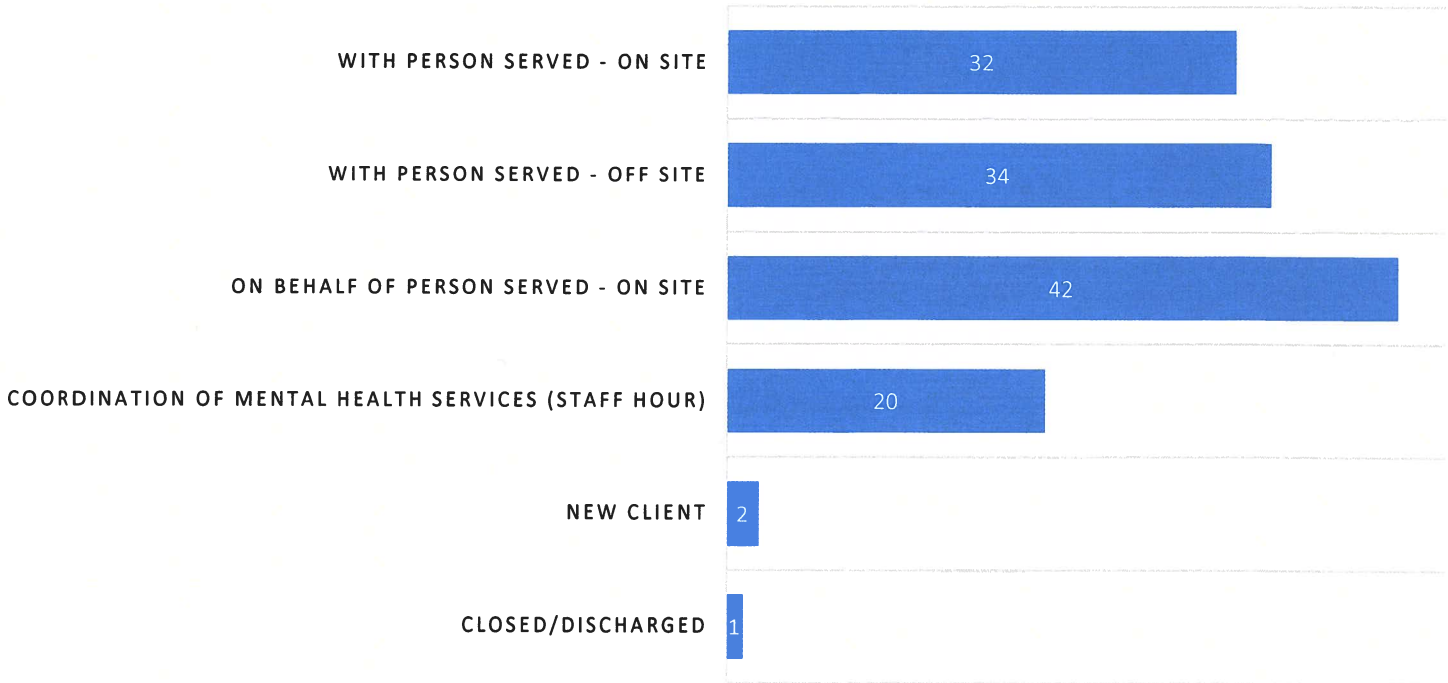
DSC

Clinical \$43,500

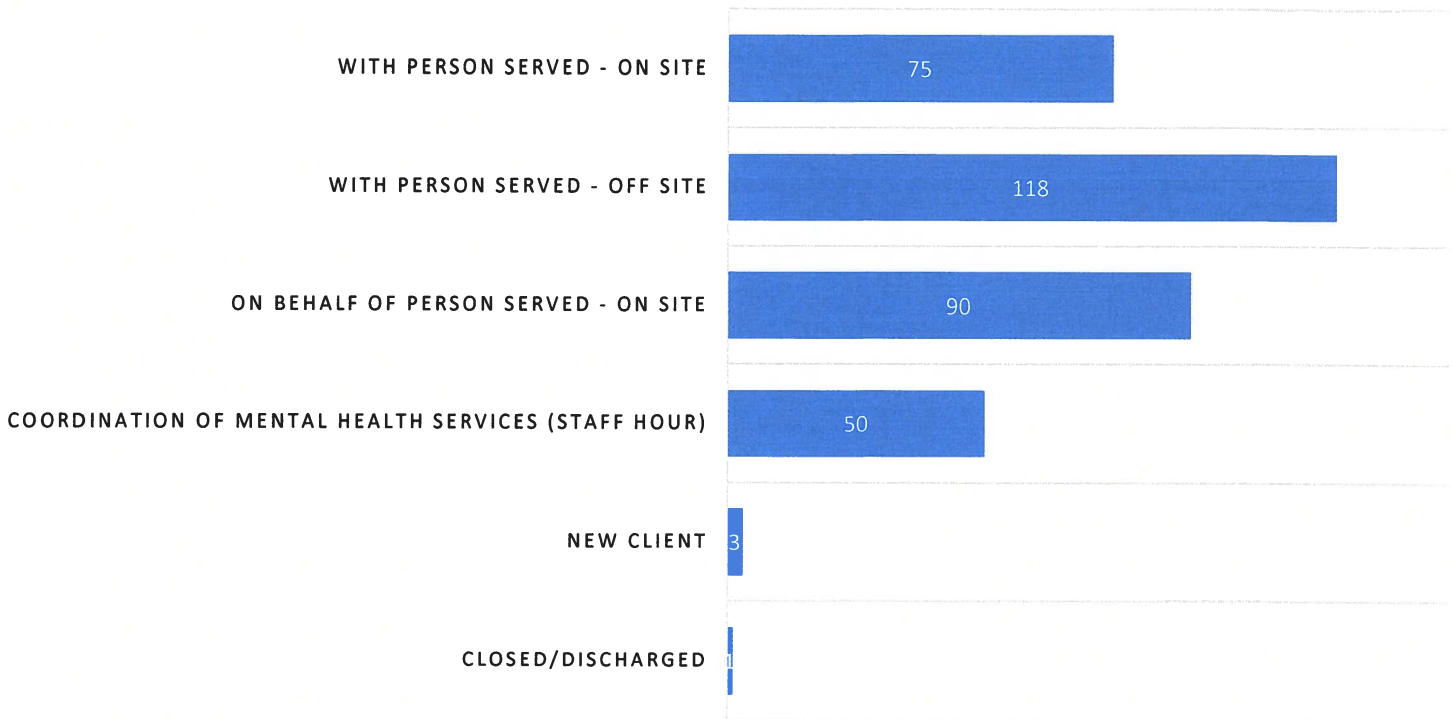
PY22 Q3

45 people were served for a total of 337 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



54

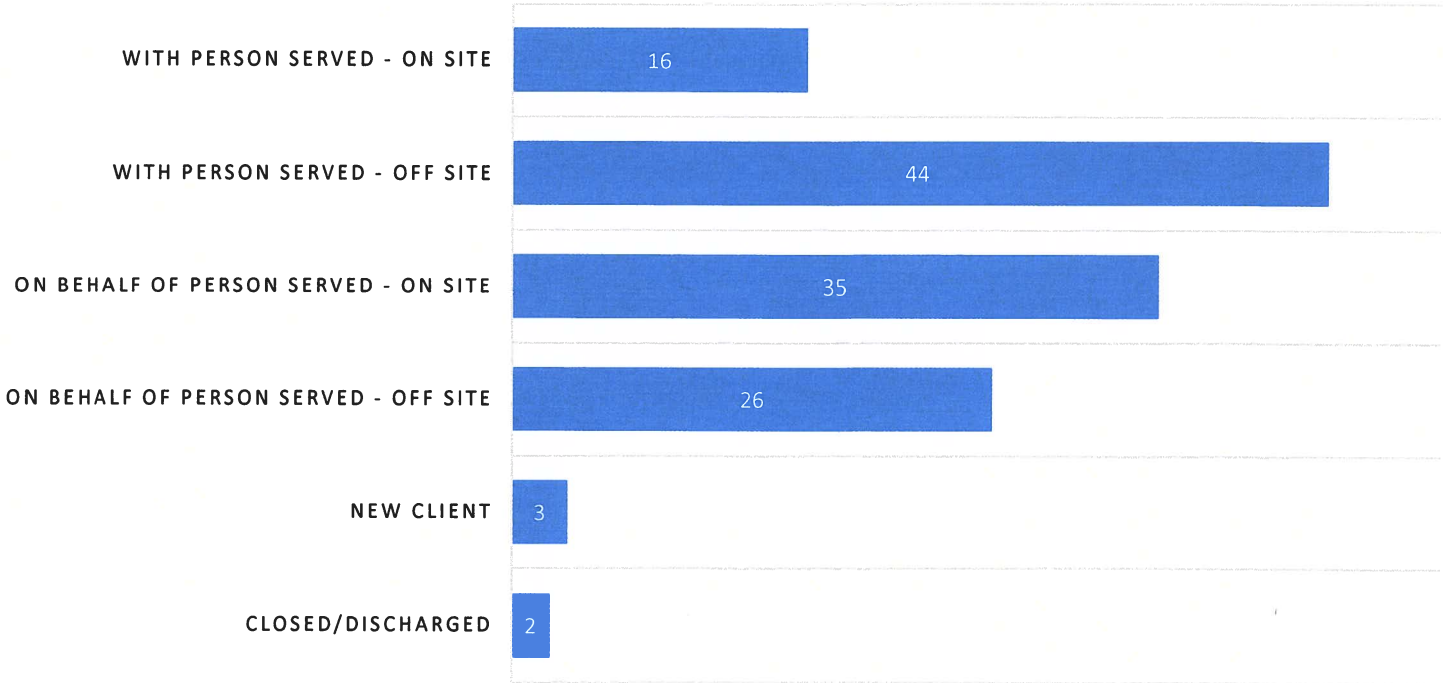
DSC

Community Employment \$90,342

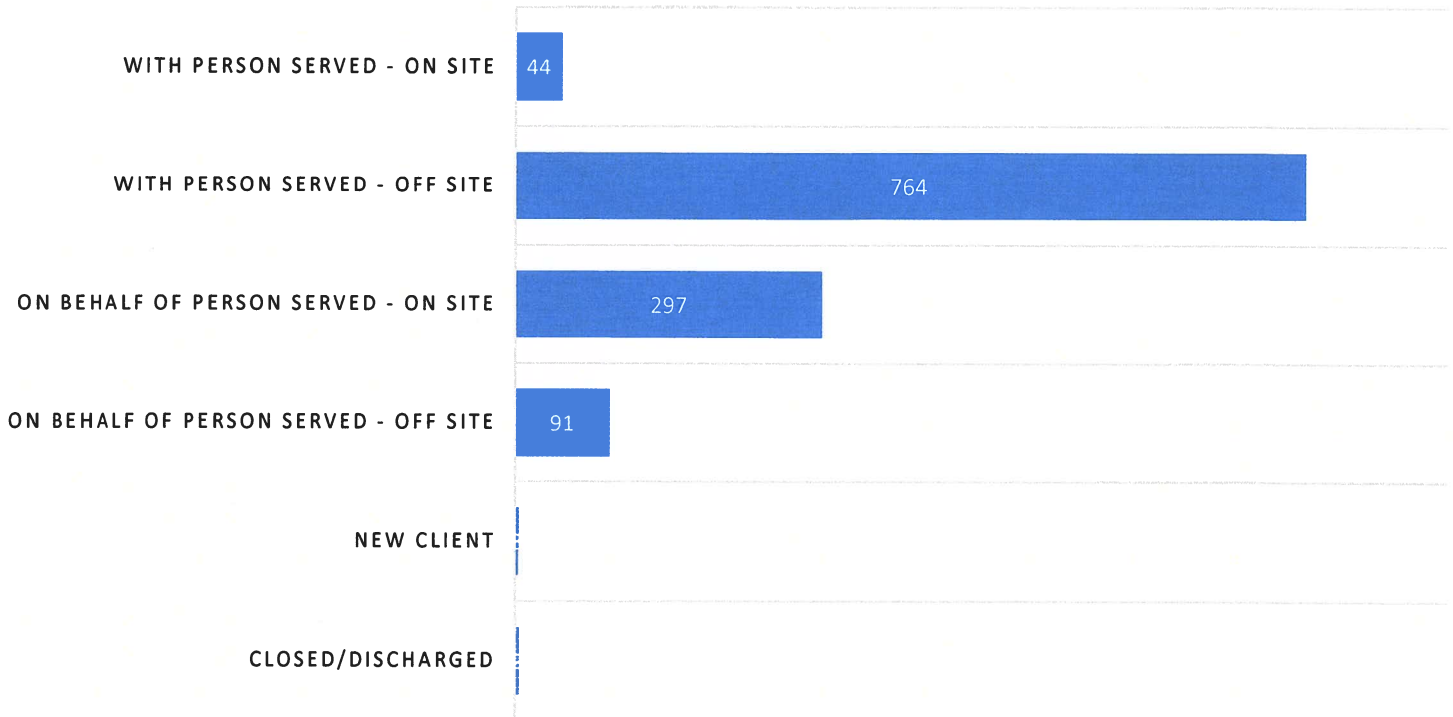
PY22 Q3

47 people were served for a total of 1,201 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



55

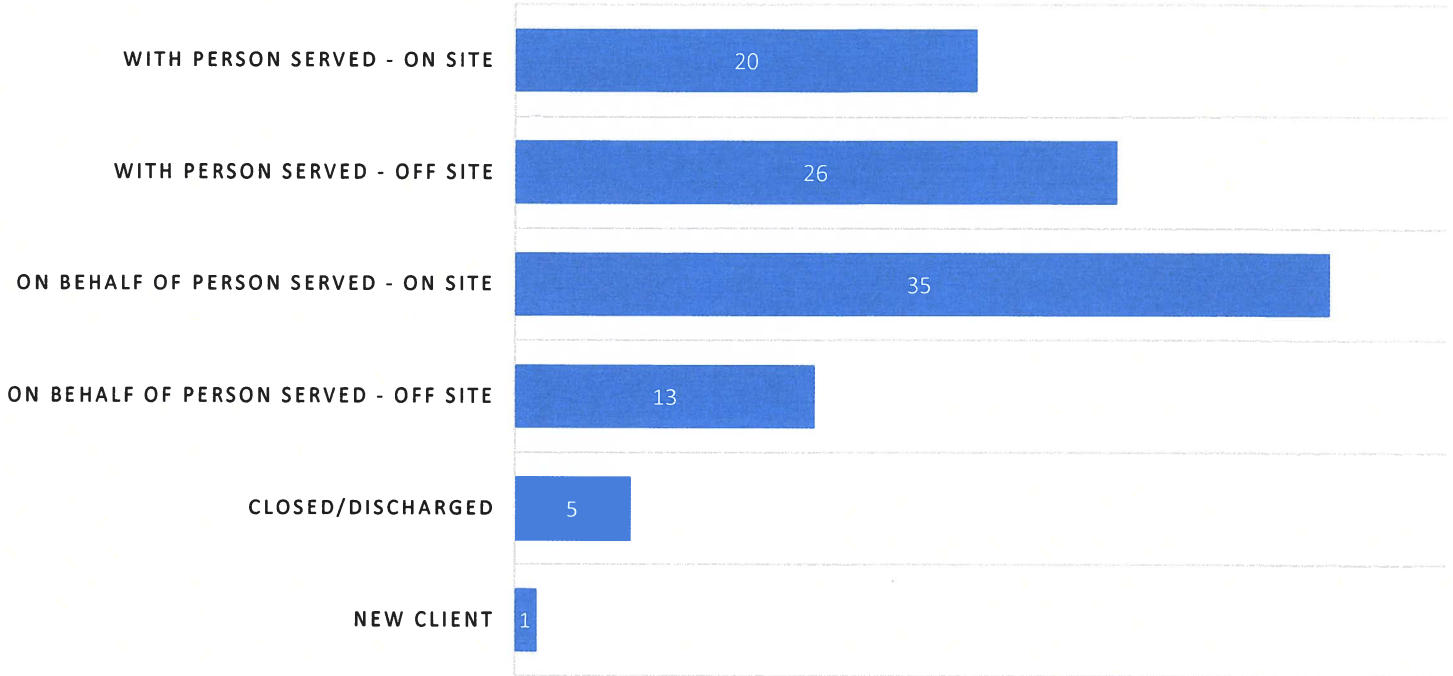
DSC

Community First \$211,914

PY22 Q3

37 people were served, for a total of 5,121 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



