



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

Champaign County Mental Health Board (CCMHB)

TUESDAY, APRIL 17, 2012

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

4:30 p.m.

1. Call to Order - Dr. Deborah Townsend, President
2. Roll Call
3. Citizen Input
4. CCDDDB Information
5. Approval of CCMHB Minutes
 - A. 3/21/12 Board meeting*
Minutes are included in the packet. Action is requested.
6. President's Comments
7. Executive Director's Comments
8. Staff Reports
For Ms. Canfield and Mr. Driscoll, please refer to the Program Summaries. Oral reports on additional activities may be provided at the meeting. A report from Mr. Parsons will be distributed at the meeting.
9. Board to Board Reports
10. Agency Information
11. Financial information
 - A. Acceptance of Claims*

12. New Business

A. Program Summaries

Discussion of agencies requests for funding. A Briefing Memo, list of applications received, copies of the program summaries, and a glossary of terms is included in the Board packet.

B. Cultural and Linguistic Competence Plans Review

Ms. Shandra Summerville's report will be distributed at the meeting.

13. Old Business

A. Anti-Stigma Alliance Event Update

A report from Barb Bressner is included in the packet.

B. Developmental Disabilities Expo Update

A report from Barb Bressner is included in the packet.

14. Board Announcements

15. Adjournment

**Board action*

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
MONTHLY BOARD MEETING**

Minutes—March 21, 2012

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

4:30 p.m.

MEMBERS PRESENT: Jan Anderson, Ailinn Dannave, Bill Gleason, Ernie Gullerud, Deloris Henry, Mike McClellan, Mary Ann Midden, Thom Moore, Deborah Townsend

STAFF PRESENT: Peter Tracy, Executive Director; Lynn Canfield, Nancy Crawford, Mark Driscoll, Stephanie Howard-Gallo

STAFF EXCUSED: Tracy Parsons

OTHERS PRESENT: Juli Kartel, Community Elements; Laura Bennett, Developmental Services Center (DSC); Shandra Summerville, Jonte Rollins, Peggy Myles-Brooks, ACCESS Initiative; Mary Kay Pleck, League of Women Voters (LWV); Bruce Suardini, Prairie Center Health Systems (PCHS); Katie Sissors, Center for Women in Transition (CWT); Mary Vita Rosemarino, Mahomet Area Youth Club (MAYC); Darlene Kloeppe, Alton Shelvin, Regional Planning Commission (RPC)

CALL TO ORDER:

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

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None

CCDDB INFORMATION:

The CCDDB did not meet this month.

APPROVAL OF MINUTES:

Minutes from the February 22, 2012 Board meeting were included in the packet for review.

MOTION: Dr. Moore moved to approve the minutes from the February 22, 2012 Board meeting. Ms. Anderson seconded the motion. A vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

Dr. Townsend announced liaison assignments will be announced shortly. Notification will be sent to the agencies.

EXECUTIVE DIRECTOR'S COMMENTS:

Mr. Tracy attended the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD) conference in Washington D.C. New funding priorities were discussed including: wellness; outpatient services for adults (similar to the Parenting with Love and Limits program); and jail issues.

STAFF REPORTS:

Reports from Ms. Canfield, Mr. Driscoll and Mr. Parsons were included in the packet.

BOARD TO BOARD:

Dr. Henry attended the ACCESS Coordinating Council meeting this month. The national evaluators will be visiting the ACCESS Initiative April 2 – 4, 2012. Dr. Townsend requested a schedule of the visit be made available to Board members so they can attend if interested.

Dr. Gullerud attended the Quarterly meeting for Parenting with Love and Limits (PLL).

Dr. Townsend requested the Crisis Nursery Beyond Blue program be scheduled for a study session in the near future.

AGENCY INFORMATION:

None.

FINANCIAL INFORMATION:

Approval of Claims:

A copy of the expenditure approval list was included in the Board packet for review.

MOTION: Mr. McClellan moved to accept the claims report as presented in the Board packet. Ms. Dannave seconded the motion. The motion passed unanimously.

NEW BUSINESS:

CCMHB Late Applications:

A Decision Memorandum requesting approval for consideration of late applications materials was included in the Board packet. The staff recommendation was to accept the late applications from the Regional Planning Commission and Don Moyer Boys and Girls Club.

MOTION: Mr. Gleason moved to accept the late application materials received from the Regional Planning Commission (RPC) and Don Moyer Boys and Girls Club (DMBGC). Dr. Gullerud seconded the motion.

There was considerable discussion regarding when the applications were submitted and the circumstances surrounding the late submissions. Dr. Henry requested a friendly amendment be made to the motion, excluding Don Moyer Boys and Girls Club. Mr. Gleason declined. It was discussed that in the future, not to accept late applications for any reason.

A voice vote was taken. Anderson, Dannave, Gleason, Gullerud, Midden, McClellan, Moore and Townsend voted aye. Henry voted nay. The motion passed.

CCMHB Annual Report:

A Draft copy of the 2011 Annual Report was included in the Board packet for approval.

MOTION: Dr. Moore moved to accept the 2011 CCMHB Annual Report as presented. Mr. McClellan seconded the motion. A voice vote was taken and the motion passed unanimously.

OLD BUSINESS:

Champaign County Anti-Stigma Alliance:

A report from Ms. Bressner was included in the Board packet.

BOARD ANNOUNCEMENTS:

None.

PRESENTATION: Champaign County Regional Planning Commission Court Diversion Services:

The presentation by Darlene Kloepfel and Alton Shelvin provided an overview of the program and included a short video and a handout of the Powerpoint presentation. A copy of the Court Diversion Services program brochure used to promote the program was included in the Board packet. Board members were given an opportunity to ask questions following the presentation.

ADJOURNMENT:

The business meeting adjourned at 6:10 p.m.

Respectfully

Submitted by: _____ Approved by: _____

Stephanie Howard-Gallo
CCMHB/CCDDB Staff

Deborah Townsend
CCMHB President

Date: _____

Date: _____

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

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VENDOR NO	VENDOR NAME	TRN DTE	B N	TR CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH												
*** DEPT NO. 053 MENTAL HEALTH BOARD												
25	CHAMPAIGN COUNTY TREASURER	4/02/12	02	VR	53-	147	467191	4/05/12	090-053-533.50-00	RENT-GENERAL CORP FACILITY/OFFICE RENTALS	APR OFFICE RENTAL	2,066.52
											VENDOR TOTAL	2,066.52 *
41	CHAMPAIGN COUNTY TREASURER	3/27/12	01	VR	620-	66	466806	3/30/12	090-053-513.06-00	HEALTH INSUR FND 620 EMPLOYEE HEALTH/LIFE INS	MAR HI, LI, & HRA	2,817.09
		4/02/12	06	VR	620-	73	467192	4/05/12	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	DEC-FEB FSA&HRA ADM	82.50
											VENDOR TOTAL	2,899.59 *
88	CHAMPAIGN COUNTY TREASURER	3/16/12	01	VR	88-	23	466472	3/23/12	090-053-513.02-00	I.M.R.F. FUND 088 IMRF - EMPLOYER COST	IMRF 3/9 P/R	1,281.80
		4/02/12	06	VR	88-	27	467194	4/05/12	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 3/23 P/R	1,282.20
											VENDOR TOTAL	2,564.00 *
161	CHAMPAIGN COUNTY TREASURER	4/02/12	02	VR	53-	151	467199	4/05/12	090-053-533.92-00	REG PLAN COMM FND075 CONTRIBUTIONS & GRANTS	APR SENIOR SERVICE	2,169.00
											VENDOR TOTAL	2,169.00 *
176	CHAMPAIGN COUNTY TREASURER	3/16/12	01	VR	119-	21	466475	3/23/12	090-053-513.04-00	SELF-FUND INS FND476 WORKERS' COMPENSATION	INSWORK COMP 2/10,24P/	133.20
											VENDOR TOTAL	133.20 *
179	CHAMPAIGN COUNTY TREASURER	4/02/12	02	VR	53-	150	467203	4/05/12	090-053-533.92-00	CHLD ADVC CTR FND679 CONTRIBUTIONS & GRANTS	APR CHILD ADVOCACY	3,090.00
											VENDOR TOTAL	3,090.00 *
188	CHAMPAIGN COUNTY TREASURER	3/16/12	01	VR	188-	37	466477	3/23/12	090-053-513.01-00	SOCIAL SECUR FUND188 SOCIAL SECURITY-EMPLOYER	FICA 3/9 P/R	973.76
		4/02/12	06	VR	188-	41	467204	4/05/12	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 3/23 P/R	974.06
											VENDOR TOTAL	1,947.82 *

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*** FUND NO. 090 MENTAL HEALTH											
572	ABSOPURE WATER	3/13/12	04 VR	53-	136	466006	3/15/12	090-053-533.51-00	EQUIPMENT RENTALS	085308-53341262 2/2	9.00
										VENDOR TOTAL	9.00 *
5780	BP COMPUTER SERVICES	3/26/12	02 VR	53-	137	466826	3/30/12	090-053-533.07-00	PROFESSIONAL SERVICES	DEC-FEB CNSLT#12-03	625.00
		3/26/12	02 VR	53-	137	466826	3/30/12	090-053-533.07-00	PROFESSIONAL SERVICES	MAR-MAY CNSLT#12-03	625.00
										VENDOR TOTAL	1,250.00 *
7982	BEST INTEREST OF CHILDREN, INC.	4/02/12	02 VR	53-	161	467215	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR INTAKE SPECIALS	2,500.00
		4/02/12	02 VR	53-	161	467215	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR WRAP FLEX FUNDS	3,333.00
		4/02/12	02 VR	53-	161	467215	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR COMMUNITY HOME	8,921.00
										VENDOR TOTAL	14,754.00 *
12986	CATHOLIC CHARITIES	SPALDING PASTORAL CR									
		3/22/12	03 VR	53-	141	466507	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JAN COUNSELING	667.00
		4/02/12	02 VR	53-	145	467223	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FEB COUNSELING	667.00
										VENDOR TOTAL	1,334.00 *
13375	CENTER FOR WOMEN IN TRANSITION	4/02/12	02 VR	53-	149	467224	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR WOMEN IN TRANSI	5,579.00
										VENDOR TOTAL	5,579.00 *
18052	COMCAST CABLE - MENTAL HEALTH ACCT	AC#8771403010088314									
		3/22/12	03 VR	53-	139	466518	3/23/12	090-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010088314 3/	84.90
		3/22/12	03 VR	53-	139	466518	3/23/12	090-053-534.37-00	FINANCE CHARGES,BANK FEES	8771403010088314 3/	16.00-
										VENDOR TOTAL	68.90 *
18203	COMMUNITY CHOICE, INC	4/02/12	02 VR	53-	152	467241	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR SELF DETERMINAT	1,875.00
										VENDOR TOTAL	1,875.00 *

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*** FUND NO. 090 MENTAL HEALTH											
18209	COMMUNITY ELEMENTS										
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR ADULT RECOV	12,578.00
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR CRISIS ACCESS	15,749.00
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR EARLY CHMH	9,542.00
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR PSYCHIATR SRVCS	3,433.00
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR NON MEDI MH	2,511.00
		3/22/12	03 VR	53- 135		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR PLL FRONT END	19,111.00
		3/22/12	03 VR	53- 142		466521	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FEB TIMES CENTER	4,000.00
										VENDOR TOTAL	66,924.00 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY										
		4/02/12	02 VR	53- 153		467243	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR 1ST CALL 4 HELP	6,873.00
										VENDOR TOTAL	6,873.00 *
19346	CRISIS NURSERY										
		4/02/12	02 VR	53- 154		467248	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR BEYOND BLUE	5,833.00
										VENDOR TOTAL	5,833.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC										
		4/02/12	02 VR	53- 155		467253	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR FAMILY DEVL P CT	17,650.00
		4/02/12	02 VR	53- 155		467253	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR DT/EMPLOYMENT	24,630.00
										VENDOR TOTAL	42,280.00 *
22730	DON MOYER BOYS & GIRLS CLUB										
		4/02/12	02 VR	53- 162		467256	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR SMART MOVES	3,333.00
										VENDOR TOTAL	3,333.00 *
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR										
		4/02/12	02 VR	53- 156		467261	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR REFUGEE SUPPORT	1,000.00
										VENDOR TOTAL	1,000.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY GRANTS										
		3/22/12	03 VR	53- 143		466545	3/23/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	FEB FAMILY COUNSELN	4,167.00

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*** FUND NO. 090 MENTAL HEALTH												
		4/02/12	02	VR	53- 157		467264	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR 1ST CAL FOR HEL	5,045.00
		4/02/12	02	VR	53- 157		467264	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR SELF HELP	2,369.00
		4/02/12	02	VR	53- 157		467264	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR SNR COUNSELING	11,861.00
											VENDOR TOTAL	23,442.00 *
27922	FRANCES NELSON HEALTH CENTER									MENTAL HLTH GRANTS		
		4/02/12	02	VR	53- 158		467269	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR MENTAL HLTH CNS	12,398.00
											VENDOR TOTAL	12,398.00 *
44570	MAHOMET AREA YOUTH CLUB									601 EAST FRANKLIN		
		4/02/12	02	VR	53- 163		467297	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR TEEN SUCCEED	1,483.00
											VENDOR TOTAL	1,483.00 *
56750	PRAIRIE CENTER HEALTH SYSTEMS									GRANTS		
		4/02/12	02	VR	53- 159		467310	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR DRUG COURT	13,750.00
		4/02/12	02	VR	53- 159		467310	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR YOUTH SVCS	8,333.00
		4/02/12	02	VR	53- 159		467310	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR PREVENTION	4,713.00
		4/02/12	02	VR	53- 164		467310	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR PLL EXTNDED CAR	19,111.00
											VENDOR TOTAL	45,907.00 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS											
		4/02/12	02	VR	53- 160		467313	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR RACE COUNSELING	1,263.00
											VENDOR TOTAL	1,263.00 *
62674	SAVANNAH FAMILY INSTITUTE, INC.											
		4/02/12	02	VR	53- 148		467318	4/05/12	090-053-533.07-00	PROFESSIONAL SERVICES	APR-JUN CTR OF EXCE	32,000.00
											VENDOR TOTAL	32,000.00 *
67290	SOAR PROGRAMS											
		4/02/12	02	VR	53- 165		467326	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR YOUTH PROGRAM	1,483.00
											VENDOR TOTAL	1,483.00 *

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*** FUND NO. 090 MENTAL HEALTH											
67867	SPOC LLC	3/28/12	04 VR	28-	65	466933	3/30/12	090-053-533.33-00	D/B/A CHAMPAIGN TEL TELEPHONE SERVICE	INV 1085755 3/14 VENDOR TOTAL	25.18 25.18 *
71626	TALKS YOUTH DEVELOPMENT INC NFP	4/02/12	02 VR	53-	168	467340	4/05/12	090-053-533.92-00	TALKS MENTORING CONTRIBUTIONS & GRANTS	APR MEN OF WISDOM VENDOR TOTAL	5,353.00 5,353.00 *
76921	UNIVERSITY OF ILLINOIS - PSYCHOLOGICAL SERVICES	4/02/12	02 VR	53-	166	467348	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR RESTORATIVE CIR	3,071.00
		4/02/12	02 VR	53-	166	467348	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR GIRLS ADVOCACY VENDOR TOTAL	2,917.00 5,988.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER	4/02/12	02 VR	53-	167	467352	4/05/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR COMUNTY STDY CT VENDOR TOTAL	1,883.00 1,883.00 *
78550	VERIZON WIRELESS-MENTAL HEALTH BOARD	4/02/12	02 VR	53-	170	467355	4/05/12	090-053-533.29-00	AC 386356887-00001 COMPUTER/INF TCH SERVICES	SAC 386356887-01 3/2	110.46
		4/02/12	02 VR	53-	170	467355	4/05/12	090-053-533.33-00	TELEPHONE SERVICE	AC 386356887-01 3/2 VENDOR TOTAL	109.12 219.58 *
81610	XEROX CORPORATION	3/22/12	03 VR	53-	140	466660	3/23/12	090-053-533.85-00	PHOTOCOPY SERVICES	INV 118316612 3/3 VENDOR TOTAL	292.69 292.69 *
602880	BRESSNER, BARBARA J.	4/02/12	02 VR	53-	146	467382	4/05/12	090-053-533.07-00	PROFESSIONAL SERVICES	APR CONSULTING FEE VENDOR TOTAL	2,625.00 2,625.00 *
603719	BRUSVEEN, JOHN	3/22/12	03 VR	53-	138	466667	3/23/12	090-053-533.07-00	PROFESSIONAL SERVICES	#12-035 CONSLT HRS VENDOR TOTAL	2,100.00 2,100.00 *

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*** FUND NO. 090 MENTAL HEALTH												
611802	DRISCOLL, MARK									MENTAL HEALTH		
		4/02/12	02	VR	53- 169		467388	4/05/12	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	87 MILE 2/2-3/15	48.29
											VENDOR TOTAL	48.29 *
644010	TRACY, PETER									MENTAL HEALTH BOARD		
		3/22/12	03	VR	53- 144		466698	3/23/12	090-053-533.95-00	CONFERENCES & TRAINING	1480 MILE 3/4-6 DC	821.40
		3/22/12	03	VR	53- 144		466698	3/23/12	090-053-533.95-00	CONFERENCES & TRAINING	PARKING 3/4-6 DC	130.98
		3/22/12	03	VR	53- 144		466698	3/23/12	090-053-533.95-00	CONFERENCES & TRAINING	LODGE 3/4-5 DC	944.64
		3/22/12	03	VR	53- 144		466698	3/23/12	090-053-533.95-00	CONFERENCES & TRAINING	MEALS 3/4-6 DC	157.00
		3/22/12	03	VR	53- 144		466698	3/23/12	090-053-533.95-00	CONFERENCES & TRAINING	BRD MTG EXP 2/7,22	42.48
											VENDOR TOTAL	2,096.50 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	304,590.27 *
										MENTAL HEALTH	FUND TOTAL	304,590.27 *

