



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, SEPTEMBER 19, 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. 8/21/12 Board meeting*
Minutes are included in the packet. Action is requested.
6. President's Comments
7. Executive Director's Comments
8. Staff Reports
9. Board to Board Reports
10. Agency Information
11. Financial Information
 - A. Acceptance of Claims*
12. New Business
 - A. Mandatory Open Meetings Act Certification

Overview of required Open Meetings Act certification requirements for Board members will be provided at the meeting

- B. Draft Three-Year Plan 2013-2015 with FY 2013 Objectives

A draft of the Three Year Plan with objectives for FY 2013 is included in the Board Packet.

- C. Draft Meeting Schedule and Allocation Timeline
Schedule of CCMHB meeting dates and deadlines for the 2013 allocation process is included in the Board packet.

13. Old Business

- A. FY 2013 Budget Documents

A copy of the CCMHB, CCDDDB, Access Initiative, Quarter Cent, and Drug Court Fund budget documents are included in the Board packet.

- B. Disability Resource Expo Update

A report from Ms. Bressner is included in the packet.

14. Board Announcements

15. Adjournment

**Board action*

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
SPECIAL BOARD MEETING**

Minutes—August 21, 2012

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

4:30 p.m.

MEMBERS PRESENT: Jan Anderson, Bill Gleason, Deloris Henry, Mary Ann Midden, Mike McClellan, Deborah Townsend

MEMBERS EXCUSED: Aillinn Dannave, Ernie Gullerud, Thom Moore

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

OTHERS PRESENT: Patty Walters, Danielle Matthews, Developmental Services Center (DSC); Shandra Summerville, ACCESS Initiative

CALL TO ORDER:

Dr. Townsend, Board President, called the meeting to order at 4:35 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None

CCDDB INFORMATION:

The CCDDB will meet tomorrow morning, August 22, 2012 at 8:00 a.m.

APPROVAL OF MINUTES:

Minutes from the June 20, 2012 Board meeting were included in the packet for review.

MOTION: Mr. Gleason moved to approve the minutes from the June 20, 2012 Board meeting. Ms. Midden seconded the motion. A vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

STAFF REPORTS:

None.

BOARD TO BOARD:

None.

AGENCY INFORMATION:

None.

FINANCIAL INFORMATION:

Approval of Claims:

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

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

NEW BUSINESS:

Developmental Disabilities Budget Deficit:

A Decision Memorandum was included in the packet. In May 2012, the Champaign County Developmental Disabilities Board (CCDDB) completed the FY13 allocation process and authorized obligation of funds based on revenue projections. On July 16, 2012, the Champaign County Administrator provided the actual revenue numbers which represented an overall reduction of 0.23% and resulted in a budget deficit of \$148,528.

The Champaign County Mental Health Board's (CCMHB) revenue numbers in the contributions and grants line have increased by \$96,203. The reason for this disparity is because the CCDDB levy is at its rate-limit of 0.100 and thus was impacted by lowering of equalized assessed valuation of property in Champaign County.

The Intergovernmental Agreement between the CCMHB and CCDDB clearly states both Boards have overlapping responsibilities pertaining to planning, funding monitoring and evaluating developmental disabilities programs and services in Champaign County. This means the budget shortfall is a problem for both Boards, requiring collaboration and problem solving participation.

On August 8, 2012, the "Presidents' Meeting" was held to review this situation and discuss possible solutions.. This group reviewed and discussed possible actions which could be taken to address the developmental disabilities shortfall. The group came to consensus about implementation of a collaborative approach to addressing this problem. Specifically, there was agreement it would be appropriate to use unanticipated CCMHB revenue to support developmental disabilities contracts which are consistent with preliminary discussions about realignment of CCDDB and CCMHB FY14 contracts.

The remainder of the deficit would then be addressed by across-the-board percentage reductions for all CCDDB contracts. It was further agreed this arrangement is for FY13 contracts only and the allocation of additional CCMHB funds would not be reflected in the "base" allocations for developmental disabilities services funded by the CCMHB. This plan would require the approval and authorization by both the CCMHB and CCDDB.

Recommendations:

- 1) Authorize the use of \$96,203 of CCMHB dollars to fund developmental disabilities programs and services. These funds shall be used to increase the contract maximum for the CCMHB FY13 Family Development Center contract with Developmental Services Center (DSC) by contract amendment. This action is for FY13 only and will not be included as part of the developmental disabilities calculations for the CCMHB allocation process.
- 2) Concurrent with this action, the CCDDB FY13 DSC Family Development Center contract maximum would be reduced by \$96,203.
- 3) An across-the-board percentage reduction shall be applied to all CCDDB contracts. The aggregate total will be about \$52,325.

MOTION: Dr. Henry moved to increase the contract maximum of the FY13 CCMHB contract for Family Development Center with Developmental Services Center by \$96,203. This approval is contingent on the CCDDDB taking actions specified in the recommendations above. Mr. McClellan seconded the motion. A roll call vote was taken and the motion passed unanimously.

OLD BUSINESS:

None.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The business meeting adjourned at 4:55 p.m.

Respectfully

Submitted by: _____ Approved by: _____
Stephanie Howard-Gallo Deborah Townsend
CCMHB/CCDDDB Staff CCMHB President

Date: _____ Date: _____

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

Mark Driscoll

Associate Director for Mental Health & Substance Abuse Services

Staff Report – September 19, 2012 Board Meeting

Summary of Activity

Draft Three-Year Plan with Objectives for FY 2013: A draft of the new Three-Year Plan 2013-2015 with Objectives for FY 2013 is included in the packet. A Briefing Memo provides an overview of the current operating environment, emerging issues, and existing commitments that influenced the development of the draft plan. Following release of the draft plan input from providers and other interested parties will be solicited and any comments received given consideration in preparation of the final document.

Program Reports: Fourth quarter reports were due at the end of August to close out the 2012 contracts. As part of the fourth quarter report, programs provide an annual performance outcome report that presents actual results in comparison to the measures and targets identified in the FY 2012 applications. These annual reports will be reviewed in more detail over the coming weeks.

The utilization data included in the quarterly program reports has been posted to the Excel workbook we use to track services. The zip code and demographic data has been cross-checked as these reports can require adjustment from time to time. The online system maintains the records by quarter and also aggregates zip code and demographic data by program, agency, and board. Copies of the FY 2012 zip code and demographic data summary reports are attached.

Generally speaking the zip code and demographic data represent clients served within a given program. Depending on the program these may be reported as treatment plan clients or non-treatment plan clients. However the Family Service First Call for Help (FCFH) program reports contacts - information and referral calls made to the program. As one can imagine these brief encounters do not always enable the program to collect zip code and/or demographic data from the caller. In the attached zip code report, these information and referral contacts represent almost 6,400 or about 35% of the total. And slightly less than half of these information and referral calls are unknown and account for over 90% of the “Other” zip code category (3,031 of 3,292). The balance remaining in “Other “ represent clients with P.O. Box based zip codes, addresses with a zip code that only partially extends into Champaign County, or is an out of county zip code. For the demographic report the Family Service FCFH data has the same total number of contacts (>6,400). The volume of unknown data for each contact varies across the consumer demographics tracked but is still a high percentage of the number reported as Data Not Available (DNA). Gender and Race are more frequently identified than Age and Origin resulting in the variations in DNA counts. Regardless of the influence of FCFH data, the two reports provide a sense of the geographic distribution and demographics of clients engaged in services or information and referral contacts.

The Parenting with Love and Limits-Front End (PLL-FE) and Parenting with Love and Limits-Extended Care (PLL-EC) programs had their annual review meetings with Ellen Souder from Savannah Family Institute in late July and early August. The conference calls are held with the therapists and are open to CCMHB and juvenile justice partners. I was able to take part in both calls.

In my June staff report, I focused on contracts, amendments and site visits. I am happy to report the contracts and amendments were executed in a timely fashion. The few remaining site visits were completed by the end of June and all reports completed by the end of July.

Child and Adolescent Local Area Network (LAN): At the August meeting, the co-conveners informed the members of budget cuts and staff changes affecting the LAN. The flexible funding used by the Child and Family Assistance Team has been eliminated from the DCFS budget. These funds, about \$32,000, were used to assist at risk families meet needs associated with a child's care and education. An ISBE grant of \$12,000 administered by the LAN for similar purposes was apparently spared in the budget. Two family centered services contracts the LAN had oversight responsibilities were also cut. The DCFS LAN Liaison staff position was eliminated as well. With these changes the role of the LAN has been significantly reduced. The October meeting will be a discussion about the continuation of the LAN.

IHA Regional Meetings: The Regional Integrated Behavioral Health Networks Act calls for establishment of networks of behavioral health providers, health care providers and related community resources. The Illinois Hospital Association in conjunction with state agencies organized regional meetings across the state as part of its charge to develop a strategic plan for each region. Three meetings were held in Region Three which follows I-74 from Danville to Rock Island and includes Champaign County. In response, providers and funders from Champaign and Vermilion County held a series of meetings to coordinate strategy and participation in the regional meetings. The last of the IHA meetings was held in Danville in late August to review a preliminary draft of the Region 3 Stakeholders Report.

Other Activity: In November the Senior Wellness Coalition will merge with the Senior Task Force. While I have not attended Senior Task Force meetings in the past, many of the members of the Coalition attend both meetings and felt the coalition's work on senior health issues including mental health could be incorporated into task force meetings. While the United Way of Champaign County goes through a change in leadership, the Community Impact Committee continues its work. The last two meetings have included updates on the family emergency shelter plans, kindergarten readiness, and an early childhood literacy initiative, and reviewed a request from the Family Advocacy Center of Champaign County. The family emergency shelter is an initiative of the United Way and Council of Service Providers to the Homeless. I attended the August meeting of the Council where the group discussed plans for the shelter including the involvement of the faith community, the search for potential sites, capital and operating cost estimates, and funding opportunities.

CCMHB ZIP Code Data Report**Aggregated Data - FY 2012**

ZIP Code	Data	Percent
60949 Ludlow	71	0.39%
61801 Urbana	2362	12.99%
61802 Urbana	2151	11.83%
61815 Bondville (PO Box)	12	0.07%
61816 Broadlands	18	0.10%
61820 Champaign	3802	20.91%
61821 Champaign	2131	11.72%
61822 Champaign	561	3.09%
61840 Dewey	26	0.14%
61843 Fisher	91	0.50%
61845 Foosland	9	0.05%
61847 Gifford	31	0.17%
61849 Homer	40	0.22%
61851 Ivesdale	8	0.04%
61852 Longview	8	0.04%
61853 Mahomet	411	2.26%
61859 Ogden	28	0.15%
61862 Penfield	15	0.08%
61863 Pesotum	20	0.11%
61864 Philo	20	0.11%
61866 Rantoul	2312	12.72%
61871 Royal (PO Box)	7	0.04%
61872 Sadorus	23	0.13%
61873 St Joseph	149	0.82%
61874 Savoy	244	1.34%
61875 Seymour	11	0.06%
61877 Sidney	37	0.20%
61878 Thomasboro	92	0.51%
61880 Tolono	198	1.09%
Other (other zip codes or unknown)	3292	18.11%
Total	18180	100.00%

CCMHB Demographic Data Report

Aggregated Data - FY 2012

Age	Data	Percent
Ages 0-6	1264	9.38%
Ages 7-12	648	4.81%
Ages 13-18	1013	7.52%
Ages 19-59	7352	54.58%
Ages 60-75+	3194	23.71%
Total	13471	100.00%
Data Not Available	4709	

Race	Data	Percent
White	8411	51.54%
Black / AA	5902	36.17%
Asian / PI	1189	7.29%
Other*	816	5.00%
Total	16318	100.00%
Data Not Available	1862	

Origin	Data	Percent
Of Hispanic / Latino origin	1763	15.85%
Not of Hispanic/Latino Origin	9357	84.15%
Total	11120	100.00%
Data Not Available	7060	

Gender	Data	Percent
Male	6669	39.76%
Female	10105	60.24%
Total	16774	100.00%
Data Not Available	1406	

Total including DNA 18180

* Other includes individuals identifying as Native Americans, Bi-racial, and Multi-racial

ACCESS Initiative Staff Update

Month of: August 2012 **Staff Name:** Regina Crider **Infrastructure Area(s):** Family Engagement

Committee/Working

August 16, 2012

Group Activity – *Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).*

Family Advisory Board
Reconstruction Working Group

- ☑ **New Business:**
 - AICC Nominations – members nominated two people to represent the family voice
 - Family Advocacy of Champaign County – Regina Crider will be meeting with the Executive Director (Grace Mitchell) bi-weekly to discuss future collaborations and supporting one another's work

☑ **Reports from Boards and Standing Committees**

- **AICC:** Reviewed minutes
- **FAB:** Reviewed, Discussed and Voted minutes from 7.12.12 meeting
- **Cultural Competency Committee:** no minutes submitted
- **Social Marketing:** no minutes submitted
- **Technical Assistance Committee:** reviewed submitted minutes

- ☑ **Old Business:** Continued working on the redevelopment plans

Each 1 – Reach 1

☑ **Each 1 Reach 1 Update:**

- Each 1, Reach 1 Family Outreach

Training and Technical Assistance and Service Delivery Report

July/August 2012

GOALS OF THE ACCESS Initiative:

To work with the Champaign County Mental Health Board and other local stakeholders to secure funding that supports transformations in policies, procedures, and practices that support:

1. Building a sustainable and replicable service delivery system and infrastructure that reflects SOC, trauma, and justice informed values and principles.
2. Providing families and youth access to trauma- and justice-informed services and supports that reflect SOC values and principles by prioritizing the expansion and the utilization of high fidelity Wraparound and Community Advocacy.
3. Increasing youth, family, and community leadership and engagement across all levels (i.e., structural, systems, organizational, and practice) demonstrated through the establishment of a vibrant and dynamic Youth and Family Leadership structure.
4. Extending the capacity of organizations, agencies, informal supports, and systems to strategically improve outcomes for youth and families through the adoption of more evidence informed and trauma and justice informed policies, procedures, and practices with the goals of reducing disparities and number of youth who have adverse and sustained contacts with the juvenile justice, child welfare, and alternative school systems.
5. Promoting authentic cross system collaboration and communication in an effort to create a seamless service and support array that will effectively meet the needs of youth with social, emotional, and behavioral challenges and their families.
6. Expanding the community's capacity to understand mental health, to meaningfully participate in our system of care transformation effort, and to access healing and restorative options for youth, families, providers, and the community.
7. Encouraging rigorous evaluation with a commitment to continuous quality improvement to meet and/or exceed our local benchmarks, IPP indicators, and National Evaluation requirements.

OVERALL GOAL: To improve outcomes for youth with significant social, emotional, and/or behavioral challenges.

Central focus has been on strengthening the service and support delivery infrastructure.

We received information from our partner agencies and our wraparound consultants and we have been using this feedback to strengthen the wraparound practice model.

We continue to receive positive feedback about our service model from courts, child welfare, and others who are a part of the wraparound process. Wrap teams are becoming increasingly more collaborative and interdisciplinary.

Almost weekly staff development trainings: family driven/youth guided care, crisis and safety planning, introduction to the juvenile justice system, social marketing and anti-stigma messaging

We are fully staffed. Each full time ACCESS Coordinator is serving approximately 7 families each. (Capacity is 12-15 families per full time staff person)

We are currently providing 61 families with wraparound services and supports.

14 JDC/Probation

4 DCFS (Some listed as Self)

3 Cross pointe

4 GAP

5 READY

10 Champaign Schools

11 Urbana Schools

3 Community Elements

2 PLL

4 (Other: Center for Youth & Family Solutions, Private Therapist, and Community Members)

In an effort to be more responsive to our family and youth needs we will be offering structured psycho-educational and skill building groups for our parents and youth.

We kicked off our parent groups (Family 2 Family) with a presentation on how to effectively respond to runaways. Officer Westfield made the presentation and Chief Cobb was also in attendance. That event was held on August 30, 2012 .

We are also offering our families skill building that focuses on de-escalation and a 4 week group that will begin at the end of September designed for families who have had domestic issues with their children. This group will be focused on educating caregivers about the cycle violence, talk about self-care and safety plan, and allow them to support each other.

In October we will begin a youth series. The first will be a 6 week group focused on developing skills to deal with school based anxieties.

Goal 1: (Building a System of Care Infrastructure) / Goal 6 (Improving Cross System Collaboration)

The Training and Technical Assistance Committee has been:

Ensuring that this year's training priorities is aligned with ACCESS' identified priorities and is responsive to our community's requests and needs.

We have also spent time revisiting the training policy.