56

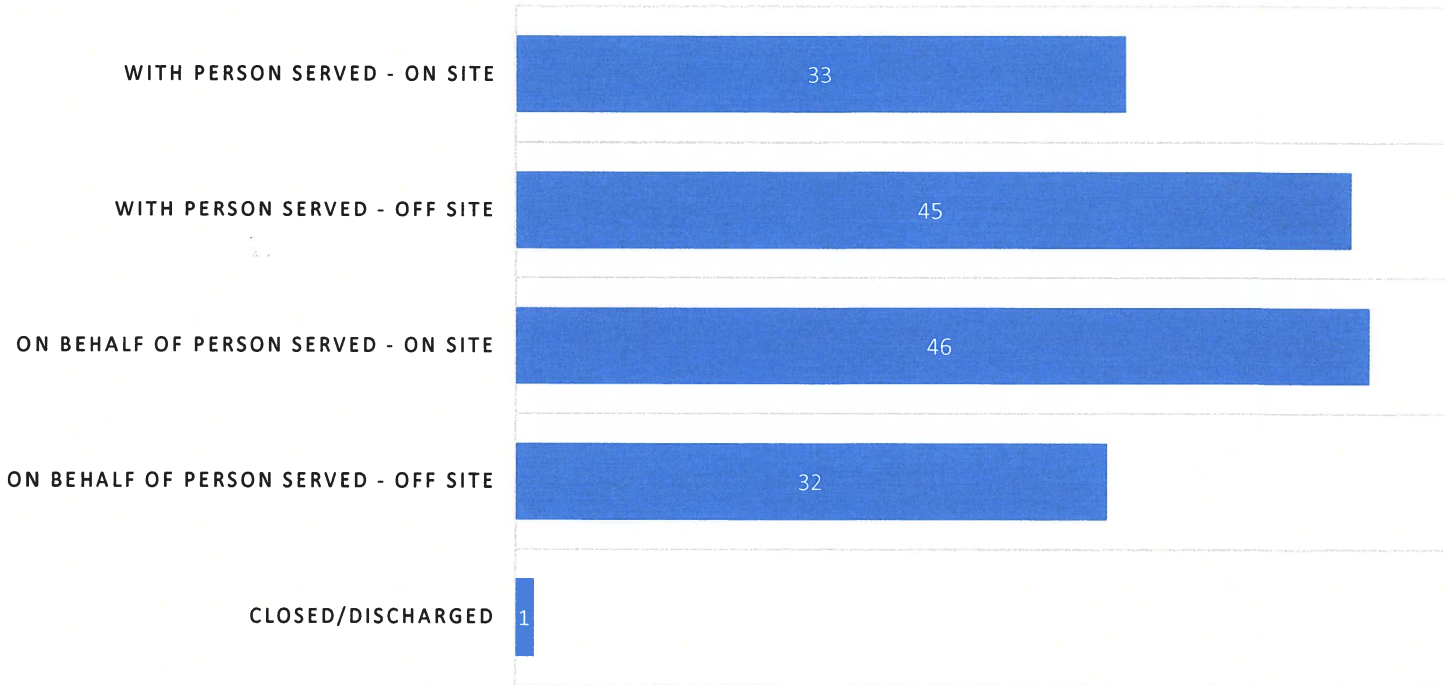
DSC

Community Living \$114,010

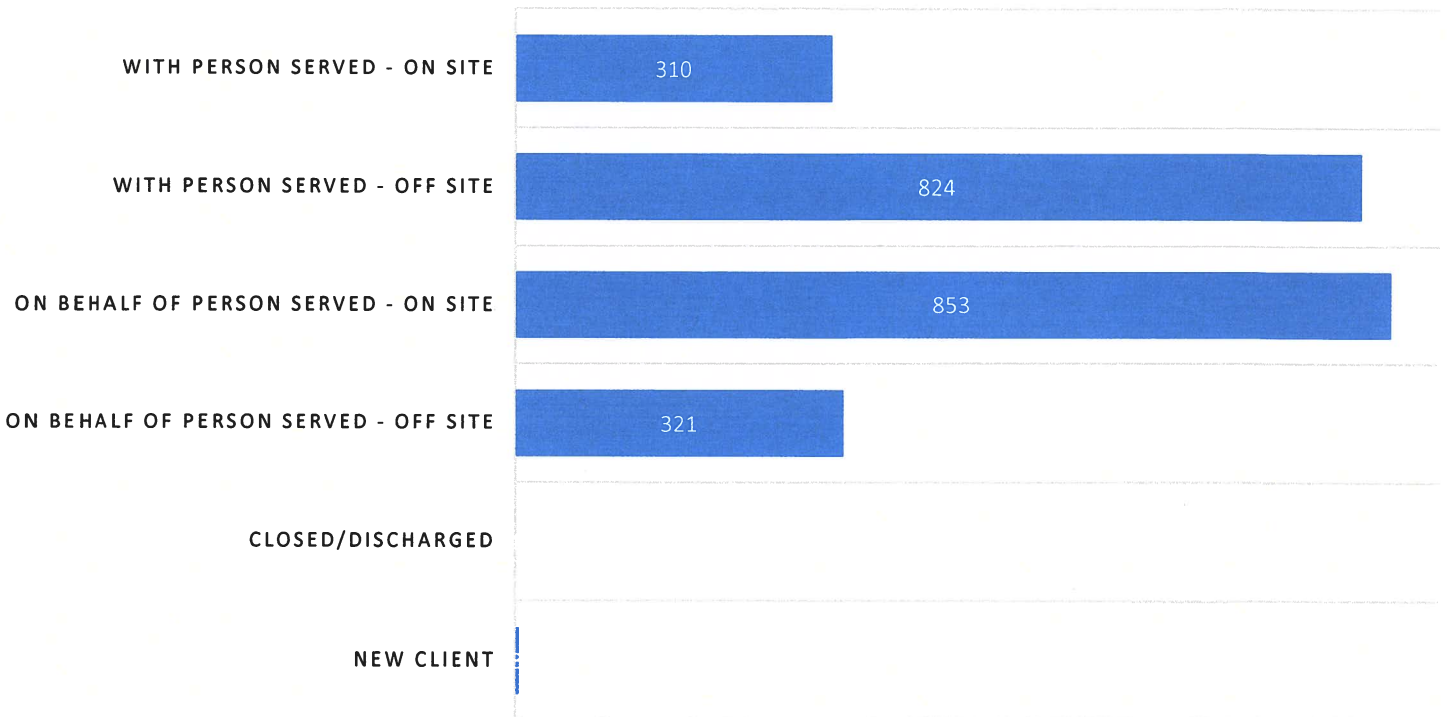
PY22 Q3

48 people were served for a total of 2,312 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