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*** FUND NO. 106 PUBL SAFETY SALES TAX FND											
*** DEPT NO. 237 DELINQ PREVENTION GRANTS											
161	CHAMPAIGN COUNTY TREASURER							REG PLAN COMM FND075			
		4/02/12	02 VR 106-	15		467199	4/05/12	106-237-533.92-00	CONTRIBUTIONS & GRANTS	APRIL COURT DIVRSIO	11,775.00
										VENDOR TOTAL	11,775.00 *
22730	DON MOYER BOYS & GIRLS CLUB										
		4/02/12	02 VR 106-	16		467256	4/05/12	106-237-533.92-00	CONTRIBUTIONS & GRANTS	APRIL JUMP PROGRAM	5,833.00
										VENDOR TOTAL	5,833.00 *
									DELINQ PREVENTION GRANTS	DEPARTMENT TOTAL	17,608.00 *
									PUBL SAFETY SALES TAX FND	FUND TOTAL	17,608.00 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
*** DEPT NO. 053 MENTAL HEALTH BOARD											
25	CHAMPAIGN COUNTY TREASURER								RENT-GENERAL CORP		
		4/02/12	02 VR	641- 61		467191	4/05/12	641-053-533.50-00	FACILITY/OFFICE RENTALS	APR OFFICE RENT	1,597.70
										VENDOR TOTAL	1,597.70 *
41	CHAMPAIGN COUNTY TREASURER								HEALTH INSUR FND 620		
		3/27/12	01 VR	620- 66		466806	3/30/12	641-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	MAR HI, LI, & HRA	1,696.80
		4/02/12	06 VR	620- 73		467192	4/05/12	641-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	DEC-FEB FSA&HRA ADM	66.00
										VENDOR TOTAL	1,762.80 *
88	CHAMPAIGN COUNTY TREASURER								I.M.R.F. FUND 088		
		3/16/12	01 VR	88- 23		466472	3/23/12	641-053-513.02-00	IMRF - EMPLOYER COST	IMRF 3/9 P/R	629.87
		4/02/12	06 VR	88- 27		467194	4/05/12	641-053-513.02-00	IMRF - EMPLOYER COST	IMRF 3/23 P/R	633.32
										VENDOR TOTAL	1,263.19 *
90	CHAMPAIGN COUNTY TREASURER								MENT HLTH BD FND 090		
		4/02/12	02 VR	641- 66		467195	4/05/12	641-053-533.89-00	PUBLIC RELATIONS	SPNSRSHP EBRTST 4/2	500.00
										VENDOR TOTAL	500.00 *
176	CHAMPAIGN COUNTY TREASURER								SELF-FUND INS FND476		
		3/16/12	01 VR	119- 21		466475	3/23/12	641-053-513.04-00	WORKERS' COMPENSATION	INSWORK COMP 2/10,24P/	65.14
										VENDOR TOTAL	65.14 *
188	CHAMPAIGN COUNTY TREASURER								SOCIAL SECUR FUND188		
		3/16/12	01 VR	188- 37		466477	3/23/12	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 3/9 P/R	478.49
		4/02/12	06 VR	188- 41		467204	4/05/12	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 3/23 P/R	481.12
										VENDOR TOTAL	959.61 *
572	ABSOPURE WATER										
		3/22/12	03 VR	641- 53		466480	3/23/12	641-053-522.02-00	OFFICE SUPPLIES	927471-53346417 2/2	6.95
		3/22/12	03 VR	641- 53		466480	3/23/12	641-053-533.51-00	EQUIPMENT RENTALS	927471-53346417 2/2	9.00
										VENDOR TOTAL	15.95 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 641 ACCESS INITIATIVE GRANT											
7982	BEST INTEREST OF CHILDREN, INC.	4/02/12	02 VR 641-	62		467215	4/05/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	APRIL YOUTH MOVE	4,537.00
										VENDOR TOTAL	4,537.00 *
18053	COMCAST CABLE - ACCESS INITIATIVE ACCT	3/22/12	03 VR 641-	55		466519	3/23/12	641-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010217756 22	81.90
										VENDOR TOTAL	81.90 *
18209	COMMUNITY ELEMENTS	4/02/12	02 VR 641-	64		467242	4/05/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	APR SCHOOL BASED	6,870.00
										VENDOR TOTAL	6,870.00 *
22730	DON MOYER BOYS & GIRLS CLUB	4/02/12	02 VR 641-	63		467256	4/05/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	APR PEER PARTNERS	45,566.00
		4/02/12	02 VR 641-	63		467256	4/05/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	APR FAM SPPT PRNE	10,401.00
										VENDOR TOTAL	55,967.00 *
42540	LATTE DA! INC	3/26/12	02 VR 641-	59		466900	3/30/12	641-053-533.89-00	PUBLIC RELATIONS	INV 630 3/13 CLC MT	130.00
										VENDOR TOTAL	130.00 *
51600	NEWS GAZETTE	3/22/12	03 VR 641-	57		466602	3/23/12	641-053-533.89-00	PUBLIC RELATIONS	AC 78329 2/26	550.00
										VENDOR TOTAL	550.00 *
58118	QUILL CORPORATION	4/02/12	02 VR 641-	65		467311	4/05/12	641-053-522.02-00	OFFICE SUPPLIES	INV 1783166 3/13	15.79
		4/02/12	02 VR 641-	65		467311	4/05/12	641-053-522.04-00	COPIER SUPPLIES	INV 1783166 3/13	378.93
		4/02/12	02 VR 641-	65		467311	4/05/12	641-053-522.04-00	COPIER SUPPLIES	INV 1802604 3/13	111.98
										VENDOR TOTAL	506.70 *
67867	SPOC LLC	3/28/12	04 VR 28-	65		466933	3/30/12	641-053-533.33-00	TELEPHONE SERVICE	INV 1085755 3/14	25.18
										VENDOR TOTAL	25.18 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 641 ACCESS INITIATIVE GRANT												
71000	SUPPORTECH COMPUTERS INC											
		3/13/12	04 VR	641-	51		466131	3/15/12	641-053-533.07-00	PROFESSIONAL SERVICES	INV 3384 1/30	416.67
											VENDOR TOTAL	416.67 *
78552	VERIZON WIRELESS-MNTL HLTH BD/ACCESS											
		3/22/12	03 VR	641-	54		466641	3/23/12	641-053-533.29-00	COMPUTER/INF TCH SERVICES	SAC 286369166-01 3/2	92.16
		3/22/12	03 VR	641-	54		466641	3/23/12	641-053-533.33-00	TELEPHONE SERVICE	AC 286369166-01 3/2	569.29
											VENDOR TOTAL	661.45 *
78873	VISA CARDMEMBER SERVICES											
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 AIRTRAN 2/24	369.20
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 USF CHILD FAM	395.00
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 HYATT 2/2	52.00
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	1939 CHMPGN FIN 2/2	50.00
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.18-00	NON-EMPLOYEE TRAINING, SEM	1939 HOTWRE HTT 2/2	105.73
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 JACKSN BSTR 3/	45.59
		3/22/12	03 VR	641-	58		466647	3/23/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 AIRTRAN 3/4	20.00
											VENDOR TOTAL	1,037.52 *
81610	XEROX CORPORATION											
		3/22/12	03 VR	641-	56		466660	3/23/12	641-053-533.85-00	PHOTOCOPY SERVICES	INV 060297202 3/1	729.22
											VENDOR TOTAL	729.22 *
635152	PARSONS, TRACY											
		3/22/12	03 VR	641-	52		466690	3/23/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	203 MILE 12/1-15	112.67
		3/22/12	03 VR	641-	52		466690	3/23/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	499 MILE 1/3-30	276.95
		3/22/12	03 VR	641-	52		466690	3/23/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	429 MILE 2/1-27	238.10
		3/22/12	03 VR	641-	52		466690	3/23/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	OFFIC SUPLS 12/6-16	47.57
											VENDOR TOTAL	675.29 *
641761	SUMMERVILLE, SHANDRA											
		4/02/12	02 VR	641-	60		467403	4/05/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	228 MILE 1/30-3/23	126.54

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VENDOR NO	VENDOR NAME	TRN DTE	B N	TR CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 641 ACCESS INITIATIVE GRANT												
		4/02/12	02	VR	641-	60	467403	4/05/12	641-053-533.95-00	CONFERENCES & TRAINING	470 MILE 3/17-23 LO	260.85
		4/02/12	02	VR	641-	60	467403	4/05/12	641-053-533.95-00	CONFERENCES & TRAINING	MEALS 3/16-17 LOUIS	49.00
											VENDOR TOTAL	436.39 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	78,788.71 *
										ACCESS INITIATIVE GRANT	FUND TOTAL	78,788.71 *

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VENDOR NO	VENDOR NAME	TRN DTE	B N CD	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 685 DRUG COURTS PROGRAM												
*** DEPT NO. 053 MENTAL HEALTH BOARD												
56750	PRAIRIE CENTER HEALTH SYSTEMS								GRANTS			
		3/26/12	02 VR	685-	3		466919	3/30/12	685-053-533.92-00	CONTRIBUTIONS & GRANTS	DEC DURG COURT PRG	5,139.62
											VENDOR TOTAL	5,139.62 *
										MENTAL HEALTH BOARD	DEPARTMENT TOTAL	5,139.62 *
										DRUG COURTS PROGRAM	FUND TOTAL	5,139.62 *
											REPORT TOTAL *****	700,343.60 *



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

BRIEFING MEMORANDUM

DATE: April 17, 2012
MEMO TO: Members, Champaign County Mental Health Board
FROM: Peter Tracy
SUBJECT: Program Summaries – FY13 Allocation Cycle

Traditionally, our April meeting is used to fully vet all applications for funding with final decisions made at our May meeting. To facilitate this process staff have completed Program Summaries on all applications for funding. These summaries glean salient information and provide opinions concerning alignment with our stated priorities and defined decision support criteria. In addition, all applicant agencies are invited to attend the April meeting for the twofold purposes of (1) providing additional information directly to the Champaign County Mental Health Board (CCMHB) during the “Agency Information” portion of the agenda, and (2) answering direct questions from CCMHB members concerning their application. CCMHB members have full and direct access to all applications through our online application system, and may at their discretion raise questions not addressed in the summaries.

Last year it was necessary to create a bifurcated process in order to address the specific requirements of the cooperative agreement with the Illinois Department of Human Services and the Substance Abuse and Mental Health Services Administration (SAMHSA). For the 2013 allocation cycle, all current ACCESS Initiative FY 2012 contracts had terms extended through the end of the 2013 contract year by the CCMHB at the January 2012 meeting. However, the 2013 application process was open to new ACCESS Initiative proposals or changes in existing contract scope of work and/or budget. Program summaries are included in the packet for one new ACCESS Initiative proposal and two current programs seeking an adjustment in funding.

All applicants for CCMHB funding have received a copy of their program summary and have been invited to notify us in writing if there are factual errors which should be corrected prior to completion of the FY13 award process. Written comments from providers will be shared with CCMHB members and errors will be corrected. Differences of opinion concerning alignment with decision support criteria and ratings will not result in changes unless directly related to a corrected factual error.

Glossary of Terms and Acronyms – CCMHB Program Summaries

ABA – Applied Behavioral Analysis. An intensive behavioral intervention targeted to autistic children and youth and others with associated behaviors.

ASD – Autism Spectrum Disorder

CADC – Certified Alcohol and Drugs Counselor, substance abuse professional providing clinical services that has met the certification requirements of the Illinois Alcoholism and Other Drug Abuse Professional Certification Association.

CILA – Community Integrated Living Arrangement

CC – Champaign County

CSEs - Community Service Events. Is a category of service measurement on the Part II utilization form and the actual activity to be performed should also be described in the Part I Program Performance Measures-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.

CSPI – Childhood Severity of Psychiatric Illness. A mental health assessment instrument.

CY – Contract Year, runs from July to following June. For example CY08 is July 1, 2007 to June 30, 2008. (Also may be referred to as Program Year – PY). Most contract 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. FY07

DD – Developmental Disabilities

DFI – Donated Funds Initiative, source of matching funds for some CCMHB funded contracts. The Illinois Department of Human Services administers the DFI Program funded with federal Title XX Social Services Block Grant. The DFI is a “match” program meaning community based agencies must match the DFI funding with locally generated funds. The required local match is 25 percent of the total DFI award.

FFS – Fee For Service. Type of contract that uses performance based billings as the method of payment.

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, for the county runs from December to following November. For example, FY07 is December 1, 2006 to November 30, 2007.

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ICJA - Illinois Criminal Justice Authority

I&R – Information and Referral

ISP – Individual Service Plan

JJ – Juvenile Justice

JJPD – Juvenile Justice Post Detention

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

MAYSI – Massachusetts Youth Screening Instrument. All youth entering the JDC are screened with this tool.

MIDD – A dual diagnosis of Mental Illness and Developmental Disability.

MISA – A dual diagnosis condition of Mental Illness and Substance Abuse

MH – Mental Health.

MHP - Mental Health Professional. Rule 132 term. Typically refers to a bachelors level staff providing services under the supervision of a QMHP.

PCI – Parent Child Interaction groups.

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.

PLL – Parenting with Love and Limits. Evidenced based program providing group and family therapy targeting youth/families involved in juvenile justice system.

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 individuals' classification of need may be emergency, critical or planning.

PY – Program Year, runs from July to following June. For example PY08 is July 1, 2007 to June 30, 2008. (Also may be referred to as Contract Year – CY and is often the Agency Fiscal Year)

QCPS – Quarter Cent for Public Safety. The funding source for the Juvenile Justice Post Detention program applications. May also be referred to as Quarter Cent.

QMHP – Qualified Mental Health Professional. Rule 132 term, that simply stated refers to a Master's level clinician with field experience that has been licensed.

SA – Substance Abuse

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. This is the number of phone and face-to-face contacts with consumers who may or may not have open cases in the program. It 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 utilization form and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section.

SFI – Savannah Family Institute.

TPCs - Treatment Plan Clients – This is the number of 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 Performance Measures-Utilization section.

Continuing Treatment Plan Clients – These are clients 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. Essentially it is a case carried from one

program year into the next. 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 Performance Measures-Utilization section.

New Treatment Plan Clients – This is the number of new clients with treatment plans written in a given quarter of the program year. 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 Performance Measures-Utilization section.

NON - Treatment Plan Clients – This is a new client engaged in a given quarter with case records but no treatment plan - includes: 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 and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section.

Agency and Program acronyms

AWF - A Woman's Fund

AWP – A Woman's Place, a program of AWF

BIOC - Best Interest of Children

CCBoH – Champaign County Board of Health

CAC - Children's Advocacy Center

CAP – Community Advocacy Project, a program component of the Psychological Service Center.

CCDDB – Champaign County Developmental Disabilities Board

CCHS – Champaign County Head Start, a program of the Regional Planning Commission

CCMHB – Champaign County Mental Health Board

CCOS - Champaign County Operation Snowball, also referred to as Operation Snowball

CDS – Court Diversion Services, a program of the Regional Planning Commission.

CSCNCC - Community Service Center of Northern Champaign County, may also appear as CSC

CN - Crisis Nursery

CUAP – Champaign Urbana Area Project

DHS – Illinois Department of Human Services

DMBGC - Don Moyer Boys & Girls Club

DPS – Delinquency Prevention Specialist, a position at CUAP responsible for monitoring and providing technical assistance to the Quarter Cent contracts.

DSC - Developmental Services Center

EBP – Effective Black Parenting

ECMHD - Early Childhood Mental Health and Development, a program of the Mental Health Center

FCCC – Family Conference of Champaign County, a program of BIOC

FGDM – Family Group Decision Making, a process used by BIOC in its program

FS - Family Service of Champaign County

FNHC - Frances Nelson Health Center

IDOC – Illinois Department of Corrections

JDC – Juvenile Detention Center

JUMP – Juvenile Upward Mobility Program, a program of DMBGC.

MAYC - Mahomet Area Youth Club

MHC or MHCCC - Mental Health Center of Champaign County

PCHS - Prairie Center Health Systems

PSC - Psychological Services Center

RAC or ECIRMAC – East Central Illinois Refugee Mutual Assistance Center

RCS - Rape Crisis Services, a program of AWF

RPC or CCRPC – Champaign County Regional Planning Commission

SAMHSA – Substance Abuse and Mental Health Services Administration, a division of the federal Department of Health and Human Services

SEL – Social Emotional Learning

TALKS - TALKS Mentoring (Transferring A Little Knowledge Systematically)

TIMES Center – Transitional Initiative Men’s Emergency Shelter Center, a program of the MHCCC

UMS – Urbana Middle School. Note other schools may be named with the Middle School or High School abbreviated as MS or HS.

UW – United Way of Champaign County

CCMHB AGENCY PROGRAM ALLOCATION REQUEST AMOUNTS PY13		DRAFT
July 1, 2012- June 30, 2013		
Agency	Program	PY13 Request
Center for Women in Transition	A Woman's Place	86,200
Center for Youth & Family Solutions	Family Counseling (Catholic Charities)	8,000
CC Children's Advocacy Center	Child Advocacy Center	37,080
Champaign County Regional Planning	NEW No Limits for Mental Health Consumers	69,277
Community Choices	Self-Determination Support	25,000
Community Elements	Adult Recovery Criminal Justice/Specialty Courts	150,860
	Crisis, Access, Benefits & Engagement	194,500
	Early CH MH & Development	117,275
	Integrated BH Services (Non-Medicaid MH Initiative)	76,250
	Psychiatric Svcs	42,450
	TIMES Center (Screening MI/SA)	50,960
Community Elements Total		632,295
Community Service Center of NCC	First Call for Help	84,123
Crisis Nursery	Beyond Blue - Perinatal Depression	100,000
Developmental Services Center	Children's/FDC	304,424
	Developmental Training/Employment Services	218,149
Developmental Services Center Total		522,573
East Central IL Refugee Assistance Center	Family Support & Strengthening	13,000
Family Service	Family Counseling	50,000
	1st Call for Help	60,540
	Self-Help Center	28,928
	Senior Counseling/Advocacy	142,337
Family Service Total		281,805
Frances Nelson (CHIC)	Mental Health Services	148,774
Prairie Center Health Systems	Drug Court	173,250
	NEW Mental Health Court	10,000
	Prevention	59,378
	Youth Services	105,000
Prairie Center Health Systems Total		347,628
Rape Advocacy, Counseling & Education Svcs	Counseling & Crisis Services	19,867
UP Center of Champaign County	NEW Youth & Volunteers	15,420
	CCMHB GRAND TOTAL	2,391,042
CCMHB/JJPD/ACCESS PY13 Agency Requests - nkc		

ACCESS Initiative CCMHB FUNDING - AGENCY PROGRAM ALLOCATION MATCH AMOUNTS - PY13		
July 1, 2012 - June 30, 2013		
Agency	Program	PY13 Alloc
Best Interest of Children	Intake Specialist	30,000
	Wrap Flex Funds	40,000
	Community Home	107,046
	Family Engagement/Empowerment & Leadership Initiative	40,000
	Clinical Coordination	10,000
Best Interest of Children Total		227,046
Community Elements	PLL - Front End	283,550
	NEW Life Skills	27,105
Community Elements Total		310,655
Don Moyer Boys & Girls Club	Smart Moves	40,000
Mahomet Area Youth Club	Teen Succeed	17,800
Prairie Center	PLL - Extended Care	285,000
SOAR	Youth Programs - Rantoul	17,800
U of I Psychological Services	Restorative Circles	36,851
	Girls Advocacy	35,000
U of Psychological Services Total		71,851
Urbana Neighborhood Connections	Community Study Center	19,800
TALKS	Men of Wisdom	64,233
		1,054,185

JJPD AGENCY PROGRAM ALLOCATION REQUEST AMOUNTS - PY13		DRAFT
July 1, 2012 - June 30, 2013		
Agency	Program	PY13 Alloc
Champaign County Regional Planning	Court Diversion-ACCESS Initiative Intake	192,700
Don Moyer Boys & Girls Club	JUMP-ACCESS Initiative	70,000
	QUARTER CENT GRAND TOTAL	262,700

ACCESS Initiative AGENCY PROGRAM ALLOCATION AMOUNTS - PY13		DRAFT
July 1, 2011- June 30, 2012		
Agency	Program	PY13 Alloc
Best Interest of Children	Youth MOVE	159,627
Community Elements	ACCESS Initiative School Outreach	106,000
Don Moyer Boys and Girls Club	Peer Partners	333,051
	Family Support Partners	162,625
		495,676
	ACCESS INITIATIVE GRAND TOTAL	761,303
CCMHB/JJPD/ACCESS PY13 Agency Requests - nkc		

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: The Center for Women in Transition

Program Name: A Woman's Place

Focus of Application: MH X SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$86,200

PY13 Total Program Budget: \$865,395

Current Year Funding (PY12): \$66,948

Proposed Change in Funding - PY12 vs. PY13: \$19,252 (29%)

Program Staff – CCMHB Funds: 3.09 FTE

Total Program Staff: 12.85 FTE

Budget Narrative: CCMHB funds account for 10% of projected program revenue. Projected revenue from a single state contract is 47% of total program funding with an additional 17% coming from other smaller state contracts. Federal funds from HUD provide 7% of revenue. Local funders, contributions and fundraising generate the remaining 19% of projected revenue. Projected program revenue exceeds expenses by 7% (\$62,839). All, 100%, of CCMHB funds are allocated to the salaries and benefits expense lines. Personnel supported in part by CCMHB are two counselor and seven case manager positions providing direct service to clients and some of the fiscal managers time allocated to A Woman's Place. The ratio of benefits/taxes to salaries paid by CCMHB is 21% and is slightly less than the 24% ratio for the agency as a whole.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 21%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance X

Auditor Finding _____

Comments: Audit out of compliance with Schedule of Operating Expenses requirement. The 2011 contract year was first year CCMHB contracted for services with The Center for Women in Transition. The CCMHB staff will provide clarification of audit requirements to the agency.

Target Population: Adults and their children who are or have been victims of, or threatened with domestic violence either physical or mental violence as defined by the Illinois Domestic Violence Act.

Service Locations(s)/Demographics: Shelter is in Urbana, serving multiple counties, with CCMHB funds targeted to residents of Champaign County. Client demographics reported for the 2011 program finds 81% were adults, 4% seniors and 15% were children/youth; 51% were White, 36% were Black, and 13% other races; of those responding (about half of total) 11% were of Hispanic/Latino origin; and 91% of the population served were female (the other 9% are presumed to be male children). Client residency by zip code indicates 41% were from Champaign, 29% from Urbana, 13% from Rantoul and 17% from the balance of the county.

Service Description/Type: Counseling/Case Management. CWT-AWP offers range of services including 24 hour domestic violence hotline, emergency shelter and transitional housing, individual and group counseling, case management, court advocacy and community education on domestic violence. Services may be accessed by AWP residents as well as non-residents.

All counseling, case management and other direct service staff meet state standards for provision of domestic violence services.

Access to Services for Rural Residents: Program has a 24 hour hotline and can transport clients. AWP distributes service/contact information to communities with population of 500 or more.

Program Performance Measures

ACCESS: State standard is access to emergency shelter within 72 hours, AWP policy is to provide access within 24 hours. No results for the 2011 program are reported or summarized.

Initial contact with client can occur through the 24 hour hotline, as a walk-in, referral by other agency or from other CWT service, or contact with court advocate. Program is staffed 24 hours a day by ICADV trained staff.

CONSUMER OUTCOMES: Program defines measures and establishes targets for clients receiving counseling. Pre- and post-test questionnaires and Goal Attainment Scale are used to evaluate client progress and effectiveness of therapy. No results for the 2011 program are reported or summarized.

UTILIZATION: Program defines and sets clear targets for all services. Adjustments are made based on 2012 performance results. CWT shortened from 5 to 3 the number of sessions before a client has treatment plan completed resulting in fewer Non-Treatment Plan Clients and increasing number of Treatment Plan Clients engaged in services. This adjustment is reflected in targets for 2013. Number of projected TPCs is 110 (20 continuing and 90 new), NTPCs is 230 (30 continuing and 200 new).