1. ACCESS Initiative Inaugural Think Tank: "To Know is Not Enough: We Must ACT": Improving Outcomes for Hurting Kids in Our Community. It is scheduled for November 8-10th at Eastland Suites. (See the Attached Save the Date Flyer)

The Think Tank is designed to gather folks (organizations, system stakeholders, some youth, caregivers, and community partners) together to seriously talk about developing a plan focused on improving mental health outcomes for African American and low income youth in our community.

At the end of the think tank we:

1. Want to leave with a current, updated map of our services and supports array. We want a picture - that can be shared - of our community's assets, deficits, and resources. (formal and informal)
2. Want to create a space for intentional discussions about collaboration and shared opportunities
3. Want to draft an updated work plan that will guide the rest of the work of ACCESS (especially focusing on the above explicitly noted outcome)
4. Want people to leave with promises of formal commitments to collaborate in the future (we really want to promote collaborations between more formal and informal systems)

- Restorative Justice especially the Restorative Circle's work taking place at JDC in the community

FAMILY TO FAMILY- Friday's from 4:00-5:00 pm -Each weeks focus on Developmental Assets - "What Every Kid Needs to Succeed" The fourth Friday of the month

Month of: July-September 2012 **Staff Name:** Shandra Summerville **Infrastructure Area(s):** CLC

Committee/Working Group Activity – Please list any committee or working group meetings hosted by you. Also provide a short update (upcoming tasks, celebrations, etc.).

CLC Committee

Actions/Decisions:

- **Minority Mental Health Awareness Campaign**
- **Developed a Standard Meeting Time 4th Wed of each Month. Time will change in September**

Task(s):

- *Distribute 72 Hour Hold Books for Families*
- *Plan for Brown Bag Lunch Series*

June 27, 2012

Pastors for ACCESS Workgroup

Actions/Decisions:

- Radio Promotional (PSA's) that will give a Fact about Mental Health to raise awareness
- Training to introduce Pastors to Mental Health 101 and a Lay Persons training will follow.
- Support Metanoia Center in the development of the Faith Based Community Collaboration

Task(s):

- 5 Pastors Recorded PSA's)
- Invite more Pastors to be involved with ACCESS Initiative.
- Send Monthly Correspondence to keep people engaged.

July-September

Natural Supports

<p>Decisions/Tasks</p> <ul style="list-style-type: none"> • The ACCESS Resource Developer will work with CLC Coordinator to continue to look as natural supports in the community • There will be a web-space that will be utilized internally for the ACCESS Coordinators in order to ensure that the services in the community are culturally responsive. • Signed up for Carletta Donaldson’s email list as a natural support in order to build awareness about family events and activities in the community that will meet the needs of the target population 	<p>August-September</p>
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Strategic Meetings/Community Presentations – Please list any strategic meetings you attended. Provide information regarding who was in attendance, the nature of the meeting, next steps, and outcomes. Please list any community presentations you made on behalf of ACCESS. Provide information regarding your audience, purpose of the presentation, and collateral materials distributed.

Social Media Team	Weekly Meetings	Every Friday 10-12pm	Preparation for ECCO Awards, Radio Updates, Community Resource Fair Planning and Social Media Updates.
Georgetown Institutes Orlando, Florida	Sessions Attended Pre-Institute How to Handle Difficult Conversations Sessions: Faith Based Open Tables	July 23-25, 2012	Required Training for the ACCESS Initiative Cooperative Agreement
Prairie Center Multicultural Advisory Council	Gayle Rainey	August 21, 2012	Reviewed the CLC Plan for Prairie Center and the Purpose for developing the committee.

Youth MOVE Summer Leadership Academy	Youth Participants	June 18-July 20, 2012	Training
CLC Training	SOAR Youth Program	August 9, 2012	CLC Annual Training
CLC Presentation/Training	Francis Nelson	August 28, 2012	CLC Annual Training
P3Meeting	Family Members	August 29, 2012	Information for Families about CLC Committees and Workgroup
Faith Based Training	Pastors of Churches	August 23, 2012	Provided Congregational Resources for Clergy on Mental Health Challenges.
Faith Based Liaison Meeting	Rev. Larry Lewis		
Community Resource Fair	Pilgrim Baptist Church	August 25, 2012	

Community Coalitions/Committees/Working Groups – Please list any community coalition/committee/working group meetings you attended as an ACCESS representative. Provide information regarding the nature of the meeting, your role as an attendee, next steps, and outcomes.

Human Services Council of
Champaign County- Chair of
Anti-Racism and Diversity
Committee

Progress in Work Plan Activities – Please highlight current work plan activities and progress made toward completion of these goals.

Ex. GOAL 1: Building a sustainable and replicable service delivery system and infrastructure

Activity/Strategy 6: Coordinating Council/
Governance Development

Developed a description for
Liaisons for the Coordinating
Council to strengthen the
stakeholder involvement and
decision making.

**August: AICC Members
completed nominations
and the Co-Chairs and
Executive Team have
been formed**

Activity/Strategy 7: Workforce
Development

May: No further progress
made

Goal 3: Increasing youth, family, and community leadership and engagement across all levels

Month of: August 2012 **Staff Name:** Jonte' Rollins

Infrastructure Area(s): Linkage, Engagement, and Communications

Committee/Working Group Activity

Social Media Team-
August 24, 2012

Actions/Decisions:

- Assigned ACCESS areas to track activity, events
 - Youth, Evaluation-(YES)
 - CLC, Faith-Based, radio show, TA (CLC Coordinator)
 - SMC, Service and Support information, Parent, Evaluation (LECC)
- Radio shows
 - Media team will set up a formal system to make sure information regarding the show gets on the website.
 - CLC has been tracking the number of call ins for the show and will begin reporting those to the team.
 - Media Team will create some small campaigns and contests to promote the show and tie it in with media site and website.
 - The media team will look into ways of streaming the show on our website or through an online source. The radio station has not been able to provide any statistical information regarding ratings, listening frequency, or call in information for either show.
- New awareness campaign that will focus on Understanding
 - Youth need to understand the challenges adults experience when trying to help them overcome challenges.
 - Adults need to understand what youth really need from them to overcome their challenges.
 - The next Community Conversation will be used to establish foundational content.
 - Team will partner with Youth Move and P3 to help with our intergenerational perspectives.
 - Team will use PSA's, Bill boards, and other promotional materials to promote the campaign
- Updated Website Tabs to better promote/highlight ACCESS events, activities, and progress towards strategic goals.
 - About Us
 - Staff
 - Committees
 - Co. Council
 - CLC
 - TA
 - SMC

- Youth
- Family/Caregivers
- Community
 - Partnerships –highlight ACCESS involvement
 - Engagement-activities, events, that ACCES participated in or co-sponsored
- Evaluation
- News
- About Us
 - Radio show updates
 - Events advertisements
 - Special messages
- Calendar
- About Us
 - Things that are open that ACCESS
 - Things that we are involved
- ACCESS Think Tank
 - Media Team will create an electronic registry embedded in our website.
 - Video tape and have put on ACCESS You Tube channel

Task(s):

- LECC will attend the next Youth MOVE meeting to lead a brainstorm session about
 - Website
 - social media site
 - other activities to get other community youth involved in our awareness outreach
- Team will create Promotional materials for Youth Move Champaign County
 - New Website page layout
 - Brochure
 - Informational Cards
 - T-shirts
 - Polos for YAB
 - Other small trinkets
- Team will redesign P3 logo to include ACCESS gear to be more aligned with the ACCESS and Youth Move logo. Bring samples to the next meeting.
- ACCESS Think Tank
 - Create a logo that will be used to brand this chain of events by next meeting. Save the date will be created and sent out by 9/4/12.
 - Information from planning committee should be submitted to Media Team by 9/25 so the official flyer and registration form can go out on 10/1/12.
- Create standards for ACCESS representatives when they are attending resource fair and conducting ACCESS presentations.
- Create faith-based book marks without CMHAW dates on them so pastors can continue to hand them out in their congregations.

Social Media Team-
August 31, 2012

Actions/Decisions:

- Social Networking Updates
 - Facebook- we have 123 likes, 81 people talking about us, we reached 1974 people in the last week.
 - There is a bullying video contest on stop bullying.gov where youth can win up to \$2000 for a 30-60sec video. Will submit the video from summer youth training.
 - Twitter-184 people are following us, we are following 627
 - Team committed to finding ways to get ACCESS staff more involved with our social networks.
- ACCESS Think Tank save the date draft flyer was presented.
- Awareness Campaign
 - Partnering with a community youth who has an Anti-violence/Anti-gun messaging rap to.
 - Campaign will produce an ACCESS Awareness tool kit and CD that will focus on:
 - Anti-violence (gun violence, bullying, dating violence)
 - Understanding (youth/adult communication)
 - Mental health-anti- stigma messaging
 - n

Task(s):

- Social Networking Sites-report back suggestions for staff involvement via email in the next few days.
- Send P3 logos to the FEEL team for voting.
- Send ACCESS Think Tank save the date draft flyer in PDF version to TA committee for approval to send out 9/4/12.
- Awareness Campaign
 - Continue to develop a library of beats/tracks for selected artists to record on for awareness album.
 - Begin brainstorming on graphics for album cover and campaign
 - Decide title of the campaign, and the layout for soliciting artists to participate on the project.
 - Follow up meeting with 105.5 regarding sponsorship.

Strategic Meetings/Community Presentations

July 26, 2012-
SAMHA Excellence
in Community
Communications &
Outreach Finalist
Presentation

2012 Georgetown
Training Institutes

- Presented ACCESS Website and Social Network launch campaign overview, goals, and outcomes to conference attendees.
- Received 3rd place in "Media Outreach" category.

July 27, 2012- Family
ACCESS Connection

2012 Georgetown
Training Institutes

- Presented on F.A.C.E. development, event structure/agenda, goals, and outcomes to conference attendees.

*Events Poster
Presentation*

*August 7, 2012-
Universal Screening
Planning Meeting*

*Regina Crider
(SOAR)
Lynnea Redmon
(SOAR)*

- *Solidified universal screening process for SOAR families*
- *Created timeline and process to extend screenings to Rantoul middle and high school students identified by school social workers who are not enrolled in SOAR.*

*August 8, 2012-
ACCESS Orientation/
Universal Screening
Training*

SOAR (All-Staff)

- *Provided a brief orientation to ACCESS strategic goals and service & supports delivery model.*
- *Trained staff ACCESS Universal Screening tools and data collection.*

*August 9, 2012-
ACCESS Services
and Support Staff HR
Meeting*

*Sam Banks
(DMBGC)
Karen Simms
(TA/Wraparound)*

- *Solidified HR procedures/protocols for ACCESS Service and Support Staff*

*August 10, 2012-
SPARCS Intake
Meeting*

*Tia Butler
(L&E Team Leader)
Juli Kartel (CE)
Glenda McFadden
(CE)*

- *Discussed how to better align Community Element's SPARCS intake process with the ACCESS intake process.*
- *Community Elements will utilize ACCESS Universal Screening tools to better identify youth who may meet criteria for National Evaluation.*
- *Created a specific process for ACCESS referred youth to receive Mental Health Assessments through Community Elements.*

*August 13, 2012-
ACCESS Awareness
Music Campaign
Meeting*

*Andre Newbill
(Local Artist)*

- *Discussed ways to incorporate two already recorded songs by artists that focused on gun violence, peer pressure, and resilience.*

*August 14, 2012-
Restorative Circle
Meeting*

*Tracy Parsons
Mikhail Shpungin
(PSC)*

- *Discussed ways to expand restorative circles outside of JDC.*
- *Agreed to offer circles as a support to youth/families receiving ACCESS services and supports as a way to begin healing trauma of family conflict.*
- *Agreed to develop ways to get faith-based community, parent, and youth trained in the model and principles in order to facilitate circles.*
- *Agreed to develop a training plan for ACCESS partners to incorporate restorative practices and facilitation with internal staff conflicts*

*August 22-24, 2012-
ACCESS Single-Point
of Entry Planning*

*Tia Butler (L&E
Team Leader)*

- *Developed changes to the ACCESS referral process to better incorporate services and supports offered beyond Wraparound.*

Meetings

August 24, 2012-
ACCESS MIS
Meeting

Kirk Bedwell

- Developed strategies to refer eligible youth who are not receiving Wraparound services to the National Evaluation.
- Solidified Universal Screening expansion to include non-funded sites.
- Improved referral reporting process and protocol for system and provider partners.
- Drafted an outreach plan to obtain more referrals to the National Evaluation.

August 27, 2012-
ACCESS Community
Home Budget Meeting

Tracy Parsons
Kim Fairley (BIOC)

- Discussed reporting formats to share ACCESS service and support information with referral sources and the community.
- Discussed how to better capture information for youth not receiving wrap around services, but who are still eligible for National Evaluation.

August 28, 2012-
ACCESS Awareness
Music Campaign
Meeting

Andre Newbill
(Local Artists)
Ratisha Carter
(Youth Move)
Shandra
Summerville
(CLC)
Turance Cobb
(Family Partner)

- Identified procedures and protocols for ACCESS Community Home operations, budget management, and financial protocol.
- Conducted a listening and brainstorming session for how to include Artist's song into the upcoming awareness campaign.
- Decided to begin with the anti-gun violence rap for our initial PSA.

August 28, 2012-
ACCESS Social
Marketing and
Communication Goals
Presentation

P3

- Provided an ACCESS Social Marketing and Communications Orientation for P3 members as recruitment to the SMC Committee.

August 29, 2012-PLL
Referral Meeting

Tracy Parsons
Peter Tracy

- Discussed how to better align the PLL intake process with the ACCESS intake process by utilizing the ACCESS Universal Screening tools to better identify youth who may meet criteria for National Evaluation.

August 29, 2012-
ACCESS Speaker's
Bureau Planning
Meeting

Ratisha Carter
(Youth Move)
Shandra
Summerville (CLC)

- Created unified standards and scripts for individuals who represent ACCESS at community resource fairs and make presentations on behalf of ACCESS

August 29, 2012-

Ratisha Carter

- Discussed strategies to improve the experience of the events

Family ACCESS
Connection Events
Restructuring Brain
Storm Meeting

(Youth Move)
Shandra
Summerville (CLC)
Regina Crider
(FEEL)
Travonda
Davenport (FEEL)
Lynnea Redmon
(FEEL)
Melissa Neely
(Evaluation)

for families and youth who attend.

Community Coalitions/Committees/Working Groups

August 10, 2012-
Champaign County
Gun Violence Meeting

Meeting to continue identifying ways to address the recent gun violence in Champaign County.

ACCESS Evaluation monthly report: JULY/AUGUST 2012

The Evaluation Team is continuing to collect and submit data for the national evaluation, including baseline data for newly referred youth and families, 6-month follow-up interviews, and is planning 12-month follow-ups starting in August. The Team continues to meet with local agencies and organizations to discuss interest in the Organizational Assessment Survey, and administered the surveys to several local organizations. The quarterly ACCESS Evaluation Collaboration Team meeting was held on 7.16.12 at the Champaign Public Library and workgroups were developed to facilitate participation in evaluation activities. Members of the team provided technical assistance to evaluate outcomes of the ACCESS Youth Summer Leadership Training program. Several members of the Evaluation team, along with ACCESS staff, participated in the annual Georgetown Training Institute held in Orlando, FL. The Team collected and submitted quarterly TRAC IPP indicators for the April-June, 2012. Team

Members also regularly attend ACCESS committees and workgroup meetings (e.g., TA, Social Marketing, P3, and Coordinating Council) as well as hold their own weekly ACCESS evaluation team meetings and weekly interviewer team meeting.

Submitted by: Allison Brown, Evaluation Coordinator

- 1) Eval Referrals: 1 new referral (8 new referrals to date for August). Discussion of anticipated bump in referrals related to adding level 2 families. 12 mos. follow-ups (interviews and CUIF data) continue in September
- 2) Services and Costs: Discussion of training and implementation of a form to extract data from files ready for entry into database. Karen to let eval know when meeting with Kirk is scheduled and how staff is doing with use of new form.
- 3) WIFI: Lisa and Karen/Jonte to meet next week to discuss procedures, protocol, etc.
- 4) Quarterly IPP: Last week discussed streamlining collection using one survey/form to track indicators on activities as they occur. Next IPP due October.
- 5) TA - recruiting students to assist with Think-tank in November. Lisa to develop evaluation materials for team to review
- 6) Students to assist with data entry needs (intake data, etc.)