57

DSC

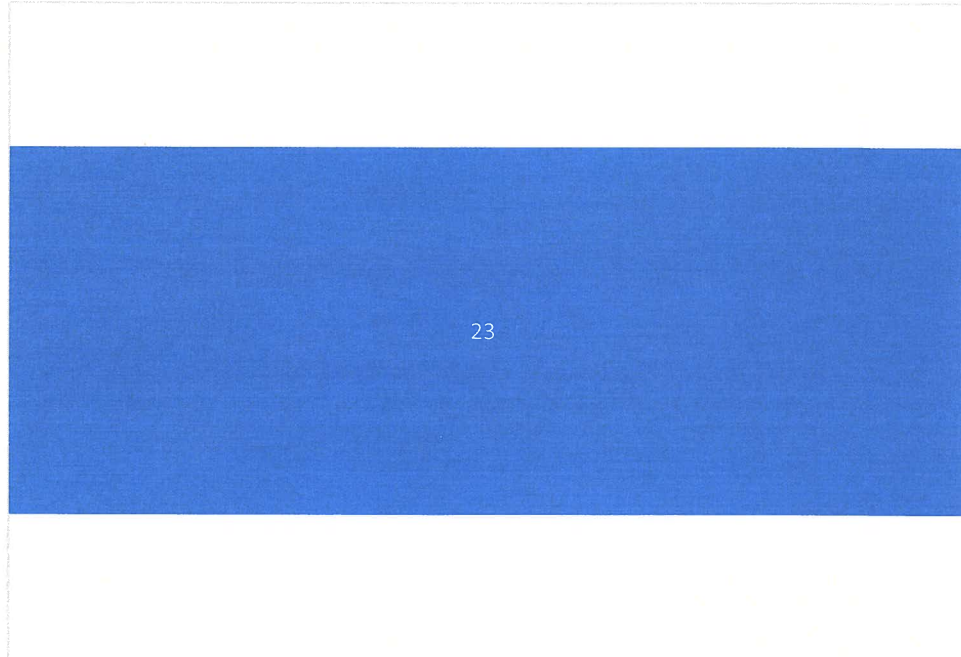
Connections \$21,250

PY22 Q3

23 people were served, for a total of 910 hours

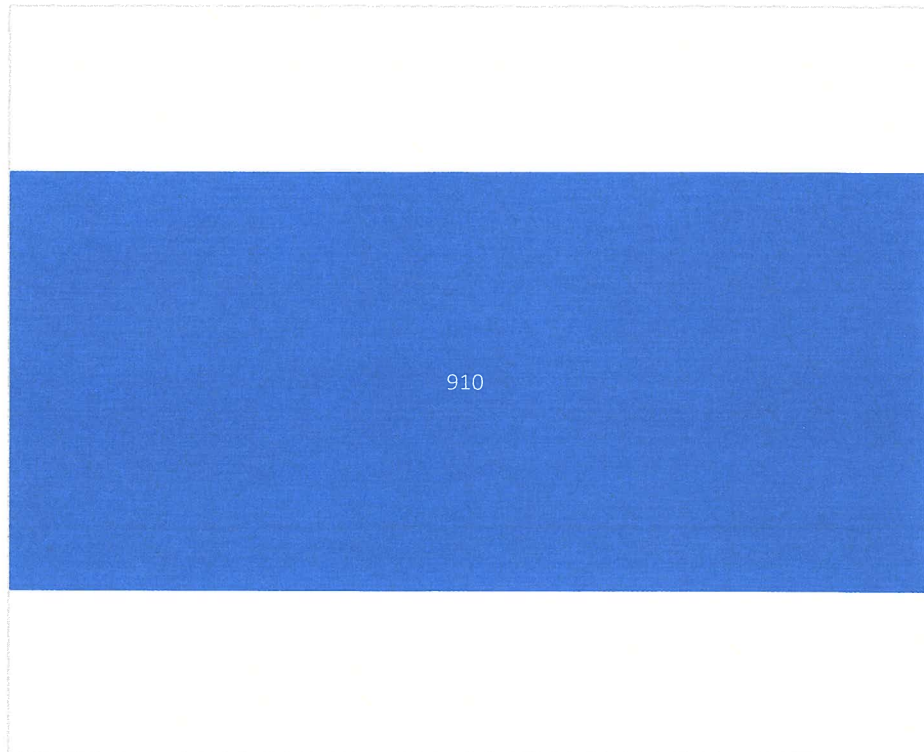
PARTICIPANTS PER SERVICE ACTIVITY

WITH PERSON SERVED - OFF SITE



HOURS PER SERVICE ACTIVITY

WITH PERSON SERVED - OFF SITE



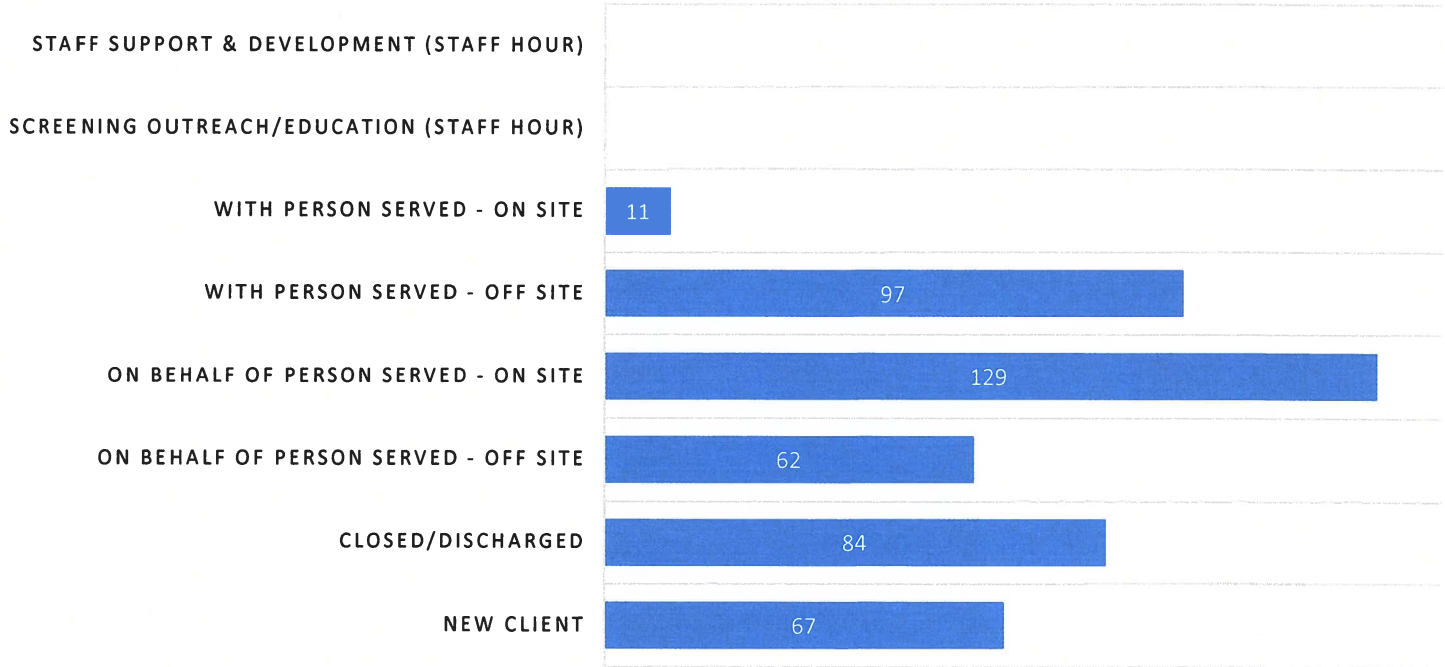
DSC

Family Development \$149,130

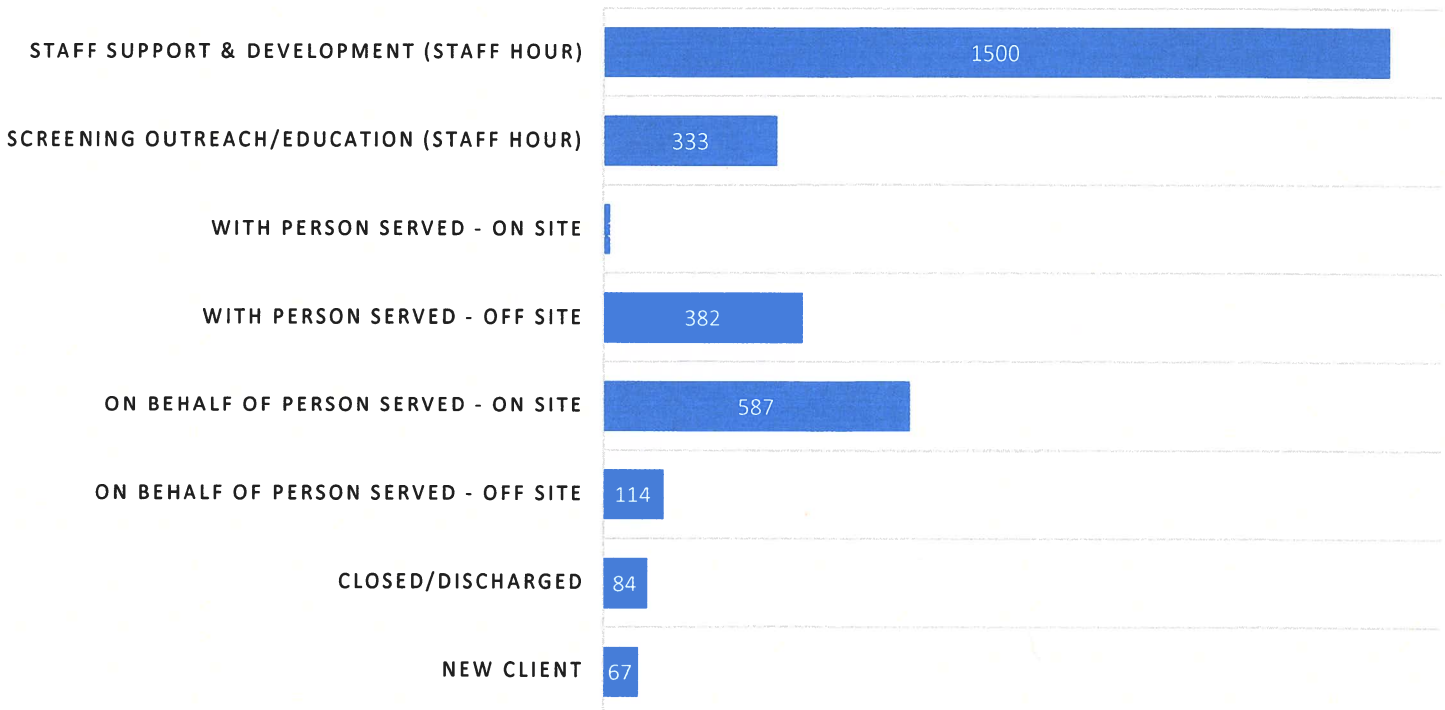
PY22 Q3 MHB

239 people were served for a total of 3,080 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



59

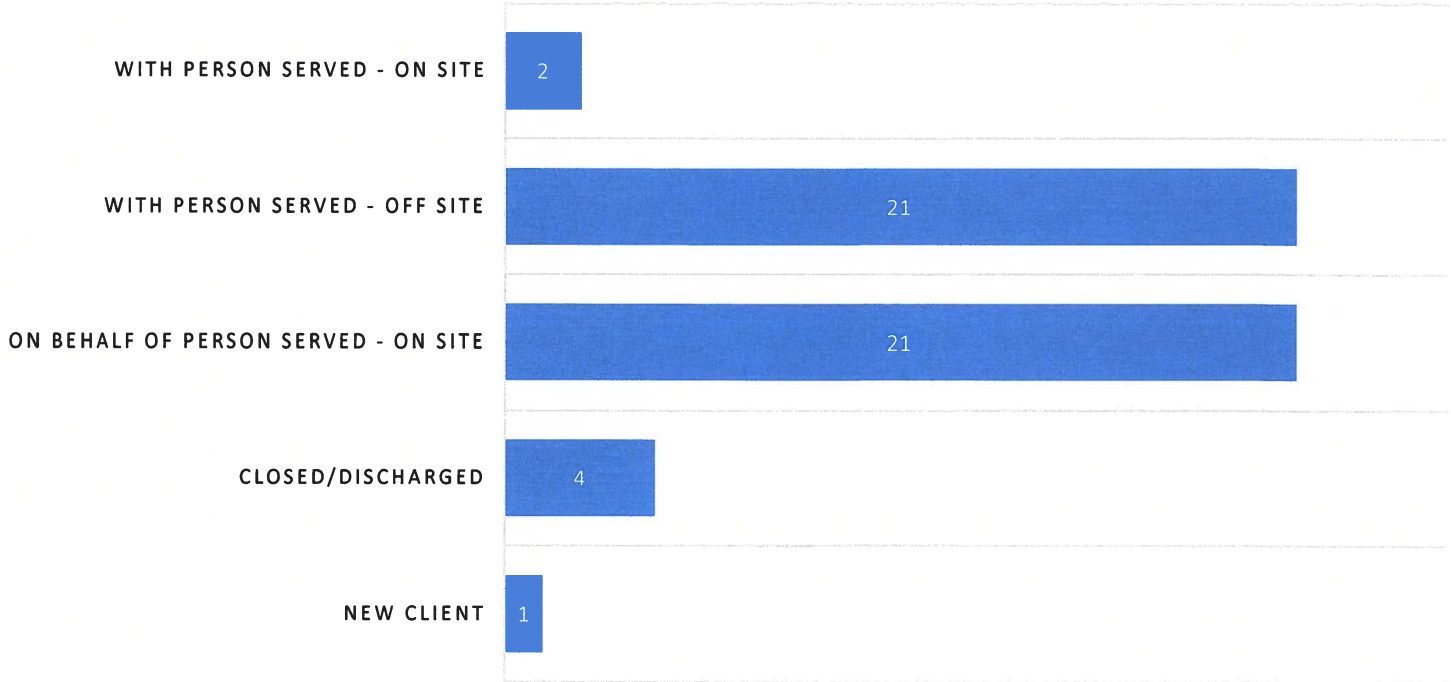
DSC

Individual & Family Support \$107,264

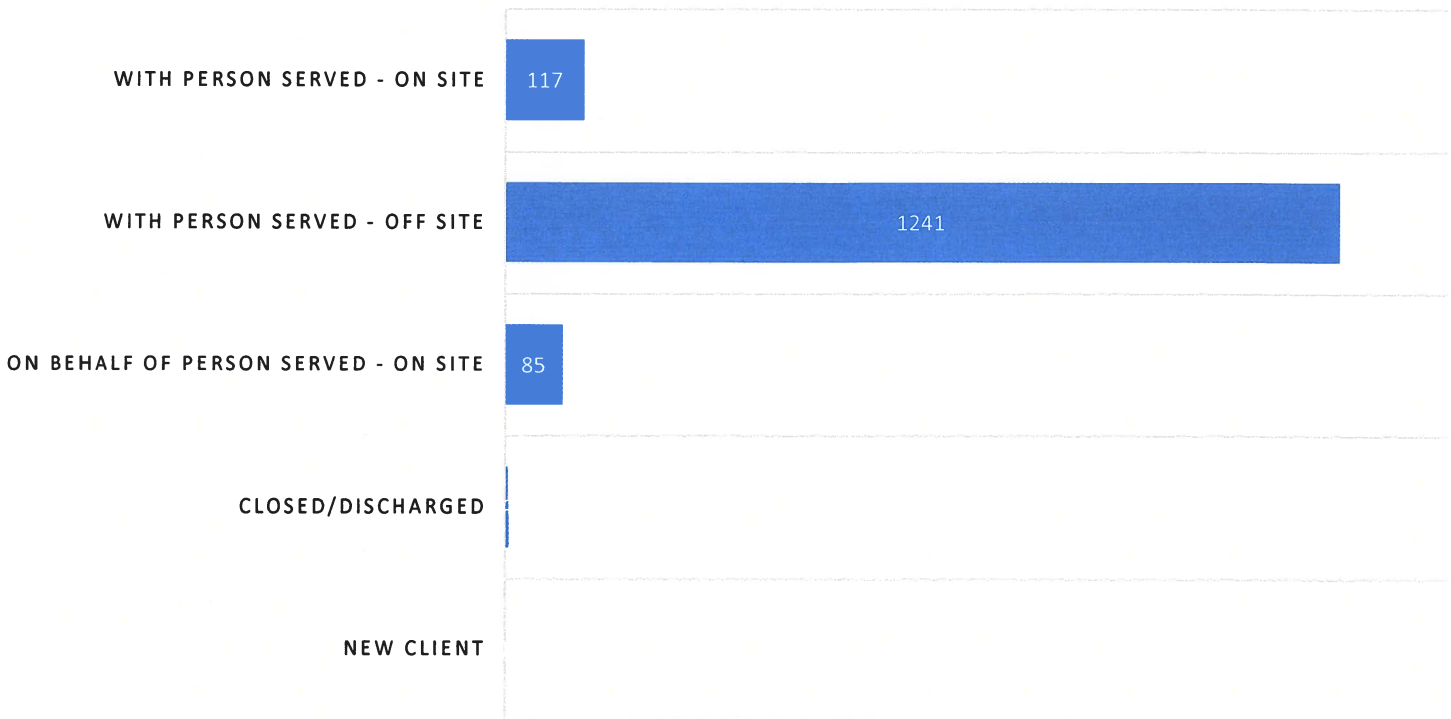
PY22 Q3

24 people were served for a total of 1,448 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



60

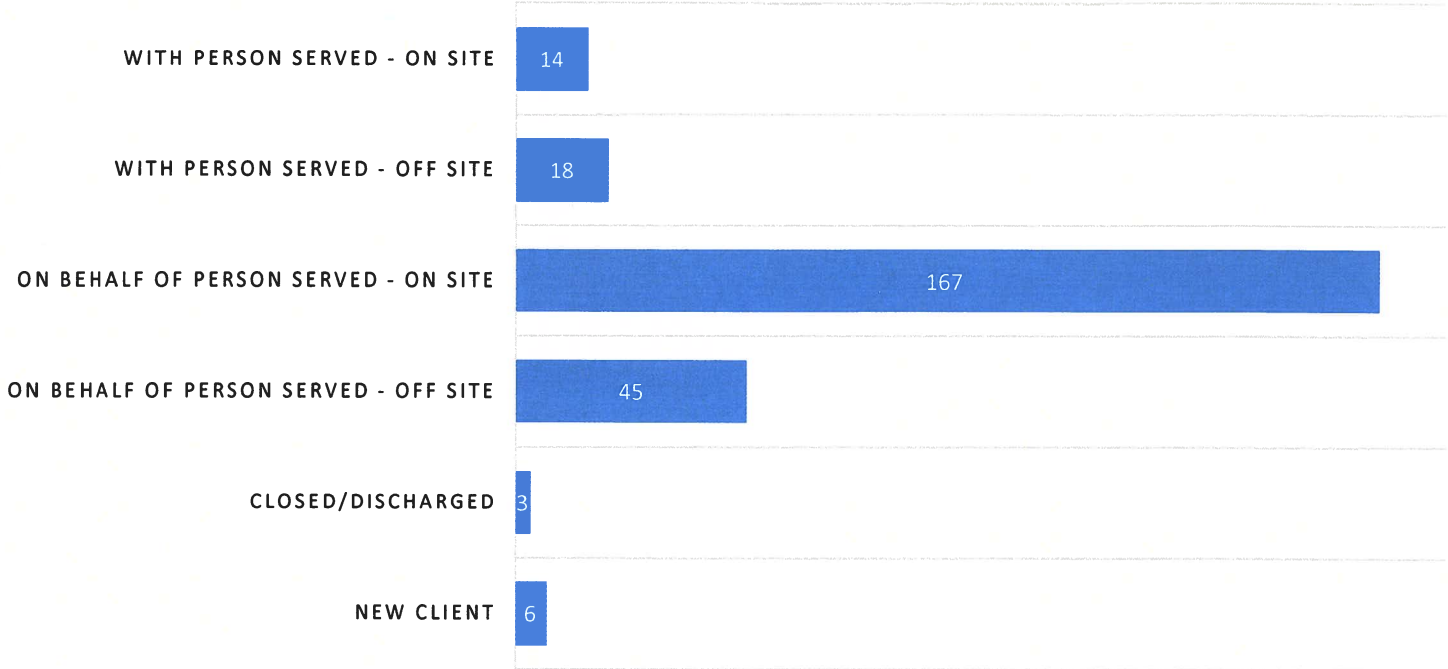
DSC

Service Coordination \$108,964

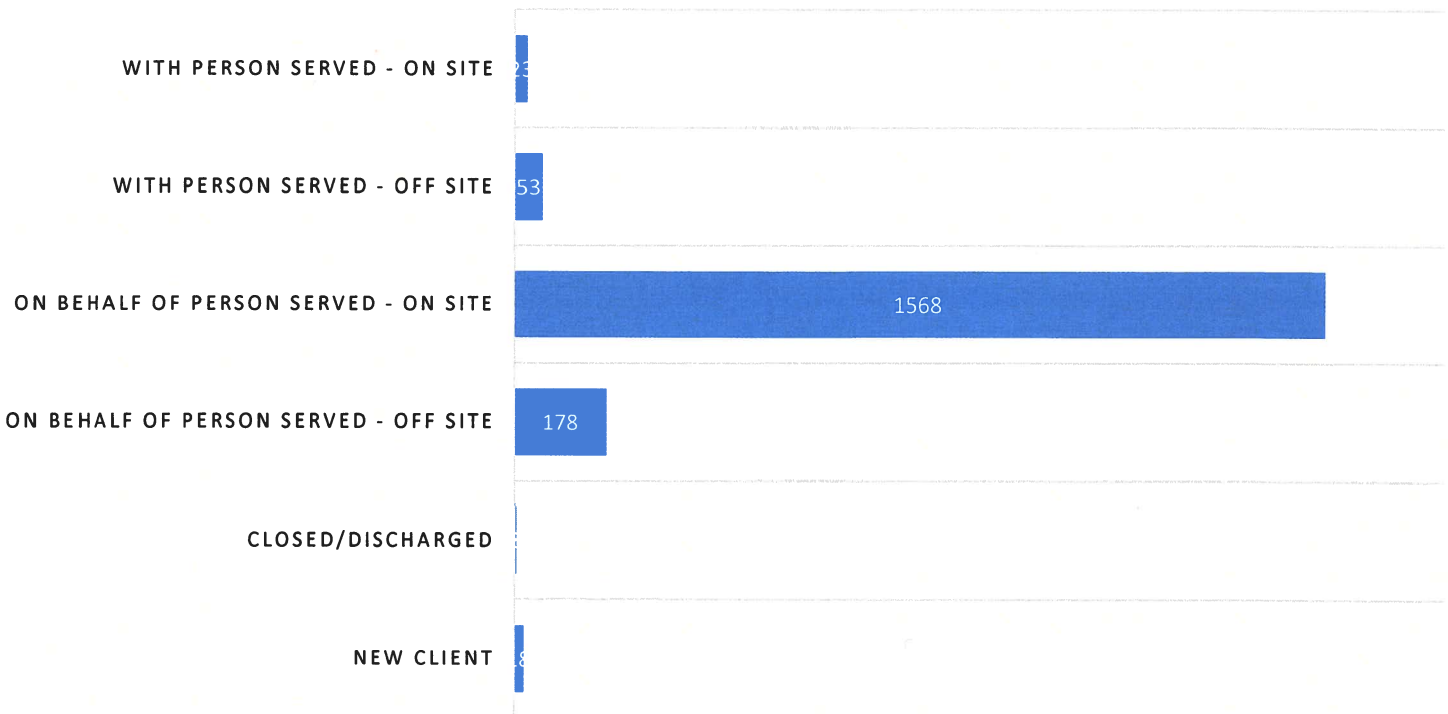
PY22 Q3

201 people were served, for a total of 1,843 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