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes, 24 hour domestic violence hotline and transportation
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes although program projects a surplus

Technical Criteria:

Approach/Methods/Innovation: Yes, meets state standards
Staff Credentials: Yes, direct service staff has received ICADV training

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: The Center for Youth and Family Solutions (previously known as Catholic Charities)

Program Name: Family Counseling Program

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Fee for Service

Financial Information:

PY13 CCMHB Funding Request: \$8,000

PY13 Total Program Budget: \$341,969

Current Year Funding (PY12): \$8,000

Proposed Change in Funding - PY12 vs. PY13: \$0

Program Staff – CCMHB Funds: .18 FTE

Total Program Staff: 5.8 FTE

Budget Narrative: CCMHB funds account for only 2% of total revenue and equals the amount generated from client fees. Fees paid by private agencies are by far the largest source of revenue at 82%. Funding requested from United Way is 9% of program revenue. The only state contract identified is from DCFS at 5% of projected program revenue. The ratio of benefits/taxes to salaries charged off to CCMHB to 25% while for the agency as a whole the ratio is a point higher at 26%. The salaries and benefits expense lines represent 88% of CCMHB funding. The remaining 12% is spread across six expense lines. The amount of CCMHB funds allocated to each expense line is roughly the same as CCMHB percentage of revenue.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 25%

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

Not Applicable _____

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding _____

Comments: The Center for Youth and Family Solutions previously operated as Catholic Charities. The 2011 contract award is below CCMHB threshold required for an audit.

Target Population: Primarily low- and very low-income individuals, couples, and families that would be eligible for Medicaid who are experiencing relationship problems, emotional/mental health problems, or problems in daily living that are severe enough to disrupt a significant area of their life.

Service Locations(s)/Demographics: Services are offered on- and off-site. The Center's office is currently located in a residential neighborhood near an MTD bus stop but may relocate. Client demographics reported indicate all were White, none of Hispanic/Latino origin, 45% were children or youth, 41% were adults and 14% were seniors, and 44% were male. Residency by zip code indicates 26% were from Champaign, 26% from Urbana, 26% from Rantoul, and 22% from the balance of the county.

Service Description/Type: Outpatient counseling. Therapists provide strength based, client centered, goal driven counseling services to individuals, couples and families using a family systems perspective.

Access to Services for Rural Residents: Agency is in a period of transition and may relocate from current location in northern Champaign. Some appointments may be held off-site in client's home or other community setting.

Program Performance Measures

ACCESS: Agency tracks access through a log of initial phone intake and case opening information. Clients are then waitlisted until therapist can be assigned and contact initiated to schedule first appointment. Clients in crisis are either seen same day or referred to other emergency service. Information on other counseling services is shared with clients on the waitlist. Appointments schedules are flexible. Client fees are charged on a sliding scale so that client has a financial investment in treatment but are not of an amount to be a barrier to service.

CONSUMER OUTCOMES: A rating on three identified measures is completed by the therapist and the client to assess the client's progress at case closure. Progress to be rated include has the client learned new ways to solve their problems, does the client practice what has been learned, and whether the problem the client sought therapy for has been resolved.

UTILIZATION: Program is fee for service. Number of unduplicated clients billed to CCMHB is small. For the 2013 program agency projects serving 16 clients.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: No
Countywide Access: Yes
Medicaid Reimbursement: Yes
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: No

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Champaign County Children's Advocacy Center (CAC)

Program Name: Champaign County Children's Advocacy Center

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$37,080

PY13 Total Program Budget: \$187,909

Current Year Funding (PY12): \$37,080

Proposed Change in Funding - PY12 vs. PY13: \$0 – No Change

Program Staff – CCMHB Funds: .45 FTE

Total Program Staff: 2 FTE

Budget Narrative: Funding requested from CCMHB accounts for 20% of total program revenue. Agency has experienced a 12% decline in total revenue from 2011 to 2012 and is primarily the result of reductions in state contracts. State funding accounts for 71% of total revenue. The ratio of benefits/taxes to salaries paid by CCMHB is 63% while for the agency it is 36%. Ninety-nine percent of CCMHB funding is budgeted for salaries and benefits/taxes. Five hundred dollars is allocated to membership dues to the National Children's Alliance. Membership in the Alliance and accreditation by the organization qualifies the CAC for state contracts and an Alliance grant.

Reasonable Cost Standards:

"Reasonable costs" are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a "reasonable cost" limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 63%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance

Auditor Finding

Comments: The agency is part of Champaign County government and is included in the Champaign County audit.

Target Population: Children and youth under age 18 that are victims of sexual abuse and/or serious physical abuse.

Service Locations(s)/Demographics: Agency is located in Champaign next to CUPHD. Interviews and multi-disciplinary team meetings are held on-site. Demographics reported for FY11: 100% of client cases were under age 18; 60% were White, 31% were Black, and 9% were other races including bi-racial/multi-racial; less than 8% were of Latino/Hispanic origin; and 43% were males. Zip code based residency data indicates 31% were in Champaign, 22% in Urbana, 14% in Rantoul, 14% in Mahomet and 19% in other zip codes.

Service Description/Type: Assessment. The CAC facilitates multi-disciplinary team interviews by law enforcement and/or DCFS personnel designated for the investigation and coordination of services for alleged victims of child abuse or neglect. The CAC provides a safe agency neutral space in which to conduct such interviews and minimize anxiety and trauma for the alleged victim. Agency has total of two staff. Both have Bachelor's degrees and extensive experience and training in the justice system and social services field.

The CAC also provides comprehensive case management services for victims, maintains a comprehensive tracking system on child sexual abuse and physical abuse cases, conducts Multidisciplinary Team Case review meetings, coordinates community education and prevention services and specialized training for all professionals involved with victims and their families. The CAC also contracts with two licensed therapists for crisis intervention counseling. All services are provided free of charge.

Access to Services for Rural Residents: Referring agencies typically ensure that families have transportation to the Center for the initial interview. The CAC Case Manager attempts to link families with services in or near their areas of residence and with access to transportation for follow-up services.

Program Performance Measures

ACCESS: The facility is accessible by the Multi-disciplinary team 24 hours a day. The facility is centrally located with easy access off of I-74. Law enforcement and DCFS make all referrals to CAC per established protocol. Site and services are handicapped accessible and CAC has made provisions for meeting the needs of non-English speaking children and families through cooperative service agreements. The Cultural Competence Plan exceeded expectations.

CONSUMER OUTCOMES: The Case Manager assesses needs at intake, engages and refers client/family as appropriate to identified needs, tracks client progress and evaluates services accessed at case closure. Database has capacity to track status of legal proceedings and assess outcomes for cases using the CAC. Program surveys clients as well as multidisciplinary team members on CAC services. Responses indicate high positive ratings/satisfaction with the CAC. Participants in child victim support groups offered at CAC complete entry and exit surveys to evaluate the effectiveness of the group and the group facilitator. The crisis intervention counselors complete discharge summaries that report on services provided, frequency, treatment outcomes and changes in level of functioning.

UTILIZATION: Program provides a trends analysis of utilization of the CAC and services provided in PY2011 and for the first half of PY2012 compared to historical data. Utilization has been lower in 2012 compared to past ten years but tracks with lower rates of recent years. Additional analysis included

comparison of CAC utilization to DCFS data as part of its service planning process. The agency adjusted targets for PY2013 as a result of these trends. Program tracks and reports referral sources as supplement to utilization data submitted to CCMHB. Service categories are well defined. Target for 2013 is 122 cases (TPCs).

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes. The Board and policy advisory group plan to oversee review and implementation of Cultural Competence Plan.
Countywide Access: Yes. Law enforcement and DCFS provide or arrange for transportation.
Medicaid Reimbursement: N/A – program does not qualify for this initiative.
Budget-Program Connectedness: Yes. Agency is a single purpose entity. Budget supports operations with CCMHB funds allocated to salary and benefits.

Technical Criteria:

Approach/Methods/Innovation: No
Staff Credentials: Yes. Years of experience and time in the respective positions of the Executive Director and the Case Manager are cited.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Champaign County Regional Planning Commission – Social Services

Program Name: No Limits for Mental Health Consumers

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$69,277

PY13 Total Program Budget: \$81,250

Current Year Funding (PY12): \$0 – New Program Application

Proposed Change in Funding - PY12 vs. PY13: N/A

Program Staff – CCMHB Funds: 1 FTE

Total Program Staff: 1.2 FTE

Budget Narrative: This is a new program proposal. CCMHB funds account for 85% of total program revenue. Other revenue is Community Service Block Grant funds at 11% and in-kind contribution (student volunteer hours) of 4%. Total salary and benefits is 84% of CCMHB charged expenses. Occupancy at 11% and transportation at 4% round out the costs charged to CCMHB funding. Program will have one fulltime staff member – Case manager. The Case Aides will be students recruited to serve as interns. The ratio of benefits/taxes to salaries charged to CCMHB is 46% and is the same for the agency as whole. Benefits are calculated as a percentage of direct service personnel for the agency. No client fees will be charged.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 46%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance

Auditor Finding

Comments: The agency is part of Champaign County government and is included in the Champaign County audit.

Target Population: Adults and seniors with severe and persistent mental illness that require wraparound services in addition to medical intervention to maintain stability.

Service Locations(s)/Demographics: Client home, community at large and at the RPC office. No demographic data is available as the application is a new proposal to CCMHB.

Service Description/Type: Outpatient Counseling/Case Management. Program will implement Assertive Community Treatment (ACT), an evidence based practice model from Michigan, following staff training in the approach (planned for March 2012). The ACT team treatment model provides comprehensive, community-based psychiatric treatment, rehabilitation, and support to persons with serious and persistent mental illness. The RPC program, combining ACT with existing long-term case management services at the agency would supplement the medical care of psychiatrically disabled individuals. Program has yet to define eligibility. Once criteria are established, eligible clients choosing to enroll in the program will have a wraparound plan created with action steps to maintain self-sufficiency. Weekly meetings with the case manager will monitor progress toward goals of employment, safe affordable housing, positive community interaction, continuing education. Activities of the case manager may include assisting client develop self-advocacy skills, monitor taking of medication, training on activities of daily living and access to health care and linkage to other services. Trained case aides may assist with monitoring client's taking medication and other action steps in the wrap-plan. Following the March 2012 training by the ACT Association, staff will complete eligibility criteria. Program will be supervised by an MSW. Case manager will have a minimum of a Bachelors' degree and Case Aides will be trained BS degree students.

Program does not identify what medical providers or psychiatrists will be involved with the program or who else will participate on the team or in the wrap plans. Aspects of the program are still in the design phase. Combination of existing service with ACT may deviate from model.

Access to Services for Rural Residents: Outreach will include rural areas of the county. Service delivery includes home visits.

Program Performance Measures

ACCESS: Outreach activity will recruit clients. Services will be accessible at various times including evenings and weekends. The screening criteria to determine eligibility will be selected following ACT training.

CONSUMER OUTCOMES: Consumer engagement in various activities and reduced hospitalization will be tracked. Means of measurement and tool used to be determined following ACT training.

UTILIZATION: For 2013, program projects serving 10 new Treatment Plan Clients, providing 4 service contacts described as activities to recruit clients, and 3 community service events to include training and activities for clients. As described the service contacts appear more appropriate for community service events. And those listed as CSEs are not a good fit for that category of service measurement either. Service contacts are intended to reflect service encounters with clients, or initial contacts for screenings or assessments.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No, program requires working relationship with medical community/psychiatric services but does not describe what organizations program would work with.

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes, support service to consumers under psychiatric care

Countywide Access: Cannot be determined. Access is limited to 10 clients

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes – Assertive Community Treatment

Staff Credentials: Yes. Staff to be trained in ACT

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Choices, Inc.

Program Name: Self Determination Support

Focus of Application: MH ___ SA ___ DD X ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$25,000

PY13 Total Program Budget: \$31,200

Current Year Funding (PY12): \$22,500

Proposed Change in Funding - PY12 vs. PY13: \$2,500

Program Staff – CCMHB Funds: 0.62 FTE

Total Program Staff: 0.62 FTE

Budget Narrative: CCMHB request is for 80% of total **revenue**, with other source being Contributions. **Personnel** form shows 25% of Executive Director’s and Community Life Coordinator’s salaries and 12% of Social Coordinator associated with this contract, and the budget narrative explains the relationship of each position, noting also that the program relies heavily on volunteers (individuals, family members, community members). Salaries and Payroll taxes/Benefits comprise 91.6% of **expenses** with smaller amounts of Consumables (\$600), General Operating, Occupancy, and Transportation (\$500 each), with details for each line provided in budget narrative.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 20.5%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance X _____
Audit Out of Compliance _____
Auditor Finding _____

Target Population: 1) Teens and adults with disabilities, focus on individuals no longer in school. 2) Parents and family members of teens and adults with disabilities. Staff comment: that portion of CCMHB allocation funding set aside for DD service (by its MOU with the CCDDDB) is to be used exclusively for

individuals with developmental disabilities and their family members; services for individuals with other disabilities supported by other revenue.

Service Locations(s)/Demographics: Office in Urbana, meetings and events County-wide. **Of 118 FY11 participants:** (zip code data on 114) 21% were from Urbana, 50% from Champaign, 0.8% from Rantoul (1 person), 18% Mahomet, and 10% elsewhere in the County; 1 was under 12, 13.5% were aged 13 to 18, 78% aged 19-59, and 7.6% over 60; 95.7% were white, 1 was black/African American, and 3.4% were Asian/Pacific Islander; 98% were not of Hispanic/Latino origin; 47% were male. **Of 89 FY12 participants:** 22.5% are from Urbana, 50.5% from Champaign, 1% Rantoul, 15% Mahomet, and 12% elsewhere in County; 12.3% are aged 13 to 18, 79.8% 19 to 59, and 7.9% over 60; 95.5% are white and 4.5% black/African American; 97.8% are not of Hispanic/Latino origin; 48% are male.

Service Description/Type: Family Support and Self-Advocacy. Self-Advocacy through monthly group focused on advocacy, teamwork, group action. Social Engagement through family events (picnics, potlucks, parties) and separate events planned by the teens/adults for themselves (dinner and a movie, sports, crafts, classes, etc.) Family Support group meets monthly for information and networking focused on family-directed, best practice services; staff coordinate presentations, speakers, topics, and provide direct support for families in crisis/transition.

Access to Services for Rural Residents: Social events staged in rural areas, outreach through Transition Planning Committee (a countywide collaboration). Volunteer network is developing to share transportation to meetings and events; parent and self-advocacy groups meet concurrently to reduce travel and respite costs.

Program Performance Measures

ACCESS: Collaboration with The Autism Program, RPC's Pre-Admission Screening/Independent Service Coordination unit, area high schools, and PACE to identify those potentially served, and with CU Autism Network and Down Syndrome Network to connect with parents seeking support/network opportunities. Information distributed at community events and presentations. There is no waiting list, and intake process is described. A specific measure of access does not appear to be included.

CONSUMER OUTCOMES: Detailed measures for Self-advocacy, Social Engagement, and Family Support include: self-advocates' planning and completion of projects (4 individuals), making 2 new social connections (10), and attending 8 Speak Out meetings (8), statewide events (2), weekly lunch clubs (6), and social events (6); and family member attendance at informational meetings (15 individuals) and gatherings (20).

UTILIZATION: In FY11, there were 8 new Treatment Plan Clients (target 8), and in FY12, 7 continued (target 8) and mid-year projection is 8 new (target 4). These were self-advocates working on person-centered plans, not targeted in FY13. Non Treatment Plan Clients are family members and individuals focusing on self-advocacy and social engagement. FY11 continuing and new NTPCs were 40 and 40 against targets of 40 and 30, and FY12 targets of 56 continuing and 10 new are met and exceeded. The FY13 targets will be 60 and 15. There were 415 Service Contacts (meetings and planning sessions) in FY11 (target 412) and 900 actual in FY12 (target 416); FY13 target is increased to 708. Program met the target of 10 Community Service Events in FY11 and FY12, and target is lowered to 5 for FY13. "Other" row of Utilization table has tracked individuals paying for services through DHS HBSS, not included in CCMHB numbers; not included for FY13.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: Yes
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: No

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: Adult Recovery: CJ & Specialty

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$150,860

PY13 Total Program Budget: \$150,860

Current Year Funding (PY12): \$150,930

Proposed Change in Funding - PY12 vs. PY13: -\$70

Program Staff – CCMHB Funds: 2.2 FTE

Total Program Staff: 2.2 FTE

Budget Narrative: CCMHB is the sole funder of the program and is essentially unchanged from the 2012 contract. Salary and benefits account for 83% of expenses. Specific assistance, used for purchase of services required by a client but beyond the scope of this contract, is 11% of total program funding. This is slightly reduced from 2012 budget at 15%. The remaining 6% is allocated across 5 other expense lines. Occupancy is increased while travel is reduced compared to 2012 levels. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency. The direct service staff includes a fulltime coordinator and fulltime clinician, 10% of the Community Support Manager's time and 2% of the Adult Services Director's time. Cost allocation plan is described in the budget narrative.

Reasonable Cost Standards:

"Reasonable costs" are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a "reasonable cost" limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance

Auditor Finding

Comments: For 2011 contract, program was referred to as Adult Recovery: Drug Court

Target Population: Adults involved with either Champaign County Drug Court, Champaign County Mental Health Court or current or recent involvement the criminal justice system in general.

Service Locations(s)/Demographics: Champaign County court system and jail, at Community Elements locations, and client's home/place of residence. Client demographics are for current contract (1st and 2nd quarters) due to reconfiguration of program from 2011 to 2012. Data reported indicates 96% were adults and 4% were seniors (age 60 or older); 49% were White, 49% were Black, and 2% were other races including bi-racial/multi-racial; no clients are reported being of Hispanic/Latino origin; and 63% were men. Residency by zip code finds 58% were from Champaign, 25% were from Urbana, 9% from Rantoul, and 11% from the balance of the county.

Service Description/Type: Assessments, Outpatient Counseling and Support Services. Any person with current criminal justice system involvement, or referred to Mental Health Court or any client referred by Drug Court are screened followed by an assessment if warranted. Results of the assessment determine level of care and services appropriate to the diagnosis. Services may include case management, individual and group counseling, medication monitoring, psychosocial rehabilitation, and psychiatric services. Respite, supportive living, and specialized clinical services are available as specific assistance. Service coordination and collaboration occurs through the Specialty Court Teams and the Specialty Court Steering Committee. Clients with open cases prior to Specialty Court involvement would continue to be served by that staff member and coordinated with the Community Elements Specialty Court staff. Staff credentials are identified for the primary staff positions and supervisors. Additional staff support will be provided by a graduate student at the U of I School of Psychology for interviews and assessments.

Access to Services for Rural Residents: Depending on the service, clients may be served in the home or be provided assistance with transportation if needed to attend office based services. All clients are required by the Court to attend a weekly hearing.

Program Performance Measures

ACCESS: Clients referred from the Specialty Courts will have immediate access to services. Measure for clients not participating in Specialty Courts is described – contact within 48 hours and access within 5 days.

CONSUMER OUTCOMES: Program identifies measures and reports results as available. Measures include: clients enrolled for 30 days will have assessment completed within the 30 days; coordinated care for all clients with co-occurring disorders (MISA); 65% will engage in services for a minimum of 3 months; and anyone potentially eligible for enrollment in a benefits/entitlement program will be referred to the Benefits Acquisition Case Manager.

A measure of client progress absent length of engagement is not identified. Reduced contact/involvement with the criminal justice system by “X%” of clients served may be another measure to consider.

UTILIZATION: The 2012 contract was the first year for this reconfigured program. Projected performance will exceed target for year. Community Elements increases target for 2013 that would allow for growth beyond current projected performance. Sole category to be tracked is Treatment Plan Clients (TPC). Target for 2013 is 160 TPCs.

Volume of service contacts, for activities such as assessments completed or number service encounters between staff and clients will not be reported.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: Yes, serves both Drug Court and Mental Health Court
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: No, access is linked to involvement with the criminal justice system
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: Crisis, Access, Benefits, & Engagement

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$194,500

PY13 Total Program Budget: \$770,253

Current Year Funding (PY12): \$188,945

Proposed Change in Funding - PY12 vs. PY13: \$5,555 (3% increase)

Program Staff – CCMHB Funds: 4.18 FTE

Total Program Staff: 14.76 FTE

Budget Narrative: CCMHB funds are 25% of total projected revenue for the 2013 program. State contracts represent 58% of the revenue (19% grant and 39% fee for service). The remaining 17% of revenue comes from local contracts, primarily with the hospitals. While requested funding increase from CCMHB is 3% it is less than the 7% increase projected for the program as whole. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency. Salary and benefits account for 99% of expenses allocated to CCMHB funding. Direct personnel positions paid with CCMHB funds include 2 crisis staff and 2 benefits case managers plus some supervisory staff. Administration (indirect) personnel account for .25 FTE of total CCMHB funded positions. Cost allocation plan is described in the budget narrative.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____

Auditor Finding _____

Comments: For 2011 contract, Crisis program was aligned with the Criminal Justice program.

Target Population: Crisis services are provided to any adult in crisis and to any child or youth determined to be ineligible for SASS by the CARES Line (state funded crisis services for youth). Access will serve children, adolescents and adults with social/emotional or behavioral health needs that meet the admission criteria of Community Elements.

Service Locations(s)/Demographics: Initial contact with Access services may be by telephone, or on designated days as a walk-in. The crisis team will complete an assessment if warranted based on the initial screening. Services were realigned for the 2012 contract. Demographic data reported is for clients receiving assistance from the benefits case manager in the 1st and 2nd quarter of 2012 program. Data reported finds 92% were adults, 5% were seniors, and 3% were 18 or under; 59% were White, 37% were Black, and 4% were either other races or not reported; 1% was of Hispanic/Latino origin; and 56% were women. Residency by zip code indicates 44% were from Champaign, 20% from Urbana, 9% from Mahomet, 8% from Rantoul and 25% from the balance of the county.