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*** FUND NO. 090 MENTAL HEALTH											
*** DEPT NO. 053 MENTAL HEALTH BOARD											
25	CHAMPAIGN COUNTY TREASURER								RENT-GENERAL CORP		
		9/06/12	03 VR	53- 319		474089	9/07/12	090-053-533.50-00	FACILITY/OFFICE RENTALS	SEP OFFICE RENT	2,066.52
										VENDOR TOTAL	2,066.52 *
41	CHAMPAIGN COUNTY TREASURER								HEALTH INSUR FND 620		
		8/27/12	03 VR	620- 132		473828	8/31/12	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	AUG HI, LI, & HRA	2,817.09
										VENDOR TOTAL	2,817.09 *
88	CHAMPAIGN COUNTY TREASURER								I.M.R.F. FUND 088		
		8/17/12	01 VR	88- 59		473585	8/24/12	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 8/10 P/R	1,282.58
		9/05/12	04 VR	88- 63		474094	9/07/12	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 8/24 P/R	1,282.80
		9/05/12	04 VR	88- 64		474094	9/07/12	090-053-513.02-00	IMRF - EMPLOYER COST	ADV 201229013 1/13P	46.47-
										VENDOR TOTAL	2,518.91 *
161	CHAMPAIGN COUNTY TREASURER								REG PLAN COMM FND075		
		9/06/12	03 VR	53- 331		474098	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COURT DIVERSION	2,167.00
										VENDOR TOTAL	2,167.00 *
176	CHAMPAIGN COUNTY TREASURER								SELF-FUND INS FND476		
		8/20/12	03 VR	119- 47		473589	8/24/12	090-053-513.04-00	WORKERS' COMPENSATION	INSWRK COMP 7/13,27 P/	133.20
										VENDOR TOTAL	133.20 *
179	CHAMPAIGN COUNTY TREASURER								CHLD ADVC CTR FND679		
		9/06/12	03 VR	53- 330		474101	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CHILD ADVOCACY	3,090.00
										VENDOR TOTAL	3,090.00 *
188	CHAMPAIGN COUNTY TREASURER								SOCIAL SECUR FUND188		
		8/17/12	01 VR	188- 89		473591	8/24/12	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 8/10 P/R	974.35
		9/05/12	04 VR	188- 93		474102	9/07/12	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER	FICA 8/24 P/R	974.50
										VENDOR TOTAL	1,948.85 *

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*** FUND NO. 090 MENTAL HEALTH											
572	ABSOPURE WATER	8/22/12	02 VR	53- 344		473594	8/24/12	090-053-533.51-00	EQUIPMENT RENTALS	80530853541509 6/30	9.00
										VENDOR TOTAL	9.00 *
5780	BP COMPUTER SERVICES	9/06/12	03 VR	53- 320		474110	9/07/12	090-053-533.07-00	PROFESSIONAL SERVICES	SEP-NOV CNSLT #12-3	625.00
										VENDOR TOTAL	625.00 *
7982	BEST INTEREST OF CHILDREN, INC.	8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COMMUNITY HOME	11,250.00
		8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG COMMUNITY HOME	11,250.00
		8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PARENT/FAM ENGA	7,917.00
		8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG PARENT/FAM ENGA	7,917.00
		8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL WRAP FLEX FUNDS	3,333.00
		8/14/12	03 VR	53- 317		473188	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG WRAP FLEX FUNDS	3,333.00
		9/06/12	03 VR	53- 329		474111	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP WRAP FLEX FNDS	3,333.00
		9/06/12	03 VR	53- 329		474111	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COMMUNITY HOME	11,250.00
		9/06/12	03 VR	53- 329		474111	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PARENT FAM ENGA	7,917.00
										VENDOR TOTAL	67,500.00 *
13375	CENTER FOR WOMEN IN TRANSITION	9/06/12	03 VR	53- 322		474123	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP WOMEN IN TRANSI	5,579.00
										VENDOR TOTAL	5,579.00 *
13376	CENTER FOR YOUTH & FAMILY SOLUTIONS	9/06/12	03 VR	53- 321		474124	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEPT COUNSELING	667.00
										VENDOR TOTAL	667.00 *
17128	CLASSIC EVENTS	9/05/12	05 VR	53- 346		474136	9/07/12	090-053-533.95-00	CONFERENCES & TRAINING	2011917 8/21 BRD MT	126.75
										VENDOR TOTAL	126.75 *

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*** FUND NO. 090 MENTAL HEALTH											
18052	COMCAST CABLE - MENTAL HEALTH ACCT	8/22/12	02 VR	53- 343		473634	8/24/12	090-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010088314 8/	84.90
										VENDOR TOTAL	84.90 *
18203	COMMUNITY CHOICE, INC	9/06/12	03 VR	53- 332		474137	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SELF DETERMINAT	2,083.00
										VENDOR TOTAL	2,083.00 *
18209	COMMUNITY ELEMENTS	9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP ADULT RECOVERY	12,572.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP CRISIS ACCESS B	15,749.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP INTEGRATED BEHA	4,000.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PSYCH SRVCS	3,433.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP TIMES CENTER	4,000.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP EARLY CH MH DEV	9,542.00
		9/06/12	03 VR	53- 323		474138	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PLL FRONT END	23,629.00
										VENDOR TOTAL	72,925.00 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY	9/06/12	03 VR	53- 324		474140	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP 1ST CALL 4 HELP	6,873.00
										VENDOR TOTAL	6,873.00 *
19346	CRISIS NURSERY	9/06/12	03 VR	53- 333		474142	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP BEYOND BLUE	5,833.00
										VENDOR TOTAL	5,833.00 *
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC	9/06/12	03 VR	53- 325		474146	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP DT/EMPLOYMENT	25,391.00
		9/06/12	03 VR	53- 325		474146	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FAM DEVELOP CTR	18,225.00
										VENDOR TOTAL	43,616.00 *
22730	DON MOYER BOYS & GIRLS CLUB	9/06/12	03 VR	53- 334		474151	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP INTAKE SPECLST	3,333.00
										VENDOR TOTAL	3,333.00 *



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*** FUND NO. 090 MENTAL HEALTH											
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR										
		9/06/12	03 VR	53- 335		474154	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP FAMILY SUPPORT	1,083.00
										VENDOR TOTAL	1,083.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY								GRANTS		
		9/06/12	03 VR	53- 326		474156	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP 1ST CALL 4 HELP	5,045.00
		9/06/12	03 VR	53- 326		474156	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SELF HELP CENTE	2,494.00
		9/06/12	03 VR	53- 326		474156	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SENIOR COUNSELN	11,861.00
		9/06/12	03 VR	53- 326		474156	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP COUNSELING	4,167.00
										VENDOR TOTAL	23,567.00 *
27922	FRANCES NELSON HEALTH CENTER								MENTAL HLTH GRANTS		
		9/06/12	03 VR	53- 336		474161	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP MH COUNSELING	12,398.00
										VENDOR TOTAL	12,398.00 *
44570	MAHOMET AREA YOUTH CLUB								601 EAST FRANKLIN		
		9/06/12	03 VR	53- 337		474177	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP UNIVERSL SCREEN	1,483.00
										VENDOR TOTAL	1,483.00 *
56750	PRAIRIE CENTER HEALTH SYSTEMS								GRANTS		
		9/06/12	03 VR	53- 327		474189	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP DRUG COURT	14,438.00
		9/06/12	03 VR	53- 327		474189	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PLL EXTENDED	23,629.00
		9/06/12	03 VR	53- 327		474189	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP YOUTH SVCS	8,750.00
		9/06/12	03 VR	53- 327		474189	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP MENTAL HEALTH	833.00
		9/06/12	03 VR	53- 327		474189	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP PREVENTION	4,713.00
										VENDOR TOTAL	52,363.00 *
59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS										
		9/06/12	03 VR	53- 328		474193	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP RACE COUNSELING	1,550.00
										VENDOR TOTAL	1,550.00 *
67290	SOAR PROGRAMS										
		9/06/12	03 VR	53- 339		474201	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP UNIVERSAL SCREE	2,317.00
										VENDOR TOTAL	2,317.00 *



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*** FUND NO. 090 MENTAL HEALTH											
67867	SPOC LLC	8/29/12	03 VR	28- 141		473934	8/31/12	090-053-533.33-00	D/B/A CHAMPAIGN TEL TELEPHONE SERVICE	INV 1089166 8/20 VENDOR TOTAL	29.98 29.98 *
71626	TALKS YOUTH DEVELOPMENT INC NFP	9/06/12	03 VR	53- 341		474205	9/07/12	090-053-533.92-00	TALKS MENTORING CONTRIBUTIONS & GRANTS	SEP MEN OF WISDOM VENDOR TOTAL	5,519.00 5,519.00 *
76921	UNIVERSITY OF ILLINOIS -PSYCHOLOGICAL SERVICES	8/14/12	03 VR	53- 316		473327	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL GIRLS ADVOCACY	2,917.00
		8/14/12	03 VR	53- 316		473327	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG GIRLS ADVOCACY	2,917.00
		8/14/12	03 VR	53- 316		473327	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL RESTORATIVE CIR	3,071.00
		8/14/12	03 VR	53- 316		473327	8/16/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG RESTORATIVE CIR	3,071.00
		9/06/12	03 VR	53- 338		474211	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP RESTORATIVE CRC	3,071.00
		9/06/12	03 VR	53- 338		474211	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP GIRLS ADVOCACY VENDOR TOTAL	2,917.00 17,964.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY	9/06/12	03 VR	53- 342		474212	9/07/12	090-053-533.92-00	SUITE 102 CONTRIBUTIONS & GRANTS	SEP COUNSELING VENDOR TOTAL	1,217.00 1,217.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER	9/06/12	03 VR	53- 340		474215	9/07/12	090-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP UNIVERSL SCREEN VENDOR TOTAL	1,650.00 1,650.00 *
78550	VERIZON WIRELESS-MENTAL HEALTH BOARD	8/14/12	03 VR	53- 310		473333	8/16/12	090-053-533.29-00	AC 386356887-00001 COMPUTER/INF TCH SERVICES	38635688701 7/20	79.04
		8/14/12	03 VR	53- 310		473333	8/16/12	090-053-533.33-00	TELEPHONE SERVICE	38635688701 7/20	108.07
		9/05/12	05 VR	53- 349		474217	9/07/12	090-053-533.29-00	COMPUTER/INF TCH SERVICES	38635688700001 8/20	99.04
		9/05/12	05 VR	53- 349		474217	9/07/12	090-053-533.33-00	TELEPHONE SERVICE	38635688700001 8/20 VENDOR TOTAL	108.07 394.22 *

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*** FUND NO. 090 MENTAL HEALTH											
78873	VISA CARDMEMBER SERVICES										
		9/04/12	03 VR	53- 350		474227	9/07/12	090-053-522.02-00	OFFICE SUPPLIES	7790 STAPLES 8/9	145.94
		9/04/12	03 VR	53- 350		474227	9/07/12	090-053-533.84-00	BUSINESS MEALS/EXPENSES	7790 PANCAKE HS 8/8	71.27
										VENDOR TOTAL	217.21 *
81610	XEROX CORPORATION										
		8/22/12	02 VR	53- 345		473773	8/24/12	090-053-533.85-00	PHOTOCOPY SERVICES	INV 120369415 8/4	292.69
										VENDOR TOTAL	292.69 *
602880	BRESSNER, BARBARA J.										
		8/14/12	03 VR	53- 312		473351	8/16/12	090-053-533.89-00	PUBLIC RELATIONS	POSTAGE 7/17, 8/6	137.50
		9/06/12	03 VR	53- 318		474239	9/07/12	090-053-533.07-00	PROFESSIONAL SERVICES	SEP CONSULTING FEE	2,625.00
										VENDOR TOTAL	2,762.50 *
604568	CANFIELD, LYNN										
		8/14/12	03 VR	53- 308		473352	8/16/12	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	106 MILE 7/6-31	58.83
										VENDOR TOTAL	58.83 *
611802	DRISCOLL, MARK										
		8/14/12	03 VR	53- 309		473358	8/16/12	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	118 MILE 6/6-7/31	65.49
										VENDOR TOTAL	65.49 *
									MENTAL HEALTH BOARD	DEPARTMENT TOTAL	348,928.14 *
									MENTAL HEALTH	FUND TOTAL	348,928.14 *

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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			
		9/06/12	03 VR 106-	29		474098	9/07/12	106-237-533.92-00	CONTRIBUTIONS & GRANTS	SEP COURT DIVERSION	13,417.00
										VENDOR TOTAL	13,417.00 *
									DELINQ PREVENTION GRANTS	DEPARTMENT TOTAL	13,417.00 *
									PUBL SAFETY SALES TAX FND	FUND TOTAL	13,417.00 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
*** DEPT NO. 000 BALANCE SHEET											
78873	VISA CARDMEMBER SERVICES	8/22/12	02 VR	641- 141		473760	8/24/12	641-000-208.50-00	DUE TO OTHERS (NON-GOVT)	1939 7/31 CARIBE RY	156.51
										VENDOR TOTAL	156.51 *
										BALANCE SHEET TOTAL	156.51 *
*** DEPT NO. 053 MENTAL HEALTH BOARD											
25	CHAMPAIGN COUNTY TREASURER	8/27/12	02 VR	641- 137		473827	8/31/12	641-053-533.50-00	RENT-GENERAL CORP FACILITY/OFFICE RENTALS	SEPT OFFICE RENT	1,645.62
										VENDOR TOTAL	1,645.62 *
41	CHAMPAIGN COUNTY TREASURER	8/27/12	03 VR	620- 132		473828	8/31/12	641-053-513.06-00	HEALTH INSUR FND 620 EMPLOYEE HEALTH/LIFE INS	AUG HI, LI, & HRA	1,696.80
										VENDOR TOTAL	1,696.80 *
88	CHAMPAIGN COUNTY TREASURER	8/17/12	01 VR	88- 59		473585	8/24/12	641-053-513.02-00	I.M.R.F. FUND 088 IMRF - EMPLOYER COST	IMRF 8/10 P/R	631.50
		9/05/12	04 VR	88- 63		474094	9/07/12	641-053-513.02-00	IMRF - EMPLOYER COST	IMRF 8/24 P/R	633.48
		9/05/12	04 VR	88- 64		474094	9/07/12	641-053-513.02-00	IMRF - EMPLOYER COST	ADV 201229013 1/13P	22.86-
										VENDOR TOTAL	1,242.12 *
96	CHAMPAIGN COUNTY TREASURER	8/14/12	03 VR	641- 110		473162	8/16/12	641-053-533.92-00	T & A ADVANCES CONTRIBUTIONS & GRANTS	TD1803 DON MOYER BO	25,000.00
		8/14/12	03 VR	641- 111		473162	8/16/12	641-053-533.95-00	CONFERENCES & TRAINING	TD 1812 SUMMERVILE	185.00
		8/14/12	03 VR	641- 112		473162	8/16/12	641-053-533.95-00	CONFERENCES & TRAINING	TD 1810 PARSNS, TRC	286.00
										VENDOR TOTAL	25,471.00 *
176	CHAMPAIGN COUNTY TREASURER	8/20/12	03 VR	119- 47		473589	8/24/12	641-053-513.04-00	SELF-FUND INS FND476 WORKERS' COMPENSATION	INSWRK COMP 7/13,27 P/	65.30
										VENDOR TOTAL	65.30 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
188	CHAMPAIGN COUNTY TREASURER							SOCIAL SECUR FUND188			
		8/17/12	01 VR 188-	89		473591	8/24/12	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	8/10 P/R	479.73
		9/05/12	04 VR 188-	93		474102	9/07/12	641-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	8/24 P/R	481.24
										VENDOR TOTAL	960.97 *
572	ABSOPURE WATER										
		8/14/12	03 VR 641-	130		473170	8/16/12	641-053-522.02-00	OFFICE SUPPLIES	92747182463532 7/16	26.90
		8/14/12	03 VR 641-	130		473170	8/16/12	641-053-533.51-00	EQUIPMENT RENTALS	92747153594234 7/31	9.00
										VENDOR TOTAL	35.90 *
7982	BEST INTEREST OF CHILDREN, INC.										
		8/14/12	03 VR 641-	134		473188	8/16/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL YOUTH MOVE	9,167.00
		8/14/12	03 VR 641-	134		473188	8/16/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	AUG YOUTH MOVE	9,167.00
		8/22/12	02 VR 641-	135		473608	8/24/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP YOUTH MOVE	9,167.00
		8/27/12	02 VR 641-	146		473849	8/31/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	LEDERSHIP ACADEMY	25,000.00
										VENDOR TOTAL	52,501.00 *
18053	COMCAST CABLE - ACCESS INITIATIVE ACCT							AC#8771403010217756			
		8/14/12	03 VR 641-	132		473214	8/16/12	641-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010217756 7/	81.90
										VENDOR TOTAL	81.90 *
18209	COMMUNITY ELEMENTS										
		8/22/12	02 VR 641-	136		473635	8/24/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	SEP SCHOOL BASED	8,833.00
										VENDOR TOTAL	8,833.00 *
22730	DON MOYER BOYS & GIRLS CLUB										
		8/23/12	01 VR 641-	144		473644	8/24/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	A64113108 SRV DELVR	130,861.00
		8/23/12	01 VR 641-	145		473644	8/24/12	641-053-533.92-00	CONTRIBUTIONS & GRANTS	A64113106 WRAPAROUN	45,000.00
										VENDOR TOTAL	175,861.00 *
26724	FIREOWL CONSULTING SERVICES							ATTN: E. PERRACHIONE			
		8/14/12	03 VR 641-	128		473238	8/16/12	641-053-533.07-00	PROFESSIONAL SERVICES	INV A1 7/12 7/27	690.00
										VENDOR TOTAL	690.00 *