61

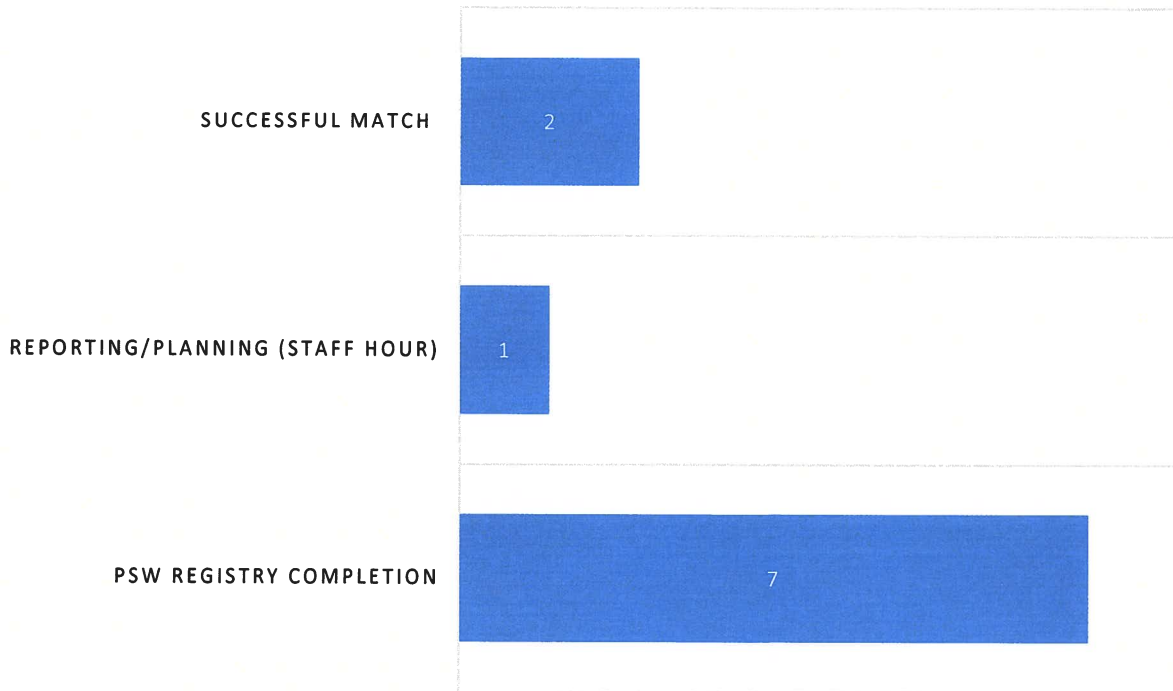
PACE

Consumer Control in Personal Support \$6,066

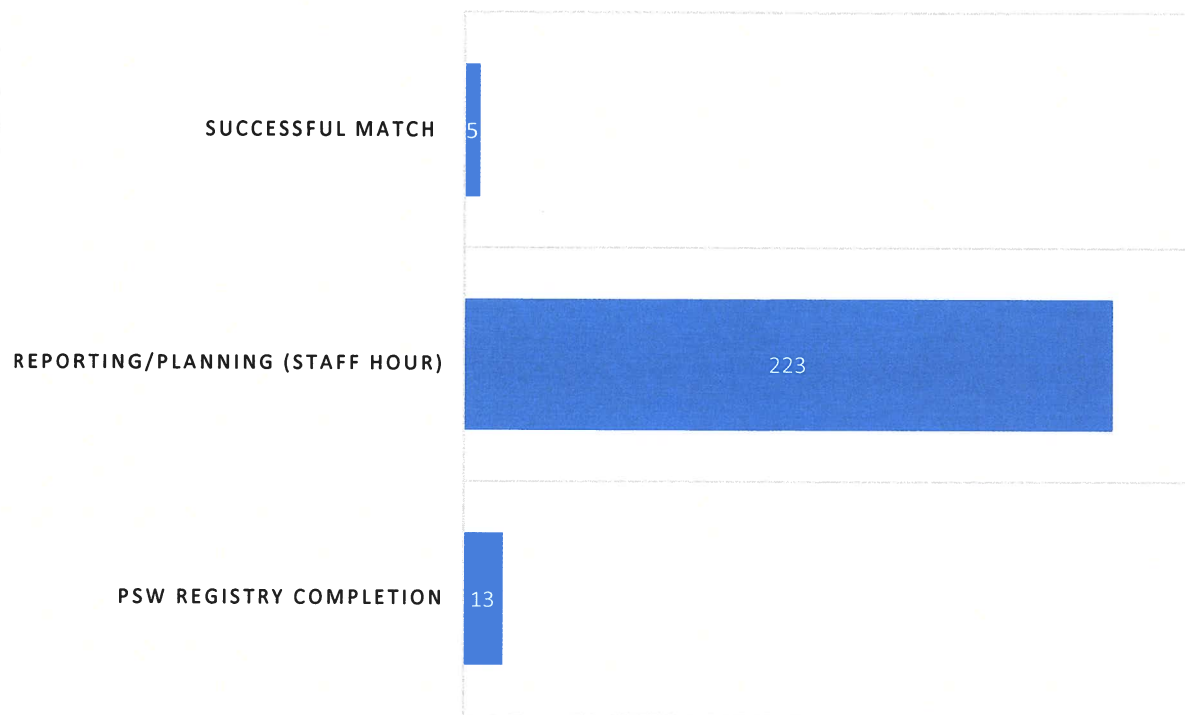
PY22 Q3

8 PSWs registered, for a total of 241 hours

PARTICIPANTS PER SERVICE ACTIVITY



HOURS PER SERVICE ACTIVITY



62

From the Executive Director

Greetings Stakeholders!!

I hope you are doing well, and I hope you had a fantastic 211 day this past February!! Please contact me (cworkman@pathcrisis.org) if there is anything specific you would like to see me address in future quarterly letters. I have provided some general updates below that may be of interest to everyone.

Updates:

- I think everyone has heard by now, but just in case you haven't: PATH Inc. was awarded the State of Illinois contract to operate the 988 mental health and suicide crisis hotline for those areas in Illinois that do not have a current federally certified crisis call center and to act as backup for the other five (5) certified crisis call centers in Illinois. You may be asking why this is relevant to 211, so let me explain:
 - PATH Inc. 211 will be making some changes effective July 1, 2022. PATH Inc. began as a mental health crisis line, so when we developed our 211-service model it made complete sense to blend Information and Referral (I&R) services with crisis services. It has worked well for us over the past ten (10) years, however, times change, and improvements are being made to strengthen our ability to help others. One of these improvements is the new federal 988 number. Illinois will be implementing the new 988 mental health/crisis line effective July 1, 2022. Therefore, PATH Inc. will separate our 211 and crisis call center model to just provide 211 services to our 211 stakeholders.
 - We are using the 211 data systems as part of 988 for making mental health referrals, but we are also using the resources developed as part of 988 to be used as part of 211. This will assist in the future development of 211 in the State of Illinois as outlined in the Illinois 211 Board proposal for expansion.
 - This data blending of 211 and 988 systems has also allowed PATH Inc. to educate those in the government about 211 resources and what 211 offers to its citizens. I believe we have developed many supporters in IDHS who I hope will foster support for the Illinois 211 Board and the proposed statewide expansion.

Updates Cont. From the Executive Director

- Ride United Last Mile Delivery partnership between UWW and Doordash is seeking grant applications. Using the same DoorDash technology that brings burritos, groceries, and pet toys to your home, Ride United's Last Mile Delivery delivers food pantry boxes, prepared meals, hygiene items, school supplies, and much more directly to neighbors' homes for free!
<https://app.smartsheet.com/b/form/52051ab466c14c2f9db7a8263e02161a>
 - Note that the deadline was March 23, 2022, but we know that in past years they have accepted late applications.
- We would like to welcome Henderson and Mercer Counties to PATH Inc. 211. And we also are welcoming Will County to PATH Inc. 211 effective June 1, 2022.

Best Regards,



Chris Workman
Executive Director/CEO PATH Inc.



Champaign County



Overview

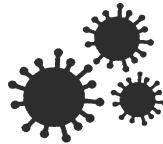
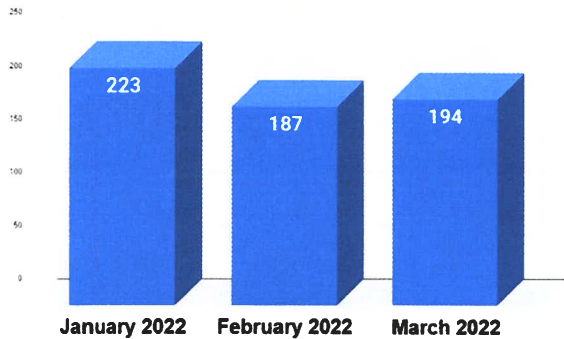
- ✓ Total Calls
- ✓ COVID-19
- ✓ Total Texts

- ✓ Time Stats
- ✓ Service Level
- ✓ Contact Needs
- ✓ Who's Calling

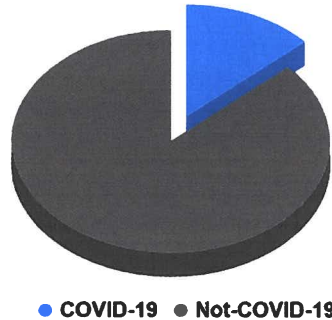
- ✓ Follow-Ups
- ✓ Referral Source
- ✓ PATH Page
- ✓ Links/Resources



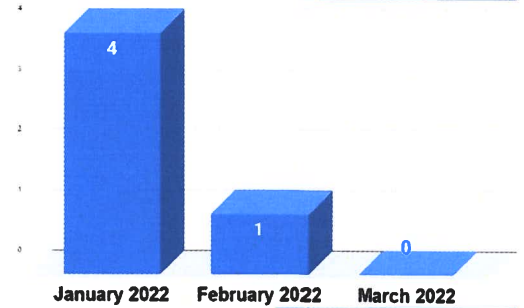
211 Calls



COVID-19 Contacts



211 Texts



United Way 211 Report 1st Quarter

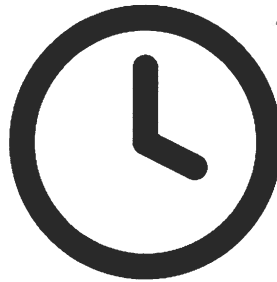
January 1st - March 31st, 2022

65

Time stats, Service Level

Average Handle Time

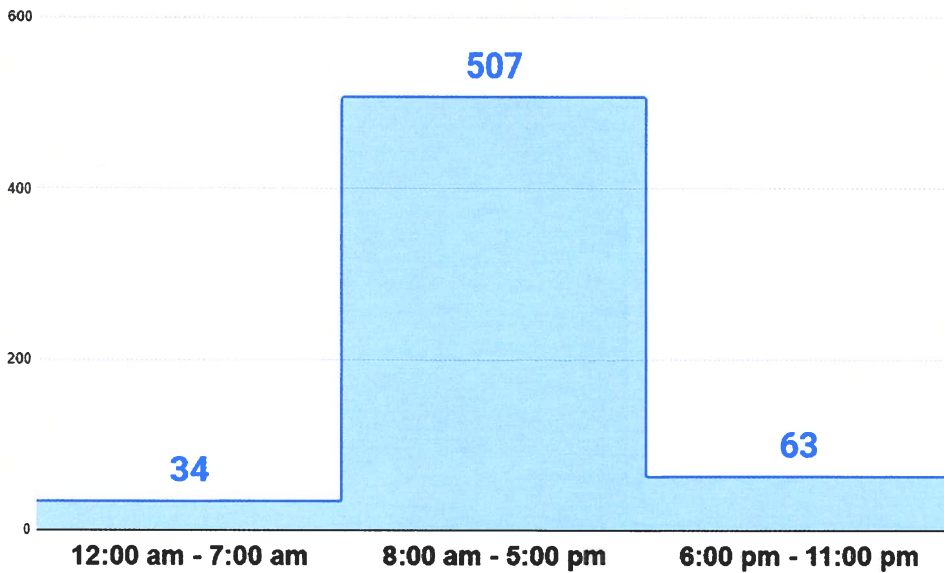
8:02
United Way 211 Calls



Average InQueue Time

71 Sec
United Way 211 Calls

Call Time



Note: Chart describes the distribution of calls received during 3 different time periods: early morning hours (12am-7am), business hours (8am-5pm), and after hours (6pm-11pm).