Service Description/Type: Crisis, Access and Support Services. Community Elements links Crisis and Access services to address state created gaps for persons without Medicaid by enabling the agency to engage the consumer until they are referred to another program and/or are assisted with applying for entitlement programs such as Medicaid. Services provided by Crisis and Access represent initial contact points providing engagement and assistance to consumers seeking help with a crisis or other urgent mental health issue. Crisis services include support for the 24 hour crisis line, short term interventions by the crisis team and community education. Access engages clients at intake providing support, screening and linkage to appropriate care. Access services include “walk-in” days where clients can be served without having an appointment. Assistance with applying for benefits/entitlement programs (Medicaid, Supplemental Security Income, Social Security Disability Insurance) to receive behavioral health care and to other programs helping to meet basic needs is provided by the Benefits Case Manager and Access Clinician. Regarding benefits assistance, of particular interest to CCMHB are the applications to entitlement programs.

Staff credentials are identified for the primary staff positions. The Emergency Services Manager is responsible for the operation of both the crisis and access programs.

Access to Services for Rural Residents: Crisis line services are available 24 hours a day. An initial screening by Access staff can be completed over the telephone. Transportation may be provided depending on need. Case management may be provided in the client’s home or community setting. The Crisis Coordinator does community education throughout the county.

Program Performance Measures

ACCESS: Access services reference 75% of initial contacts by telephone will be answered by an Access Clinician (actual result was 72%) and those not answered live are to receive a call back within 24 hours. Access offers “walk-in” appointments for assessments twice a week. The 75% of calls answered live, call backs within 24 hours for all other calls and the availability of walk-in appointments two days per week can be considered measures for access services. Quantity/volume of Access contacts is not reported.

For Crisis Line calls no clear measure is described and is a weakness of the application identified in 2012 program summary and noted again here. Prior to 2012, the measure was 90% of calls would be answered or a call back made within 15 minutes. Program projects receiving 4,500 crisis calls.

CONSUMER OUTCOMES: Program has implemented “Client Writes” as a means of assessing program performance based on client satisfaction. Results for 2012 will not be available until the end of the program year. No additional detail on what outcomes will be measured by Clients Writes is provided.

No timeframe for accessing services is referenced as a benchmark other than 75% of Access contacts answered live. Engagement groups are available during times clients must wait to access other services but this service is reported to be underutilized. How long is it from the point a call is made by a client to Access until Access is able connect the client to needed service(s)?

Agency states it has difficulty measuring effectiveness of the benefits acquisition service. Number of completed applications approved or approved following appeal might suffice but not identified.

UTILIZATION: Community Elements is implementing the Anasazi software program to track services. Access activity to be reported is limited to number of benefits applications completed (350 - Other) and for crisis services it is crisis line calls (4,500 Service Contacts) and community education (45 Community Service Events). This information helps to define the services linked to specific service elements of the program. Targets presented in narrative do not match numbers included on the Part II Utilization form.

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): No
- ACCESS Initiative: No
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: No
- Gaps in Core Services: Yes. Services were realigned starting with 2012 contract in response to state funding reductions.

Overarching Decision Support Criteria:

- Underserved Populations: Yes
- Countywide Access: Yes
- Medicaid Reimbursement: No
- Budget-Program Connectedness: Yes

Technical Criteria:

- Approach/Methods/Innovation: Yes
- Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: Early Childhood Mental Health & Development (ECMHD)

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$117,275

PY13 Total Program Budget: \$823,262

Current Year Funding (PY12): \$114,500

Proposed Change in Funding - PY12 vs. PY13: \$2,775 (2.5%)

Program Staff – CCMHB Funds: 2.07 FTE

Total Program Staff: 14.5 FTE

Budget Narrative: CCMHB revenue accounts for 14% of total program revenue. Three other sources, all state related contracts, fund the balance of the program. The Ounce of Prevention funds 30% of the program. The DHS Healthy Families contributes 32%. And an Illinois State Board of Education grant is 24% of revenue. Total projected funding for 2013 is 4% less than that projected for 2012. The reduction is tied to decreased support from ISBE. Salaries and benefits are 79% of expenses paid by CCMHB. The remaining 21% of expenses allocated to CCMHB is spread across eight expense lines, of which travel is the largest at 4%. Thirteen program personnel are charged off at a rate equal to CCMHB revenue percentage. Administration (indirect) personnel account for .23 FTE of the 2.07 FTE funded by CCMHB. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency. Cost allocation plan is described in the budget narrative.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____

Audit not in Compliance _____
Auditor Finding _____

Target Population: Children birth to 5 and their families. Program is comprised of three distinct program components whose eligibility criteria fall within this range. All 3 programs include consideration of parent and/or child risk factors.

Service Locations(s)/Demographics: Services are delivered in client homes and community locations such as schools and churches. Client demographics for 2011 program finds 24% were age 18 or under and 76% adults; 41% were Black, 34% were White, and 25% were other races including bi-racial/multi-racial; 15% were of Hispanic/Latino origin; and 88% were women. Residency by zip code indicates 44% were from Champaign, 30% from Urbana, 12% from Rantoul, and 14% from the balance of the county.

Service Description/Type: Prevention/Early Intervention. The ECMHD program is actually three interrelated programs - Healthy Families, Healthy Young Families and the Prevention Initiative. The ECMHD applies a research based Infant Mental Health model. Program goals are to prevent abuse/neglect, increase positive parent-child relationships and promote family development, functioning and independence. Services include screening and assessments using standardized tools, home visits with frequency tied to family needs, case management, parenting groups and parent education, and child developmental screening. Staff also collaborates with other providers including C-UPHD and FNHC. All ECMHD staff has Associate, Bachelors or Masters Degrees and receives extensive specialized training. Some staff members are bi-lingual increasing access to services by the Latino community.

Access to Services for Rural Residents: Program provides home based services and transportation to groups.

Program Performance Measures

ACCESS: Program engages clients in services for long periods. Referral and collaboration with multiple healthcare providers is referenced. Program goal is within 48 hours of referral the client will be contacted by a member of ECMHD staff. Due to the length of engagement, a limited number of openings are available and a waitlist is maintained. Services are delivered in the home or community settings. Meeting client and child in the natural setting of the home is said to enhance cultural sensitivity. Services are delivered in English and Spanish. Program participates in the Birth to Six Council and the newly established Birth to Three Service Coordinating Council

Number of new openings in relation to size of waitlist is not quantified. Length of time a family may spend on waitlist is not identified.

CONSUMER OUTCOMES: The three measures used are defined by state funders and establish benchmarks for program effectiveness. The measures are associated with program capacity, immunization rates, and completion of developmental screenings. Program identifies targets for each measure and reports results indicating all measures were met in 2011 and on track for 2012. Clients are screened for depression at regular intervals using the Edinburgh Postnatal Depression Scale.

UTILIZATION: Program defines how services will be classified and reported. Targets are adjusted down from 2012 to 2013. Program missed 2011 treatment plan client (TPC) and service contact (SC) targets primarily due to a series of staff vacancies over the course of the year and project 2012 may underperform for similar reasons. Targets for 2013 are 260 TPCs (down from 80), 300 SCs (down from 350) and 140 CSEs (unchanged).

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No, although program tracks children's developmental progress.

Specialty Courts: No

Behavioral Health/Physical Health Integration: Yes, collaborates with primary care providers for early identification of families/children with infant mental health needs.

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: Yes

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes, applies research based Infant Mental Health model

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: Integrated Behavioral Health Services

Focus of Application: MH_X_SA_X_DD ____ ACCESS ____ Qtr Cent ____

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$76,250

PY13 Total Program Budget: \$76,250

Current Year Funding (PY12): \$30,132 (Non-Medicaid Initiative contract)

Proposed Change in Funding - PY12 vs. PY13: \$46,118 (153%)

Program Staff – CCMHB Funds: 1.01 FTE

Total Program Staff: 1.01 FTE

Budget Narrative: The CCMHB is the sole funder for the program. Program is a redesign of the Non-Medicaid Initiative funded in 2012. Salary and benefits is 74% of expenses. The remaining 26% is in the professional fees/consultant expense line to support stipends for interns with budgeted amount equivalent to three fulltime interns. Program will hire a fulltime Clinical Services/Intern Supervisor. The remaining .01 FTE represents administrative personnel charged off to the program. No funds are allocated for travel or other expenses. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable X

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding _____

Comments: Program is new proposal based on the new 2012 Non-Medicaid Initiative contract. The Non-Medicaid Initiative contract will be included in the audit of 2012 contracts.

Target Population: Non-Medicaid eligible adults with social/emotional or behavioral health needs or co-occurring mental health and substance use disorders.

Service Locations(s)/Demographics: Office based with interns placed in the Access and Counseling programs and at TIMES Center. As a new program demographics are not available.

Service Description/Type: Outpatient Counseling. Changes made in state eligibility criteria limit services to assessments for the target population. Program will utilize interns under supervision of a licensed clinician to design and provide group services as a bridge to more client self-directed recovery activities. The interns will identify and implement best practice models for client engagement and delivery of services in group settings. In addition to clinical supervision of the interns, the clinician will be responsible for preparing lesson plans, clinical orientation of interns, and liaison with university faculty as well as provide some direct service to the target population. Interns will be recruited primarily from the University of Illinois's School of Social Work but may also come from other universities in central Illinois. Timing of internships is planned to provide year round services. Nominal fee may be charged client based on ability to pay.

Access to Services for Rural Residents: Information on the program will be provided through general outreach and community education. Clients may call and be screened over the telephone by the Access program.

Program Performance Measures

ACCESS: Changes to state eligibility criteria has restricted access to services. Community Elements attempts through this proposal to provide a creative solution to maximize clients not eligible for Medicaid, access to services beyond an assessment.

The narrative seeks to justify the program rather than present a specific measure for access.

CONSUMER OUTCOMES: Program states will use the standardized consumer satisfaction survey "Client Writes" to evaluate outcomes for the 2012 program. Local results will be compared to state and national benchmarks. Program will track client engagement and length of service too.

UTILIZATION: Program identifies targets by service category. A total of 150 consumers will be served: 130 Treatment Plan Clients and 20 Non-Treatment Plan Clients (educational group participants).

Under the 2012 Non-Medicaid Initiative contract, a predecessor to this proposal, Community Elements was unable to recruit interns and funds were redirected after the end of the second quarter to support recruitment and hiring of the clinician position.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: Yes, proposal is response to loss of state support for non-Medicaid eligible clients.

Overarching Decision Support Criteria:

Underserved Populations: Yes, serves population losing state funded services.

Countywide Access: No. Services are office based or at TIMES Center. Community education/outreach will include information on service.

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes, services align with Rule 132 and Rule 2060

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: Psychiatric Services

Focus of Application: MH X SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$42,450

PY13 Total Program Budget: \$1,103,969

Current Year Funding (PY12): \$41,200

Proposed Change in Funding - PY12 vs. PY13: \$1,250 (3%)

Program Staff – CCMHB Funds: .48 FTE

Total Program Staff: 11.07 FTE

Budget Narrative: CCMHB funds used for revenue enhancement and account for 4% of total revenue. The single largest source is a state Office of Mental Health grant that represents 67% of total revenue. Remaining sources include a state fee for service contract, Medicaid, Medicare, insurance and client fees. Total program expenses of \$1,351,192 exceed revenue by \$247,223 or over 4%. CCMHB budgeted expenses reflect a similar expense over revenue ratio. Community Elements allocates the deficit based on share of revenue. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency. The salaries and benefits lines are 78% of CCMHB allocated expenses. Professional fees/consultants line is 12% of CCMHB expenses with the remaining 10% allocated across 11 other lines. Cost allocation plan is described in the budget narrative.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable
Audit Requirement Waived
Audit in Compliance X
Audit not in Compliance

Auditor Finding _____

Target Population: Children, adolescents and adults with mild to severe psychiatric disturbances.

Service Locations(s)/Demographics: Service delivered on-site at either the Community Elements Park St. or Fox Dr. offices. Client demographics for 2011 finds 28% of clients were age 18 or younger, 64% were adults, and 8% were seniors; 665 were White, 32% were Black, and 2% were other races; 2% reported being of Hispanic/Latino origin; and 46% were male. Residency by zip code indicates 50% were from Champaign, 25% from Urbana, 10% from Rantoul, 3% from Mahomet and the remaining 10% from the balance of the county.

Service Description/Type: Outpatient psychiatric care. Services include psychiatric evaluation, medication monitoring and education, and as appropriate consultation, for Medicaid and Non-Medicaid clients. Psychiatrists are board certified and licensed by the State of Illinois. Funds are used to maintain existing levels of services for both Medicaid and Non-Medicaid clients.

Access to Services for Rural Residents: Services are delivered in Champaign. Clients may be referred from other locations where Community Elements has a presence.

Program Performance Measures

ACCESS: For residents without insurance or the ability to self-pay access to psychiatric services in Champaign County and the state is limited. Community Elements has 2 fulltime psychiatrists serving those with limited resources. Program has a waitlist.

Length of time from referral to assessment or first appointment is not indicated or proposed as a measure of access to services.

CONSUMER OUTCOMES: In 2012, the program began using the standardized consumer satisfaction survey "Client Writes" to evaluate outcomes and will continue to do so in 2013. Specific outcomes to be measured through Client Writes are not described.

UTILIZATION: Program addresses how services will be counted. Based on 2012 performance and past service levels an upward adjustment is made for number of service contacts while total number of treatment plan clients holds steady. Targets for 2013 are 2,300 psychiatric patients (1,100 new TPCs and 1,200 continuing TPCs) and 9,200 service contacts (increase of 200 SCs).

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): No
- ACCESS Initiative: No
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: No
- Gaps in Core Services: Yes

Overarching Decision Support Criteria:

Underserved Populations: No

Countywide Access: No

Medicaid Reimbursement: Yes

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: TIMES Center (Screening MI/SA)

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Fee for Service (FFS)

Financial Information:

PY13 CCMHB Funding Request: \$50,960

PY13 Total Program Budget: \$391,627

Current Year Funding (PY12): \$48,000

Proposed Change in Funding - PY12 vs. PY13: \$2,960 (6%)

Program Staff – CCMHB Funds: 1.27 FTE

Total Program Staff: 9.18 FTE

Budget Narrative: CCMHB funds account for 13% of total program revenue. This program is fee for service with Community Elements billing CCMHB for screens of TIMES Center residents and participation in engagement groups by any person who is homeless or in a transitional housing program. Projected revenue from various state contracts represents 43% of program revenue. HUD provides 11%. The remaining 33% come from contributions, other local funders, and fee for service contract. Overall, program revenue is projected to decline by 7% from 2012 to 2013, primarily from reduced contributions. Salary and benefits are the only expenses charged to CCMHB. The ratio of benefits/taxes to salaries is 22% and mirrors the rate for the agency as a whole. Personnel supported with CCMHB funding include 100% of the TIMES Center Case Manager and about a quarter of the TIMES Center Supervisors time.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance

Auditor Finding _____

Comments: Audit includes an incomplete listing of expenses paid by CCMHB.

Target Population: Men who are homeless.

Service Locations(s)/Demographics: On-site at TIMES Center. Client demographics reported for 2011 finds 96% were adults, 3% were seniors, and 1% were age 18 or under; 50% were Black, 46% were White and 4% were other races; 3% reported being of Hispanic/Latino origin; and all were men. Residency by zip code indicates a 82% were from Champaign (75% from 61820), 9% from Urbana, 4% from Rantoul, and 5% from the balance of the county.

Regarding residency data, the high number from TIMES Center zip code (61820), skews data for determining origin of the client and may mask out of county residency of client prior to entering TIMES Center.

Service Description/Type: Screening and Outpatient Counseling. Intent is to screen all clients upon admission to TIMES Center for mental health, alcohol abuse and/or substance use disorders. Based on result, linkage and referral services are provided. For clients with co-occurring disorders, effort is made to engage the client on-site due to limited capacity in the community to serve this specific population. This can include and ASAM assessment, treatment planning, and individual and group counseling. Groups offered at TIME Center include substance abuse recovery, coping skills and emotional regulation with other groups initiated based on need. Co-occurring services applies evidence based practices endorsed by SAMHSA.

Billable activities to CCMHB are for screenings and group counseling.

Access to Services for Rural Residents: TIMES Center is located in Champaign. Effort is made to educate other providers and community based organizations about the TIMES Center.

Program Performance Measures

ACCESS: TIMES Center is open 24 hours a day, 365 days a year. Staff participates in a number of collaborative organizations to coordinate and promote services to the homeless population.

While all residents are screened for mental health, alcohol abuse, and substance use disorders upon admission, this is not identified as an access measure or consumer outcome measure. Results of screens are not reported.

CONSUMER OUTCOMES: Use of the consumer satisfaction survey "Client Writes" was adapted for and implemented at TIMES Center in 2011. Results for Level I and Level II services at TIMES Center were evaluated. Results for Level I were reported on general satisfactions with services (6% reported satisfaction), interaction with the Case Manager (83% reported satisfaction), and improved ability to manage personal problems (94% reported improved ability) and would the person recommend the services (91% indicated would recommend). Level II surveys had a low response rate and are collecting more surveys before reporting results. Client Writes does not have/collect comparable national data or benchmarks for this particular type of service.

UTILIZATION: The volume of screening to residents is almost 100%. Outcome determines what referral and linkage services are necessary/provided. Dual diagnosis cases have individual plans prepared.

Target for clients screened in 2013 is unchanged from 2012 at 300. Services billable to CCMHB are for screens and for participation in engagement/treatment groups.

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): No
- ACCESS Initiative: No
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: No
- Gaps in Core Services: No

Overarching Decision Support Criteria:

- Underserved Populations: Yes
- Countywide Access: No
- Medicaid Reimbursement: Yes
- Budget-Program Connectedness: Yes

Technical Criteria:

- Approach/Methods/Innovation: Yes, applies evidence based practices endorsed by SAMHSA.
- Staff Credentials: Yes, Case Manager is a Certified Alcohol and Drug Counselor (CADC)

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Service Center of Northern Champaign County (CSCNCC)

Program Name: First Call for Help

Focus of Application: MH X SA X DD X ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$84,123

PY13 Total Program Budget: \$264,334

Current Year Funding (PY12): \$82,474

Proposed Change in Funding - PY12 vs. PY13: \$1,649 (2% increase)

Program Staff – CCMHB Funds: 2.11 FTE

Total Program Staff: 3.35 FTE

Budget Narrative: CCMHB requested funding is 32% of the total program budget. Total agency funding is projected to increase by over 9% and by a similar amount for the First Call for Help program by for FY 2013. The CCMHB is the single largest revenue source for the program and agency, followed by United Way. The agency has one state contract but is not for the First Call for Help program. About 98% of CCMHB funds are budgeted for salaries and benefits/taxes. The remaining 2% is applied to the occupancy line. The ratio of benefits/taxes to wages charged to CCMHB is 25%. For the agency as a whole the ratio is 50%. Four positions are supported in part with CCMHB funds. Two-thirds of the CCMHB salary line is allocated to 2 direct service staff positions (service coordinator and intake coordinator).

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 25%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance X

Auditor Finding _____

Comments: Presentation of Management and General expense as separate program column on Schedule of Operating Expense statement creates appearance of excess revenue for the program.

Target Population: Program serves residents of nine northern most Champaign County townships. Typical consumer is described as female, under employed, single head of household with 2 young children, living at or below the poverty level.

Service Locations(s)/Demographics: Agency is based in Rantoul and serves as a satellite site for other Champaign and Urbana based providers. Demographics reported for FY11: 91% were adults and 9% were seniors; 57% were White, 29% were Black, and 14% were other races including bi-racial/multi-racial; almost 17% were of Latino/Hispanic origin; and 63% were females. Zip code based residency data indicates 90% were in Rantoul, 2.5% in Ludlow and and 7.5% in other zip codes.

Service Description/Type: Information and referral. Staff responds to telephone and walk-ins seeking information and assistance. Bilingual staff member and service information in Spanish is available. Other agency services include a food pantry, transportation and limited financial assistance. Agency also offers office/meeting space to other providers. Space is available for use by the ACCESS Initiative and Parenting with Love and Limits. Clients may use office phone to contact other providers/services/job searches free of charge and use fax/copy service for nominal fee. Web access may be available with the new program year. Staff qualifications are identified for the primary staff positions. None of the staff are Certified Information and Referral Specialists (CIRS) but extensive experience is cited in budget narrative.

Access to Services for Rural Residents: Rantoul is the largest community and centrally located in the nine township service area. Other providers, including Community Elements and Prairie Center, use the agency as a satellite site.

Program Performance Measures

ACCESS: Program tracks the number of information and referral contacts and number of unduplicated households as the primary access measures. After experiencing an 8% decline in contacts for 2010, the volume rose 13% in 2011. Contacts with other agencies satellite offices were down in 2011. Transportation assistance has been reduced significantly due to the CRIS rural transportation program. Unmet needs are tracked by the program and in generally are related to basic needs. Latino households account for about 25% of all contacts. The bilingual staff member manages most intake work. Use of space by ACCESS Initiative related agencies includes RPC Court Diversion staff engagement with station adjusted youth, and a meeting by the Youth Advisory Board. Consumer survey includes section on cultural competence.