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
32008	HASLER, INC.	8/14/12	03 VR	641- 129		473244	8/16/12	641-053-533.51-00	EQUIPMENT RENTALS	INV 15972231 7/31	140.85
										VENDOR TOTAL	140.85 *
42540	LATTE DA! INC	8/27/12	02 VR	641- 143		473907	8/31/12	641-053-533.84-00	BUSINESS MEALS/EXPENSES	INV 683 8/6 COMM MT	468.00
										VENDOR TOTAL	468.00 *
58118	QUILL CORPORATION	8/22/12	02 VR	641- 138		473719	8/24/12	641-053-522.02-00	OFFICE SUPPLIES	INV 4827010 8/3	77.86
										VENDOR TOTAL	77.86 *
63561	SEABOAT INC	8/21/12	02 VR	641- 142		473727	8/24/12	641-053-533.84-00	BUSINESS MEALS/EXPENSES	COORDINATNG MTG 5/2	170.97
										VENDOR TOTAL	170.97 *
67867	SPOC LLC	8/29/12	03 VR	28- 141		473934	8/31/12	641-053-533.33-00	TELEPHONE SERVICE	INV 1089166 8/20	30.03
									D/B/A CHAMPAIGN TEL	VENDOR TOTAL	30.03 *
71000	SUPPORTECH COMPUTERS INC	8/14/12	03 VR	641- 131		473315	8/16/12	641-053-522.44-00	EQUIPMENT LESS THAN \$1000	INV 3874 7/23	99.99
		8/14/12	03 VR	641- 131		473315	8/16/12	641-053-533.07-00	PROFESSIONAL SERVICES	INV 2874 7/23	214.99
										VENDOR TOTAL	314.98 *
78552	VERIZON WIRELESS-MNTL HLTH BD/ACCESS INT AC	8/22/12	02 VR	641- 139		473750	8/24/12	641-053-533.29-00	COMPUTER/INF TCH SERVICES	SAC 28636916601 8/2	92.16
		8/22/12	02 VR	641- 139		473750	8/24/12	641-053-533.33-00	TELEPHONE SERVICE	AC 28636916601 8/2	567.91
		8/22/12	02 VR	641- 139		473750	8/24/12	641-053-534.37-00	FINANCE CHARGES,BANK FEES	SAC 28636916601 8/2	9.94
										VENDOR TOTAL	670.01 *
78873	VISA CARDMEMBER SERVICES	8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.18-00	NON-EMPLOYEE TRAINING,SEM	1939 7/10 AMRICN AI	187.00

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*** FUND NO. 641 ACCESS INITIATIVE GRANT											
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.18-00	NON-EMPLOYEE TRAINING, SEM	1939 7/17 CRB RYL R	11,952.20
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.84-00	BUSINESS MEALS/EXPENSES	1939 7/10 GFS FOOD	92.11
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.89-00	PUBLIC RELATIONS	1939 7/10 DOUBLE TR	24.00
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.84-00	BUSINESS MEALS/EXPENSES	1939 7/19 SILVR MIN	140.41
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/12 SCHNUCKS	73.29
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/23,30 FRONTR	40.00
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/27 GLRD PALM	599.19
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/30 GLRD PALM	1,219.64
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/28 VANER TXI	145.00
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/28 MEARS TRA	128.90
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/30 MERS LUXR	84.00
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	1939 7/31 MERS LUXR	138.00
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.84-00	BUSINESS MEALS/EXPENSES	1939 8/2 CLYBOURNE	45.79
		8/22/12	02 VR	641- 141		473760	8/24/12	641-053-533.29-00	COMPUTER/INF TCH SERVICES	1939 7/13 CONCENTRI	11.95
										VENDOR TOTAL	14,881.48 *
81610	XEROX CORPORATION										
		8/14/12	03 VR	641- 133		473347	8/16/12	641-053-533.85-00	PHOTOCOPY SERVICES	INV 063017955 8/1	557.20
										VENDOR TOTAL	557.20 *
633858	MYLES-BROOKS, PEGGY										
		8/14/12	03 VR	641- 126		473369	8/16/12	641-053-533.12-00	JOB-REQUIRED TRAVEL EXP	122.5 MILE 5/23-7/1	67.99
										VENDOR TOTAL	67.99 *
641761	SUMMERVILLE, SHANDRA										
		8/22/12	02 VR	641- 140		473817	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	108ML 7/23-27 BLMGT	59.94
		8/22/12	02 VR	641- 140		473817	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	BAGGAGE 7/23-27 AIR	40.00
		8/22/12	02 VR	641- 140		473817	8/24/12	641-053-533.95-00	CONFERENCES & TRAINING	SHUTTLE 7/27 ORLNDO	22.00
		8/22/12	02 VR	641- 140		473817	8/24/12	641-053-522.06-00	POSTAGE, UPS, FED EXPRESS	FED EX 7/27	52.92
										VENDOR TOTAL	174.86 *
									MENTAL HEALTH BOARD	DEPARTMENT TOTAL	286,638.84 *
									ACCESS INITIATIVE GRANT	FUND TOTAL	286,795.35 *

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*** FUND NO. 685 DRUG COURTS PROGRAM

*** DEPT NO. 053 MENTAL HEALTH BOARD

56750	PRAIRIE CENTER HEALTH SYSTEMS								GRANTS			
		8/14/12	03	VR 685-	6		473297	8/16/12	685-053-533.92-00	CONTRIBUTIONS & GRANTS	APR DRUG COURT PRG	8,432.16
		8/14/12	03	VR 685-	7		473297	8/16/12	685-053-533.92-00	CONTRIBUTIONS & GRANTS	DC13-001 PC DURG CT	15,000.00
											VENDOR TOTAL	23,432.16 *
									MENTAL HEALTH BOARD		DEPARTMENT TOTAL	23,432.16 *
									DRUG COURTS PROGRAM		FUND TOTAL	23,432.16 *

REPORT TOTAL ***** 979,034.65 *

12.A.

MUNICIPAL MINUTE

Updates on cases, laws, and other topics of interest to municipalities and local governments by Ancel Glink attorneys

Wednesday, September 21, 2011

New Law Requires Open Meetings Training for Elected and Appointed Officials

On August 23, 2011, the Illinois General Assembly amended the Open Meetings Act (OMA) to add a new training requirement for all elected and appointed officials of a public body. This new training requirement does not replace the annual OMA training that must be completed by the OMA officials designated by the public body to receive such training.

Officials holding office on January 1, 2012, have one year in which to complete the training. Officials taking office after that date have 90 days to complete the training. Officials who have already completed an OMA training program are not required to do so again.

The electronic training program is administered by the Public Access Counselor (PAC). Upon completion of the training, each official must submit a certificate of completion to the PAC. A certificate of completion covers the official for any committee or subcommittee of the public body and for every other public body of which the official may be a member. Instructions to public officials are not yet published by the PAC, but certification as an OMA officer under the current law will satisfy the new requirements. An elected school board member may satisfy the training requirement by participating in a program conducted by an organization created under §23 of the School Code (school board associations), rather than the program administered by the PAC.

Failure of an official to satisfy the OMA training requirement does not affect the validity of any action taken by the public body.

The new law is effective January 1, 2012.

UPDATED posts on this topic: 1/2/2012 and 12/27/2011

Posted by Julie Tappendorf at 4:43 PM
Labels: Open Meetings

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Amendment to Telecommunications Act Limits Local Control of Cellular Facilities

D.C.'s Gun Registration Law Gets Mixed Review by Court

Texts on Personal Cell Phones Must be Released under FOIA

Billboards, Leases, Zoning, and Takings

About Me



JULIE TAPPENDORF

is a partner at Ancel Glink Diamond Bush DiCianni & Krafthefer in Chicago, practicing in the areas of local government, land use & zoning litigation. Follow us on

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- Ethics and Officials(18)
- Finances (13)
- Freedom of Information(12)



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

BRIEFING MEMORANDUM

DATE: September 19, 2012
TO: CCMHB Members
FROM: Mark Driscoll, Associate Director
SUBJECT: Draft Three-Year Plan 2013-2015 with FY 2013 Objectives

Building on the prior three year cycle and consideration of emerging issues, a Three Year Plan for fiscal years 2013 through 2015 with objectives for FY 2013 has been drafted. Past goals that represent on-going activities have been updated and new or revised objectives identified for the coming fiscal year. Other proposed goals and objectives in the plan are tied to long-term commitments that extend into the new three year period or are a response to state and federal policy impacting local systems of care.

Background

As was the case during the prior plan, the State of Illinois' never ending financial crisis continues to have a significant impact on consumers reliant on state supported community based services, on local agencies doing business with the state, and on the CCMHB as a local funder. State funding reductions and delayed payment pose risks to consumers' access to services and providers' ability to maintain operations. The CCMHB sets allocation criteria that takes into consideration reduced or eliminated support for local services by the state. However, the loss of state funding to local services far exceeds the Board's ability to fill these gaps. Compounding the problem is the state's decision to again increase the length of time the state takes to pay its bills. The Board, through strong fiscal and administrative policies, is committed to timely payments to providers per the terms of the contract but has limited capacity to offset delays in state payments. At the same time the state is cutting funding and extending payment delays, it proposes to close some state operated facilities and has reached settlements in class action suits that will return consumers to less restrictive settings in communities. Consumer advocates and providers alike, while supportive of deinstitutionalization, have raised concerns that the level of financial support that will follow clients' return to their home communities will not be adequate to support their needs. The issues of state funding decisions, delayed payment practices, and deinstitutionalization place the Board in the position of having to react and reassess priorities on an annual basis in response to actions by the state.

Beyond the uncertainties associated with the unrelenting state fiscal crisis, there are existing commitments that extend into the next three year plan. In particular is the continued implementation of the ACCESS Initiative under the SAMHSA cooperative agreement. The ACCESS Initiative is entering year four of the six year term. At the

mid-point in the development of the system of care, progress is evident as youth and families engage in wraparound services, development of cultural competencies continues, data is collected for the national evaluation, and new challenges arise as local match requirements increase while federal funds decline, and attention turns to the question of sustainability.

Other commitments are reflected in the executed Memoranda of Understanding and Intergovernmental Agreements between the Board and other partners, particularly the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB). The Board collaborates with the CCDDB on issues affecting the system of care for persons with developmental disabilities including decisions affecting the allocation of resources. The Board also has commitments with the Champaign County Board related to management of the Quarter Cent for Public Safety Fund, whose purpose is to reduce juvenile delinquency, and the Drug Court Fund intended to support participating clients with their recovery. As part of those commitments, the Board convenes meetings of the partners involved with the Quarter Cent Fund and serves on the Champaign County Specialty Court Steering Committee responsible for the oversight of the Champaign County Drug Court and Mental Health Court.

Awareness of new initiatives at the federal, state, and local level and their potential impact on consumers, providers, and systems of care are reflected in the plan. By far the most significant of these new initiatives is implementation of the federal Affordable Care Act (ACA). The ACA includes creation of state and federal Health Benefits Exchanges, expansion of Medicaid, and movement to integrated care during the term of the new plan. These changes have the potential to change individuals' access to mental health services yet many aspects of how the changes will take place remain unknown. At the state level, the Department of Healthcare and Family Services has solicited collaborative proposals involving multiple providers for integrated care networks that serve regions of the state. Some local providers, in response to the pending implementation of the ACA and the current operating environment, are pursuing broad based affiliations including responses to the state's collaboration proposal solicitation. Greater coordination, collaboration, and integration of behavioral health care with physical care is coming and looks to extend beyond local communities and county boundaries. The Board will need to monitor movement to regional based services for its' potential impact on local services. Membership and participation in the Association of Community Mental Health Authorities of Illinois as well as other similar organizations provides the means to stay informed of development of proposed policies on these issues and be strong advocates for local interests.

Activity at the local level seeks to address issues associated with access to care too. A new entity, Promise Healthcare has been formed with the intent of returning Frances Nelson Health Center to local control. The organization has entered into negotiations with the Community Health Improvement Center that currently operates the health center. If an agreement cannot be reached, other options for establishing a new Federally Qualified Health Center will be pursued. In either case, Promise Healthcare is committed to expanding access to behavioral healthcare and physical health care to underserved

populations. An extension of the integration of the behavioral health and physical health is the Board's interest in promoting wellness in people with mental illness through public health based models particularly as it applies to eating a healthy diet and being physically and socially active to reduce morbidity and mortality rates. Also of interest is the rollout of regionally based 211 information and referral systems which has begun across the state. Champaign County will be served by the 211 system based in Bloomington-Normal. That system is expected to go live in early 2013 and to reduce call volume at local information and referral systems. The local Council of Service Providers to the Homeless is taking the lead on addressing the need for an emergency shelter for intact families. The need for such a facility was raised last year by providers during the Boards' discussion of allocation criteria for FY 2013. The Council has worked on this for some time and continues to move forward with plans for such a facility.

The financial issues, existing commitments, and new policy and service initiatives all influence the content of the plan. The plan itself is structured similar to the current plan with goals and objectives divided into four sections: Children, Adolescent, and Family Focused Programs and Services; Community Engagement and Advocacy; Resource Development and Collaboration; and Organizational Development, Administration, and Accountability.

Next Steps

Following today's release of the draft plan to the Board, the document will be disseminated for comment to the public. Providers and other interested parties will be encouraged to provide input on the proposed goals and objectives as well as identify additional activity not addressed in the draft plan.

While staff has had an opportunity to review the draft document prior to its release, additional discussions will occur. This will include consideration of comments received from interested parties on content of the plan as well as input on additional goals and objectives.

The updated Three Year Plan will be presented for approval at the November 14, 2012 Board meeting.

DRAFT
CHAMPAIGN COUNTY MENTAL HEALTH BOARD

THREE-YEAR PLAN

FOR

FISCAL YEARS 2013 - 2015
(12/1/12 – 11/30/15)

WITH

ONE YEAR OBJECTIVES

FOR

FISCAL YEAR 2013
(12/1/12 – 11/30/13)

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (Ch. 91-1/2, Sections 301-314, inclusive) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents (of Champaign County) and/or to contract therefore..."

WHEREAS, the Champaign County Mental Health Board is required by the Community Mental Health Act to prepare a one- and three-year plan for a program of community mental health services and facilities;

THEREFORE, the Champaign County Mental Health Board does hereby adopt the following Mission Statement and Statement of Purposes to guide the development of the mental health plan for Champaign County:

MISSION STATEMENT

The mission of the CCMHB is the promotion of a local system of services for the prevention and treatment of mental or emotional, developmental, and substance abuse disorders, in accordance with the assessed priorities of the citizens of Champaign County.

STATEMENT OF PURPOSES

1. To plan, coordinate, evaluate and allocate funds for the comprehensive local system of mental health, developmental disabilities, and substance abuse services for Champaign County.
2. To promote family-friendly community support networks for the at-risk, underserved and general populations of Champaign County.
3. To increase support for the local system of services from public and private sources.
4. To further develop the systematic exchange of information about local services and needs between the public/private service systems and the CCMHB.

In order to accomplish these purposes, the Champaign County Mental Health Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the community mental health system.

CHILDREN, ADOLESCENT, AND FAMILY FOCUSED PROGRAMS AND SERVICES

Goal #1: Identify children at-risk of developmental delay and intellectual disability and support early intervention services and family supports.

Objective #1: Support use of evidence based/informed models for provider programs serving families with children age birth to five, and require collaboration and coordination by providers to limit duplication of effort.

Objective #2: Participate in collaborative bodies such as the Champaign County Birth to Six Council whose mission focuses on serving families with young children.

Objective #3: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on issues of mutual interest associated with early intervention services and programs.

Goal #2: Identify youth at risk of social, emotional, and/or behavioral health issues and, using evidence based/informed services, engage in a process of healing and positive development.

Objective #1: Continue development and implementation of the SAMHSA Children's Mental Health Initiative Cooperative Agreement for the ACCESS Initiative system of care delineated in the SAMHSA application, including cultural competence development and support, subject to post-award changes as determined by the Coordinating Council, principle investigators, project director, and ACCESS team and partners.

Objective #2: Begin discussions with ACCESS Initiative partners whose systems benefit from the youth and family interventions delivered through the ACCESS Initiative system of care to identify innovative means for sustaining system change.

Objective #3: Support continued implementation of the Parenting with Love and Limits (PLL) program based on positive evaluation and feedback from community partners and stakeholders.