Service Level

✓ **72.60 %** (United Way 211)

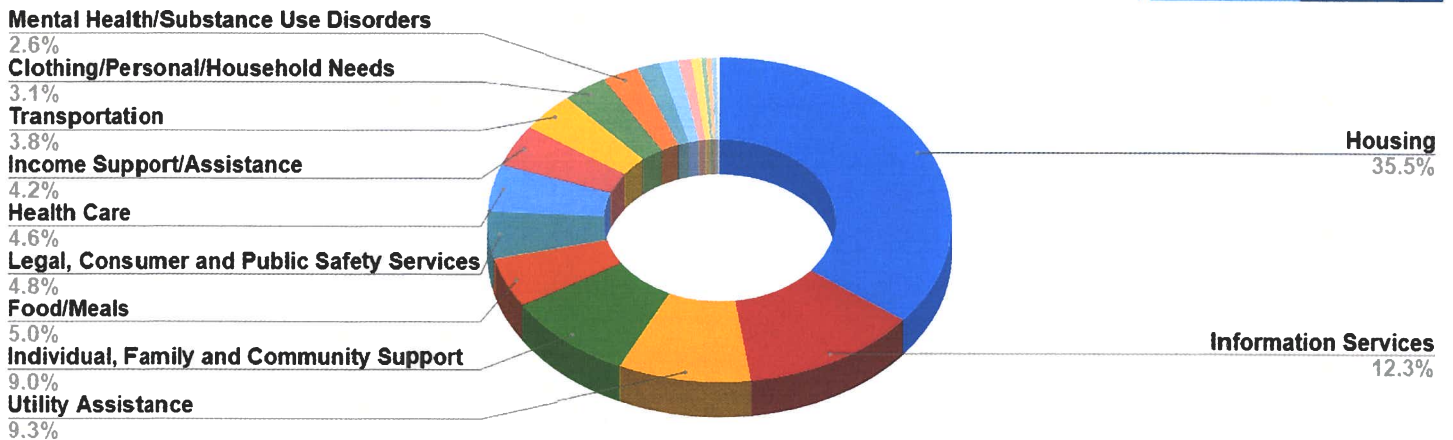


Service Level % = Percentage of calls answered within 90 seconds. Goal 80%

66

Contact Needs

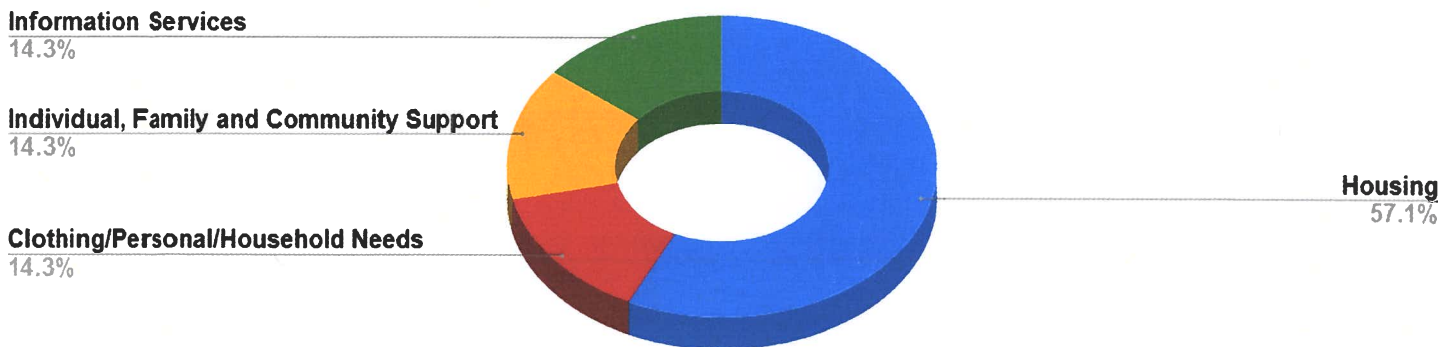
AIRS Problem Needs - Call



Note:

- AIRS - The Alliance of Information and Referral Systems. "AIRS is the driving force behind the delivery of quality I&R services and the sole source for standards, program accreditation and practitioner certification for the I&R sector." ([AIRS home page](#))
- AIRS Problem Needs - AIRS list of national categories for I&R problem/needs is a means to organize the incredibly wide range of inquiries handled by I&R services and to provide for the consistent and credible reporting of community needs across jurisdictions.

AIRS Problem Needs - Text

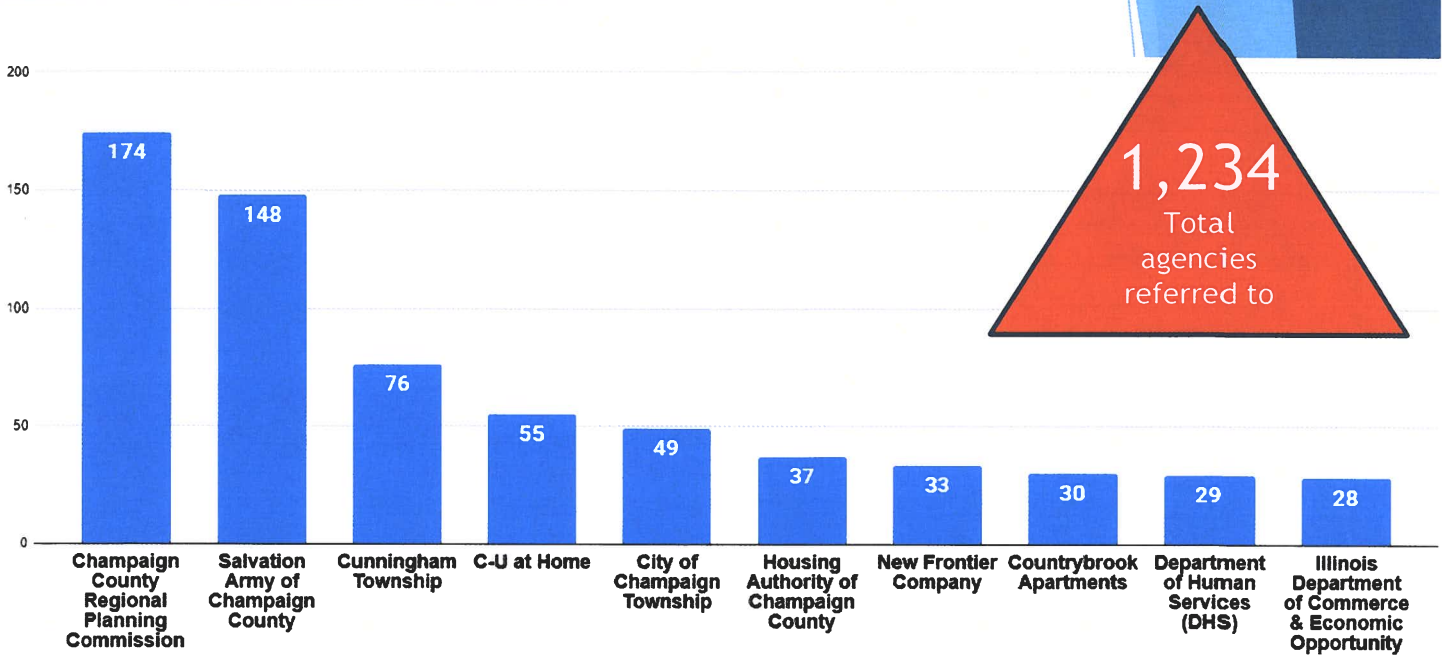


Note: Champaign County received 5 total 211 texts. This chart describes the percentage of AIRS Problem Needs recorded on the 211 text-line.

67

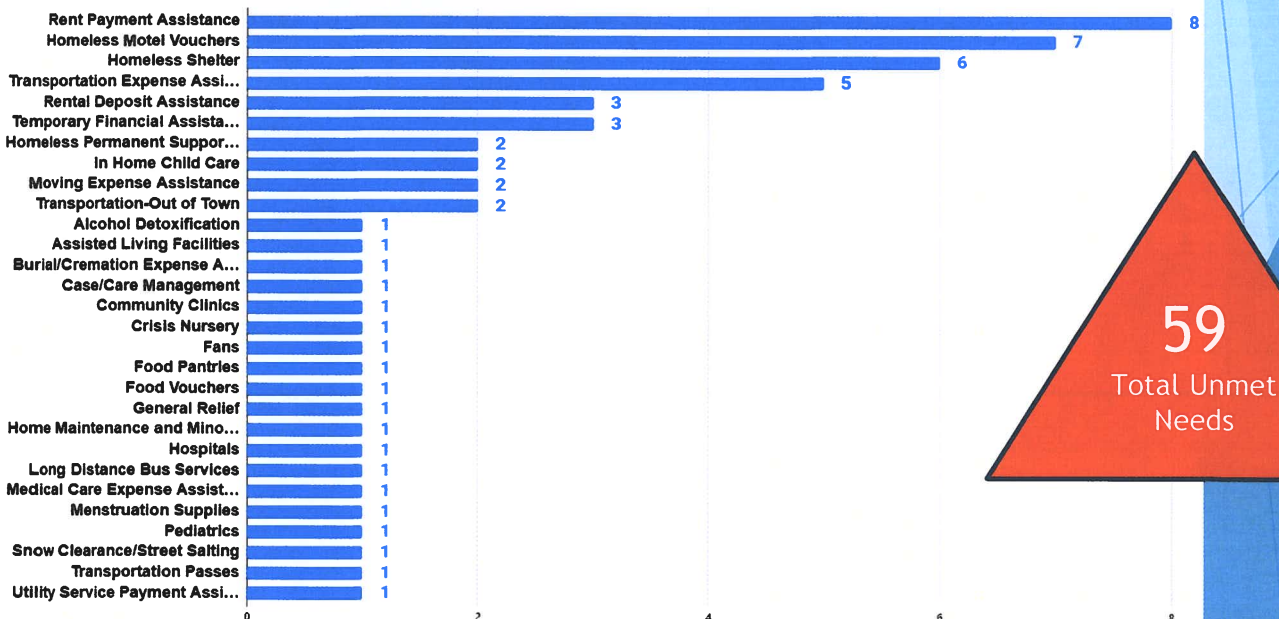
Contact Needs Cont.

Top 10 Agency Referrals



Note: 1,234 total agencies were referred to in Champaign County. This chart displays the top ten agencies referred to with exact referral numbers in data labels.

Unmet Needs

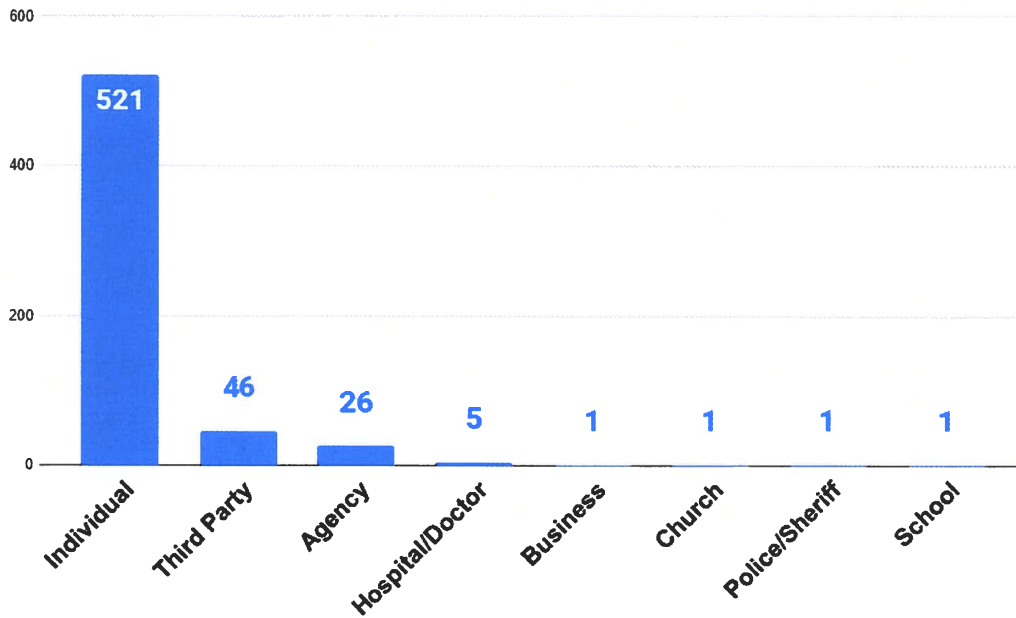


Note: 59 total unmet needs were recorded in Champaign County. The number one unmet need was *Rent Payment Assistance*.

68

Who's Calling

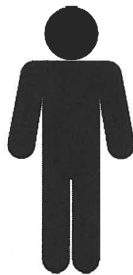
Contact Person Type



Note: Contact Person Type describes the 211 caller and their role in contacting I&R services.