CONSUMER OUTCOMES: Outcomes are the access measures. A client satisfaction survey is used to assess services. The previous client satisfaction survey done two years ago found high levels of satisfaction with services. The survey is available in English and Spanish. A new survey will be completed in the spring of 2012 that will include a section for comments including on cultural competence. If web access is added as a service, utilization will be tracked. Agency also tracks volume of clients using satellite office services.

UTILIZATION: Demand for services appears to have peaked in 2009 but continues at very high levels. For 2011, program had a slight increase in contacts after a downturn in 2010. There was a decrease for

contacts with agencies providing satellite services. Partial year data continues to support a leveling off of contacts. Program tracks service contacts and unduplicated households (classified as NTPCs for CCMHB reports) with targets at similar levels as recent years. Economic and housing data continue to show high mobility of residents and high number of low and very low income households. Targets for 2013 are 1600 NTPCs and 6900 SCs.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): Space available for groups
ACCESS Initiative: Space is available for group and individual meetings.
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes – northern rural Champaign County, high volume of Black and Latino contacts reported.
Countywide Access: No, primary service area is northern nine townships
Medicaid Reimbursement: N/A
Budget-Program Connectedness: Yes.

Technical Criteria:

Approach/Methods/Innovation: No
Staff Credentials: Yes, but program staff is not Certified Information and Referral Specialists

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Crisis Nursery

Program Name: Beyond Blue Champaign County

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$100,000

PY13 Total Program Budget: \$190,215

Current Year Funding (PY12): \$70,000

Proposed Change in Funding - PY12 vs. PY13: \$30,000 (42% increase)

Program Staff – CCMHB Funds: 2.09 FTE

Total Program Staff: 3.76 FTE

Budget Narrative: Funding requested from CCMHB accounts for over 50% of total program revenue. At 28%, contributions are the next largest source of revenue for the program. DHS Donated Funds Initiative monies are the only state funds in the program budget and account for less than 8% of the total. The ratio of benefits/taxes to salaries charged to CCMHB is almost 28%. For the agency as whole the ratio is just a bit lower at 26%. Salaries and benefits account for 93% of expenses allocated to CCMHB. The remaining 7% is spread across 7 other expense lines with transportation the largest at 2.5% of total expenses. Two full-time Family Specialist positions account for the majority of personnel related expenses.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 28%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding _____

Target Population: Mothers identified as “at risk” of perinatal depression who reside in Champaign County and have a child or children less than one year of age. “At risk” is defined as low-income and/or a family history of depression or who experienced depression during pregnancy. Methods for identifying “at-risk” mothers are described. The number of Champaign and Urbana clients will increase from 10 to 25 and equal the projected number to be served from the balance of the county.

Service Locations(s)/Demographics: Clients home, Crisis Nursery, and other neutral sites. Demographic data for the first six months of the 2012 program finds all but one of the 22 clients are over age 18; 7 are White, 11 are Black, and four are of other races including bi-racial/multi-racial; One client is of Hispanic/Latino origin and all the clients (mothers) are female. New and continuing client residency based on zip code finds 41% are from Champaign and Urbana and 59% from the balance of the county including 36% from Rantoul.

Service Description/Type: Screening, Assessment, Individual and Group Counseling. Program uses a mix of home visits and participation in Parent-Child Interaction (PCI) Groups to reduce mothers feeling of isolation, provide education and counseling about perinatal depression, child development and parenting skills. Central to the program’s services are an intake and screening using the Edinburgh Postnatal Depression Scale (EPDS), home visits to complete assessment, provide counseling and education, participation in Parent-Child Interaction groups, participation in perinatal support groups, and referral and linkage to other services appropriate to the needs of the mother and child. No fees are charged to participants.

Access to Services for Rural Residents: Program establishes a target of 50% of mothers served will be from rural Champaign County. Program commits to holding 3 of 5 PCI groups outside of C-U. Program is placing a greater emphasis on serving C-U families.

Program Performance Measures

ACCESS: Program cites established relationships and protocols for referrals with healthcare providers and describes on-going outreach at various providers’ locations.

CONSUMER OUTCOMES: Program cites an established tool used to measure outcomes for general operations of crisis nurseries around the state and reports results in relation to those measures. A new tool, the Protective Factors Survey (PFS), will be also implemented in 2013. The PFS, done interview-style by trained staff like the current tool, will measure family functioning/resiliency, social support, concrete support, nurturing and attachment, and knowledge of parenting/child development.

While the method or tool is not identified, specific impacts of the Beyond Blue program to be evaluated are changes in the mother’s symptoms of perinatal depression, its effect on a child’s development, the mother’s understanding of child development and how to promote positive development, and understanding how to reduce stress. The EPDS is used at intake and then quarterly to track progress of the client. The Ages and Stages Questionnaire is used to track the child’s development.

UTILIZATION: Program defines how services will be classified and reported. Of the new mothers/clients to be served in 2013, 50% (25 of 50) will reside outside Champaign and Urbana. For PY 11 number of mothers/children served exceeded target and half way through PY12 program has almost met the target. Primary targets for 2013 are 56 mothers (6 continuing TPCs and 50 new TPCs), 115 babies, other family members, mothers not eligible or do not engage (15 continuing NTPCs and 100 new NTPCs).

Increased utilization of the program focuses on serving C-U families. Program originated as a joint venture with the Champaign County Board of Health to deliver services to families outside Champaign and Urbana. Program is moving away from that original intent. The current contract stipulates 70% of new clients served to be from outside Champaign and Urbana.

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): No
- ACCESS Initiative: No
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: Yes. Access and referral sources include medical providers.
- Gaps in Core Services: No

Overarching Decision Support Criteria:

- Underserved Populations: Yes
- Countywide Access: Yes. At the mid-point of the current contract year, percentage of new rural clients appears on track to meet contract minimum.
- Medicaid Reimbursement: No
- Budget-Program Connectedness: Yes

Technical Criteria:

- Approach/Methods/Innovation: Yes
- Staff Credentials: No

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Developmental Services Center

Program Name: Family Development Center

Focus of Application: MH ___ SA ___ DD X ACCESS ___ Qtr Cent ___

Type of Contract:

Financial Information:

PY13 CCMHB Funding Request: \$218,149 (CCDDB \$392,878)

PY13 Total Program Budget: \$786,632 projected surplus \$39,643

Current Year Funding (PY12): \$211,795

Proposed Change in Funding - PY12 vs. PY13: \$6,354 (3%)

Program Staff – CCMHB Funds: 3.06 FTE

Total Program Staff: 10.54 FTE

Budget Narrative: Revenue Enhancement. CCMHB funding request supports 28% of total program, CCDDB 50%. Other **revenue** sources include Early Intervention reimbursements (16.5%), United Way (4.6% of total program), DHS training reimbursements (0.5%), and small amounts of Interest Income, Third Party Payments, and Misc (allocated, based on projections, but not more fully described in the budget narrative.) **Personnel** form shows those portions of indirect staff (from 2% to 9% of 22 positions, 1 vacant) and 12 direct staff servicing this contract: 29% of 4 Child Development Specialists, a Screening Coordinator, Office Manager, and Program Director, 22% of a Speech/Language Pathologist, 4% of a Program Director, 3% of 2 RNs, and 9% of Vice President. Staff salaries and benefits comprise 75% of total request, and other **expenses** include: Professional Fees (6%), Consumables, General Operating, Occupancy (5.7%), Staff Development, Transportation (3%), Specific Assistance, Equipment Purchases, Lease/Rental (5.3%), Membership Dues, Interest Expense (per CCMHB funding guidelines, not an allowable expense), Misc, and Depreciation. Budget Narrative describes each expense item thoroughly and relates changes from FY12 levels to 3% wage increase, 10% benefits cost increase, increase in interest expense due to borrowing on line of credit. Allocation method included.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDB funding guidelines and specific contractual requirements. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 24%

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

Not Applicable _____

Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance X
Auditor Finding _____

Comments: audit does not provide breakout information for state and federal government funder categories.

Target Population: Children birth to 5, with or at risk of developmental disabilities/delays, and their families. Statewide 3.41% and regionally 3.11% of children 0-3 are enrolled in Early Intervention (those with a 30% delay in one or more areas or an identified disability or prematurity); estimates of underserved or unidentified children much higher. Program emphasizes early identification, family-directed intervention, and preserving the range of services and coordination across providers. Service enhancements of family support and education, child care consultation, and filling gaps for underserved populations.

Service Location/Demographics: County-wide. **Of 827 children served in FY11:** 22% were residents of Greater CC; all were 6 or younger; 52% were White, 26% Black/AA, 4% Asian/PI, and 18% Other; 8.3% were of H/L origin; 57% were male. **Of 630 children served in the first half of FY12:** 22% are residents of Greater CC; all are 6 or younger; 56% are White, 25% Black/AA, 3% Asian/PI, and 17% Other; 12% have H/L origin; and 60% are male.

Service Description/Type: Comprehensive Services for Young Children. Coordinated, home-based, family centered array of services, evidence-based/best practices. For children and families to experience uninterrupted, comprehensive services, the FDC maximizes state funds for comprehensive assessment services, developmental, occupational, and physical therapies, and parent-child developmental play groups. CCDDDB/CCMHB funding supports all of screening, child care consultation, PLAY (Play and Language for Autistic Youngsters) Project home consultation, and Family Resource Center (books, toys, and sensory materials lending libraries). Family-driven intervention plans build on strengths and resources of child, family, and community. Detail on education, specialized training, certification, and/or licensure of staff.

Access to Services for Rural Residents: Comprehensive screening and travel reimbursement for therapists, to whom geographic areas are assigned, permit service to over 20 rural communities. School and community screening events held with rural school coops, child care centers, and churches.

Program Performance Measures:

ACCESS: Initial assessments completed within 15 days of evaluation - actual outcomes of 97% in FY11 and 85.9% mid-year FY12 against targets of 90%. Referrals come from a variety of sources, are responded to immediately, assessment within two weeks. Natural supports (extended family, medical and faith-based community resources, and peer groups), culturally appropriate toys and materials, translation services, family input in service planning contribute to culturally appropriate services. All are informed of PUNS.

CONSUMER OUTCOMES: Consumer satisfaction target 90% was exceeded in FY11, no data mid-year FY12: satisfaction surveys are mailed to current families at random and to exiting families; feedback sought on child-centered, family-focused intervention, culturally responsive interactions. Developmental outcomes target 90% exceeded in FY11 (99%) and at mid-year FY12 (100%): child progress is evaluated using standardized tests, repeated at specific intervals, not more than six months. Each individual service plan includes goals and strategies for services plus outcome measures.

UTILIZATION: Description of decrease in participation in early intervention statewide, reduction in referrals from state system, decline in availability of independent therapy providers (due to state non-payment), and impact on this program (because the need for services has NOT decreased). In FY11, there were 830 total TPCs (850 in FY10, 879 in FY09, 927 in FY08), exceeding the target of 700; FY12 target of 700 against mid-year total of 633; FY13 target is increased to **750**. No targets established for NTPCs, but these are reported each year, described in plan narrative as children served in child care settings receiving consultations, total of 549 in FY11 and 286 by mid-year FY12. Service Contact target of 150 (developmental evaluations) was exceeded in FY11 (278 actual) and increased to 150 for FY12 (mid-year total is 121); FY13 target increased to 200. Community Service Event target of 120 (child care consultations) was exceeded in FY11 (actual 758), adjusted to 300 for FY12 (mid-year total is 405), continued at 300 for FY13.

Services to rural residents have increased, increasing therapists' travel time and decreasing the number of children seen daily; the need has grown due to fewer independent therapists serving rural areas.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: Yes

Specialty Courts: No

Behavioral Health/Physical Health Integration: Yes. Collaborates with primary care providers for early identification of families/children with social/emotional and developmental needs.

Gaps in Core Services: Yes

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: Yes

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes. Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Developmental Services Center

Program Name: Developmental Training – Employment Services

Focus of Application: MH ___ SA ___ DD X ACCESS ___ Qtr Cent ___

Type of Contract: Grant format requested

Financial Information:

PY13 CCMHB Funding Request: \$304,424 (CCDDB \$1,218,187)

PY13 Total Program Budget: \$6,250,283 (program deficit of \$278,140)

Current Year Funding (PY12): \$295,557

Proposed Change in Funding - PY12 vs. PY13: \$8,867 (3%)

Program Staff – CCMHB Funds: 4.7 FTE (5% of total program)

Total Program Staff: 94.76 FTE

Budget Narrative: Revenue Enhancement. CCMHB request is 4.9% of total program **revenue**, CCDDB 19.5%, Ford County MHB 0.4%, United Way 0.3%, Contributions 0.06%, DHS FFS and POS (individual awards) 36%, DHS DRS awards 13.6%, Sales of Goods & Services 29%, Other Program Service Fees 12%, and Interest, Rental, and Misc Income combined are 6.6% of total program revenue. Budget Narrative contains sufficient detail for each category. **Personnel** form shows those portions of indirect staff (from 1% to 5% of 22 positions, 1 vacant, total 0.37 FTE) and 93 direct staff positions servicing the contract: 5% of 36 Developmental Instructors, 4 DT Managers, 7 Drivers, a Transportation Coordinator, 3 Community Employment Specialists, 6 Employment Counselors (1 vacant), 2 Employment Specialists (1 vacant), 1 Operations Manager, 1 Employment Program Manager, 1 Supported Employment Supervisor, 11 Production Crew Leaders, 3 Production Workers, 3 Program Directors, 1 Account Manager, 1 Vocational Supervisor, 1 Vocational Evaluator, 4% of 2 Certified Occupational Therapy Assistants, 2% of 2 RNs, 3 Maintenance Techs (1 vacant), and a Program Director, 1% of a Maintenance Tech and 2 Vice Presidents; the relationship of each to this contract is described in budget narrative. **Expenses** consist of: staff costs, at 58% of total request; production cost at 13%; client wages/benefits at 6%; local transportation at 5.6%; occupancy at 5.2%; lease/rental 4.5%; and smaller amounts in other categories (no fundraising, no specific assistance). Each category is described in the budget narrative, with increases of 3% in salaries, 10% benefits costs, and interest expense.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDB funding guidelines and specific contractual requirements. Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 30%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance X _____
Auditor Finding _____

Comments: audit does not provide breakout information for state and federal government funder categories.

Target Population: Adults with developmental disabilities, with wide ranging abilities and support needs. Increase in health crises and issues related to aging among this population, along with greater prevalence of diagnosis of Autism Spectrum Disorder (ASD), has influenced the types of support offered, including staffing patterns and relationship between DT and vocational settings. Impact on families also noted.

Service Location/Demographics: Of 299 Champaign County residents served in FY11: 19% were from Greater CC; 90% were aged 19 to 59 and 8% over 60 (no demo data for the 6 NTPCs); 80% were White, 14% were Black/AA, 2.7% were Asian/PI, and less than 1% Other; 1% of Hispanic/Latino origin; and 55% were male. Of 266 Champaign County residents served in the first half of FY12: 21% are in Greater CC; 91% were aged 19 to 59, 9.4% were over 60; 82% were white, 14% black/African American, 3% Asian/Pacific Islander, and less than 1% Other; 1.5% of H/L origin, and 57% were male.

Service Description/Type: Adult Day Programming; Vocational. Low to High Intensity. Consumer preference determines location, type, schedule. Range of activities includes individualized exercise, computer lab, art room, Prompting Theater and Parkland Pops, community volunteering, and vocational training to self-advocacy groups, job skills development, autism/social skills support, sign language classes, vocational evaluation, and personalized job development and coaching. Staff training includes 120 hours mandated by DHS plus Crisis Prevention and Intervention, safe lifting, and inservices (e.g., Person-Centered-Planning, Total Communication, Occupational Therapy, Supported Employment, Community Employment, and Community Integration.) Certified Occupational Therapy Assistants fulfill continuing ed requirements. Job development staff certified in community-based employment strategies through Rehabilitation Continuing Education Programs.

Access to Services for Rural Residents: Staff attend IEPs county-wide, participate in transition workshops in these outlying areas, and provide tours of Champaign and Rantoul sites to members of the Rural CC Special Ed Coop and rural residents. Transportation services to Tolono, Philo, St. Joseph, Mahomet, Ludlow, and areas between.

Program Performance Measures

ACCESS: Intake process is described, with good detail on screenings and process for access to DT and ES. Performance measure is for presentation (of case of any individual seeking these program services) to Admissions Committee within 30 days of contact/interview and receipt of documentation establishing eligibility, at 90%.

CONSUMER OUTCOMES: Consumer satisfaction: FY11 target of 90% vs. outcome 100%. Target for FY12 is also 90%. DT consumer participation in independent community-based vocational or volunteer work setting: FY11 target of 45% was exceeded, at 54%; FY12 target same. DT consumer participation in

monthly community-based activity: FY11 target of 90% exceeded at 95%; FY12 target same. In-house consumer promotion to Supported Employment for job development: FY12 target of 5 individuals, against mid-year actual 2. Development of new employer-paid job sites: FY12 target of 8 sites against mid-year actual 3. Emphasis on person-centered planning and consumers' strong interest in community based recreation and employment (reflected in planning interviews, satisfaction surveys, and through service contacts). In FY11, DT consumers volunteered with 9 organizations and worked in 4 (C-U and Rantoul) community settings, and some marketed their art/crafts. ES staff supported 77 individuals in community-based competitive and supported jobs throughout the county.

UTILIZATION: Plan to serve **306** unduplicated TPCs (now reporting Champaign County only). TPC includes those open with DT, Evaluation/Screening, Regular Work, or Supported Employment. FY11 target for Continuing TPCs was 320, with actual 306; FY12 target 310, actual ~260, and FY13 target adjusted to 300. New TPC target of 10 for FY11 was met; target of 10 for FY12 not expected to be met (6) and lowered to 6 for FY13. NTPC are students with school support in DSC site ("Vocational Experience") or individuals in 3-day voc screening or those referred through DRS for temporary support. FY11 target of 4 was exceeded (10) and FY12 target of 5 not expected to be met (3); NTPC target for FY13 also 5. Service Contact target of 10 and Community Service Events target of 5 were exceeded in FY11 (18 and 13) and were adjusted to 8 each for FY12 (on track), remain at 8 for FY13. Because the program responds to varying intensity of service/support needs, an additional utilization measure for total hours of service continues in the category "Other".

Unexpected or Unintended Results section contains detail on volunteer work done by program participants, including Salvation Army, Peace Meals, Transitions Resale Shop, Humane Society, church, nursing homes, grocery delivery to families in need. "If you were to ask why they volunteer, they will cheerfully tell you it's 'for the people.'"

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: YES
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: YES

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: Program serves many with individual Medicaid-waiver funding.
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: Yes

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: East Central Illinois Refugee Mutual Assistance Center

Program Name: Family Support & Strengthening

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$13,000

PY13 Total Program Budget: \$153,916

Current Year Funding (PY12): \$12,000

Proposed Change in Funding - PY12 vs. PY13: \$1,000 (8% increase)

Program Staff – CCMHB Funds: .38 FTE

Total Program Staff: 4.48 FTE

Budget Narrative: CCMHB funds account for over 8% of total program revenue. Projected 2013 total agency revenue is essentially unchanged from 2012 while projected program revenue declines 5% from 2012 to 2013. Fundraising is the single largest source of program support at 48% followed by United Way at 18%. While the agency receives state funds none are allocated to this program. The ratio of benefits/taxes to wages is 16% for the agency as a whole as well as for the program. Salary and benefits represent 88% of expenses allocated to CCMHB and are spread across 7 direct staff positions. The remaining funds are allocated across six other expense lines.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 16%

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

Not Applicable _____

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding _____

Comments: The 2011 contract award is below CCMHB threshold required for an audit.

Target Population: Legally admitted refugees, former refugees, asylees, immigrants and their families that have relocated to Champaign County. Also assist local agencies with whom the target population interacts.

Service Location(s)/Demographics: Office in Urbana and various locations in the community for group meetings. Agency reports 39% of clients are from Asia, 49% are of Hispanic origins, 8% are from Africa, and the remaining 4% come from the balance of the world. Newly arrived immigrants are primarily from Africa, Mexico, Central and South America, the Middle East, and Asia.

Service Description/Type: Prevention. Building on the natural support networks within the different ethnic communities, the program assist client's transition to a new culture. Program activities include: ongoing assistance to mutual support groups; linkages with mainstream service providers; counseling for families in crisis; Peer to Peer Workshops, educational programs and bi-annual newsletter. Services are provided in nine different languages. Staff is bi-lingual/multi-lingual and is knowledgeable of social services.

Access to Services for Rural Residents: Program is open to any refugee/client.

Program Performance Measures

ACCESS: Program conducts outreach with and accepts referrals from multiple sources. Native language counseling provided by bi-lingual/multi-lingual staff is available. Appointments for families in crisis are a priority. Program also assists with interpretive services for clients medical/mental health appointments. Staff can also assist agencies with understanding the client's native culture. Newsletter published in multiple languages and widely distributed in the refugee community and community at large. Family Strengthening workshops are promoted to those refugees new to the community and those known to have an interest/need associated with the workshop topic.