Objective #4: As practicable, leverage resources of juvenile justice system stakeholders and units of local government benefitting from the outcomes of youth and families engaged in PLL.

Objective #5: Maintain collaboration with juvenile justice system stakeholders on implementation and evaluation of the Quarter Cent for Public Safety Fund supported services and PLL and the integration of Quarter Cent funded services and PLL with the ACCESS Initiative.

Objective #6: Monitor evaluation of the ACCESS Initiative through engagement with evaluators on progress, including interim outcomes of the local and national evaluation, and through participation in the ACCESS Evaluation Collaboration Team.

Goal #3: Support adults' and families' access to services and programs, including evidence based/informed behavioral health practices to increase positive outcomes for consumers.

Objective #1: Continue participation and support for Champaign County Specialty Courts serving persons with substance use disorders and/or mental health disorders.

Objective #2: Support a continuum of services for persons with a mental health, substance use disorder, and/or developmental disability in response to reduced state supported services.

Objective #3: Promote wellness for people with mental illnesses, substance use disorders, and/or developmental disabilities to prevent and reduce early mortality as embodied in the "10x10 Wellness Campaign."

Objective #4: Encourage training of staff across the service spectrum on use of evidence based/informed practice and associated outcome measurement.

COMMUNITY ENGAGEMENT & ADVOCACY

Goal #4: Address stigma associated with a person's or family members' mental illness, substance use disorder, and/or developmental disability through broad based community education efforts to increase community acceptance and positive self-image.

Objective #1: Continue support for and involvement in the signature anti-stigma and community education events Reaching Out for Answers – Disability Resource Expo, Roger Ebert's Film Festival, and the ACCESS Initiative Children's Mental Health Awareness Week.

Objective #2: Participate in other community based activities such as walks, forums, and presentations to raise awareness.

Goal #5: Stay abreast of emerging issues affecting the local systems of care and consumer access to services and be proactive through concerted advocacy efforts.

Objective #1: Monitor implementation of the Affordable Care Act by the State of Illinois and advocate for increased service capacity sufficient to meet consumer demand through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI) and other state and national associations.

Objective #2: Track state implementation of class action suit settlements involving persons with developmental disabilities or mental illness, e.g. Ligas vs. Hamos Consent Decree and Williams vs. Quinn Consent Decree, and proposed closure of state facilities, and advocate for the allocation of state resources sufficient to meet needs of clients returning to home communities.

Objective #3: Continue broad based advocacy efforts at the state and local levels to respond to continued reductions in state funding and increasing delays in payment for local community based mental health, substance use disorder, and developmental disability services and to the broader human services network under contract with the State of Illinois.

Objective #4: In collaboration with the United Way of Champaign County, monitor implementation of the regional 211 information and referral system and its impact on local utilization of funded information and referral services.

Objective #5: Assess impact on local systems of care for persons with mental illness, substance use disorder and/or developmental disabilities of the State of Illinois and provider networks movement to a regional service delivery model.

RESOURCE DEVELOPMENT & COLLABORATION

Goal #6: Increase investment in programs and services through promotion of collaborative and innovative approaches.

Objective #1: Through participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), seek input and feedback on innovative approaches for resource development or cost containment.

Objective #2: Partner with other local entities for a coordinated response to needs of at-risk populations.

Objective #3: Consider non-financial support to agencies to offset state funding reductions and control costs.

Objective #4: Support and assist with affiliations and mergers of providers as a means to streamline the delivery of services and enable administrative cost savings through economies of scale.

Objective #5: Encourage development of collaborative agreements between providers to increase or maintain access and coordination of services for consumers residing in Rantoul and rural Champaign County.

Goal #7: Sustain the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB).

Objective #1: Implement the Intergovernmental Agreement between CCMHB and CCDDB.

Objective #2: Coordinate integration, alignment, and allocation of resources with the CCDDB to ensure the efficacious use of resources within the developmental disability service continuum.

Objective #3: Assess alternative service strategies that empower consumers and increase access to needed but underutilized services.

Goal #8: Reduce involvement of target populations in the criminal justice system.

Objective #1: Collaborate with juvenile justice system partners on implementation of services supported with Quarter Cent for Public Safety Fund, Board resources, and the ACCESS Initiative to reduce youth contact and involvement with the criminal justice system.

Objective #2: Continue participation in the Champaign County Specialty Court Steering Committee and support for Champaign County Drug Court and Champaign County Mental Health Court.

Objective #3: Using established oversight committees, review performance and evaluation reports including data on recidivism.

Objective #4: Support continuation of Champaign County Drug Court services funded through the Department of Justice Bureau of Justice Assistance Enhancement Grant award and the pursuit of non-CCMHB funding to sustain the enhanced services.

ORGANIZATIONAL DEVELOPMENT, ADMINISTRATION, AND ACCOUNTABILITY

Goal #9: Set priorities for funding through an annual review and allocation process to ensure access to core mental health, substance use disorder, and developmental disability services by consumers.

Objective #1: Draft priorities based on current service needs and operating conditions including consideration of changes in state funding and payment practices, commitments to implementation of the ACCESS Initiative, and obligations established through Memoranda of Understanding and Intergovernmental Agreements.

Objective #2: Solicit input from the service network and community at large on proposed funding priorities prior to adoption.

Objective #3: Utilize a competitive application process to evaluate proposals in relation to annual priorities.

Goal #10: Maintain program and fiscal accountability of service providers and programs under contract with Board.

Objective #1: Evaluate program performance on a quarterly and annual basis.

Objective #2: Implement the Audit and Financial Accountability policy.

Objective #3: Maintain the on-line application and reporting system and provide enhancements as necessary.

Objective #4: Evaluate provider administrative expenses and cost allocation plans to ensure maximum investment in consumer services.

Goal #11: Respond to State funding reductions for mental health, substance use disorder and developmental disability services through administrative efficiencies at the Board level enabling maximum investment in community service grants and contracts.

Objective #1: Continue the administrative services agreement as defined in the Intergovernmental Agreement the Board and the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability.

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
SPECIAL BOARD MEETING**

Minutes—August 21, 2012

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

4:30 p.m.

MEMBERS PRESENT: Jan Anderson, Bill Gleason, Deloris Henry, Mary Ann Midden,
Mike McClellan, Deborah Townsend

MEMBERS EXCUSED: Aillinn Dannave, Ernie Gullerud, Thom Moore

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

OTHERS PRESENT: Patty Walters, Danielle Matthews, Developmental Services Center
(DSC); Shandra Summerville, ACCESS Initiative

CALL TO ORDER:

Dr. Townsend, Board President, called the meeting to order at 4:35 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

ADDITIONS TO AGENDA:

None.

CITIZEN INPUT:

None

CCDDB INFORMATION:

The CCDDB will meet tomorrow morning, August 22, 2012 at 8:00 a.m.

APPROVAL OF MINUTES:

Minutes from the June 20, 2012 Board meeting were included in the packet for review.

MOTION: Mr. Gleason moved to approve the minutes from the June 20, 2012 Board meeting. Ms. Midden seconded the motion. A vote was taken and the motion passed unanimously.

PRESIDENT'S COMMENTS:

None.

EXECUTIVE DIRECTOR'S COMMENTS:

None.

STAFF REPORTS:

None.

BOARD TO BOARD:

None.

AGENCY INFORMATION:

None.

FINANCIAL INFORMATION:

Approval of Claims:

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

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

NEW BUSINESS:

Developmental Disabilities Budget Deficit:

A Decision Memorandum was included in the packet. In May 2012, the Champaign County Developmental Disabilities Board (CCDDB) completed the FY13 allocation process and authorized obligation of funds based on revenue projections. On July 16, 2012, the Champaign County Administrator provided the actual revenue numbers which represented an overall reduction of 0.23% and resulted in a budget deficit of \$148,528.

The Champaign County Mental Health Board's (CCMHB) revenue numbers in the contributions and grants line have increased by \$96,203. The reason for this disparity is because the CCDDB levy is at its rate-limit of 0.100 and thus was impacted by lowering of equalized assessed valuation of property in Champaign County.

The Intergovernmental Agreement between the CCMHB and CCDDB clearly states both Boards have overlapping responsibilities pertaining to planning, funding monitoring and evaluating developmental disabilities programs and services in Champaign County. This means the budget shortfall is a problem for both Boards, requiring collaboration and problem solving participation.

On August 8, 2012, the "Presidents' Meeting" was held to review this situation and discuss possible solutions.. This group reviewed and discussed possible actions which could be taken to address the developmental disabilities shortfall. The group came to consensus about implementation of a collaborative approach to addressing this problem. Specifically, there was agreement it would be appropriate to use unanticipated CCMHB revenue to support developmental disabilities contracts which are consistent with preliminary discussions about realignment of CCDDB and CCMHB FY14 contracts.

The remainder of the deficit would then be addressed by across-the-board percentage reductions for all CCDDB contracts. It was further agreed this arrangement is for FY13 contracts only and the allocation of additional CCMHB funds would not be reflected in the "base" allocations for developmental disabilities services funded by the CCMHB. This plan would require the approval and authorization by both the CCMHB and CCDDB.

Recommendations:

- 1) Authorize the use of \$96,203 of CCMHB dollars to fund developmental disabilities programs and services. These funds shall be used to increase the contract maximum for the CCMHB FY13 Family Development Center contract with Developmental Services Center (DSC) by contract amendment. This action is for FY13 only and will not be included as part of the developmental disabilities calculations for the CCMHB allocation process.
- 2) Concurrent with this action, the CCDDB FY13 DSC Family Development Center contract maximum would be reduced by \$96,203.
- 3) An across-the-board percentage reduction shall be applied to all CCDDB contracts. The aggregate total will be about \$52,325.

MOTION: Dr. Henry moved to increase the contract maximum of the FY13 CCMHB contract for Family Development Center with Developmental Services Center by \$96,203. This approval is contingent on the CCDDDB taking actions specified in the recommendations above. Mr. McClellan seconded the motion. A roll call vote was taken and the motion passed unanimously.

OLD BUSINESS:

None.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The business meeting adjourned at 4:55 p.m.

Respectfully

Submitted by: _____ Approved by: _____
Stephanie Howard-Gallo Deborah Townsend
CCMHB/CCDDB Staff CCMHB President

Date: _____ Date: _____

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

DRAFT
2012-2013 MEETING SCHEDULE with SUBJECT

The schedule provides the dates of board meetings for the Champaign County Mental Health Board. The subjects are not exclusive to any given meeting as other matters requiring Board review or action may also be addressed or may replace the subject listed. Study sessions may be scheduled throughout the year and held after the board meeting.

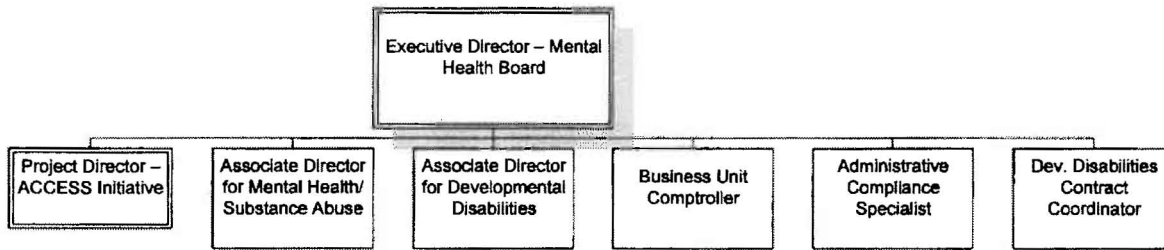
9/19/12	Regular Board Meeting Release Draft Three Year Plan 2013-2015 with FY 2013 Objectives
10/17/12	Regular Board Meeting Release Draft Contract Year 2014 Allocation Criteria
11/14/12	Regular Board Meeting Approve Three Year Plan with One Year Objectives
12/19/12	Regular Board Meeting Allocation Decision Support – CY 2014 Allocation Criteria
1/23/13	Regular Board Meeting Election of Officers
2/20/13	Regular Board Meeting Liaison Assignments
3/20/13	Regular Board Meeting Approve Annual Report
4/17/13	Regular Board Meeting Program Summaries Review and Discussion
5/22/12	Regular Board Meeting Allocation Decisions Authorize Contracts for CY 2014
6/19/12	Regular Board Meeting Approve Draft Budget

DRAFT
ALLOCATION TIMELINE AND PROCESS

The following is a tentative schedule for the CCMHB/Quarter Cent for Public Safety allocation process for Contract Year 2014 (July 1, 2013 – June 30, 2014).

<u>Timeline</u>	<u>Tasks</u>
12/9/12	Public Notice to be published on or before this date giving at least 21 day notice of application period.
1/4/13	Open CCMHB/CCDDB Online System access to CCMHB/Quarter Cent Fund CY 2014 Agency Program and Financial Plan Application forms.
2/15/13	Online System Application deadline – System suspends applications at 4:30 p.m. (CCMHB close of business).
4/11/13	Program summaries released to Board and copies posted online with the CCMHB April 17, 2013 Board meeting agenda.
4/17/13	CCMHB meeting including review of program summaries.
5/16/13	Allocation recommendations released to Board and copies posted online with the CCMHB May 22, 2013 Board meeting agenda.
5/22/13	CCMHB meeting on allocation recommendations and action on contract awards.
6/28/13	Contracts completed.

MENTAL HEALTH BOARD – 090-053



MISSION STATEMENT

The mission of the Champaign County Mental Health Board (CCMHB) is the promotion of a local system of services for the prevention and treatment of mental or emotional, developmental, and substance abuse disorders, in accordance with the assessed priorities of the citizens of Champaign County.

BUDGET HIGHLIGHTS

We anticipate no revenue growth during FY13 and this will leave funding of mental health, substance abuse and developmental disabilities programs and services relatively flat. As a result there will not be new initiatives, but modest redirection of effort to support CCMHB priorities including services associated with specialty courts, expansion of juvenile justice/mental health programming, and anti-stigma activities will be planned and implemented. State of Illinois funding cuts and payment delays will be destructive to core services and will require us consider program plan amendments to address service gaps.

FINANCIAL

Fund 090 Dept 053			2011 Actual	2012 Original	2012 Projected	2013 Budget
311	24	CURR PROP TX-MENTAL HLTH	\$3,644,091	\$3,751,272	\$3,751,272	\$3,906,389
313	24	RE BACKTAX-MENTAL HEALTH	\$1,335	\$500	\$500	\$500
314	10	MOBILE HOME TAX	\$3,910	\$4,000	\$4,000	\$4,000
315	10	PAYMENT IN LIEU OF TAXES PROPERTY TAXES	\$2,190 \$3,651,526	\$700 \$3,756,472	\$700 \$3,756,472	\$700 \$3,911,589
336	9	CHAMPAIGN COUNTY	\$83,726	\$0	\$0	\$0
336	16	VILLAGE OF MAHOMET	\$0	\$0	\$0	\$0
336	23	CHAMP COUNTY DEV DISAB BD	\$337,183	\$292,402	\$292,402	\$317,517
337	21	LOCAL GOVT REIMBURSEMENT FEDERAL, STATE & LOCAL SHARED REVENUE	\$0 \$420,909	\$0 \$292,402	\$0 \$292,402	\$0 \$317,517
361	10	INVESTMENT INTEREST	\$1,508	\$1,250	\$1,000	\$1,100