67.2%
Female



30.7%
Male



2.1%
Unknown



4
Spanish 211 calls



0.2%
Young Adult
<18



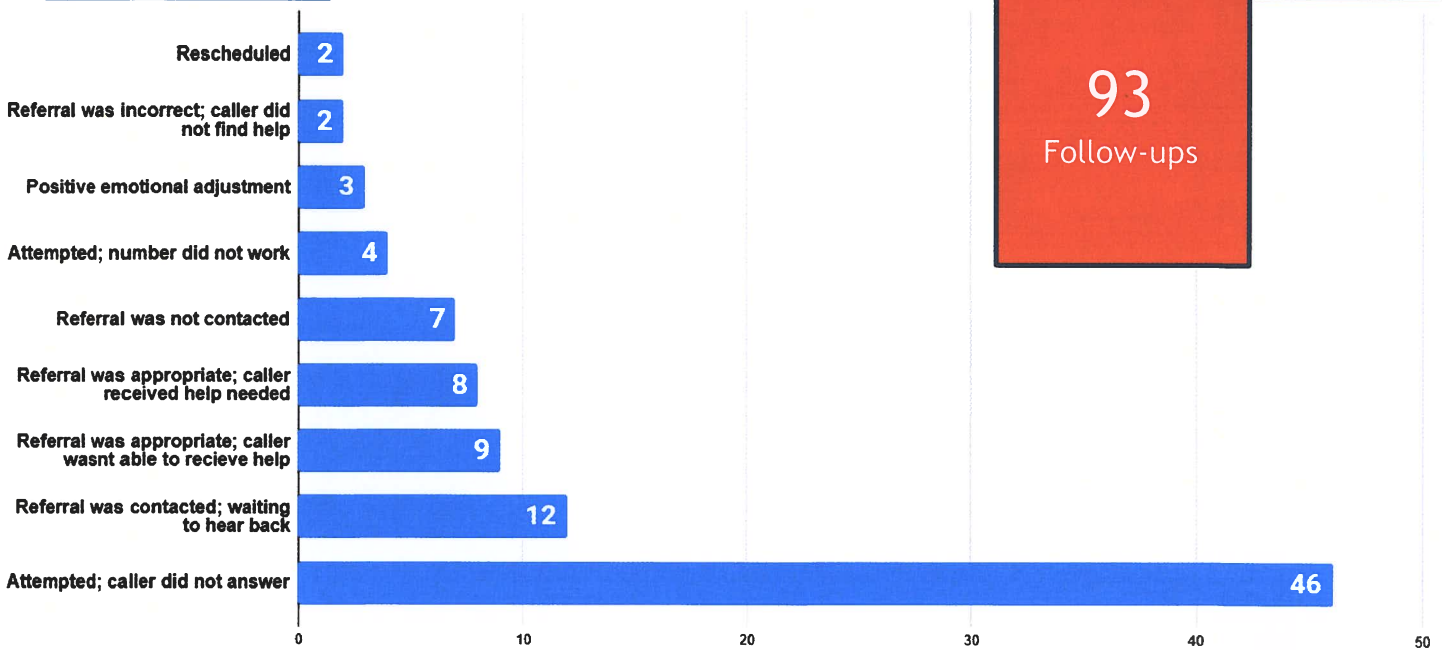
75.3%
Adult
18-54



24.5%
Older Adult
55+

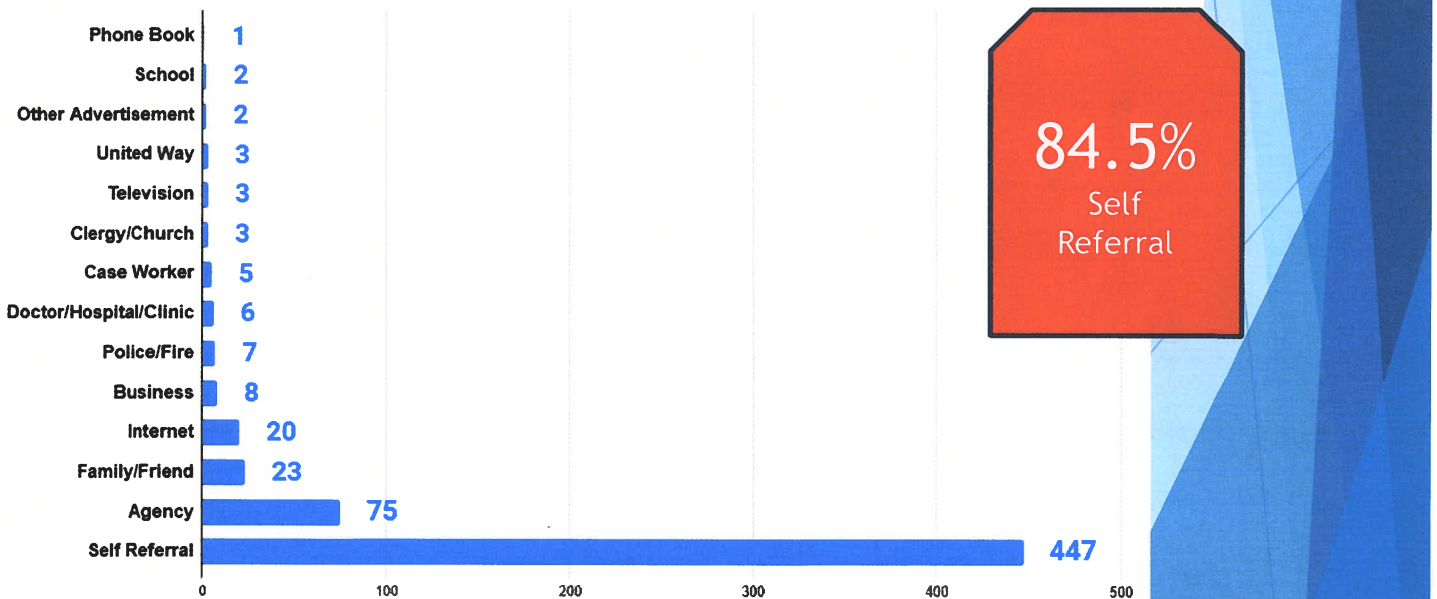
Follow-Ups, Referral Source

Follow-Ups



Note: 93 total follow-ups were performed. This chart describes the breakdown of each follow-up result.

Referral Source



Note: Referral source refers to what motivated the 211 contact to reach out to 211 services.

70



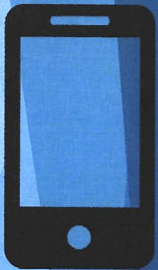
All Calls Answered by PATH Inc.

- ✓ 10,107 calls handled (United Way 211)
- ✓ 314 calls handled (Spanish 211)



All Text Messages Handled by PATH Inc.

- ✓ 65 texts
- ✓ Text your zip-code to 898-211 to get started!



Abandons

- 1,538 (United Way 211)
- 193 (Spanish 211)

Average Abandon Time

- 1 min:42 sec (United Way 211)
- 57 sec (Spanish 211)

% Abandons

- 14.51% (United Way 211)
- 38.07% (Spanish 211)

% Abandon Goal = 9%

PATH Page Cont.



Average Handle Time

✓ 8:02 (United Way 211)

✓ 7:47 (Spanish 211)

Average InQueue Time

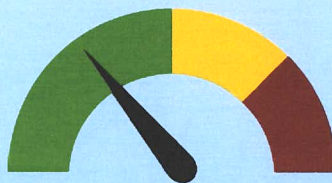
✓ 71 sec (United Way 211)

✓ 68 sec (Spanish 211)

Service Level

✓ 72.60 % (United Way 211)

✓ 64.64 % (Spanish 211)



Service Level % = Percentage of calls answered within 90 seconds. Goal 80%

PATH Success Stories (1st Quarter 2022)

The following are real 211 callers and their stories. Certain details have been changed to preserve their anonymity.



Story 1



The hospital told the caller to reach out to the 211 hotline if she needed someone to talk to.

She struggles with PTSD and phobias. Her main phobia is the dentist. She went to the dentist last Wednesday and it has been really hard for her since then.

She does not feel suicidal, but she is just scared of reaching that point. She thinks that she has a fear of the dentist because it makes her feel like she has a lack of control, and it reminds her of her sexual assault that happened 18 years ago.

She also has an eating disorder, which has really damaged her teeth, making her need to go to the dentist more often. This has been giving her a lot of anxiety, and she is spending a lot of time googling what to do.

We then talked about her husband. He gets mad at her when she talks about her mental health and has said that he will leave her. She does not think he does it to be mean, but he just has his own problems and just wants her to be happy.

We talked about what she can do tonight to help take her mind off everything. She is going to go to Walgreens, call her dad, and then watch a comfort show that she knows will make her happy. We also talked about trying to stay off her phone tonight so she won't Google things that will trigger her more. We scheduled a follow up call for Monday.

Story 2

Caller is doing taxes for herself and her father. She is trying to find help with getting their taxes done without it costing an arm and a leg.

Her father is elderly and disabled. I gave her resources that would be able to help her father file taxes for free. She is only 40 and was interested in the online free tax preparation resource that would be able to help her with her specific needs.

The caller did not know we existed and was excited to hear about all our resources! She said that she will be calling back some other time to utilize our services, and she thanked us for all our hard work.



Links/Resources

PATH Inc. Website

- <https://www.pathcrisis.org/>

211 Counts

- <https://uwaypath.211counts.org/>

PATH Inc. Online Database

- <https://www.navigateresources.net/path/>

AIRS

- <https://www.airs.org/i4a/pages/index.cfm?pageid=1>

Raw Data

- https://docs.google.com/spreadsheets/d/17m0q0YjSVo1CjyJ1aAS40oGWsyk4W_KSHqxI7pN45ds/edit?usp=sharing

Submitted by:
Violet Pavlik

Director of Database Services
vpavlik@pathcrisis.org
309-834-0580





#11.D.

CCDDB 2022 Meeting Schedule

9:00AM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81559124557> 312-626-6799, Meeting ID: 815 5912 4557

January 19, 2022 – Shields-Carter Room

February 23, 2022 – Shields-Carter Room

March 23, 2022 – Shields-Carter Room

April 20, 2022 – Shields-Carter Room

May 18, 2022 – Shields-Carter Room

June 22, 2022 – Shields-Carter Room

July 20, 2022 – Shields-Carter Room

August 17, 2022 – Shields-Carter Room - *tentative*

September 21, 2022 – Shields-Carter Room

October 19, 2022 – Shields-Carter Room

October 26, 2022 5:45PM – Shields-Carter Room – study session with CCMHB

November 16, 2022 - Shields-Carter Room

December 21, 2022 – Shields-Carter Room

This schedule is subject to change due to unforeseen circumstances.

Please email stephanie@ccmhb.org to confirm meetings or to request alternative format documents, language access, or other accommodation needed to participate. All meetings and study sessions include time for members of the public to address the Board.

Meetings are posted in advance and recorded and archived at <http://www.co.champaign.il.us/mhbddb/DDBMeetingDocs.php>

Public Input: All are welcome to attend the Board's meetings, using the Zoom options or in person, in order to observe and to offer thoughts during the "Public Participation" period of the meeting. For support to participate in a meeting, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

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CCMHB 2022 Meeting Schedule

5:45PM Wednesday after the third Monday of each month

Brookens Administrative Building, 1776 East Washington Street, Urbana, IL

<https://us02web.zoom.us/j/81393675682> 312-626-6799 Meeting ID: 813 9367 5682

January 19, 2022 – Shields-Carter Room

January 26, 2022 – *study session* - Shields-Carter Room

February 16, 2022 – *study session* - Shields-Carter Room

February 23, 2022 – Shields-Carter Room

March 23, 2022 – Shields-Carter Room

April 20, 2022 – Shields-Carter Room

April 27, 2022 – *study session* - Shields-Carter Room

May 18, 2022 – *study session* - Shields-Carter Room

May 25, 2022 – Shields-Carter Room

June 22, 2022 – Shields-Carter Room

July 20, 2022 – Shields-Carter Room

September 21, 2022 – Shields-Carter Room

September 28, 2022 – *study session* - Shields-Carter Room

October 19, 2022 – Shields-Carter Room

October 26, 5:45PM – *study session with CCMHB* - Shields-Carter

November 16, 2022 – Shields-Carter Room (*off cycle*)

December 21, 2022 – Shields-Carter Room (*off cycle*) - *tentative*

This schedule is subject to change due to unforeseen circumstances.

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

Public Input: All meetings and study sessions include time for members of the public to address the Board. All are welcome to attend meetings, using the Zoom options or in person, in order to observe and to offer thoughts during "Public Participation". For support to participate, let us know how we might help by emailing stephanie@ccmhb.org.

If the time of the meeting is not convenient, you may still communicate with the Board by emailing stephanie@ccmhb.org any written comments which you would like us to read to the Board during the meeting. Your feedback is appreciated but be aware that the time for each person's comments may be limited to five minutes.

IMPORTANT DATES - 2022 Meeting Schedule with Subjects, Agency and Staff Deadlines, and Allocation Timeline for PY23

This schedule offers dates and subject matter of meetings of the Champaign County Developmental Disabilities Board. Subjects are not exclusive to any given meeting, as other matters requiring Board review or action may be addressed. Study sessions may be added on topics raised at meetings or by staff, or with the CCMHB. Regular meetings are held at 9AM; joint study sessions at 5:45PM. Included are tentative dates for steps in the funding process for PY23 and deadlines related to PY21 and PY22 agency contracts.

- | | |
|---------|--|
| 1/3/22 | <i>Online System opens for Applications for PY23 Funding</i> |
| 1/19/22 | Regular Board Meeting |
| 1/28/22 | <i>Agency PY22 2nd Quarter and CLC Progress Reports due</i> |
| 1/31/22 | <i>Deadline for submission of updated eligibility questionnaires</i> |
| 2/11/22 | <i>Deadline for submission of applications for PY2023 funding
(Online system will not accept any forms after 4:30PM)</i> |
| 2/23/22 | Regular Board Meeting
List of Requests for PY2023 Funding |
| 3/23/22 | Regular Board Meeting |
| 4/13/22 | <i>Program summaries released to Board, posted online with the
CCDDB April 20 meeting agenda and packet</i> |
| 4/20/22 | Regular Board Meeting
Board Review, Staff Summaries of Funding Requests |
| 4/29/22 | <i>Agency PY2022 Third Quarter Reports due</i> |
| 5/11/22 | <i>Allocation recommendations released to the Board and posted
Online with CCDDB May 18 meeting agenda and packet</i> |
| 5/18/22 | Regular Board Meeting
Allocation Decisions; Authorize PY2023 Contracts |

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6/22/22 **Regular Board Meeting:** Draft FY2023 Budget

6/24/22 *Deadline for agency application/ contract revisions*
Deadline for agency letters of engagement with CPA firms
PY2023 contracts completed

6/30/22 *Agency Independent Audits, Reviews, or Compilations due*
(only for those with calendar fiscal year, per Special Provision)

7/20/22 **Regular Board Meeting:** Election of Officers

8/17/22 **Regular Board Meeting** - tentative

8/26/22 *Agency PY2022 4th Q Reports, CLC Progress Reports, and*
Annual Performance Measure Reports due

9/21/22 **Regular Board Meeting**
Draft Three Year Plan 2022-24 with 2023 Objectives

10/19/22 **Regular Board Meeting**
Release Draft Program Year 2024 Allocation Criteria

10/26/22 **Joint Study Session with CCMHB** at 5:45PM

10/28/22 *Agency PY2023 First Quarter Reports due*

11/16/22 **Regular Board Meeting** (off cycle)
Approve Three Year Plan, PY24 Allocation Criteria

12/11/22 *Public Notice of Funding Availability to be published by*
this date, giving at least 21-day notice of application period.

12/21/22 **Regular Board Meeting** (off cycle)

12/31/22 *Agency Independent Audits, Reviews, or Compilations due*

1/2/23 *Online System opens for Applications for PY2024 Funding*

#11.E.

Agency and Program acronyms

CC – Community Choices
CCDDB – 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
CUAN – Champaign-Urbana Autism Network
DSC - Developmental Services Center
DSN – Down Syndrome Network
IAG – Individual Advocacy Group
ISC – Independent Service Coordination Unit
FDC – Family Development Center
PACE – Persons Assuming Control of their Environment, Inc.
PCMHC – Piatt County Mental Health Center
RCI – Rosecrance Central Illinois
RPC – Champaign County Regional Planning Commission

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 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.

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

IDHS – Illinois Department of Human Services

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

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

NACO – National Association of Counties

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

Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities Staff Report – May 2022

CCDDB: I cloned the PY22 3rd Quarter programs to create the 4th Quarter programs for data entry into the Online Claims system for CCDDB funded programs with claims requirements. I supported one agency with their 3rd Quarter claims upload after the Online System showed an error message.

I created PY2022 3rd Quarter Service Data Reports and Program Reports for CCDDB and CCMHB I/DD funded programs. 3rd Quarter Service Data and Program Reports for CCDDB and CCMHB I/DD funded programs were printed for the CCDDB packet. I am currently reviewing 3rd Quarter reports.

March and April consisted of reviewing PY23 applications and working on Program Summaries with other CCDDB/CCMHB team members. I spent time with Executive Director Canfield reviewing the Decision Memorandum for PY23 Funding Recommendations. I also started the process of developing special provisions to be included in PY23 contracts. The CCDDB Program Year 2023 Contract was reviewed and updated. I have started developing contracts for PY23.

I attended PACE's virtual Financial Site Visit with the Financial Manager and other CCMHB staff members. A Program Site Visit is scheduled with Community Choices for May 19, 2022. I have also contacted PACE staff to schedule a Program Site Visit for late May or early June.

I met with Board members and contacted agency representatives related to the DSP shortage and ARPA Premium Pay for essential workers.

CCDDB/CCMHB will be supporting a summer intern, from UIUC, through the Humanities without Walls project. A meeting was held with the intern, CCMHB Executive Director, Associate Director for MH/SUD, and me to meet her and discuss potential projects.

CCDDB Contract Amendments: A prorated PY22 contract was issued for the Community Choices Community Living program due to two newly funded staff positions. One of the positions was filled in August 2021. In April, Community Choices filled the Community Support Specialist position, requiring an adjustment to the contract maximum. The Community Living contract maximum was adjusted to \$164,069.