CONSUMER OUTCOMES: Program solicits direct feedback from families served as well as through exit surveys. Brief statements summarize results for each measure. One statement refers to working with providers to better understand the client's native culture.

UTILIZATION: Program describes current level of activities and compares to targets. Program will exceed targets for current year. Records used to document services are referenced. Primary service category is Community Service Events tied to volume of mutual support groups and Family Strengthening workshops. Target of 72 CSEs for 2013 is unchanged from prior year.

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): No
- ACCESS Initiative: No
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: No
- Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: No

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Family Service of Champaign County

Program Name: Counseling

Focus of Application: MH _X_ SA ___ DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Fee for Service

Financial Information:

PY13 CCMHB Funding Request: \$50,000

PY13 Total Program Budget: \$94,500

Current Year Funding (PY12): \$50,000

Proposed Change in Funding - PY12 vs. PY13: \$0

Program Staff – CCMHB Funds: 1.22 FTE

Total Program Staff: 2.3 FTE

Budget Narrative: CCMHB funds account for 53% of total program funding. The balance of revenue comes from client fees, a DCFS contract, contributions, and two small local grants. Projected program revenue for 2013 is 2.5% lower than that for 2012. Client fees are assessed on a sliding scale based on income and household size but can be reduced or waived if hardship. The ratio of benefits/taxes to salaries for the program is 12% and for the agency as a whole it is 18%. Salary and benefits account for 78% of total expenses charged to CCMHB. The balance of CCMHB funds are spread across nine lines with occupancy at 12% is the single largest of these expenses. Staffing pattern for services includes portion of three therapist's time plus the program director. The budget narrative includes a description of how costs are allocated.

Reasonable Cost Standards:

"Reasonable costs" are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a "reasonable cost" limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 12%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____

Auditor Finding X

Comments: The Controller has not received continuing education and does not have available resources necessary to draft the financial statement footnotes in accordance with accepted accounting standards. Management response is to outsource the specific functions identified.

Target Population: Open to children, adolescents and adults. Agency has collaboration contracts with Illinois Department of Children and Family Services (IDCFS), Greater Community Aids Program (GCAP), DSC, Lutheran Social Services, and Catholic Charities to give those agencies' clients priority. Added to the priority groups are referrals from the Champaign County Specialty Courts. Such referrals are anticipated to be non-Medicaid clients.

Service Locations(s)/Demographics: Office based with participation in Specialty Court Team meetings and court hearings as necessary. Client demographics for the 2011 program finds 13% were age 18 or under, 85% were adults and 2% were seniors; 74% were White, 20% were Black, 4% were Asian and 2% were other races including bi-racial/multi-racial; and 63% were women. Client residency by zip code indicates 49% were from Champaign, 18% from Urbana, 8% from Rantoul, 6% from Mahomet, and 19% from the balance of the county.

Service Description/Type: Outpatient Counseling. The Counseling application includes services to Champaign County Specialty Courts. Specialty Court clients are identified as a priority population for the program. The Program Director and therapists as appropriate would prepare required reports and attend court hearings and Specialty Court Team meetings. Specialty Court clients served will have fees waived if requested by the Court. Time spent on reports and participation in Specialty Court meetings would be a billable activity. The program offers individual, couple and family counseling to address mental health and substance abuse issues. A Specialty Court therapy group is proposed that would provide transition and/or follow-up services. Following intake, an assessment is completed and treatment plan developed in consultation with the client and reviewed at regular intervals. Counseling addresses wide range of issues and uses creative approaches to engage the client. Staff is Masters level licensed clinicians with experience working with diverse populations including persons with a developmental disability.

Access to Services for Rural Residents: Services are delivered on-site with evening office hours available. Community education promotes program to rural residents.

Program Performance Measures

ACCESS: Office location in Champaign is on an MTD line and program has evening hours available. Clients are seen by therapists within days of initial intake and services are coordinated with other providers for integrated care planning. Sliding fee scale enables low-income families/clients to access services. The fee will be waived for Specialty Court clients on request by the Court.

CONSUMER OUTCOMES: Program identifies, defines and tracks three methods for measuring client outcomes and reports results. Methods include use of Global Assessment of Functioning (GAF) scores, Outcome Rating Scales (ORS) and rating completion of clients' treatment plan goals. Client scores for GAF and ORS indicate positive progress/client outcomes. And 85% of closed client cases met 90% of treatment goals.

UTILIZATION: Program is fee for service. Staff turnover at start of 2012 contract resulted in lower utilization in first quarter. However, program is currently on target for billing out the contract. Fees have

been reduced or waived for clients unable to pay full sliding scale assessed fee. Projected unduplicated clients for 2013 is 158 TPCs.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No but program does have an agreement to provide counseling to DSC clients.

Specialty Courts: Yes. Specialty Court participants are a priority.

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: No

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Family Service of Champaign County

Program Name: First Call for Help

Focus of Application: MH X SA X DD X ACCESS ____ Qtr Cent ____

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$60,540

PY13 Total Program Budget: \$101,060

Current Year Funding (PY12): \$60,540

Proposed Change in Funding - PY12 vs. PY13: \$0

Program Staff – CCMHB Funds: 1.77 FTE

Total Program Staff: 2.91 FTE

Budget Narrative: CCMHB funding is 60% of total revenue. The next largest source is United Way at 27%. A small grant from the City of Urbana contributes another 5% of revenue. Other sources are contributions, and donations/ad revenue from the HelpBook. No state funds support the program. The program is 100% funded with local revenue. Projected revenue for 2013 is 7% lower than that for 2012. The ratio of benefits/taxes to salary charged to CCMHB is 17% and closely aligns with the agency ratio of 18%. Salary and benefits account for 85% of total expenses charged to CCMHB. Direct service staff includes two FCFH staff plus the coordinator and program director that provide back-up when FCFH staff is not available. The remaining 15% of funding is allocated across nine expense lines. The budget narrative includes a description of how costs are allocated.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 17%

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

Not Applicable _____

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding __X_____

Comments: The Controller has not received continuing education and does not have available resources necessary to draft the financial statement footnotes in accordance with accepted accounting standards. Management response is to outsource the specific functions identified.

Target Population: Any resident of Champaign County may contact the program for information on services available including services for mental health, substance abuse and developmental disabilities. Specific reference is made to assisting clients of the Champaign County Specialty Courts.

Service Locations(s)/Demographics: Service is provided by phone or to walk-in clients at the Family Service office in Champaign. Many clients choose not to provide demographic data when contacting First Call for Help. Of those that did provide this information, 92% were adults and 8% seniors; 60% were Black and 40% were White; 2% were of Hispanic/Latino origin; and 70% were women. Residency determined by zip code finds 60% were from Champaign, 36% from Urbana and 4% from the balance of the county. Of total contacts, 41% did not provide zip code information.

Service Description/Type: Information and Referral. Program provides information and referral on services available in Champaign County to meet wide range of needs. Follow-up contacts may occur on some cases to be sure service was accessed. Maintenance of the information and referral database used in publication of the HelpBook and content of the online HelpSource is part of the service. Publication and distribution of the HelpBook is a collaborative project. The Program Director and one of the Information and Referral Specialists are Certified Information and Referral Specialists. The other specialist will pursue certification once eligible.

Program services include participation in Champaign County Specialty Court Team meetings to provide information on community resources and client advocacy with service providers as needed to expedite their access to services.

Access to Services for Rural Residents: Program is accessible to rural residents by telephone, via the web at the family service webpage and at www.helpsource.org, and distribution of the HelpBook. Assistance to walk-ins is also available.

Program Performance Measures

ACCESS: Telephone calls not answered live are responded to within 24 hours during business hours. Online database is accessible 24 hours a day. The HelpBook is updated and printed on an annual basis.

CONSUMER OUTCOMES: Client satisfaction surveys are used to assess program effectiveness. Surveys returned are very positive of the services provided. Results reported find 93% responded the assistance provided will meet the immediate need while the rest indicated the assistance was not enough to meet the need or the assistance was not available. Program does track type of service/assistance requested and unmet needs. Program also references collaboration with C-UPHD in publishing the HelpBook.

Agency does not indicate if Illinois AIRS (Alliance of Information and Referral Systems) or AIRS, the national organization, has identified measures appropriate for this type of service. Family Service does state it is unable to apply traditional outcome measurement techniques, e.g. pre and post-test measures, to the service provided.

UTILIZATION: Program reports all information and referral contacts/direct service as service contacts. Activity related to publication of the HelpBook and HelpSource online database is not reflected in service contacts data. For the 2011 program year, FCFH exceeded its target by 33%. The target for 2012 was adjusted upward in response to 2011 performance. With the program on track to exceed projected service contacts for 2012, the target for 2013 has been increased again. Actual performance for 2012 is on track to exceed 7,000 contacts as was done in 2011. Target for 2013 is 6,800 service contacts.

Outreach and advocacy calls are tracked separately and totaled 1,580 in 2011. These are calls made on behalf of clients to determine if resources are available or to assist clients with accessing a particular service/resource.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: Yes. Specific reference is made to assisting Specialty Court teams with identifying resources for court participants.

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations:

Countywide Access:

Medicaid Reimbursement:

Budget-Program Connectedness:

Technical Criteria:

Approach/Methods/Innovation: No. Agency is a member of the Illinois Alliance of Information and Referral Specialists but is not able to meet accreditation requirements due to financial constraints.

Staff Credentials: Yes. Direct service staff is Certified Information and Referral Specialists

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Family Service of Champaign County

Program Name: Self-Help Center

Focus of Application: MH_X_SA_X_DD_X_ACCESS ____ Qtr Cent ____

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$28,928

PY13 Total Program Budget: \$38,778

Current Year Funding (PY12): \$29,428

Proposed Change in Funding - PY12 vs. PY13: \$500

Program Staff – CCMHB Funds: .55 FTE

Total Program Staff: .76 FTE

Budget Narrative: CCMHB funds are 75% of total program revenue. United Way funds account for about another 10% of program revenue. Remaining revenue includes a small grant from Carle Foundation hospital and then contributions. No state funds support the program. The \$500 increase requested from CCMHB is to support scholarships to attend the Self Help Centers bi-annual conference held in the fall. Salary and benefits represent 64% of expenses charged to CCMHB. The ratio of benefits/taxes to salary of CCMHB funds is 14% whereas for the agency as a whole it is 18%. The balance of CCMHB funding is allocated across ten line items of which the conference line and miscellaneous line are the largest non-personnel expenses at 8% each. Program is staffed by a part-time coordinator. The budget narrative includes a description of how costs are allocated.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 14%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____

Auditor Finding __X_____

Comments: The Controller has not received continuing education and does not have available resources necessary to draft the financial statement footnotes in accordance with accepted accounting standards. Management response is to outsource the specific functions identified.

Target Population: Individuals seeking a self-help/support group or who are interested in forming a group when none exists, group leaders and members, and professionals seeking to assist a group or make a referral.

Service Locations(s)/Demographics: Program operates out of Family Service in Champaign. Workshops organized by the program may be at Family Service or in the community. Groups themselves meet at locations of their choosing and function independent of the Self-Help Center. Demographic data is not collected on contacts.

Service Description/Type: Support Services. The Self Help Center provides a wide range of services to assist with start-up and support of groups and raise community awareness of the groups available. Staff maintains a database of all support groups in Champaign County, provides consultation and educational materials for those wanting to start a self help group, publishes and distributes a self help directory and specialized lists by general topic, maintains online web presence with information on groups, publishes newsletter for group leaders and professionals, conducts workshops and participates in community events.

The Self-Help Coordinator is new to the position. Education, work experience, and community volunteerism fits well with the requirements of the position.

Access to Services for Rural Residents: Information on self-help groups is accessible by telephone, online and by e-mail. Program also sends libraries and churches the Self-Help Newsletter, directories and other meeting information.

Program Performance Measures

ACCESS: Program maintains a log to track volume of contacts and responses to inquiries. All contacts by telephone or e-mail are responded to within 24 hours. Use of the online database provides immediate access.

CONSUMER OUTCOMES: Limited information is collected on contacts but does include if the contact is from a professional or lay person and the topic/group associated with the inquiry. Events organized by the Self-Help Center include evaluations by participants and results are compared to benchmarks.

UTILIZATION: Program measures activities as community service events. For PY 2011 program exceeded projected CSEs and adjusted target for 2012. Program is on track to meet the 2012 target. Target for 2013 is 280 CSEs.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Family Service of Champaign County

Program Name: Senior Counseling & Advocacy

Focus of Application: MH X SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$142,337

PY13 Total Program Budget: \$477,610

Current Year Funding (PY12): \$142,337

Proposed Change in Funding - PY12 vs. PY13: \$0

Program Staff – CCMHB Funds: 3.8 FTE

Total Program Staff: 12.5 FTE

Budget Narrative: CCMHB funds account for 30% of total program revenue. A number of contracts that are a mix of state and federal funds comes through the East Central Illinois Area Agency on Aging provide 36% of total revenue. The next largest source of revenue is a fee for service contract for the IDOA Elder abuse program at 27%. Remaining revenue comes from a variety of small contracts and United Way funding. Total projected revenue is 7% less than that for 2012. The ratio of benefits/taxes to salaries charged to CCMHB is a little bit higher than the other Family Service programs at 21% whereas for the agency as a whole the ratio is 18%. Salaries and benefits is the single largest expense charged to CCMHB at 87%. The remaining 13% of CCMHB funded expenses is spread across 10 other line items of which transportation is 4% of the total and transportation another 3%. CCMHB funds support a range of program related positions, primarily caseworkers and the program manager and the director. The budget narrative includes a description of how costs are allocated.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 21%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding X _____

Comments: The Controller has not received continuing education and does not have available resources necessary to draft the financial statement footnotes in accordance with accepted accounting standards. Management response is to outsource the specific functions identified.

Target Population: Adults age 60 and older living at home/non-institutional setting and need for assistance with anxiety, depression or other mental health issue, isolation, family issues, abuse or neglect including self-neglect and/or need to access services or benefits. Caregivers, typically an adult family member assisting an elderly parent, may also be assisted. Emphasis is placed on serving those 75 and older, those living alone, living in rural areas or are people of color.

Service Locations(s)/Demographics: Initial screening by telephone and followed up with home visit(s) as necessary for assessment and services provided during regular business hours. Client demographics reported for the 2011 program year finds 96% were age 60 and older with the remaining 4% being adult caregivers; 75% were women; 75% were White, 24% Black, and 1% Asian descent; and 1% reported being of Hispanic/Latino origin. Client residency by zip code indicates 43% were from Champaign, 36% from Urbana, 6% from Rantoul, 4% from Savoy, and 2% each from Mahomet and Tolono with the remaining 7% from the balance of the county.

Service Description/Type: Information and Referral, Outpatient Counseling and Support Services. Services may be short-term with two to three contacts total to long-term with an assessment and treatment plan followed by counseling and/or referral and advocacy. Many elderly lack the ability to meet basic needs that results in stress, anxiety, and/or depression. The program is intended to mitigate the causes by connecting clients to the appropriate resource to meet their needs and build trust to engage clients in counseling. Clients with chronic mental illness are referred to Community Elements.

All caseworkers have a minimum of a Bachelor's degree. Three have Master's degrees and one is an RN. Program manager has a Master's degree and considerable work experience in the field. Seven staff including the program manager are Certified Information and Referral Specialists – Aging (CIRS-A).

Access to Services for Rural Residents: Program delivers services over the telephone and in the clients' home. Transportation may be provided to assist client with accessing services in Champaign and Urbana. Two caseworkers conduct outreach through regular contact with rural senior groups and others to keep them informed of services.

Program Performance Measures

ACCESS: For the 2011 contract, program reports first contact by case workers for short-term cases (Non-treatment Plan Clients) averaged 3 days and essentially no wait for long-term cases (Treatment Plan Clients). Time to access services can vary with time of year, e.g. longer during Medicare Part D plan open enrollment. Services may be over the phone, in the home or other community setting. Initial contacts, usually by telephone, are used to gauge need and those with the most immediate health or welfare need given priority. Program has the capacity to "warm-transfer" a call live to another provider. Program conducts outreach and places emphasis on the 75 and older age group. Written information is available in three languages.

CONSUMER OUTCOMES: Program sets measures associated with improving social connectedness, increased feelings of empowerment and satisfaction, increased access to resources to meet basic needs and unmet needs will decrease or stabilize. Program reports results and met or exceeded target for each measure except one. The unmet needs measure missed target by one point. Tools used to measure outcomes are cited. Outcome measures for 2013 are described.

UTILIZATION: Categories are defined in the service section of the application. Results are compared to targets for each service category used. Program reports periodic reviews of service mix and reallocates resources to adjust to fluctuations. Targets for 2013 are increased but past performance indicates some could be set higher than proposed, particularly for NTPCs and SCs. Projected client service levels are 295 TPCs (165 new and 130 continuing), 850 NTPCs (820 new and 30 continuing). Target for service contacts is 5,000.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: No
Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Health Improvement Center, Frances Nelson Health Center Satellite (FNHC)

Program Name: Mental Health Services at Frances Nelson

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$148,774

PY13 Total Program Budget: \$309,079

Current Year Funding (PY12): \$148,774

Proposed Change in Funding - PY12 vs. PY13: \$0

Program Staff – CCMHB Funds: 2.3 FTE

Total Program Staff: 2.38 FTE

Budget Narrative: CCMHB funds account for 48% of total program revenue. Other revenue sources include unrestricted federal HHS grant funds at 25%, Medicaid (19%) and Medicare (4%) billings for psychiatric care, with the remaining 4% from self-pay and insurance. While projected revenue for 2013 is 3% higher than 2012, no increase is requested from CCMHB. All CCMHB funds (100%) are budgeted for salaries. Other revenue sources account for the balance of the salary expense line. The ratio of benefits/taxes to salary for the program as whole is the same as for total agency, 20%. An explanation is provided in the budget narrative for calculation of all other expense lines. CCMHB supports all direct service personnel comprising 2 part-time LCSWs as 1 FTE, .3 FTE of the psychiatrist, and .5 FTE of the bilingual counselor's time.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 20% (total program)

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

Not Applicable _____

Audit Requirement Waived _____

Audit in Compliance _____

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Audit not in Compliance _____
Auditor Finding _____

Target Population: To receive services the individual must be a medical patient at FNHC. Referrals for counseling and psychiatric services are made by physicians. FNHC has 7,455 patients. Of clients seen for counseling or psychiatric, 56% are uninsured and a higher percentage than that for the total agency. FNHC charges a sliding fee scale for primary care with the majority receiving a 90% discount. Mental health services charge a \$5 flat fee. Agency cites research and other references supporting integration of behavioral and primary healthcare in a primary care setting.

Service Locations(s)/Demographics: On-site at FNHC. Client demographics reported finds 96% were adults including 3% age 60 or older, and 4% were children; 55% were white, 33% were Black, and 12% were other races including bi-racial/multi-racial; 13% were of Hispanic/Latino origin; and 72% were women. Client residency by zip code indicates 41% were from Champaign, 29% from Urbana, 14% from Rantoul and 16% from the balance of the county.

Service Description/Type: Counseling and Psychiatric services delivered in a primary health care environment. On-site mental health services enable integration of mental health services with physical health care. The Mental Health Services Program has three distinct service elements. Counseling and case management for adult clients is provided by two .5 FTE counselors (LCPCs). Total unduplicated clients served by the LCPCs were 169. Clients are assessed within 3 weeks of a medical provider's referral and a treatment plan is completed at the second session with the counselor. Crisis contacts are handled the same day. The second element is psychiatric services provided by a .3 FTE psychiatrist. Total unduplicated clients served by the psychiatrist were 122. Medication management/monitoring are provided to patients with acute or chronic/serious mental illness and consultation with medical staff about specific patients and/or diagnosis and treatment. The third element is counseling services for Spanish speaking patients provided by a .5 FTE bilingual counselor (MSW) with half-time support from CCMHB. Total unduplicated clients seen by this position was 90 of which over half were Spanish speaking clients. This position has additional support from other funding.

Access to Services for Rural Residents: Access is tied to patient status at FNHC.

Program Performance Measures

ACCESS: Program defines measures for each of the three service components and reports results. Depending on the service, 75% to 80% of referrals will be seen within a set period of time. Results reported met or exceeded targets. Measures for PY13 are unchanged from 2012.

CONSUMER OUTCOMES: Program identifies measures associated with timeframes for completion of GAF scale for adults. Target for completion of initial GAF was met while measure for completion of six month/case closure GAF score was not. Changes in GAF scores are reported for adults. Measures for PY13 are described including a measure tied to attainment of treatment plan goals.

UTILIZATION: With the exception of case management activity, all services are anticipated to meet or exceed projections for 2012. Program sets clear targets for all services for 2013. For counseling, target is 200 TPCs (50 continuing and 150 new) with 1500 service contacts. For psychiatric services, target is 110 TPCs (90 continuing and 20 new) with 875 service contacts. For bilingual counseling, target is 75 TPCs (20 continuing and 55 new) with 700 service contacts.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: Yes, services are delivered within a primary healthcare setting.

Gaps in Core Services: Yes

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: Yes

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes, research support for integration of behavioral health in primary care setting and use of CBT and other evidence based practices is referenced.

Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Prairie Center Health Systems, Inc.