Fund 090 Dept 053			2011	2012	2012	2013
			Actual	Original	Projected	Budget
363	10	GIFTS AND DONATIONS	\$18,651	\$10,000	\$15,000	\$10,000
369	41	TELEPHONE TOLL REIMB	\$0	\$0	\$0	\$0
369	90	OTHER MISC. REVENUE	\$23,934	\$0	\$4,023	\$0
		MISCELLANEOUS	\$44,093	\$11,250	\$20,023	\$11,100
371	89	FROM PUBLIC HLTH FUND 089	\$0	\$0	\$0	\$0
		REVENUE TOTALS	\$4,116,528	\$4,060,124	\$4,068,897	\$4,240,206
511	2	APPOINTED OFFICIAL SALARY	\$116,414	\$120,946	\$120,946	\$125,179
511	3	REG. FULL-TIME EMPLOYEES	\$195,605	\$167,360	\$167,361	\$173,842
511	11	MERIT PAY	\$0	\$0	\$0	\$0
511	24	JOINT DEPT REG EMPLOYEE	\$30,735	\$67,832	\$67,857	\$71,224
513	1	SOCIAL SECURITY-EMPLOYER	\$24,449	\$27,627	\$27,627	\$28,350
513	2	IMRF - EMPLOYER COST	\$33,645	\$36,366	\$36,366	\$38,000
513	4	WORKERS' COMPENSATION INS	\$1,510	\$1,589	\$1,589	\$1,975
513	5	UNEMPLOYMENT INSURANCE	\$2,479	\$2,680	\$3,093	\$3,650
513	6	EMPLOYEE HEALTH/LIFE INS	\$33,578	\$37,500	\$37,061	\$42,250
513	20	EMPLOYEE DEVELOPMNT/RECOG PERSONNEL	\$0	\$0	\$0	\$0
			\$438,415	\$461,900	\$461,900	\$484,470
522	1	STATIONERY & PRINTING	\$0	\$1,000	\$1,000	\$1,000
522	2	OFFICE SUPPLIES	\$3,045	\$3,000	\$3,000	\$3,250
522	3	BOOKS,PERIODICALS & MAN.	\$149	\$500	\$500	\$500
522	4	COPIER SUPPLIES	\$708	\$500	\$500	\$1,000
522	6	POSTAGE, UPS, FED EXPRESS	\$5,004	\$5,000	\$5,000	\$4,250
522	22	MAINTENANCE SUPPLIES	\$0	\$0	\$0	\$0
522	44	EQUIPMENT LESS THAN \$1000 COMMODITIES	\$1,769	\$5,000	\$5,000	\$5,000
			\$10,675	\$15,000	\$15,000	\$15,000
533	7	PROFESSIONAL SERVICES	\$168,079	\$200,000	\$197,925	\$225,000
533	12	JOB-REQUIRED TRAVEL EXP	\$1,555	\$4,000	\$4,000	\$4,000
533	19	SCHOOLNG TO OBTAIN DEGREE	\$0	\$0	\$0	\$0
533	20	INSURANCE	\$4,623	\$4,500	\$5,000	\$5,000
533	29	COMPUTER/INF TCH SERVICES	\$2,416	\$2,465	\$3,425	\$4,385
533	33	TELEPHONE SERVICE	\$1,612	\$1,800	\$1,925	\$1,925
533	42	EQUIPMENT MAINTENANCE	\$943	\$750	\$750	\$750
533	50	FACILITY/OFFICE RENTALS	\$23,957	\$24,525	\$24,575	\$25,542
533	51	EQUIPMENT RENTALS	\$611	\$650	\$650	\$650
533	70	LEGAL NOTICES,ADVERTISING	\$63	\$150	\$150	\$150
533	72	DEPARTMENT OPERAT EXP	\$129	\$200	\$200	\$200
533	73	EMPLOYEE/OFFC RELOCATION	\$0	\$0	\$0	\$0
533	84	BUSINESS MEALS/EXPENSES	\$1,174	\$1,500	\$1,500	\$1,500
533	85	PHOTOCOPY SERVICES	\$3,242	\$3,200	\$3,540	\$3,540
533	88	CONTRIB & GRANTS-CAP IMPR	\$0	\$0	\$0	\$0
533	89	PUBLIC RELATIONS	\$46,585	\$50,000	\$55,000	\$55,000

Fund 090 Dept 053			2011	2012	2012	2013
			Actual	Original	Projected	Budget
533	92	CONTRIBUTIONS & GRANTS	\$3,202,658	\$3,242,984	\$3,242,984	\$3,359,094
533	93	DUES AND LICENSES	\$25,000	\$26,500	\$26,500	\$26,500
533	95	CONFERENCES & TRAINING	\$7,441	\$15,000	\$15,000	\$22,500
533	99	CONTINGENT EXPENSE	\$0	\$0	\$0	\$0
534	37	FINANCE CHARGES,BANK FEES	\$43	\$0	\$100	\$0
534	59	JANITORIAL SERVICES	\$0	\$0	\$0	\$0
534	70	BROOKNS BLDG REPAIR-MAINT SERVICES	\$0	\$0	\$0	\$0
			\$3,490,131	\$3,578,224	\$3,583,224	\$3,735,736
544	33	FURNISHINGS, OFFICE EQUIP CAPITAL	\$3,840	\$5,000	\$5,000	\$5,000
			\$3,840	\$5,000	\$5,000	\$5,000
		EXPENDITURE TOTALS	\$3,943,061	\$4,060,124	\$4,065,124	\$4,240,206

FUND BALANCE

<i>2011 Actual</i>	<i>2012 Projected</i>	<i>2013 Budgeted</i>
\$2,021,009	\$2,024,782	\$2,024,782

Fund Balance Goal: The CCMHB's goal is to maintain a fund balance which assures adequate cash flow necessary to meet contractual and administrative obligations.

EXPENSE PER CAPITA

Actual Dollars

2009	2010	2011	2012	2013
\$19.04	\$20.39	\$20.66	\$20.22	\$21.09

FTE HISTORY

2009	2010	2011	2012	2013
5	5	5	5	5

ALIGNMENT to STRATEGIC PLAN

Goal #1 – Champaign County is a high performing local government committed to open, transparent governance.

- The Champaign County Mental Health Board (CCMHB) usually meets 10 times a year and conducts most business in public open meetings. All funding decisions are made in May with contracts issued in July.

Goal #2 – Champaign County maintains high quality public facilities.

- The CCMHB has offices in the Brookens Administrative Center which are easily accessible to the public.

Goal #3 – Champaign County promotes a safe and healthy community.

- The CCMHB funds behavioral health services, anti-stigma initiatives, and supports wellness programming for people with disabilities.

Goal #4 – Champaign County is a county that supports balanced growth.

- The CCMHB budget is used in accordance with the Community Mental Health Act and the amount of funding available is based on the original mental health referendum.

DESCRIPTION

The Champaign County Mental Health Board (CCMHB) has been established under Illinois Revised Statutes (Ch. 91-1/2, Sections 301-314, inclusive) in order to "construct, repair, operate, maintain and regulate community mental health facilities to provide mental health services as defined by the local community mental health board, including services for the developmentally disabled and for the substance abuser, for residents of Champaign County." The CCMHB is responsible for planning, coordinating, evaluating, and allocating funds for the comprehensive local system of mental health, developmental disabilities, and substance abuse services for Champaign County. It is our intent to promote family-friendly community support networks for the at-risk, underserved and general populations of Champaign County; to increase support for the local system of services from public and private sources; and to further develop the systematic exchange of information about local services and needs between the public/private service systems and the CCMHB. In order to accomplish these purposes, the Champaign County Mental Health Board must collaborate with the public and private sectors in providing the resources necessary for the effective functioning of the community mental health system.

OBJECTIVES

Objective #1: Maintain efforts to implement a system-of-care (i.e., ACCESS Initiative) for children and adolescents with serious emotional disturbance, as outlined in our cooperative agreement with the Substance Abuse and Mental Health Services Administration. For FY13, it is our intent to implement an evidence based practice (Parenting with Love and Limits) to increase continuity and provide structure to support program integration with the Wraparound Initiative. This program (i.e. PLL) also serves as a major portion of the required match for the SAMHSA Cooperative Agreement.

Objective #2: For Year Four of the six year cooperative agreement, facilitate the implementation of the Federal Children's Initiative Cooperative Agreement with the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Illinois Department of Human Services.

Objective #3: Underwrite the integration strategies related to working directly with juvenile justice stakeholders, to assure alignment between the Quarter Cent for Public Safety Post-Detention program and programs and services funded to continue implementation of the ACCESS Initiative. This program will be incorporated with the SAMHSA cooperative agreement.

Objective #4 Address issues related to State of Illinois Funding Cuts and slow payment policies: Develop policies and procedures to assure fiscal accountability for CCMHB dollars tied to co-funded programs. The primary focus is related to programs which are also funded by revenue from the State of Illinois. Utilize the new on-line application and reporting system to effectively track all objectives pertaining to this goal. Prioritize services along the service continuum in response to changes in state funding. Realign funding to support high priority programs in response to contract cuts or reserve percentage in state funding.

Objective #5: Implement a revised Intergovernmental Agreement between the CCMHB and CCDDDB. Continue integration strategies to assure alignment between the CCDDDB and developmental disabilities programs and services funded by the CCMHB. Collaborate with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability on co-funded programs. Implement mutually acceptable options for realignment of funding within the developmental disability service continuum. In response to unilateral financing and eligibility changes by the State of Illinois, develop revenue maximization strategies to assure an appropriate mix of state and local funding and continued availability of services for Champaign County consumers. Regular quarterly meetings take place between the executive director and the presidents of the two Boards.

Objective #6: Address stigma pertaining to people with mental illness, developmental disabilities, and substance use disorders. Stigma refers to negative attitudes and beliefs which result in fear, rejection, avoidance, and discrimination against people with disabilities. Continue and expand anti-stigma and inclusion efforts for people with disabilities: Reduce the stigma associated with mental illness, substance use disorders, and developmental disabilities by sponsoring projects and events designed to address discrimination related to stigma, as well as to promote acceptance, dignity, and social inclusion. Promote, fund, participate in and sponsor the Disability Resource Expo and the Roger Ebert Film Festival in order to improve disability awareness, increase inclusiveness, improve community acceptance, and reduce stigma and discrimination. Use these events to energize community support for funding for disabilities programs and services.

Objective #7: During FY13, reinforce our support and expansion of Specialty Courts in Champaign County: Maintain support and involvement in the Champaign County Drug Court and the Champaign County Mental Health Court and support access to treatment for eligible clients. Maintain and comply with the terms and conditions of memoranda of understanding.

Objective #8: Expand cultural competence efforts: Prioritize FY13 funding for cultural competence staff and/or consultation as delineated in the SAMHSA application. Continue to track agencies'

progress on implementation of cultural competence plans and support efforts to address issues raised in the Surgeon General’s Report Mental Health: Race, Culture and Ethnicity.

Objective #9: Develop and promulgate CCMHB funding priorities and decision support criteria for the FY14 funding cycle. Maintain program and financial accountability of funded programs. Implement new audit requirements and protocols to address the gaps created by changes in the State of Illinois audit threshold requirements. Maintain an online application and reporting system across all funding sources to streamline the application process and program reporting, including collection of client data, and assess potential for expansion of such a system for performance measure outcome evaluation.

Objective #10 Collaborate with other members of our trade association (i.e., ACMHAI) to explore using local dollars to secure Medicaid reimbursement: As practicable, implement Medicaid claiming (Part 77 & Part 132), including a redirection of capacity and conversion of fee for service rates to the Medicaid rates as necessary.

Objective #11: Intensify advocacy efforts: Advocate for positive change in state funding and policy decisions affecting the local system of care for persons with mental or emotional or substance use disorders or developmental disabilities. Support, through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), the National Association of County Behavioral Health and Developmental Disabilities Directors, the Illinois Council on Developmental Disabilities, the Illinois Association of Rehabilitation Facilities (IARF), the ARC of Illinois, the Illinois Alcohol and Drug Dependence Association (IADDA) and other appropriate bodies efforts to strengthen the local systems of care.

Objective #12: Update and fully implement all elements of CCMHB Three-Year Plan.

PERFORMANCE INDICATORS

INDICATOR	2011 Actual	2012 Projected	2013 Budgeted
Completion of annual funding priorities	11/10	11/11	November 2012
Notice of Funding availability	12/10	12/11	December 2012
Completion of application instructions	1/10	1/11	January 2013
Completion of Three Year Plan and/or update	11/10	11/11	November 2012
Number of contracts (MH – DD-SA-QC)	47	47	47
Total Number of MHB Meetings	12	12	12
Total Onsite Monitoring Visits by contract	47	47	47
Quarterly Reports from Contractors	188	188	188
SAMHSA Child Initiative Match	met	met	met
SAMHSA Child initiative Implementation	yes	yes	yes
Joint Planning with the CCDDDB	Quarterly	Quarterly	Quarterly
Parenting with Love and Limits (capacity)	228 youth	228 youth	228 youth

CHAMPAIGN COUNTY BOARD FOR CARE AND TREATMENT OF PERSONS WITH A DEVELOPMENTAL DISABILITY – 108-050



MISSION STATEMENT

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

BUDGET HIGHLIGHTS

We anticipate a slight reduction in revenue during FY13 and this will leave funding for developmental disabilities programs and services relatively flat. As a result there will not be new initiatives, but modest redirection of effort to support CCDDB priorities and to the extent possible address the myriad of problems associated with state funding policies. State of Illinois funding cuts and payment delays will be destructive to core services and will require us consider program plan for contract amendments to address service gaps.

FINANCIAL

Fund 108 Dept 050			2011	2012	2012	2013
			Actual	Original	Projected	Budget
311	19	CURR PROP TX-DISABILTY BD	\$3,566,727	\$3,673,507	\$3,673,507	\$3,580,082
313	19	RE BACKTAX-DISABILITY BD	\$1,307	\$0	\$0	\$500
314	10	MOBILE HOME TAX	\$3,827	\$0	\$0	\$1,000
315	10	PAYMENT IN LIEU OF TAXES	\$2,144	\$0	\$0	\$1,000
		PROPERTY TAXES	\$3,574,005	\$3,673,507	\$3,673,507	\$3,582,582
361	10	INVESTMENT INTEREST	\$1,048	\$4,000	\$700	\$500
363	10	GIFTS AND DONATIONS	\$0	\$0	\$0	\$0
369	90	OTHER MISC. REVENUE	\$0	\$0	\$0	\$0
		MISCELLANEOUS	\$1,048	\$4,000	\$700	\$500
REVENUE TOTALS			\$3,575,053	\$3,677,507	\$3,674,207	\$3,583,082

Fund 108 Dept 050			2011	2012	2012	2013
			Actual	Original	Projected	Budget
513	2	IMRF - EMPLOYER COST	\$0	\$0	\$0	\$0
533	7	PROFESSIONAL SERVICES	\$337,183	\$292,575	\$292,575	\$317,517
533	33	TELEPHONE SERVICE	\$0	\$0	\$0	\$0
533	88	CONTRIB & GRANTS-CAP IMPR	\$0	\$0	\$0	\$0
533	89	PUBLIC RELATIONS	\$0	\$0	\$0	\$0
533	92	CONTRIBUTIONS & GRANTS SERVICES	\$3,212,895	\$3,382,807	\$3,382,807	\$3,265,565
			\$3,550,078	\$3,675,382	\$3,675,382	\$3,583,082
EXPENDITURE TOTALS			\$3,550,078	\$3,675,382	\$3,675,382	\$3,583,082

FUND BALANCE

<i>2011 Actual</i>	<i>2012 Projected</i>	<i>2013 Budgeted</i>
\$1,530,285	\$1,519,451	\$1,519,451

Fund Balance Goal: The CCDDDB's goal is to maintain a fund balance which assures adequate cash flow that is necessary to meet contractual and administrative obligations.

EXPENSE PER CAPITA

Actual Dollars

2009	2010	2011	2012	2013
\$17.80	\$18.05	\$18.33	\$18.28	\$17.82

ALIGNMENT to STRATEGIC PLAN

Goal #1 – Champaign County is a high performing local government committed to open, transparent governance.

- The Champaign County Developmental Disabilities Board (CCDDDB) conducts business in open public meetings during the course of the year. Funding decisions are made in May with contracts issued in July.

Goal #2 – Champaign County maintains high quality public facilities.

- The CCDDDB offices are located in the Brookens Administrative Center and are easily accessible to the public.

Goal #3 – Champaign County promotes a safe and healthy community.

- The CCDDDB funds a variety of programs and services for people with developmental disabilities.

- The board sponsors a Disabilities Expo which occurs every October as a means of improving the health, safety and quality of life for people with disabilities.

Goal #4 – Champaign County is a county that supports balanced growth.

- The CCDDDB allocates dollars in accordance with statute and is based on the public referendum which was passed in November 2004.

DESCRIPTION

The Champaign County Developmental Disabilities Board (CCDDDB) has been established by referendum and operates under the requirements of the County Care for Persons with Developmental Disabilities Act (55ILCS 105/Section 0.01 et.seq.). All funds shall be allocated within the intent of the controlling act as codified in the laws of the State of Illinois. The CCDDDB is responsible for planning, coordinating, monitoring, evaluating, and funding a comprehensive community based system of developmental disabilities programs and services. Applications for funding are assessed using CCDDDB established decision support criteria and are subject to the availability of funds. The nature and scope of applications vary significantly and typically include treatment, early intervention, prevention programs, and family support. Final funding decisions rest with the CCDDDB and their best judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs and decision-support match up.

OBJECTIVES

Objective #1: Work closely with providers to mitigate the harmful State of Illinois budget cuts by maximizing service capacity in prioritized programs. Develop policies and procedures to assure fiscal accountability for CCDDDB dollars tied to co-funded programs. The primary focus is related to programs which are also funded by revenue from the State of Illinois. Utilize the new online application and reporting system to track all objectives pertaining to this goal. Identify each CCDDDB funded contract that budgets state revenue as part of program revenue and develop mechanisms to track the level of state payments during the term of the contract. Clarify how CCDDDB dollars are used in each co-funded contract and develop policies to assure that reductions in state contract maximums are not supplanted by CCDDDB dollars. Evaluate risk for loss of co-supported services resulting from state funding reductions. Prioritize services along the service continuum in response to changes in state funding. Realign funding to support high priority programs in response to contract cuts or reserve percentage in state funding.