CU Autism Network requested a contract amendment, in early May, to reallocate funds from the General Operating and Miscellaneous lines to increase the Professional Fees line to pay for fees associated with the financial review.

Learning Opportunities: I hosted a Case Managers Roundtable on March 31, 2022. This was an opportunity for local case managers to hear from provider agencies in Champaign County about their CCDDB and state waiver funded programs. Each provider agency gave an overview of their

different programs and the type of funding that a person would need to enroll in those programs. I am planning to provide another opportunity for case managers to come together to complete a case study.

On April 28, 2022, Donna Tanner-Harold & Joe Omo-Osagie presented “Mental Health and the Black Community.” The presentation provided an overview of the increase in mental health issues in the Black community, a historical perspective of the obstacles and barriers to treatment, and recommendations for positive health and wellness.

MHDDAC: I participated in the March and April meetings of the MHDDAC. “Mental Health and the Black Community” was presented during the April meeting, the presenters included Donna Tanner-Harold, Joycelyn Landrum-Brown, and Joe Omo-Osagie.

ACMHAI: I participated in the March and May meetings of the ACMHAI I/DD Committee. I also participated in the ACMHAI Membership Best Practice Training.

NACBHDD: I participated in the April and May NACBHDD I/DD Committee meetings.

Disability Resource Expo and Alliance for Inclusion and Respect: I participated in the Expo Steering Committee meeting in April. I met two other Steering Committee members at the Expo storage facility, in March, to inventory sensory items to be used in Children’s Activity Bags. The next Disability Resource Expo Steering Committee meeting is scheduled for June 2, 2022.

During Ebertfest, I shopped at the Alliance for Inclusion and Respect (AIR) Art Show, before seeing “Krisha,” the Ebertfest movie sponsored by AIR. After the movie, I viewed the panel discussion. The panel included Eric Pierson, Professor of Communication Studies at the University of San Diego; Nell Minow, Critic; Joe Omo-Osagie, panelist; and Krisha Fairchild, actor.

Community Coalition Race Relations Subcommittee: I participated in weekly meetings with the Race Relations Subcommittee meeting. These meetings were spent organizing the showing of the “Open Wounds” documentary, as well as organizing the “Mental Health and the Black Community” presentations. The next presentation of “Mental Health and The Black Community” will be held on May 17, 2022, from 11 a.m. – 1 p.m., at the Parkland College Union Building.

Transition Planning Committee: I participated in the March and May meetings of the TPC. During March, Stephen M. Kwiatek, Ph.D. from University of Illinois Urbana-Champaign-Illinois Center for Transition and Work, presented to the group. Jon Rutter, Community Choices Employment Specialist, presented the Workforce Empowerment Program during the May meeting.

Other activities: I participated in the March and May meetings of the Transition Planning Committee. I participated in the March meeting of the Champaign County LIC. I participated in over 30 webinars during March, April, and early May.

I also participated in the March, April, and May Human Services Council meetings. During March there was a panel presentation about local law enforcement departments' efforts to further integrate social workers and behavioral health services as a crisis response. April featured a panel presentation from agency representatives from Refugee, Immigrant, and Migrant Service Organizations. Family Service presented on their services during the May meeting.

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

Staff Report- May 2022

Summary of Activity

During March, April and May, much of my time was devoted to working on Program Summaries, funding recommendations, and creating special provisions for contracts.

Emails were sent out to CCMHB PY23 multi-year contract recipients about the online application system being open during May to make minor revisions to their application forms and a request that they send a copy of the letter of engagement with the CPA firm which will be performing the agency's PY2022 audit or financial review. The PY22 applications were cloned into PY23 applications to save agencies time and frustration with having to redo applications from the beginning.

PY22 3rd Quarter Service Data and Program Reports for CCMHB and CCDDDB were due April 29th at midnight. The reports are being reviewed for clarifications or corrections. The excel spreadsheets are used to track each program's service activity. Several agencies requested an extension for their reports, which required us to open the system and for them to fill out the Request for Extension Deadline report form.

- Terrapin Station Sober Living for PY22 3rd Quarter submit financial reports.
- Eastern Central Illinois Refugee Mutual Assistance Center to submit their 3rd Quarter Demographic data.
- Urbana Neighborhood Connection Center requested an extension for 3rd Quarter to submit financial reports

I have been providing support to agencies on updating their information in the system and continuing to review those reports.

Contract Amendments: A contract amendment was approved by the Board for Terrapin Station Sober Living in May. The Agency Director requested the amendment to adjust budget funds cover accountant fees and general operating and professional fees.

A contract amendment approved by the Board for Urbana Neighborhood Community Center. UNCC requested to make changes in their PY22 Expense and Personnel forms.

Two contract amendments were approved by the Board for Cunningham Children's Home for a decrease in the FST contract and an increase in the ECHO Housing and Employment Support contract at the same amounts.

A contract amendment was approved by the Board for the Uniting Pride to reflect changes in their budget and Expense forms, and Personnel changes.

Audit Delays/Suspension of Funding: Three CCMHB agencies, Uniting Pride, Christian Health Center, and Dreaam anticipate their audit should be completed by the extended May 31st date per their CPA firms.

Criminal Justice-Mental Health: Crisis Intervention Team (CIT) Steering Committee Plus Some. In April, I participated a discussion with Cloud 9 and key stakeholders to regarding a potential pilot project (offered by NACBHDD) in Champaign County. Cloud 9 delivers telehealth strategies and software for community healthcare and local government agencies. The focus was sharing information and streamlining communication for different populations.

Reentry Council: March and May meetings. In the March meeting, we discussed locating a contact person at the MTD to submit a letter on behalf of people reentering the community with little to no income for discounted passes. Also, there were updates on housing discrimination /evictions and criminal justice reform. In addition, Caren Cohen-Heath has been nominated for the court facilitator position and she accepted the position. A second co-chair is needed and there has only been one nomination which is Caren Cohen-Health. The May Reentry Council Meeting was cancelled, and the next Reentry Council meeting is scheduled for Wednesday, June 1, 2022 at 12pm. CST. Via Zoom.

CCMHDDAC: March and April Meetings. Ms. Obuchowski presented to the Council whether we should continuing Zoom meetings or go in person. The Council preferred zoom for now. Agencies and stakeholders provided updates. In the April meeting, we listen to a presentation on Black Mental Health in the Community. The presenters were CCMHB Board President, Joe Omo-Osagie, U of I Professor Joycelyn Landrum-Brown and Parkland College Counselor Donna Tanner-Harold.

Continuum of Service Providers to the Homeless (CSPH): I attended the monthly CSPH Full Board Meetings. In April, the group took a vote on FY23 Draft Emergency Solutions Grants (ESG) Prioritization Guidelines for project rankings. Also, the group will also vote on submission of the IDHS Homeless Prevention CoC application. In May, The Point-in-Time and Housing Inventory Counts were submitted on Friday, 4/29/2022. The full report book for the PIT or spreadsheet for the HIC are available from Thomas Bates. Results will be publicized via press release.

ACMHAI: I attended ACMHAI Conference via zoom: Membership Meeting - Best Practice Training and Business Meeting along with the regular committee meetings.

Rantoul Service Provider's Meeting: I attended the Provider's meeting for the months of March and April. The next meeting scheduled for Monday, May 9th was cancelled and rescheduled for Monday, May 23rd at 9:00 AM via Zoom.

Other Activities:

CCMHDD: I attended the Expo Subcommittee Accessibility and Entertainment & Steering Committee meetings.

In March, CCMHB staff met with Promise Healthcare staff and discussed agency deadlines and allocation timelines and alternative funding opportunities.

Lynn and I met with CU at Home Shelter and discussed their case management pilot program, which allows them to track data and outcomes.

Lynn and I had an introductory meeting with Katie Difanis, a Community Outreach Worker for Carle Addiction Recovery Center Carle. Essentially, Ms. Difanis wanted to establish/maintain contact with community stakeholders. She was encouraged to attend the CCMHDDAC Meetings to learn the stakeholders and services provided by them.

In April, Lynn and I met with Gail Raney and the new Executive Director, Melissa Pappas of Rosecrance. Lynn explained CCMHB responsibilities/roles and expectations of funded agencies.

In April, CCMHB staff with financial consultants Mary Fortune and Regina Stevenson for updates on the accounting support project. We also met with three of four of the participating agencies for their updates on how the project is going. Both consultants and agency participants think the project is extremely beneficial to smaller and new agencies for the next project.

CCMHB staff met with Don Moyer Boys & Girls Club to review program service quarters 1st-3rd.

Chris Wilson and I met with RACES at their office to discuss reallocation of funds.

I participated in a zoom meeting with GROW staff. The purpose of the meeting was to clarify their Quarterly Program Activity/Consumer Service data. GROW staff report that they have better understanding of their *service contacts*.

I participated in a meeting with United Way. We discussed ideas of how to support new and seasoned agencies with little to no financial infrastructure through a grant incubation process.

Invited to the Champaign County Drug Court Graduation on Monday, May 9, 2022 at 2pm CST via ZOOM.

Learning Opportunities (Trainings and Webinars) :

- Portraits of Diversity, Equity, and Inclusion Efforts in Behavioral Health Nationwide
- NACBHDD:"A Year Ahead in Behavioral Health Policy"
- NaCo Jail Reentry for People with Substance Use Disorders Part 1: Meeting Immediate Needs.
- Briefing on Biden-Harris Administration Strategy to Address Our National Mental Health Crisis.
- Jail Reentry for People with Substance Use Disorders Part 2: Creating a Continuum of Care.

Stephanie Howard-Gallo

Operations and Compliance Coordinator Staff Report –

May 2022 Board Meeting

SUMMARY OF ACTIVITY:

Audits:

No updates.

Quarterly Reporting:

Third Quarter PY2022 Financial and Program Reports, including Service Activity, Utilization, Zip Code, and Demographic were due Friday, April 29, 2022. An email reminder was sent to all agency directors on April 5th. Several agencies requested an extension, which was approved by staff.

Other Compliance:

Nothing to report.

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

I coordinated the Ebertfest AIR art show and sale. Thirteen artists/groups sold their work (soaps, original paintings, books, garden art, greeting cards, T shirts, jewelry) outside of Ebertfest on Saturday, April 23. We provided artists with face masks, hand sanitizer, easels, beverages, and a lunch. The event was promoted here

<https://www.facebook.com/allianceforAIR>

and <https://champaigncountyair.com/>.

Foot traffic in and out of the tent was steady throughout the day and most artists were really pleased with the turnout. Thank you to Nancy Carter (NAMI), Vicki Tolf (DSC), and Lynn Canfield who all staffed the art show, as I was out of state on a planned vacation.

I viewed two movies, “Passing” and “Krisha” prior to Ebertfest, in order to make a recommendation for a proper anti-stigma film to the Ebertfest organizers. “Krisha” was chosen.

Funding Applications for 2023:

Lynn, Leon, Chris, and I met with Promise Healthcare staff on March 22 regarding their failure to submit a funding application by the deadline.

Program Summaries:

I participated in creating/editing program summaries, along with other staff members.

Contract File Maintenance:

I contacted the Illinois State Archives regarding local records disposal. It is a formal process to destroy any of our files. I have requested to dispose of our files from 2012 and earlier.

2021 Annual Report:

The 2021 CCMHB Annual Report that the Board approved in March has been posted on the County website.

<https://www.co.champaign.il.us/mhbddb/reports/21annualreport.pdf>

Paper copies are available upon request.

Site Visits:

Kim Bowdry and I participated in a financial site visit led by Chris Wilson for PACE (CCDDB funded) on May 5th.

Other:

- Preparing meeting materials for CCMHB/CCDDB regular meetings, special meetings, and study sessions/presentations.
- Composing minutes from the meetings.
- Attending meetings and study sessions for the CCDDB/CCMHB.
- I completed a Champaign County Employee required Sexual Harassment Prevention Training.
- I met with employees at the State's Attorney Office regarding record retention.
- I met with Alex Campbell regarding our online compliance dashboard.

May 2022 Staff Report- Shandra Summerville Cultural and Linguistic Competence Coordinator

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

Agency Support and Technical Assistance:

Community Choices- Reviewed Self Advocacy Presentation

Cultural Competence Training/Support

Community Choices- May 26, 2022- Support with organizations to become more inclusive with people living with Disabilities

CLC Coordinator Direct Service Activities

Mental Health First Aid-

Reviewed updated information and new training. Scheduled MHFA for June 15, 2022

Anti-Stigma Activities/Community Collaborations and Partnerships

C-HEARTS African American Storytelling Project:

The ASPIRE Program received funding from the University of Illinois Call to Action to Address Racism & Social Injustice Research Program. The ASPIRE program is a youth-centered intervention that is co-created between trusted adult facilitators and middle school youth that facilitates psychological health. This team meets bi-weekly as a research team. We have started the program with a partnership with DREAAM and will complete the sessions on June 13, 2022.

Community Research Cooperative - ADVISORY BOARD

This is a partnership with the Community Data Clinic. This is a project that is funded by the University of Illinois, Urbana-Champaign, for Community Media, Data and Technology (CMDT) fellowships to provide annual funding and technical support to community organizations in Champaign County looking to advance promising ideas to change local communities and systems. I presented a workshop on May 4, 2022, on Trauma, Healing, Resilience and Recovery for the first Cohort Team.

ACHMAHI

I submitted information for the ACHMAHI Newsletter for Children's Mental Health Acceptance Month.

Short Reading List to continue the conversation about Racism and Trauma as a decision maker.

May 2022 Staff Report- Shandra Summerville
Cultural and Linguistic Competence Coordinator
Eliminate Racism – Five Year Impact

“The Grand Challenges for Social Work released a 5-year impact report on January 22, 2021. “Progress and Plans for the Grand Challenges: An Impact Report at Year 5 of the 10-Year Initiative” highlights the many accomplishments throughout the initiative and across the country in its first five years. The report acknowledges progress to date and outlines goals for the remaining five years. Below is the section of the report as it relates to the Grand Challenge to Eliminate Racism”

<https://grandchallengesforsocialwork.org/resources/eliminate-racism-five-year-impact/>

MENTAL HEALTH: Culture, Race, and Ethnicity

A SUPPLEMENT TO MENTAL HEALTH: A REPORT OF THE SURGEON GENERAL

<https://drum.lib.umd.edu/bitstream/handle/1903/22834/sma-01-3613.pdf?sequence=1&isAllowed=y>

National CLAS Standards Fact Sheet

<https://thinkculturalhealth.hhs.gov/pdfs/NationalCLASStandardsFactSheet.pdf>

National Federation of Families for Children’s Mental Health

<https://www.ffcmh.org/acceptanceweek>

Mental illness is nothing to be ashamed of. It is a medical problem, just like heart disease or diabetes. Mental illnesses are health conditions involving changes in emotion, thinking or behavior (or a combination of these). **Mental illnesses** are associated with distress and/or problems functioning in social, work or family activities - and they are often accompanied by **substance use**. It's critical that we talk about these challenges and that we do so in the right way.