Program Name: Drug Court

Focus of Application: MH ___ SA X DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$173,250

PY13 Total Program Budget: \$256,949

Current Year Funding (PY12): \$165,000

Proposed Change in Funding - PY12 vs. PY13: \$8,250 (5%)

Program Staff – CCMHB Funds: 3.83 FTE

Total Program Staff: 4.53 FTE

Budget Narrative: CCMHB funds account for 67% of total program revenue. State fee for service contracts (DASA and Medicaid) provide 25% of projected program revenue. The remaining 8% comes from client fees and insurance. A \$5 fee per service encounter is charged to DASA and CCMHB clients. The ratio of benefits/taxes to salary charged to CCMHB is 23% and matches that for the agency as a whole. Salary and benefits is 76% of total expenses with CCMHB funds supporting 67% of the total cost. All other expense lines are charged off at the same rate equal to CCMHB share of revenue. Cost allocation plan is described in the budget narrative.

Personnel form is incomplete. No personnel information is listed in the program and CCMHB columns.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 23%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance X _____

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Auditor Finding _____

Comments: Audit does not meet expectations for presentation of Schedule of Operating Income by Program and Schedule of Operating Expenses by Program required by contract. The absence of schedules specifying revenue and expenses directly attributed to CCMHB contracts is a significant non-compliance issue. The CCMHB staff will provide clarification of audit requirements to the agency.

Target Population: Adults are referred by Champaign County Court and Treatment Alternatives for Safer Communities (TASC). All referred clients have non-violent felony convictions, may have been incarcerated in the past and have a history of attempted treatment for substance abuse.

Service Locations(s)/Demographics: Champaign County Drug Court, PCHS Urbana location for outpatient care and Champaign location for residential treatment. Client demographics for the 2011 program finds 1005 were adults; 48% were Black, 48% were White, and 4% were other races, including bi-racial/multi-racial; of those clients responding to the question of Hispanic/Latino origin, 5% were of such origin; and 57% of clients were men. Residency by zip code indicates 48% were from Champaign, 31% were from Urbana, 7% from Rantoul, and 14% from the balance of the county.

Service Description/Type: Counseling. Range of services includes assessments applying ASAM and DSM-IV criteria, individual and group counseling and intensive case management. Program uses the evidence based Matrix Intensive Outpatient curriculum with educational modules on substance abuse, cross-addiction, relapse prevention, corrective thinking and family dynamics. Groups can include gender specific group therapy, and co-occurring disorders groups. PCHS Drug Court staff works closely with other members of the Drug Court Team and other community partners. The team includes Judge Ford, representatives from State's Attorney, Public Defender, Probation, TASC, and Community Elements. Weekly reports are provided to the Team by PCHS staff. Clients receive an intensive level of treatment and are frequently monitored for compliance. A minimum of one year of sobriety is required before a client may graduate from drug court.

Program staff is licensed and/or certified addictions counselors (CADC) with Masters or Bachelors level degrees. Clinical supervision provided by experienced and licensed staff (LCPC or LCSW). Staff is diverse and representative of the clients served. Program staff training is on-going and includes drug court specific events.

Access to Services for Rural Residents: Participation is tied to involvement with Drug Court. Counseling is provided at PCHS Urbana location. Program will assist with transportation.

Program Performance Measures

ACCESS: Any Drug Court participant referred to PCHS will be assessed within 3 days of referral and engage in treatment within three days after the assessment is completed, and will receive intensive case management if barriers to treatment exist. While the measures do not set a target or benchmarks results are reported for each measure.

Counseling sessions are available days and most weeknights. Residential services operate 24 hours a day. The Drug Court Case Manager assists clients with barriers such transportation, housing and child care. PCHS uses interpreters as needed.

CONSUMER OUTCOMES: Three outcome measures linked Drug Court graduation rate are cited. The first is the actual graduation rate. The other two monitor client activity prior to graduation: no legal

involvement six months prior to graduation; and involvement in 12-step program or other community support at time of graduation. Of the 24 graduates in 2011, none had new legal involvement and all were involved in some type of community support, 12-step or otherwise.

Program cites measurement tool used by PCHS, Mental Health Statistics Improvement Program (MHSIP) Consumer Satisfaction Survey, used to collect client feedback on services. Results for the agency are compared to Midwest and national averages for the survey. PCHS is outperforming other providers on all measures – access, quality of care, outcomes and general client satisfaction.

UTILIZATION: Program reports unduplicated client totals for 2011 program at 107 of projected 110. Service categories for 2013 program are well defined. Client target is unchanged at 110 (50 new and 60 continuing). Service contacts will now be tracked with a target of 11,720.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: Yes
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: No, access to services is contingent on involvement with Drug Court
Medicaid Reimbursement: No
Budget-Program Connectedness: No. Percentage of staff time by position allocated to program cannot be determined as personnel form is incomplete. References in budget narrative provide some detail on staff positions.

Technical Criteria:

Approach/Methods/Innovation: Yes, use of DSM-IV and ASAM criteria based assessment and evidence based curriculum cited.
Staff Credentials: Yes, licensed and/or Certified Alcohol and Drug Counselors with specialized drug court training.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Prairie Center Health Systems, Inc.

Program Name: Mental Health Court

Focus of Application: MH ___ SA X DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$10,000

PY13 Total Program Budget: \$12,902

Current Year Funding (PY12): \$0 – New proposal for 2013.

Proposed Change in Funding - PY12 vs. PY13: N/A

Program Staff – CCMHB Funds: .16 FTE

Total Program Staff: .16 FTE

Budget Narrative: CCMHB is the primary funder at 78% of total projected revenue for the program. Remaining revenue is tied to billing state contracts for services. CCMHB supports 100% of program salary and benefits using 73% of requested funding. The remaining 27% of CCMHB funding is spread across five lines. The consumables line is the highest of the five at 11% and includes the purchase of the curriculum to be used with clients. The ratio of benefits/taxes to salary charged to CCMHB is 23% and matches ratio for the agency.

Personnel form is incomplete. No personnel information is listed in the program and CCMHB columns.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 23%

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

Not Applicable X

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding _____

Comments: Program is a new proposal for 2013.

Target Population: Adults referred by the Champaign County Mental Health Court Team. A substance abuse issue will have been identified by Community Elements during assessment or by Champaign County Probation prior to referral to Prairie Center.

Service Location(s)/Demographics: Champaign County Mental Health Court, County Jail, and PCHS Urbana location for outpatient care. No client demographics available because this is new program proposal.

Service Description/Type: Substance Abuse Assessment and Outpatient Counseling. The PCHS Mental Health Court clinician will complete an assessment applying DSM-IV and ASAM criteria to determine level of treatment, case management needs and individual strengths of the client. An individualized client driven treatment plan is prepared based on assessed needs and strengths. Coordinated services include case management, individual and as group sessions, as well as monitoring compliance, and client's involvement in community recovery support groups. PCHS will use the Hazelden Co-Occurring curriculum and materials designed specifically for use with persons with a dual diagnosis in a substance abuse treatment setting. PCHS Mental Health Court staff will work closely with other members of the Mental Health Court Team to coordinate services and will provide the team with weekly reports.

Program staff is licensed and/or certified addictions counselors (CADC) with Masters or Bachelors level degrees. Clinical supervision provided by experienced and licensed staff (LCPC or LCSW).

Access to Services for Rural Residents: Participation is tied to involvement with Mental Health Court. Counseling is provided at PCHS Urbana location. Program will assist with transportation.

Program Performance Measures

ACCESS: Any Mental Health Court participant referred to PCHS will be assessed within five days of referral and engage in treatment within five days after the assessment is completed, and will receive intensive case management if barriers to treatment exist. The measures do not set a target or benchmarks. Counseling sessions are available days and most weeknights. PCHS uses interpreters as needed.

CONSUMER OUTCOMES: Mental Health Court specific measures to be used are client participation in treatment, completion of treatment goals and graduation from Mental Health Court, and use of GAF scale to track client progress.

Program cites measurement tool used by PCHS, Mental Health Statistics Improvement Program (MHSIP) Consumer Satisfaction Survey, used to collect client feedback on services. Results for the agency are compared to Midwest and national averages for the survey. PCHS is outperforming other providers on all measures – access, quality of care, outcomes and general client satisfaction.

UTILIZATION: Program describes service categories to be used and establishes targets. Service contacts represent assessments completed and treatment plan clients are the number engaging in treatment. Volume projected is low with 5 TPCs.

CCMHB Priorities:

Primary Decision Support Considerations:

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Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: Yes, proposal provides substance abuse treatment to Mental Health Court participants with a dual diagnosis (MISA).

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: No, access to services is contingent on involvement with Mental Health Court

Medicaid Reimbursement: No

Budget-Program Connectedness: No. Percentage of staff time by position allocated to program cannot be determined as personnel form is incomplete. References in budget narrative provide only general information on staff positions.

Technical Criteria:

Approach/Methods/Innovation: Yes, use of DSM-IV and ASAM criteria based assessment and evidence based curriculum cited.

Staff Credentials: Yes, staff licensed and/or Certified Alcohol and Drug Counselors.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Prairie Center Health Systems, Inc.

Program Name: Prevention Program

Focus of Application: MH ___ SA X DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$59,378

PY13 Total Program Budget: \$192,889

Current Year Funding (PY12): \$56,550

Proposed Change in Funding - PY12 vs. PY13: 2838 (5%)

Program Staff – CCMHB Funds: 1.14 FTE

Total Program Staff: 3.33 FTE

Budget Narrative: CCMHB funds account for 31% of projected program revenue. Funding from DHS-DASA is 52% of projected revenue. Other local sources plus contributions provide the remaining 17% of revenue. The DASA contract solicited proposals that are under review with awards to be made for the 2013 state fiscal year. The ratio of benefits/taxes to salary charged to CCMHB is 23% and matches that for the agency as a whole. Salary and benefits is 76% of total expenses paid by CCMHB. The other 24% is allocated across 10 expense lines. All expense lines are charged off at a rate equal to CCMHB share of revenue, 31%. Cost allocation plan is described in the budget narrative.

Personnel form is incomplete. No personnel information is listed in the program and CCMHB columns.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 23%

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

Not Applicable _____

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance ___ X _____

Auditor Finding _____

Comments: Audit does not meet expectations for presentation of Schedule of Operating Income by Program and Schedule of Operating Expenses by Program required by contract. The absence of schedules specifying revenue and expenses directly attributed to CCMHB contracts is a significant non-compliance issue. The CCMHB staff will provide clarification of audit requirements to the agency.

Target Population: Three groups are listed, youth primarily 4th through 8th grade, parents of school age children and the community at large.

Service Locations(s)/Demographics: At schools and other community sites throughout the county. Of the presentations made in 2011, 44% were in Urbana, 32% were in Champaign, 4% were in Rantoul and 20% were in other rural communities in the county. PCHS and Community Elements both have prevention programs but do not serve same schools.

Service Description/Type: Prevention. Services are designed to fit the audience – youth, parents and community. Youth focused services use the Too Good for Drugs and Too Good for Violence curricula that address alcohol, tobacco and other drugs (ATOD), life skills and violence prevention. This is a research/evidence based curricula that has proven effective with diverse populations and are recognized by SAMHSA as model programs. Parent education occurs through materials shared with students and parent workshops held when requested by schools/community organizations or parent groups. The session(s) are designed to meet the needs of the requesting organization, with an emphasis on increasing parental knowledge of ATOD and parenting skills when dealing with ATOD issues. Community oriented activities include participation in events to increase awareness of the dangers associated with ATOD. The annual Red Ribbon campaign led by the Prevention program is a prime example of this type of work.

Access to Services for Rural Residents: Services are promoted throughout the county. Program will deliver services at the requesting organization's location, primarily schools.

Program Performance Measures

ACCESS: Curricula used were selected for proven effectiveness with diverse populations and settings. Staff is trained in the curricula and is encouraged to attend trainings on programming for diverse populations.

CONSUMER OUTCOMES: Pre-and Post-Tests from the two curriculums are used to assess youth knowledge and teacher perceptions of the material and youth response. Positive results reported for various schools/grades that are compared to national benchmarks. Parent feedback is positive noting changes in student behavior. Community events enjoy broad support through coalition building efforts.

UTILIZATION: Program measures prevention presentations as community service events (CSEs) and was within 95% of established targets for 2011 and on track for 2012. Current target of 900 CSEs remains the same for the 2013 program year.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: No. Percentage of staff time by position allocated to program cannot be determined as personnel form is incomplete. References in budget narrative provide some detail on staff positions.

Technical Criteria:

Approach/Methods/Innovation: Yes. Program uses evidence based Too Good for Drugs and Too Good for Violence curricula.

Staff Credentials: Yes, staff is trained in the prevention curricula used.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Prairie Center Health Systems, Inc.

Program Name: Youth Services

Focus of Application: MH ___ SA X DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$105,000

PY13 Total Program Budget: \$145,735

Current Year Funding (PY12): \$100,000

Proposed Change in Funding - PY12 vs. PY13: \$5,000 (5%)

Program Staff – CCMHB Funds: 2.19 FTE

Total Program Staff: 2.79 FTE

Budget Narrative: CCMHB funds account for 72% of projected revenue. The remaining 28% are state contracts, primarily billings to Medicaid. No client fee is charged. The ratio of benefits/taxes to salary charged to CCMHB is 23% and matches that for the agency as a whole. Salary and benefits is 85% of total expense paid by CCMHB. The other 15% is allocated across 8 expense lines. Cost allocation plan is described in the budget narrative.

Personnel form is incomplete. No personnel information is listed in the program and CCMHB columns.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 23%

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

Not Applicable X
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding _____

Comments: First year of contract was 2012.

Target Population: Youth age 12 to 18 and report use, abuse or dependence with alcohol and/or other drugs. Referrals sources identified include ACCESS Initiative partners, PLL and schools. Family members as defined by the consumer may be engaged in services as part of the youths' treatment.

Service Locations(s)/Demographics: At Urbana High School, READY school, Champaign County Probation, and on-site at Prairie Center-Killarney St. office. Some home visits or use other natural setting may be done as necessary. Demographics reported are for the first and second quarter of 2012 program. All clients (100%) are age 13 to 18; 47% are White, 47% are Black, and 6% are of other races including bi-racial/multi-racial; 5% are of Hispanic/Latino origin, and 84% are male. Client residency by zip code indicates 40% were from Urbana, 30% from Champaign and 30% from the balance of the county including Rantoul.

Service Description/Type: Outpatient Counseling. Initial screening of youth will be done with the CRAFFT a six question screening tool, and based on screening results an assessment completed, treatment plan developed, and range of evidence based services provided including individual and group counseling. Level of services may be outpatient or intensive outpatient depending on assessment. Youth counseling sessions include skill building in multiple areas, including relapse prevention, life skills, self-esteem, family issues, and recreation/leisure. While the program will continue to use the Chestnut Health System Youth OP/IOP treatment model, staff has found it does not meet the complex treatment needs of some youth. In response PCHS may implement the evidence based SAMHSA "Seven Stages" model (purchase contingent on funds from another funder). The two models will provide a broaden treatment options. Educational sessions for family members, peers, teachers and other school staff are also planned.

Services will be provided by clinicians with Masters or Bachelors' degrees, licensed (LPC, etc.) and/or Certified Alcohol and Drug Counselor (CADC) with supervision provided by experienced and licensed staff (LCPC or LCSW).

Access to Services for Rural Residents: Services are primarily delivered within Champaign and Urbana although home visits or use of other setting may occur.

Program Performance Measures

ACCESS: Youth referred to the program will be assessed within five days of referral and engage in treatment within five days after the assessment is completed, and will case management if barriers to treatment exist. Benchmarks or targets for measures are not identified. Home visit may be done to build trust with youth/family. Assistance with arranging transportation is provided if needed. Counseling sessions are available days and most weeknights. PCHS uses interpreters as needed.

CONSUMER OUTCOMES: Program identifies various methods for assessing treatment outcomes. Tools to be used include the Adolescent Relapse Coping Questionnaire (ARCO), the Children's Global Assessment Scale (CGAS), and the Mental Health Statistics Improvement Program (MHSIP) Client Satisfaction Survey.

UTILIZATION: Program describes service categories to be used and establishes targets. Number of treatment clients for 2013 is 30 continuing TPCs and 50 new TPCs. Service contacts will track number of screens completed and has a target of 50. Community Service Events will track classroom presentations to students and community education events for parents and has a target of 12.

The program is in its first year. For the first two quarter of 2012, 19 youth have been engaged in services.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No
ACCESS Initiative: No
Quarter Cent for Public Safety: No
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes, although service sites are in Champaign and Urbana.
Medicaid Reimbursement: No
Budget-Program Connectedness: No. Personnel form is incomplete. References in budget narrative provide some detail on staff positions.

Technical Criteria:

Approach/Methods/Innovation: Yes, evidenced based model(s).
Staff Credentials: Yes. Licensed and/or CADAC.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Rape Advocacy, Counseling, & Education Services

Program Name: Counseling & Crisis Services

Focus of Application: MH X SA DD ACCESS Qtr Cent

Type of Contract:

Financial Information:

PY13 CCMHB Funding Request: \$19,867

PY13 Total Program Budget: \$114,588

Current Year Funding (PY12): \$15,152

Proposed Change in Funding - PY12 vs. PY13: \$4,715 (24%)

Program Staff – CCMHB Funds: .4 FTE

Total Program Staff: 1.7 FTE

Budget Narrative: CCMHB funds are 17% of projected program revenue. State funding through the Illinois Coalition Against Sexual Assault (ICASA) represents 67% of projected program revenue. The United Way and other local contributions/fundraising are expected to generate the remaining 13% of revenue. The ratio of benefits/taxes to salary charged to CCMHB is 24% and is less than the 26% rate charged for the agency as a whole. Virtually 100% of CCMHB funds are allocated to salary and benefits and supports the therapist position providing direct service. Local transportation is allocated a nominal amount (\$250). Agency has six staff and qualifications of each are described in the budget narrative.

Increased request to local funders made to offset anticipated reduced support from the state.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 24%

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

Not Applicable X
Audit Requirement Waived
Audit in Compliance
Audit not in Compliance

Auditor Finding _____

Comments: Agency was not under contract with CCMHB for the 2011 program year. For 2012, the requirement for an audit is waived because award is less than the \$20,000 threshold.

Target Population: Survivors of sexual assault and non-offending significant others age three and older. The agency reports it serves a disproportionate number of African American clients.

Service Locations(s)/Demographics: Office and other secure location that provides space that allows for confidential meetings (separate office or meeting space with door). The 2012 contract is the first year of funding for the agency. Client demographics, for the 1st and 2nd quarters of the 2012 program, finds 3% were age 7 to 12, 57% were age 13 to 18 and the remaining 40% were adults; 57% were White, 31% were Black, and 12% were other races including bi-racial/multi-racial, 17% were of Hispanic/Latino descent, and 91% were female. Residency by zip code finds 54% were from Rantoul, 29% from Urbana, and 17% were from Champaign.

Service Description/Type: Counseling. Services include individual and group counseling. Program also operates the 24 hour Rape Crisis Hotline. Counseling hours include evening hours one night per week. Groups are offered once per week in late afternoon or evening. Counseling services are provided by a full time therapist who is an LPC and has completed ICASA required training, crisis intervention training and child counselor training and is currently being trained in Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS) curriculum in conjunction with the ACCESS Initiative.

Access to Services for Rural Residents: The counselor will meet clients at a neutral location such as a school or social service agency that has space available to conduct a confidential meeting. Program has a toll free crisis hotline.

Program Performance Measures

ACCESS: Initial contact is typically made through the Rape Crisis Hotline. After office hours hotline is managed through an answering service that connects caller to staff or volunteer on call. Any staff or volunteer working the hotline has completed state mandated 40 hour crisis intervention training. Counseling appointments generally follow the day after first contact with some evening hours offered. Currently there is no waiting list.

CONSUMER OUTCOMES: RACES uses two methods to measure consumer outcomes. The first approach is a client satisfaction survey completed at case closure. The short survey was created and standardized by ICASA. The second method is an annual outcome evaluation survey completed by a third party that reports results in total and by center to ICASA. The client survey is done in October and asks clients about services they are receiving, improvement in functioning, and satisfaction with the center providing the service. Results are reported for adults and adolescents.

UTILIZATION: Service categories are well defined. Targets include 50 Treatment Plan Clients (treatment plan completed within 5 sessions) and 25 Non-Treatment Plan Clients (participate in less than 5 sessions), 25 service contacts (crisis intervention contacts by staff), and community service events described as information and referral or professional contacts made by staff. Targets for 2013 are unchanged from 2012 with the exception of community service events that are increased to 150.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: No

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: Yes. Increase funding is to offset reduced state support.

Overarching Decision Support Criteria:

Underserved Populations: Yes

Countywide Access: Yes, program is accessible through 24 hour toll free Rape Crisis hotline.

Medicaid Reimbursement: No

Budget-Program Connectedness: Yes. All CCMHB funds support the therapist providing direct service.

Technical Criteria:

Approach/Methods/Innovation: Yes.

Staff Credentials: Yes. Therapist is an LCSW with extensive training. Credentials of all six agency staff is detailed in the budget narrative.