Objective #2: Expand cultural competence efforts: Continue to track agencies' progress on implementation of cultural competence plans and support efforts to address issues raised in the Surgeon General's Report Mental Health: Race, Culture and Ethnicity. Emphasize person-centered or consumer-driven planning efforts, promoting self-directed and culturally appropriate individualized service plans within the five categories of services and populations described below.

Objective #3: Continue and expand anti-stigma and inclusion efforts for people with disabilities: Reduce the stigma associated with developmental disabilities by sponsoring projects and events designed to address discrimination related to stigma, as well as to promote acceptance, dignity, and social inclusion. Promote, fund, participate in, and sponsor the Disability Resource Expo and the Roger

Ebert Film Festival in order to improve disability awareness, increase inclusiveness, improve community acceptance, and reduce stigma and discrimination. Use these events to energize community support for funding for disabilities programs and services. Encourage consumer groups' community education efforts to reduce stigma and coordinate with ACCESS Initiative social marketing activities as feasible.

Objective #4: Maintain capacity of vocational training for people with developmental disabilities seeking services which include assessment, exploration and enhancement of interests and abilities, instruction in job tasks and problem solving, assistance in establishing a vocational direction and objective, and support for customized employment opportunities.

Objective #5: Maintain capacity of residential service options for people with developmental disabilities in danger of being removed from their home community or of becoming homeless, to include sustained group home capacity, emergency residential support for families, assisted living for medically fragile individuals, in-home supports and/or respite services, and a range of supports and services for individuals living in the most integrated settings.

Objective #6: Maintain capacity of flexible family support for people with developmental disabilities and their families to enhance their ability to live together. The intent is to allow consumer families to determine the process of providing care and support for a family member by allocating funds for a variety of services including family respite, assistive technology, transportation, household needs, and recreational activities.

Objective #7: Maintain capacity of comprehensive services for young children with developmental delays, a service array which addresses all areas of development and is coordinated, home-based, and responsive to the needs of the entire family. Early identification of children with developmental delays can be achieved through consultation with child care providers and pre-school educators.

Objective #8: Maintain capacity of adult day programs for people with severe cognitive impairments with behavioral challenges and who may have significant physical limitations. Services provided should include: functional academic skills training, communications skills development, occupational therapy, fitness training, vocational training, personal care instruction/support, community integration opportunities, independent living skills training, and social skills training.

Objective #9: Support the continued awareness and understanding of developmental disabilities through sustainable consumer advocacy and family support organizations, especially those comprising parents of and persons with the most prevalent developmental disabilities of intellectual disabilities and autism spectrum disorders.

Objective #10: Intensify advocacy efforts on behalf of people with developmental disabilities: Advocate for positive change in state funding and policy decisions affecting the local system of care for persons with developmental disabilities. Support, through active participation in the Association of Community Mental Health Authorities of Illinois (ACMHAI), the National Association of County Behavioral Health and Developmental Disabilities Directors, the Illinois Council on Developmental Disabilities, the ARC of Illinois, the Illinois Association of Rehabilitation Facilities (IARF), and other appropriate bodies, efforts to strengthen the local systems of care. Continue to promote effective methods of engaging consumer and family groups in advocacy, including parent groups currently funded, and

coordinate with ACCESS Initiative as feasible. Statewide and locally, explore and promote service system redesign efforts consistent with recommendations of the Blueprint for System Redesign in Illinois. Follow developments, at the state and federal levels, of Olmstead and Olmstead-related cases, particularly regarding new initiatives.

Objective #11: Strengthen the relationship between the CCDDDB and the Champaign County Mental Health Board: Collaborate with the Champaign County Mental Health Board on co-funded programs. Implement mutually acceptable options for realignment of funding within the developmental disability service continuum. In response to unilateral financing and eligibility changes by the State of Illinois, develop revenue maximization strategies to assure an appropriate mix of state and local funding and continued availability of services for Champaign County consumers. Ensure compliance with existing Memoranda of Understanding (MOU), e.g. support initiatives extending from the agreements, and enter into new agreements as may be necessary to respond to local service issues or state funding adjustments.

Objective #12: Develop and promulgate CCDDDB funding priorities and decision support criteria for the FY13 funding cycle. We are exploring the possibility of a community wide needs assessment co-sponsored by the CCDDDB, CCMHB, and ACMHAI to identify current issues affecting consumer access and treatment. Continue to assess the impact of state funding reductions on consumer access to care and provider capacity. Participate in other county-wide assessment activities to ensure CCDDDB target populations are represented. Track Illinois Department of Human Services Division of Developmental Disabilities' Prioritization of Urgency of Need for Services (PUNS) database for state and local trends and to ensure full representation of the service preferences of Champaign County residents. Using Child and Family Connections data for Champaign County, track the identification of developmental delay and disability among children, Birth to 3, and engagement in Early Intervention and Prevention services.

PERFORMANCE INDICATORS

INDICATOR	2011 Actual	2012 Projected	2013 Budgeted
Completion of annual funding priorities	11/10	11/11	November 2011
Notice of Funding availability	12/10	12/11	December 2011
Completion of application instructions	1/11	1/12	January 2013
Completion of Three Year Plan and/or update	11/10	11/11	November 2011
Number of service provision contracts	16	14	14
Total Number of DDB Meetings	8	8	8
Total Onsite Monitoring Visits by contract	12	16	14
Quarterly Reports from Contractors	52	56	56
Joint Planning with the CCMHB	Quarterly	Quarterly	Quarterly
Total amount contract maximums	\$3,155,683	\$3,185,683	\$3,258,396

ACCESS INITIATIVE GRANT – 641-053

Project Director – ACCESS Initiative

BUDGET HIGHLIGHTS

All revenue pertaining to this budget is from a six year grant from the Illinois Department of Human Services (DHS). The source of this funding is a Substance Abuse and Mental Health Services Administration (SAMHSA) Children’s Initiative Cooperative Agreement. We anticipate an increase in revenue during FY13 as defined by the contract payment schedule, but will drop off to lower levels in FY14 and FY15. The increased level of funding will be dedicated to implementation of family-driven, youth-guided, strength-based, culturally competent, trauma and justice informed Wraparound services targeted on youth with Serious Emotional Disturbance (SED) involved in the juvenile justice system. These services shall be delivered through contract with community based providers. Funding will also be used to contract for the development of a centralized point of entry into the service delivery system, a centralized information and data management system, and development of strength-based service plans.

FINANCIAL

Fund 641 Dept 053			2011	2012	2012	2013
			Actual	Original	Projected	Budget
331	94	HHS-MNT HTH SRV FOR CHLDN FEDERAL, STATE & LOCAL SHARED REVENUE	\$901,570 \$901,570	\$1,502,531 \$1,502,531	\$1,478,424 \$1,478,424	\$1,478,424 \$1,478,424
361	10	INVESTMENT INTEREST	\$764	\$0	\$325	\$0
363	10	GIFTS AND DONATIONS	\$2,500	\$0	\$0	\$0
369	90	OTHER MISC. REVENUE MISCELLANEOUS	\$26 \$3,290	\$0 \$0	\$28,105 \$28,430	\$0 \$0
REVENUE TOTALS			\$904,860	\$1,502,531	\$1,506,854	\$1,478,424
511	2	APPOINTED OFFICIAL SALARY	\$0	\$0	\$0	\$0
511	3	REG. FULL-TIME EMPLOYEES	\$333,169	\$350,410	\$179,750	\$89,134
511	24	JOINT DEPT REG EMPLOYEE	\$6,183	\$13,463	\$13,498	\$14,138
513	1	SOCIAL SECURITY-EMPLOYER	\$25,338	\$28,219	\$14,780	\$7,900
513	2	IMRF - EMPLOYER COST	\$34,364	\$37,145	\$19,451	\$10,637
513	4	WORKERS' COMPENSATION INS	\$1,495	\$1,623	\$1,173	\$516
513	5	UNEMPLOYMENT INSURANCE	\$4,064	\$3,752	\$2,614	\$750
513	6	EMPLOYEE HEALTH/LIFE INS PERSONNEL	\$42,096 \$446,709	\$54,600 \$489,212	\$20,200 \$251,466	\$8,000 \$131,075

Fund 641 Dept 053			2011	2012	2012	2013
			Actual	Original	Projected	Budget
522	1	STATIONERY & PRINTING	\$195	\$6,000	\$6,000	\$2,500
522	2	OFFICE SUPPLIES	\$12,097	\$9,000	\$9,000	\$5,000
522	3	BOOKS,PERIODICALS & MAN.	\$155	\$750	\$750	\$500
522	4	COPIER SUPPLIES	\$3,057	\$1,500	\$1,500	\$1,500
522	6	POSTAGE, UPS, FED EXPRESS	\$85	\$3,500	\$3,500	\$1,000
522	44	EQUIPMENT LESS THAN \$1000 COMMODITIES	\$24,845 \$40,434	\$10,000 \$30,750	\$10,000 \$30,750	\$10,000 \$20,500
533	1	AUDIT & ACCOUNTING SERVCS	\$5,715	\$5,000	\$5,750	\$6,000
533	7	PROFESSIONAL SERVICES	\$33,813	\$75,000	\$73,050	\$30,000
533	12	JOB-REQUIRED TRAVEL EXP	\$3,460	\$7,500	\$7,500	\$4,000
533	18	NON-EMPLOYEE TRAINING,SEM	\$29,174	\$30,000	\$30,000	\$25,000
533	20	INSURANCE	\$4,621	\$3,500	\$3,500	\$4,750
533	29	COMPUTER/INF TCH SERVICES	\$1,394	\$1,500	\$1,500	\$1,500
533	33	TELEPHONE SERVICE	\$8,963	\$12,600	\$12,600	\$9,000
533	42	EQUIPMENT MAINTENANCE	\$50	\$1,000	\$1,000	\$1,000
533	50	FACILITY/OFFICE RENTALS	\$19,031	\$19,500	\$19,500	\$9,945
533	51	EQUIPMENT RENTALS	\$680	\$690	\$690	\$708
533	70	LEGAL NOTICES,ADVERTISING	\$150	\$1,000	\$1,000	\$500
533	84	BUSINESS MEALS/EXPENSES	\$19,182	\$35,000	\$35,000	\$15,000
533	85	PHOTOCOPY SERVICES	\$12,721	\$15,000	\$15,000	\$5,000
533	89	PUBLIC RELATIONS	\$25,736	\$15,000	\$15,000	\$15,000
533	92	CONTRIBUTIONS & GRANTS	\$549,932	\$684,529	\$1,422,275	\$1,171,546
533	93	DUES AND LICENSES	\$1,050	\$2,500	\$2,500	\$2,500
533	95	CONFERENCES & TRAINING	\$52,914	\$65,000	\$65,000	\$20,000
534	37	FINANCE CHARGES,BANK FEES	\$342	\$750	\$750	\$400
534	69	PARENT ACTIVITIES/TRAVEL	\$309	\$2,500	\$2,500	\$0
534	81	GENERAL LIABILITY CLAIMS SERVICES	\$0 \$769,237	\$0 \$977,569	\$1,200 \$1,715,315	\$0 \$1,321,849
544	33	FURNISHINGS, OFFICE EQUIP CAPITAL	\$1,350 \$1,350	\$5,000 \$5,000	\$5,000 \$5,000	\$5,000 \$5,000
EXPENDITURE TOTALS			\$1,257,730	\$1,502,531	\$2,002,531	\$1,478,424

FUND BALANCE

<i>2011</i>	<i>2012</i>	<i>2013</i>
<i>Actual</i>	<i>Projected</i>	<i>Budgeted</i>
\$433,282	- \$62,395	-\$62,395

Fund Balance Goal: The ACCESS Initiative's revenue received from the Illinois Department of Human Services (DHS) is based on a reimbursement methodology, and because of this arrangement the point-in-time fund balance projections manifest radical shifts. It is the policy of the CCMHB to maintain fund

balances which are adequate to meet contractual and administrative obligations, and our reimbursement process is fully compliant with policy.

ALIGNMENT to STRATEGIC PLAN

Goal #1 – Champaign County is a high performing local government committed to open, transparent governance.

- The ACCESS Initiative is supported by grant funds received from the federal Substance Abuse and Mental Health Services Administration and the Illinois Department of Human Services. The project has a coordinating council which acts for the community in an advisory capacity.

Goal #2 – Champaign County maintains high quality public facilities.

- The ACCESS Initiative has offices in the Brookens Administrative Center and is easily accessible to the public. Other direct service offices are located in facilities which are convenient to the public.

Goal #3 – Champaign County promotes a safe and healthy community.

- ACCESS Initiative supports community activities during Children’s Mental Health month, and provides services to youth at high risk for involvement with the juvenile justice system.

Goal #4 – Champaign County is a county that supports balanced growth.

- All funding for this project is grant based. The match requirement is a combination of funding from the CCMHB and in-kind sources within the community.

DESCRIPTION

The ACCESS Initiative will facilitate development of a sustainable system of care to address the needs, strengths, and risks of children and their families; to restore youth to healthy living at home, in school, and in their community; to end the disproportional systems involvement of African American children; and to ensure that every child's family has the resources to fulfill their potential for healthy and productive lives. Through the ACCESS Initiative, the Illinois Department of Human Services/Division of Mental Health, together with youth, families, and child-serving agencies in Champaign County, will increase capacity to serve children and youth with serious emotional disturbances (SED) and their families by transforming the county's services into an integrated network of community-based services and supports that are trauma, justice, and evidence informed, family-driven, youth-guided and culturally responsive.

Having begun in 2002 local efforts to develop more coordinated mental health services, this Initiative will help the county expand its capacity to serve youth and their families, including a targeted population that is disproportionately over-represented in all of the state’s child-serving systems by annually serving 200 youth with SED, who additionally are African American, age 10-18 and involved with (or at risk of involvement with) the juvenile justice system. To achieve this vision, services will be delivered through individualized, comprehensive plans of care, guided by the strengths and needs of the youth and family, supported by trained Family Mentors and Youth Advocates who will work with families to construct comprehensive family care plans to help the family achieve their goals across all life domains and child-serving systems.

Champaign County has been mentored by McHenry County Family CARE, a currently-funded Children's Mental Health Initiative site, and other systems of care communities.

The implementation plan includes restructuring of the fiscal system, plans to increase the cultural competence of local providers and leaders, the creation of a care coordination process which involves Wraparound and Advocacy, social marketing strategies, infrastructure building activities (designed to create more trauma- and justice-informed, family driven, youth guided, and culturally responsive policies, procedures, and practices), expansion of evidence-based and practice based interventions, programs and services, and a transformation of “funding to follow the child” rather than “funding to follow the program”. These strategies will increase capacity, quality, and access for under-served youth to be effective, efficient, culturally responsive and sustainable.

OBJECTIVES

1. Building a sustainable and replicable service delivery system and infrastructure that reflects SOC, trauma- and justice-informed values and principles.
 - Providing training and technical assistance to broaden and deepen the community’s, stakeholders, youth and families understanding of Systems of Care and trauma- and justice-informed values and principles. (Approach includes creating learning cohorts, utilizing first adoptors, and providing mentors/coaches.)
 - Working with local agencies to fully integrate Cultural Competency in all agency plans. 25% of organizations or agencies partnering with ACCESS will have its cultural competency goals clearly articulated in their program plan.
 - Building, reviewing, and updating the sustainability plan to identify an additional 10% in matching funds (both cash and in-kind).
 - Developing MOUs and letters of collaboration between Partner Agencies, members of the Coordinating Council, and Community Partners to solidify their commitment to support this transformation effort.

2. Providing families and youth access to trauma- and justice-informed services and supports that reflect SOC values and principles by prioritizing the expansion and the utilization of high fidelity Wraparound and Community Advocacy.
 - Expanding the availability of restorative justice options (Restorative Circles or Peer Juries at schools and community organizations, etc.) with input from stakeholders, the community, youth, and families.
 - Participating in the National Community Day of Healing, Children’s Mental Health Awareness Month, African American Mental Health Awareness Month, and other Initiatives designed to promote community healing, wellness, and recovery.
 - Creating venues to host strategic ‘community and educational campaigns’ focusing on restorative justice.

3. Increasing youth, family, and community leadership and engagement across all levels (i.e., structural, systems, organizational, and practice) demonstrated through the establishment of a vibrant and dynamic Youth and Family Leadership structure.
 - Broadening and deepening family and youth opportunities to engage in meaningful work within the System of Care by increasing the availability of jobs for youth and families with our service delivery network.
 - Broadening and deepening the Family and Youth Network (the family and youth leadership infrastructure).
 - Maintaining and deepening participation and involvement of youth and families on the Coordinating Council.
 - Developing and implementing strategic social marketing for youth, families, and faith based network and community organizations to increase youth, family, and community participation in ACCESS.