REFRAMING LANGUAGE



WHY CHANGING OUR THINKING, OUR ACTIONS AND OUR LANGUAGE MATTERS

The terms we use to describe mental illness matter. We have all heard derogatory terms used to describe someone who has a mental illness. Here are a few to jog your memory: Cuckoo; Mad as a hatter; Screwy - having a screw loose; Bananas; Loopy; Crackers; Wacko (whacko); Loony; Nuts; Freak; Crazy; Weirdo. Can you imagine mocking someone with an illness such as cancer or heart disease? **Here's how we can do better.**

✓ UPDATED LANGUAGE	✗ OUTDATED LANGUAGE	! WHY IT MATTERS
Prejudice and Discrimination	Stigma	Prejudice refers to thinking, discrimination refers to action - both can be changed.
Acceptance	Awareness	Being aware doesn't call for action, change in behavior or thinking.
Experiencing or Living with a Mental Illness	Suffering from a Mental Illness	People who experience mental health conditions can and do live healthy, fulfilling lives. Suffering implies one is unwell, unhappy or can't recover.
Experiences/has been treated for Emotional, Mental and/or Behavioral Health Challenges	Emotionally Disturbed	Being diagnosed, experiencing symptoms of or having been treated for a mental illness is a common part of the human experience. The term disturbed perpetuates prejudice and creates a barrier to treatment.
Person Experiencing /Living with or Diagnosed with a Mental Illness	Mentally Ill Person; referring to someone with a diagnosis as schizophrenic, autistic, bipolar, OCD, etc.	Certain language exaggerates mental illness and reinforces prejudice. Always use person-first language.
Person who Experiences Substance Use Challenges	Drug Abuser; Alcoholic; Addict. Substance Abuse	Avoid words that suggest a lack of quality of life for people with substance use concerns. Terms like addict reduce a person's identity, deny dignity/humanity and imply powerlessness or the inability to recover.

The importance of using person-first language when talking about mental illness and substance use cannot be overstated. This is true for members of the media, support and treatment professionals, family members, friends and the community at large. Person-first language separates the individual from the symptoms they experience - maintaining their identity as people with strengths who have the power to recover. **Here are a few examples.**

Person-first phrases

- A person living with a mental health condition
- A person with substance use challenges
- My son diagnosed with bipolar disorder
- My daughter with schizophrenia
- My neighbor who has autism
- The client I'm treating for depression
- My father who has alcoholism

Phrases that hinder recovery

- The mentally ill; psycho, crazy, lunatic
- Addict; meth head, tweaker, burnout, druggie, junkie
- My son is bipolar
- My schizo daughter
- The autistic boy down the street
- My depressed client
- My alcoholic father

✓	✗	!
Experiencing Mental Health Symptoms that Interfere with Daily Life/Activities	Emotional breakdown; Nervous breakdown	Using terms that don't acknowledge an individual's symptoms perpetuates avoidance of needed support and treatment that promote recovery.
Died by Suicide	Committed Suicide; Completed Suicide	The term committed is associated with a crime. The term completed suggests an accomplishment.
Person in Recovery	Former Addict; Former Alcoholic; Drunk	Emphasize strengths and the ability to recover, not limitations.
The Family Support Workforce family support peers, clinicians, and others who support families	Professionals and Family Peer Specialists separates family peer support professionals from others	The Family Peer workforce should be thought of as professional and a respected career choice as much as clinicians, care managers, etc.
Family Peer Support	Peer Support applies to adult peer support alone	There are specific differences between adult peers and family peers. They have different lived and systems navigation experience.

Think before you act. Think twice before you speak. Your words matter.

Children's Mental Health Acceptance Week

The meaning and importance of the shift from **Awareness** to **Acceptance**

Why? Awareness is passive. **Acceptance inspires action!**
(asking for help, seeking treatment, offering support)



- Awareness means you know it exists
- **Acceptance** means you make a personal connection and **take steps** to learn more



- Awareness means you acknowledge the issue
- **Acceptance** means you **work to understand** and offer compassion and sensitivity to others



- Awareness means you share concern
- **Acceptance** means you **offer help and support** without judgment



- Awareness means you are informed about the issue
- **Acceptance** means you **embrace** it and are invested and committed to **inspiring** and **building support** in your own community

Awareness Is Not Enough!



It's Time to Step into Action.



- **Acceptance** is the next step towards building an inclusive, supportive society that celebrates all children and youth
- **Acceptance** moves us to advocate for equitable support and family-driven treatment options
- **Acceptance** supports social justice for children who experience mental health challenges - and their families

Show others that **children's mental health matters**.
Take action during Children's Mental Health
Acceptance Week - and **every day of the year!**

Mental Health Acceptance



Because awareness **ISN'T ENOUGH.**

In 2022, the National Children's Mental Health Week campaign was redefined to emphasize the need to move beyond awareness.



Acceptance means recognizing that our mental health is **as important** as all other health issues.

It means acknowledging that we all have mental health needs that **require care**, just like brushing our teeth.

It means responding to mental health conditions with **treatment and support** like any other disease.

Acceptance would mean my child **feels safe** to say she is going to see her therapist, just as freely as she says she is going to the doctor or dentist.



It means a more **empathetic approach** towards children who struggle with mental health issues and recognizing it's not something they can turn on and off.

Acceptance means understanding that a mental health diagnosis is **not the end** - that coping skills and support are available.

It means understanding when someone has an emotional disability and is symptomatic, they need **support, not punishment.**

We asked children, youth and families - "What does acceptance of mental health challenges mean to you?"



Acceptance means my child **isn't embarrassed or afraid** to ask for help.

It means children with mental health challenges are accepted, supported, and **feel wanted and worthy.**

It means **being held** in the caring hands of everyone in the community.

It means being treated with the same **dignity and respect** as others.

It means being brought **into the fold** - into the group. It feels like protection.

It means my kids are happier and **feel understood.**

Acceptance means I am loved and cared for **as I am.**

It means having patience and making the effort to **try to understand** what someone is going through.

Acceptance means having the right to be unique - to express your feelings, thoughts, and opinions **without judgment.**

It means **feeling free** to discuss your challenges without feeling like others are judging or discrediting your experiences.

It means seeing **people first** - acknowledging their strengths, not just their challenges or diagnosis.



Acceptance means educators and community members would understand my child's behavior, and that is a reflection of trauma that she experienced - not her personality or our parenting skills.

Acceptance means respecting that I am the expert on my child and trusting that I know what's best for him/her.



Social Justice

NATIONAL FEDERATION OF FAMILIES
Bringing Lived Experience to Family Support



For Youth Who Experience
Mental Health and/or
Substance Use Challenges

We asked parents and caregivers, "What **access and opportunities** would your child gain if their mental health challenges were supported and **ACCEPTED** in your community?" Here's what they said.

Supportive Community



- Easier to make friends
- Access to a school psychologist or counselor
- Relationships/connections with supportive adults & peers
- A meaningful role in the community

“Support and resources would be devoted to ensuring my child can be as successful as any other child in the community.”

Appropriate Education



- Inclusion rather than isolation
- Well-established accommodations for I.E.P.s & 504 plans
- Participation in prosocial sports, clubs & school activities
- Support, rather than discipline, for difficult behaviors

“With appropriate support, youth could achieve a higher level of education, leading to expanded employment choices, financial growth, independence and stability for their future.”

Improved Treatment



- More likely to seek help; less reluctant to ask
- Having skilled providers in every community
- Families/youth would guide treatment planning
- Effective treatment is available - *when it's needed*

“Access to skilled providers and referral services would be a relief. Coordinated efforts between schools, families and support agencies is imperative.”

Increased Funding



- For research on mental health challenges
- For schools, camps and other programming
- Equitable insurance reimbursement for treatment
- To support families balancing work and care needs

“Our children need resources, support, and the chance to learn, grow, and - most of all - thrive as they are.
We need equity!”

The Heart of Acceptance

NATIONAL FEDERATION OF FAMILIES
Bringing Lived Experience to Family Support



What Acceptance of Mental Health Needs Means for Youth and Young Adults

Getting to the heart of the matter, young people shared how acceptance would change the way they think and feel about themselves.

They said:

- I would feel more confident
- I would believe in myself
- I would love and accept myself
- I would be true to myself
- I would be able to find my value
- I would not feel like a bad kid
- I would feel wanted
- I would feel accepted, supported, and worthy
- I would feel welcomed and supported
- I would feel happier and understood
- I would feel I am loved and cared for as I am
- I would not feel shameful
- I would feel empowered
- I would feel the right to be unique
- I would have the ability to live and thrive
- I would smile again
- I would feel free to share my feelings
- I would feel important and valued
- I would have a stronger, more positive sense of self
- I would feel like I have a place in my community
- I would better understand myself and the world I live in
- I would have a happier, healthier lifestyle
- I would be more willing to share
- I would feel better about myself
- I would feel self-love
- I would feel more positive
- I would feel good about myself
- I would learn, grow and thrive
- I would have a healthier mind set
- I would have a healthier self-image
- I would feel successful
- I would be more comfortable being a part of my community
- I would feel encouraged and empowered
- I would feel successful in my goals
- I would have some fun along the way
- I would feel I can achieve independence and stability
- I would have self-acceptance
- I would strive to contribute to my community
- I would have self-esteem
- I would have normalcy
- I would have a successful, normal, and cultivated life
- I would be able to enjoy things other children enjoy
- I would be confident and wouldn't isolate myself



"I would feel like the sky's the limit!"



#youthvoice

#acceptance

www.ffcmh.org



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YEAR-TO-DATE BUDGET REPORT

FOR 2022 03

ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
2108 DEVLPMNTL DISABILITY FUND						
21000046 DEVLPMNTL DISABILITY FUND						
21000046 400101 PROPERTY TAXES	-4,515,334	0	-4,515,334	.00	-4,515,334.00	.0%*
21000046 400103 PROPERTY TAXES	-1,000	0	-1,000	.00	-1,000.00	.0%*
21000046 400104 PAYMENT IN LIEU	-2,000	0	-2,000	.00	-2,000.00	.0%*
TOTAL DEVLPMNTL DISABILITY FUND	-4,518,334	0	-4,518,334	.00	-4,518,334.00	.0%
21000053 DEVLPMNTL DISABILITY FUND						
21000053 400301 HOTEL / MOTEL T	-3,000	0	-3,000	.00	-3,000.00	.0%*
TOTAL DEVLPMNTL DISABILITY FUND	-3,000	0	-3,000	.00	-3,000.00	.0%
21000077 DEVLPMNTL DISABILITY FUND						
21000077 400801 INVESTMENT INTE	-1,000	0	-1,000	.00	-1,000.00	.0%*
TOTAL DEVLPMNTL DISABILITY FUND	-1,000	0	-1,000	.00	-1,000.00	.0%
21000085 DEVLPMNTL DISABILITY FUND						
21000085 400902 OTHER MISCELLAN	-8,000	0	-8,000	.00	-8,000.00	.0%*
TOTAL DEVLPMNTL DISABILITY FUND	-8,000	0	-8,000	.00	-8,000.00	.0%
21000100 DEVLPMNTL DISABILITY FUND						
21000100 502001 PROFESSIONAL SE	395,426	0	395,426	131,808.00	263,618.00	33.3%
21000100 502025 CONTRIBUTIONS &	4,091,708	0	4,091,708	1,171,153.00	2,920,555.00	28.6%
TOTAL DEVLPMNTL DISABILITY FUND	4,487,134	0	4,487,134	1,302,961.00	3,184,173.00	29.0%
21000117 DEVLPMNTL DISABILITY FUND						
21000117 600101 TRANSFERS IN	-6,800	0	-6,800	.00	-6,800.00	.0%*

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 03

ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMNTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
21000117 700101 TRANSFERS OUT	50,000	0	50,000	50,000.00	.00	100.0%
TOTAL DEVLPMNTL DISABILITY FUND	43,200	0	43,200	50,000.00	-6,800.00	115.7%
TOTAL DEVLPMNTL DISABILITY FUND	0	0	0	1,352,961.00	-1,352,961.00	100.0%
TOTAL REVENUES	-4,537,134	0	-4,537,134	.00	-4,537,134.00	
TOTAL EXPENSES	4,537,134	0	4,537,134	1,352,961.00	3,184,173.00	

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 03

	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
GRAND TOTAL	0	0	0	1,352,961.00	-1,352,961.00	100.0%

** END OF REPORT - Generated by Chris M. Wilson **

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 03

ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
2101 MHB/DDB CILA FACILITIES						
21000070 MHB/DDB CILA FACILITIES						
21000070 400801 INVESTMENT INTE	-200	0	-200	.00	-200.00	.0%*
TOTAL MHB/DDB CILA FACILITIES	-200	0	-200	.00	-200.00	.0%
21000095 MHB/DDB CILA FACILITIES						
21000095 502017 WASTE DISPOSAL	2	0	2	.00	2.00	.0%
TOTAL MHB/DDB CILA FACILITIES	2	0	2	.00	2.00	.0%
21000096 MHB/DDB CILA FACILITIES						
21000096 501017 EQUIPMENT LESS	6,176	0	6,176	.00	6,176.00	.0%
21000096 502001 PROFESSIONAL SE	9,000	-8,000	1,000	.00	1,000.00	.0%
21000096 502002 OUTSIDE SERVICE	5,800	0	5,800	.00	5,800.00	.0%
21000096 502011 UTILITIES	4,603	0	4,603	.00	4,603.00	.0%
21000096 502012 REPAIRS AND MAI	10,000	8,000	18,000	12,562.00	5,438.00	69.8%
21000096 502014 FINANCE CHARGES	69	0	69	.00	69.00	.0%
21000096 502021 DUES LICENSE PE	350	0	350	.00	350.00	.0%
TOTAL MHB/DDB CILA FACILITIES	35,998	0	35,998	12,562.00	23,436.00	34.9%
21000102 MHB/DDB CILA FACILITIES						
21000102 502007 INSURANCE	4,200	0	4,200	.00	4,200.00	.0%
TOTAL MHB/DDB CILA FACILITIES	4,200	0	4,200	.00	4,200.00	.0%
21000115 MHB/DDB CILA FACILITIES						
21000115 600101 TRANSFERS IN	-50,000	0	-50,000	-50,000.00	.00	100.0%
TOTAL MHB/DDB CILA FACILITIES	-50,000	0	-50,000	-50,000.00	.00	100.0%

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YEAR-TO-DATE BUDGET REPORT

FOR 2022 03

ACCOUNTS FOR:	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
2101 MHB/DDB CILA FACILITIES						
<u>21000123 MHB/DDB CILA FACILITIES</u>						
21000123 800501 BUILDINGS	10,000	0	10,000	.00	10,000.00	.0%
TOTAL MHB/DDB CILA FACILITIES	10,000	0	10,000	.00	10,000.00	.0%
TOTAL MHB/DDB CILA FACILITIES	0	0	0	-37,438.00	37,438.00	100.0%
TOTAL REVENUES	-50,200	0	-50,200	-50,000.00	-200.00	
TOTAL EXPENSES	50,200	0	50,200	12,562.00	37,638.00	

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YEAR-TO-DATE BUDGET REPORT

FOR 2022_03

	ORIGINAL ESTIM REV	ESTIM REV ADJUSTMTS	REVISED EST REV	ACTUAL YTD REVENUE	REMAINING REVENUE	PCT USE/COL
GRAND TOTAL	0	0	0	-37,438.00	37,438.00	100.0%

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