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: The UP Center of Champaign County

Program Name: Youth & Volunteers

Focus of Application: MH X SA ___ DD ___ ACCESS ___ Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$ 15,420

PY13 Total Program Budget: \$ 23,420

Current Year Funding (PY12): \$ N/A

Proposed Change in Funding - PY12 vs. PY13: N/A

Program Staff – CCMHB Funds: .4 FTE

Total Program Staff: .5 FTE

Budget Narrative: The revenue side for the total agency indicates expectations of significant contributions (about 74% of the total budget) to support programming. In addition to gifts and contributions, a grant from United Way is anticipated predicated on an award from CCMHB. The revenue projections for the CCMHB contract appear to be accomplishable. The overall agency projections are perhaps optimistic in the current economic climate, but there is nothing wrong with setting challenging goals.

The anticipated expenses for the total budget for the CCMHB contract/program appears to be adequately explained and the non-CCMHB portion includes dollars for consumables, general operating, local transportation, lease-rental, fund raising, and miscellaneous. All CCMHB funds would be used for allowable expenses. The ratio of benefits/taxes to salaries for the program is 13% and matches that for the agency.

In summary, the proposed budget is fully compliant with CCMHB funding guidelines and policies.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: N/A %

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

Not Applicable X
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding _____

Target Population: Youth aged 13-17 years identified as Lesbian, Gay, Bisexual, Transgendered, Questioning, and/or Ally who are residents of Champaign County. The application points out that this cohort has significantly higher incidence of attempted suicide (45%) than the general population of their heterosexual peers (8%). They also experience increased levels of victimization than their peers, and this leads to increased levels of depression and anxiety, and decreased self esteem.

Service Locations(s)/Demographics: The application does not clearly identify service locations or demographics. In the “Consumer Outcome” section the application talks about providing a “safe space” for youth to come and feel accepted and comfortable, but there does not appear to be a description of the location for this space. The budget narrative indicates \$5,400 allocated for lease expense, but no further explanation is given.

Other than the target population description, there is no apparent mention of demographic information such as gender, race, ethnicity, socio-economic, etc.

Service Description/Type: The program will focus on the development, implementation, and evaluation of peer support, education, and social programming in a safe, culturally diverse, and hate-free environment.

Access to Services for Rural Residents: The program will provide transportation assistance upon request for youth living in rural areas. Further, LGBT in small towns and rural areas are less likely to have a Gay Straight Alliance network (GSA) in their school, and also have less support/resources to address issues specific to LGBT students and their allies.

Program Performance Measures

ACCESS: The program will provide LGBT resource packets for school personnel and other community organizations. They will also do formal presentations and telephone support. All volunteers will be required to have criminal background checks.

CONSUMER OUTCOMES: Increasing availability of information and support to all youth in Champaign County. Reduction in suicidal ideation, attempts, and suicides. Reduction in levels of depression and anxiety. Improved self concept and esteem.

UTILIZATION: This is not a treatment-plan program. About 42 youth will participate as non-treatment plan clients. There will be 25 community service events.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): Not directly – youth could be referred to this program.

ACCESS Initiative: Not directly – youth could be referred to this program.

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes
Staff Credentials: Not Stated

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: ACCESS Initiative – PLL

Focus of Application: MH X SA ___ DD ___ ACCESS X Qtr Cent ___

Type of Contract: Supplemental Grant – This application seeks supplemental dollars for an existing contract which expires on June 30, 2013.

Financial Information:

PY13 CCMHB Funding Request: \$ 283,550

PY13 Total Program Budget: \$ 283,550

Current Year Funding (PY12): \$ 272,000

Proposed Change in Funding - PY12 vs. PY13: \$11,550 (4%)

Program Staff – CCMHB Funds: 4.65 FTE

Total Program Staff: 4.65 FTE

Budget Narrative: The CCMHB is the sole funder for the program. The base contract of \$272,000 was extended to June 30, 2013 by approval of the CCMHB. This application is seeking an increase of \$11,500 for the addition of a part-time position. The increase is tied primarily to training and personnel costs for the new position. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance X _____
Audit not in Compliance _____
Auditor Finding _____

Target Population: Front End – parenting with Love and Limits (PLL) – contract end-date is June 30, 2013. No adjustment proposed.

Service Locations(s)/Demographics: No adjustment.

Service Description/Type: Program proposes to add to the existing team of three PLL Therapists and one Family Support Specialist a part-time PLL Program Support position. The new team member is expected to be a youth age 18 to 21 and graduate of PLL. This person would assist the Family Support Specialist during teen breakout sessions.

Consultation with Savannah Family Institute (SFI) on the new position and compliance with existing terms of the SFI-PLL supervision contract and staff training requirements is needed.

Access to Services for Rural Residents: No adjustment.

Program Performance Measures

ACCESS: No adjustment. Program tracks and reports referral activity to SFI, CCMHB and juvenile justice partners on regular basis.

CONSUMER OUTCOMES: No adjustment. Reported to and tracked by SFI. Graduation rate benchmark is 70% of youth engaged.

UTILIZATION: No adjustment from 2012 to 2013. TPC target is 128 youth engaged (attend 2 or more PLL sessions). Program is projected to exceed 2012 program target.

CCMHB Priorities:

Primary Decision Support Considerations:

- Parenting with Love and Limits (PLL): YES
- ACCESS Initiative: YES
- Quarter Cent for Public Safety: No
- Developmental Disabilities: No
- Specialty Courts: No
- Behavioral Health/Physical Health Integration: No
- Gaps in Core Services: No

Overarching Decision Support Criteria:

- Underserved Populations: YES
- Countywide Access: YES
- Medicaid Reimbursement: No
- Budget-Program Connectedness: YES

Technical Criteria:

- Approach/Methods/Innovation: YES
- Staff Credentials: YES

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Community Elements, Inc.

Program Name: ACCESS Initiative: Life Skills

Focus of Application: MH ___ SA X DD ___ ACCESS X Qtr Cent ___

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$ 27,105

PY13 Total Program Budget: \$ 27,105

Current Year Funding (PY12): \$ N/A

Proposed Change in Funding - PY12 vs. PY13: N/A

Program Staff – CCMHB Funds: .64 FTE

Total Program Staff: .64 FTE

Budget Narrative: This proposal would be fully funded by the CCMHB with no additional revenue from other sources. About 83% of the expenses are assigned to salaries and fringe benefits. The remaining expenses are assigned to consultants, consumables, general operating, occupancy, local transportation, interest expense, and depreciation. All costs other than interest expense are allowable. The ratio of benefits/taxes to salaries for the program is 22% and matches that for the agency.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 22%

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

Not Applicable X

Audit Requirement Waived _____

Audit in Compliance _____

Audit not in Compliance _____

Auditor Finding _____

Comments: New program proposal for 2013. If contract awarded, program would be included in audit of 2013 contracts.

Target Population: Middle school aged youth attending Edison Middle School (Champaign) and Eater Middle School (Rantoul). The students experience challenges in dealing with the negative influences and are at risk of succumbing to peer pressure and developing destructive behaviors.

Service Locations(s)/Demographics: On-site at the two target schools.

Service Description/Type: Prevention. This program will use the Botvin Life Skills curriculum, an evidence based life skills interactive education program for at-risk youth. In addition, it will be supplemented during the summer months with a service learning component. The learning objectives include: personal self-management skills, general social skills, and drug resistance skills. The program is structured with 15 group sessions of 45-minutes each conducted bi-weekly at each site. Parent meetings are also held bi-monthly at each site.

Access to Services for Rural Residents: Program limited to specific schools in Rantoul and Champaign.

Program Performance Measures

ACCESS: Limited to two specific schools in Rantoul and Champaign – will serve 60 students.

CONSUMER OUTCOMES: Pre and post testing to measure the following: (1) intentions to use alcohol or substances (2) intentions to engage in violence (3) assessing risk and protective factors for substance use and violence (4) personal and social behaviors.

UTILIZATION: Program projects serving 60 students and 18 parents for a total of 78 Non-Treatment Plan Clients (NTPCs). Eight parent meetings will be reported as Community Service Events (8 CSEs).

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No

ACCESS Initiative: YES

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: YES

Countywide Access: No

Medicaid Reimbursement: No

Budget-Program Connectedness: YES

Technical Criteria:

Approach/Methods/Innovation: YES

Staff Credentials: YES

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Prairie Center Health Systems, Inc.

Program Name: Parenting with Love and Limits

Focus of Application: MH SA DD ACCESS Qtr Cent

Type of Contract: Supplemental Grant – This application seeks supplemental dollars for an existing contract which expires on June 30, 2013.

Financial Information:

PY13 CCMHB Funding Request: \$ 285,600

PY13 Total Program Budget: \$ \$285,600

Current Year Funding (PY12): \$ 272,000

Proposed Change in Funding - PY12 vs. PY13: \$13,600

Program Staff – CCMHB Funds: FTE N/A

Total Program Staff: FTE N/A

Budget Narrative: This application is seeking a COLA adjustment of \$13,600 and is primarily assigned to salaries and fringe benefits. The base contract of \$272,000 was extended to June 30, 2013 by approval of the CCMHB. The ratio of benefits to salaries for the program is 23% and matches that for the agency.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 23%

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

Not Applicable

Audit Requirement Waived

Audit in Compliance

Audit not in Compliance

Auditor Finding

Comments: Audit does not meet expectations for presentation of Schedule of Operating Income by Program and Schedule of Operating Expenses by Program required by contract. The absence of schedules

specifying revenue and expenses directly attributed to CCMHB contracts is a significant non-compliance issue. The CCMHB staff will provide clarification of audit requirements to the agency.

Target Population: Extended Care – Parenting with Love and Limits (PLL) – contract end-date is June 30, 2013. No adjustment proposed.

Service Location(s)/Demographics: No adjustment

Service Description/Type: The application is seeking an increase for salaries of PLL therapists and supervisors.

Access to Services for Rural Residents: No adjustment

Program Performance Measures

ACCESS: No adjustment. Program tracks and reports referral activity to SFI, CCMHB and juvenile justice partners on regular basis.

CONSUMER OUTCOMES: No adjustment. Reported to and tracked by SFI. Graduation rate benchmark is 70% of youth engaged.

UTILIZATION: No adjustment from 2012 to 2013. TPC target is 100 youth engaged (attend 2 or more PLL sessions). Program is projected to miss 2012 program target but number served is in line with past performance.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): YES

ACCESS Initiative: YES

Quarter Cent for Public Safety: No

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: YES

Countywide Access: YES

Medicaid Reimbursement: N/A

Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: YES

Staff Credentials: YES

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Champaign County Regional Planning Commission – Social Services

Program Name: Court Diversion-ACCESS Initiative Intake

Focus of Application: MH ___ SA ___ DD ___ ACCESS ___ Qtr Cent X

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$192,700

PY13 Total Program Budget: \$246,981

Current Year Funding (PY12): \$141,302

Proposed Change in Funding - PY12 vs. PY13: \$51,398 (36%)

Program Staff – CCMHB Funds: 3 FTE

Total Program Staff: 4.68 FTE

Budget Narrative: CCMHB revenue accounts for 78% of program revenue. In-kind contributions from CCRPC CDS program volunteers represent the next largest source of revenue at 10%, followed by 6% from the CCRPC-Social Services federal community Services Block Grant funds. The Village of Rantoul provides 4% and City of Urbana Community Development Block Grant (CDBG) funds at 2% of revenue round out projected funding for the program. Youth are not charged any fee to participate. The ratio of benefits/taxes to salaries paid by CCMHB is 46% and is the same as that for the program as a whole (agency budget information was not provided). Salaries and benefits are 87% of CCMHB paid expenses. Occupancy is 12% and local transportation 1% of CCMHB charged expenses. Three fulltime case managers and a portion of the program managers position are paid in part with CCMHB funds.

Of the increase requested from CCMHB, \$20,000 of it is offset by a reduction of CSBG funds provided directly from CCRPC.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 46%

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

Not Applicable X

Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding _____

Comments: The agency is part of Champaign County government and is included in the Champaign County audit.

Target Population: Youth age 10 to 17 with a station adjustment referred to ACCESS Initiative, by any local law enforcement jurisdictions, or the state’s attorney will be served by Court Diversion Services, Peer Court or Mediation. No Limits for Teens serves a sub group age 14 to 17.

Service Locations(s)/Demographics: Onsite at CCRPC office at Brookens, and Community Service Center (CSCNCC) in Rantoul and other accessible locations as convenient for participants. Demographics for the 2011 program finds 91% were age 13 to 17 and 9% age 10 to 12; 54% were Black, 45% White, and 1% other races; 3% were of Hispanic/Latino origin; and 61% were male. Client residency by zip code indicates 47% were from Champaign, 14% from Urbana, 17% from Rantoul and 22% from the balance of the county.

Service Description/Type: Program presents broad description of approach to services using Balanced and Restorative Justice (BARJ) principles. Program conducts intake for station adjustment providing referral, screening, triage and data tracking. Specific service options described are Peer Court and Mediation that place an emphasis community safety and repairing harm as an alternative to involvement with the juvenile justice system. Program serves as an ACCESS Initiative partner. Program staff is trained in BARJ and trauma informed practice.

A new service component was added in 2011 – “No Limits for Teens.” The eight week intervention uses U of I School of Social Work BSW students, trained as mentors to work with youth. The students work with youth to establish goals and promote positive activities in support of the defined goals. Activities can include life skills such as money management, completing college applications, volunteering, and positive decision making. The No Limits for Teens has a workbook guiding the teen and mentor through the eight week engagement. The Youth Community Integration Scale is completed on enrollment and exit from the program.

There is no specific reference to being a screening and referral source for PLL. Nor is use of the YASI (Youth Assessment and Screening Instrument) as the screening tool mentioned. Both aspects are presumed but are not stated.

Access to Services for Rural Residents: Locations with convenient access for youth and law enforcement in the county in addition to CCRPC Brookens Building location and satellite office at CSCNCC in Rantoul.

Program Performance Measures

ACCESS: Youth with a station adjustment are referred from various law enforcement and court services related entities. Staff works varied schedule to reach and serve youth and families referred with program activities held in the evenings to accommodate school and work schedules. Program satisfaction survey results used to evaluate services and drive program improvement (95% satisfaction on access, staff response and services cited for 2011 program).

CONSUMER OUTCOMES: Program measures include one for recidivism. Program reported an 18% average reduction in police contacts by youth successfully completing mediation. What constitutes a successful mediation is described as is a negative outcome. The No Limits for Teens uses the Youth Community Integration Scale to measure success described as an increase in points on the scale.

Quantification of successful outcomes by number or percentage of youth engaged is not provided.

UTILIZATION: Service categories are clearly described. Past performance is not addressed in the narrative. Part II form projects meeting target for 2012. No adjustment in number of youth served is proposed for 2013. Target for 2013 is 325 station adjusted youth (TPCs) engaged in services.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): No, relationship to PLL is not referenced
ACCESS Initiative: Yes, program indicates it is an ACCESS Initiative partner
Quarter Cent for Public Safety: Yes
Developmental Disabilities: No
Specialty Courts: No
Behavioral Health/Physical Health Integration: No
Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: Yes
Countywide Access: Yes
Medicaid Reimbursement: No
Budget-Program Connectedness: Yes

Technical Criteria:

Approach/Methods/Innovation: Yes, use of BARJ principles referenced
Staff Credentials: Yes

Applicant Review and Input

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

Draft CCMHB PY13 PROGRAM SUMMARY

AGENCY: Don Moyer Boys & Girls Club (DMBGC)

Program Name: ACCESS Initiative – JUMP Program

Focus of Application: MH ___ SA ___ DD ___ ACCESS X Qtr Cent X

Type of Contract: Grant

Financial Information:

PY13 CCMHB Funding Request: \$ 70,000

PY13 Total Program Budget: \$ 70,000

Current Year Funding (PY12): \$ 70,000

Proposed Change in Funding - PY12 vs. PY13: No Change

Program Staff – CCMHB Funds: 1.875 FTE

Total Program Staff: 1.875 FTE

Budget Narrative: This program is totally funded by Quarter Cent for Public Safety revenue. In addition, the narrative reports \$16,150 of in-kind personnel services which is not reported on the revenue portion of the budget. About 89% of the total program expense budget is assigned to salaries and fringe benefits. The remainder of the expenses includes consumables, conferences/training, local transportation, and membership dues. Ratio of benefits/taxes to salaries for the program is 15% and is 35% for the agency.

Reasonable Cost Standards:

“Reasonable costs” are those costs incurred by providers that are determined to be necessary and appropriate in accordance with CCMHB and CCDDDB funding guidelines and specific contractual requirements.

Current internal analysis applies a “reasonable cost” limit on fringe benefits of 25% of salaries and administrative costs to 20% of all non-administrative costs. This application was reviewed to determine fringe benefit percentages.

Payroll Taxes/Benefits vs. Salaries/Wages: 15%

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

Not Applicable _____
Audit Requirement Waived _____
Audit in Compliance _____
Audit not in Compliance _____
Auditor Finding X _____

Target Population: This program is the day and evening reporting treatment program to assist at-risk youth aged 13-18 who need post-detention services, or have been station adjusted and are deemed

appropriate for this type of programming. Youth who have been expelled from school are a secondary population.

Service Locations(s)/Demographics: Services to be delivered at the Day-Evening Reporting Center at Don Moyer Boys and Girls Club.

Service Description/Type: The program includes: Day Evening reporting center (2) cognitive behavior therapy and (3) intensive case management.

Access to Services for Rural Residents: The program is open to all appropriate residents of Champaign County, but transportation is not provided.

Program Performance Measures

ACCESS: Priority referrals are accepted from the Juvenile Detention Center and for youth on station adjustment status.

CONSUMER OUTCOMES: Exposure to positive youth development programming. Reduction in recidivism. Linkage with PLL. A care/case management plan. Parent involvement and program participation. Improved school involvement.

UTILIZATION: Target projected for 2013 is 40 NTPCs (30 new NTPC and 10 continuing NTPC) and is unchanged from 2012.

CCMHB Priorities:

Primary Decision Support Considerations:

Parenting with Love and Limits (PLL): YES

ACCESS Initiative: YES

Quarter Cent for Public Safety: YES

Developmental Disabilities: No

Specialty Courts: No

Behavioral Health/Physical Health Integration: No

Gaps in Core Services: No

Overarching Decision Support Criteria:

Underserved Populations: YES

Countywide Access: YES with transportation caveat

Medicaid Reimbursement: No

Budget-Program Connectedness: YES

Technical Criteria:

Approach/Methods/Innovation: No

Staff Credentials: No

Applicant Review and Input

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

ANTI-STIGMA ALLIANCE

Board Report

April, 2012

The Champaign County Anti-Stigma Alliance continues it's planning for the free community film they are sponsoring on Sunday, April 29, following the close of the Roger Ebert Film Festival. "Antwone Fisher" is this years' film, which depicts the life of a young man suffering from Post Traumatic Stress Disorder resulting from severe childhood abuse and neglect.

The Alliance met on February 14, and plans to meet again on April 16 to complete final details for this years' event, as well as to begin discussion on future goals for the group.

The event this year will include an art show and sale on Saturday, April 28 from 12:30-8:30 p.m. at Community Elements, directly across the street from the Virginia Theater. Local artists, many of whom were a part of the PRIDE Room at the 5th annual Disability Resource Expo will be on hand displaying and selling various forms of art, including paintings, photography, jewelry, ceramics, and more.

On Sunday, April 29th, we will be showing the film, "Antwone Fisher" at 4:30 p.m., and it is free to the public. A panel discussion will take place following the film. Panelists are still being confirmed at this point. Just prior to the film, at 3:30 p.m., we will enjoy music by Mo' Betta Music. This orchestra, directed by Nathaniel Banks, is an after school artistic enrichment program dedicated to enhancing the music arts skills of young musicians in a culturally sensitive manner so that they may actively participate with confidence in their music programs at their respective schools.

A small resource booklet is being developed to be distributed to movie-goers. It will define the mission of the Anti-Stigma Alliance, include some information on advocates and providers (Alliance members), list the local artists, and provide a listing of other films with anti-stigma themes. Many thanks go out to Lynn Canfield for her tedious hours with the development of this booklet.

We are currently in full swing with promotion of this event. Posters, flyers and billboards are presently being used to promote the event, as well as newsletters, facebook and e-mail lists. We will be taping 30 and 60 second spots with S. J. Broadcasting, and will do PSA's with all media outlets within the community.

Reaching Out For Answers: Disability Resource Expo
Board Report
April, 2012

The Steering Committee for the 6th annual Disability Resource Expo met for the first time this year on April 3 to begin planning for this years' event. I am extremely pleased to report that our original membership remains consistent, and all are back to take on another year of planning for this important event for our county. We welcomed one new member, Rob Pritt, who has been a PRIDE Room vendor for the past several years. Each member identified a sub-committee they plan to participate in, and a number of great ideas for the 2012 Expo were discussed. Watch for more information in the months to come!

Jon Dietrich and Barb Bressner attended the Business Expo at the Assembly Hall on March 14. This Expo is sponsored by the Chamber of Commerce, and has been found in past years to be a wonderful resource as our Marketing/Sponsorship Committee goes about its work of attaining sponsors for our event.

The Expo Steering will meet next on May 16 to continue it's awesome task of planning for the 2012 Expo. We would invite any board members or others who might have an interest to come join us in this process.

Respectfully submitted

Barb Bressner
Consultant