4. Extending the capacity of organizations, agencies, informal supports, and systems to strategically improve outcomes for youth and families through the adoption of more evidence informed, trauma and justice informed policies, procedures, and practices with a goal of reducing disparities and the number of youth who have adverse and sustained contacts with the juvenile justice, child welfare, and alternative school systems.
 - Realigning Fiscal Strategies to support a broader service array and expanded evidence-based practices and programs.
 - Continuing to broaden and deepen capacity to deliver Evidence Informed Practices focusing on the needs of youth with trauma histories, co-occurring conditions, and developmental disabilities.
 - Solidifying training requirements for front-line providers, supervisors, and staff; developing a certification process for those who demonstrate competencies as Wraparound and/or Family Partners.
 - Linking and coordinating the evidence based Parenting with Love and Limits (PLL) program with the Wraparound services system.
 - Creating and distributing a quarterly community report card in an effort to monitor their fidelity to evidence-based practice models, SOC principles, consumer feedback, and trauma and justice principles.

5. Promoting authentic cross system/ collaboration and communication in an effort to create a seamless service and support array that will effectively meet the needs of youth with social, emotional, and behavioral challenges and their families.
 - Continuing to build upon the Management Information System (MIS) and refine as needed.
 - Refining reporting requirements and Wraparound plan review procedures to provide 'real' feedback to families, youth, providers, and stakeholders.
 - Continuing to expand ACCESS-ALL (the full partnership) to include broader community input and participation

6. Expanding the community’s capacity to understand mental health, to meaningfully participate in our system of care transformation effort, and the availability of healing and restorative options for youth, families, providers, and the community.
 - Working with two local agencies to adopt a trauma-informed organizational model (i.e. Sanctuary).
 - Expanding the availability and utilization of trauma-focused treatments and supports. Training will be offered to providers interested in trauma-focused Cognitive Behavioral Therapy (CBT), Structured Psychotherapy for Adolescents Responding to Chronic Stress (SPARCS), and other trauma-informed treatment practices.
 - Forming a working group and completing our conflict management policies and procedures which are trauma- and justice-informed.
 - Using Public Education and targeted Social Marketing campaigns to mobilize and prioritize the issue of addressing racial disparities and stigma related to juvenile justice and mental health.
 - Utilizing National, Regional and Statewide technical assistance and training resources to help educate the community and shape the development of our community’s strategic plan that focuses on addressing racial disparities.
 - Piloting a Universal Screening Tool in 4 community-based service organizations in preparation for use throughout the community.
 - Identifying a coordinator charged with organizing and coordinating our community wide prevention and intervention campaigns.

7. Encouraging rigorous evaluation with a commitment to continuous quality improvement to meet and/or exceed local benchmarks, IPP indicators, and National Evaluation requirements.
 - Continuing to recruit families into the National Evaluation and work closely with the Social Marketing Coordinator to disseminate our outcome data widely throughout the community.
 - Implementing local evaluation activities as reflected in and designed with the Evaluation Collaboration Team (e.g., organizational assessment, ongoing fidelity assessment) and Continuous Quality Improvement (CQI) processes.
 - Implementing the National Evaluation and maintaining all necessary reporting and communication with ICF Macro, the company which contracts with SAMHSA for the national evaluation.

PERFORMANCE INDICATORS

INDICATOR	2011 Actual	2012 Projected	2013 Budgeted
Completion of annual funding priorities	11/2010	11/2011	11/2012
Completion of SAMHSA reporting	yes	yes	as required
Number of contracts for services	N/A	14	14
Total Number of MHB Meetings	12	12	12

Total Onsite Monitoring Visits by contract	N/A	N/A	14
Quarterly Reports from Contractors	N/A	N/A	56
SAMHSA Child Initiative Match Met	N/A	yes	yes
Compliance with SAMHSA requirements	Met	Met	yes

Fund Balance Goal: The CCMHB's goal is to maintain a fund balance which assures adequate cash flow that is necessary to meet contractual obligations as defined by the Drug Court Steering Committee.

ALIGNMENT TO STRATEGIC PLAN

Goal #1 – Champaign County is a high performing local government committed to open, transparent, governance.

- The Drug Court Fund is used according to guidelines created by the Drug Court Team. The County entered into a memorandum of understanding with the Champaign County Mental Health Board (CCMHB) to assure integration of funding and coordination/alignment.

Goal #2 – Champaign County maintains high quality public facilities.

- The CCMHB administers the Drug Court fund and is located in the Brooken's Administrative Center.

Goal #3 – Champaign County promotes a safe and healthy community.

- The Drug Court Fund is used as part of the CCMHB behavioral health plan for the county.

Goal #4 – Champaign County supports balanced growth.

- The CCMHB allocated Drug Court Fund dollars in accordance with the policies established by the Drug Court Team. In addition, the Drug Court fund has been supplemented by a grant from the U.S. Department of Justice, Office of Justice Programs.

DESCRIPTION

For FY13, the Champaign County Mental Health Board (CCMHB) continues to be a party to the memorandum of understanding with the Champaign County Board to manage and administer all Drug Court fees and donations collected on behalf of the operation of the Drug Court. This is an extension to the CCMHB prioritization of Drug Court and funding for substance abuse services for Drug Court participants. All monies included in this fund shall be used to benefit Drug Court clients with guidelines for use promulgated by the Drug Court Steering Committee. The purpose of these funds shall be to purchase capital equipment for the Drug Court program, provide training to Drug Court team members, pay expenses related to home visits for drug court participants and to pay expenses for drug court participants for medical care, dental care, education, housing, transportation and other incentives as delineated in the guidelines. There have not been changes in these criteria since the onset of this project.

The CCMHB contracts with Prairie Center Health Systems to disburse Drug Court Fees in behalf of Drug Court clients. These disbursements are made under the supervision of and consistent with Drug Court Steering Committee policies for appropriate use of these dollars. In addition, the CCMHB provides funding to support clinical services for Drug Court clients through a separate contract with Prairie Center.

In collaboration with the Drug Court Steering Committee, the CCMHB contracts with Prairie Center Health Systems to provide services as delineated in the Federal Grants Justice Drug Courts Program. This is a two grant for \$100,000 per year.

OBJECTIVES

1. Work in collaboration with Drug Court Team members to maintain and expand Champaign County Drug Court programs and services.
2. Use Drug Court fees and donations to provide incentives and support the clinical progress of Drug Court participants.
3. Assure integration of the Drug Court fees and donations with other CCMHB funded Drug Court contracts.

PERFORMANCE INDICATORS

Indicator	2011 Actual	2012 Projected	2013 Budgeted
Execute FY13 Contracts with Prairie Center	FY11	FY12	Yes
Quarterly Financial Monitoring	4	4	4
Quarterly Participation in DC Team	4	4	4
Compliance with MOU	Yes	Yes	Yes

DELINQUENCY PREVENTION GRANTS – 106-237

BUDGET HIGHLIGHTS

All dollars associated with this budget are used to support juvenile delinquency prevention and intervention programs and services as prioritized by the Quarter Cent for Public Safety Administrative Team (QCAT). This team includes the States’ Attorney, Director of Court Services, Superintendent of the Juvenile Detention Center, the ACCESS Initiative, and representatives of the Champaign County Mental Health Board (CCMHB). The authority to issue Delinquency Prevention Grants is predicated on a memorandum of understanding (MOU) between the Champaign County Board and the Champaign County Mental Health Board. These funds are also designated as match for our Federal Children’s Initiative Cooperative Agreement. The QCAT decided to issue one contract for FY13 for front end court diversion services. This contract will be supplemented by an additional \$26,000 of CCMHB revenue.

The QCAT also provides programmatic oversight and technical assistance for the Parenting with Love and Limits (PLL) evidence based practice funded by the CCMHB.

FINANCIAL

Fund 106 Dept 237			2011 Actual	2012 Original	2012 Projected	2013 Budget
371	46	FROM DELINQ PREV FUND 109	\$0	\$0	\$128,100	\$0
		INTERFUND REVENUE	\$0	\$0	\$128,100	\$0
		REVENUE TOTALS	\$0	\$0	\$128,100	\$0
533	92	CONTRIBUTIONS & GRANTS	\$0	\$0	\$203,116	\$228,380
		SERVICES	\$0	\$0	\$203,116	\$228,380
		EXPENDITURE TOTALS	\$0	\$0	\$203,116	\$228,380

ALIGNMENT to STRATEGIC PLAN

Goal #1 – Champaign County is a high performing local government committed to open, transparent governance.

- The Delinquency Prevention grants are managed by the CCMHB based on a Memorandum of Understanding with the Champaign County Board. All funding decisions are predicated on the recommendations of the Quarter Cent Administrative Team and in accordance with the CCMHB funding guidelines. All funding decisions are made in open public meetings of the CCMHB.

Goal #3 – Champaign County promotes a safe and healthy community.

- The Delinquency Prevention Grants are used to deflect youth from the juvenile justice system and are focused on public safety.

DESCRIPTION

The Quarter Cent for Public Safety funding supporting Juvenile Justice Post-Detention programs is a partnership between the Champaign County Board and the Champaign County Mental Health Board (CCMHB). The terms and conditions of this arrangement are spelled out in a Memorandum of Understanding (MOU) which was executed in December 2005. The Champaign County Board assigned the CCMHB responsibility for management and administration of the Quarter Cent Delinquency Grant funds, with the primary purpose being to reduce recidivism at the Champaign County Juvenile Detention Center and to implement other post-detention programs/services designed to prevent or reduce delinquent behavior through intervention, rehabilitation and prevention services targeted for minors who have committed delinquent acts.

The Champaign County Mental Health Board (CCMHB) is the community mental health, substance abuse and developmental disabilities services authority for Champaign County as delineated in the Illinois Community Mental Health Act (405 ILCS 20 / Section 0.1 et.seq.). It is estimated that approximately 75% of youth involved in the juvenile justice system have behavioral problems related to mental illness or emotional disturbance. The CCMHB has made substantial investments in addressing the needs of children and youth with juvenile justice involvement. The partnership between the Champaign County Board and the CCMHB affords an opportunity for fully integrated planning and a coordinated system of care for these youth. Applications for funding for the Quarter Cent for Public Safety programs/services are assessed using CCMHB established decision support criteria as specified in the MOU and are subject to the availability of funds. Final funding decisions rest with the CCMHB and their judgment concerning the most appropriate and efficacious use of available dollars.

For FY13, planning for the use of Quarter Cent revenue was directed by the Quarter Cent Administrative Team which included the States' Attorney, Director of Court Services, Superintendent of the Juvenile Detention Center and Mental Health Board staff. This team assessed all applications and made recommendations to the CCMHB. The Quarter Cent allocation decisions for FY13 were to support the evidence-based practice (EBP) Parenting with Love and Limits (PLL). Funded projects are aligned with PLL.

1. The primary focus of applications shall relate directly to post detention programming for youth (and their families). The target population in order of priority may include: (a) youth discharged from the Champaign County Juvenile Detention Center; (b) youth released without detention from the JDC; (c) youth detained and station adjusted by local law enforcement agencies; and (d) youth referred directly from the 6th Circuit Court.
2. The application shall describe how the proposed program will reduce the recidivism rate for the target population.
3. The application shall demonstrate alignment with our community's Substance Abuse Mental Health Services Administration (SAMHSA) Children's Initiative application and efforts to implement system-of-care components as delineated in the SAMHSA application and the Shallcross Consultation reports.

4. Programs and services will promote access to underserved populations identified in the Surgeon General's Report on Mental Health: Culture, Race and Ethnicity and the consultation with Carl Bell, MD. In addition, emphasis will be given based on the quality of the applicant's cultural competence plan and progress made toward implementation of the Plan.
5. Programs and services will promote and enhance access to services for all youth included in the target population regardless of where they reside in Champaign County.

OBJECTIVES

Objective #1: Maintain resources to support the PLL project and other programs prioritized by the Quarter Cent Administrative Team with primary focus and target population of this project being post detention programming for youth (and their families). The target population in order of priority may include: (a) youth discharged from the Champaign County Juvenile Detention Center; (b) youth released without detention from the JDC; (c) youth detained and station adjusted by local law enforcement agencies; and (d) youth referred directly from the 6th Circuit.

Objective #2: Expand the project, using CCMHB revenue, to include front-end services for station adjusted youth. The primary goal of the expansion is to divert youth from further penetration in the juvenile justice system and to develop a unified response in all law enforcement jurisdictions in Champaign County.

Objective #3: The desired outcomes of applications shall continue to include the following: reduction of the recidivism rate (i.e., no further arrest or incarceration) for the target population; successful transition and linkage from the JDC to programs and services that support juvenile justice involved youth and their families in order to lessen the likelihood of future incarceration; consistent family engagement and participation in program development processes; and improved school academic and behavioral performance.

Objective #4: All appropriate youth who meet the enrollment criteria and have been served by the Quarter Cent program shall be enrolled in the Champaign County system-of-care program known as the ACCESS Initiative.

Objective #5: All Quarter Cent projects will have the opportunity to participate in the implementation of an evidence-based practice (PLL) to improve the efficacy of services for the full range of youth involved in the juvenile justice system.

PERFORMANCE INDICATORS

INDICATORS	2011 Actual	2012 Projected	2013 Budgeted
Number of Contracts	2	2	1
Total Amount of QC Revenue (est)	\$212,000	\$212,000	\$203,000
On-Site Monitoring Visits	2	2	1
Quarterly Reports from Contractors	8	8	4

Coordination with ACCESS Initiative
Federal Match requirement

Yes
N/A

Yes
Yes

Yes
Yes

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

The 6th annual “Reaching Out For Answers: Disability Resource Expo” will be held on Saturday, October 13, 2012 at Lincoln Square Village in Urbana.

The Expo Steering Committee has met often as we near the date of the event. The energy and commitment of the members of this committee continues to be exemplary. We welcomed a new member to our group last month. Sue Suter has joined the group and has taken on responsibilities related to marketing and sponsorship.

With the Expo slightly more than four weeks away, all activities of the various sub-committees have stepped into high gear. Following is a brief synopsis:

Exhibitors – 73 exhibitors are registered for the 6th annual Expo. We have 8 new exhibitors this year (3 not-for-profit and 5 for-profit). Four of the new for-profit exhibitors came to us as a result of our attendance at the Abilities Expo in Schaumburg in early July. We’re very excited to have these new folks, as they bring some wonderful new technology to the Expo.

We will be receiving a donation of adaptive games from Flaghouse, a mail order company. These games will be the focus of our exhibitor bingo this year, and will allow folks to seek out and try out some very neat adaptive games at various exhibitor booths.

Marketing/Sponsorship – This committee has sent out three different mailings, done follow-up calls, and to date, with cash and pledges, we have raised \$11,000 above what the CCMHB/CCDDB has allocated. An additional \$4,470 of in-kind contributions have also been acquired. We will continue to fundraise up until the event.

Lynn Canfield has been working fast and furiously on development of the 2012 Expo Resource Book which will be distributed to Expo attendees and throughout the coming year. We very much appreciate Lynn taking on this awesome task! This year we offered six special sponsorships to cover the cost of our entertainment, children’s activity room, and the Pride Room. I’m pleased to say that all but one of these six sponsorships has been taken at this point.

We are now ready to begin the huge task of promoting the 2012 Expo. Martin Graphics was chosen as our printer for this year again, due to their large in-kind printing contribution. We currently have posters and tri-fold brochures ready for distribution. We are setting up radio and TV promotion spots, and will be getting yard signs out within two weeks of the event. Please let me know if you live in a high traffic area of the county, and would be willing to put a yard sign up for us.

Accessibility – Sign language interpreters, personal assistants, additional parking for disability access, and much more is handled by this committee. Exhibitors are currently submitting all of their handout materials to be formatted by UIUC-DRES into alternative formats of large print and CD. This will enable all attendees to have equal access to the materials being distributed at the Expo. We will be providing Braille by request only this year.

PRIDE Room – Vickie Tolf from DSC has taken on the awesome responsibility for the PRIDE Room this year. She is working to pull together vendors who will display and sell items such as paintings, photography, jewelry, cards, etc.

Entertainment – The entertainment schedule has been confirmed. It is as follows:

9:30 a.m.	Mayoral Proclamation
9:45 a.m.	AMTRYKE presentation
10:00 a.m.	Donnie Heitler, Jazz Pianist
11:00 a.m.	Mo' Betta Music
12:00 p.m.	Fashion Show by Carlton Bruett Designs
1:00 p.m.	Donnie Heitler, Jazz Pianist
1:45 p.m.	Ebertfest Ticket Drawing/Kindle Fire Drawing

Children's Activities – The Children's Activity Room will be sponsored again this year by First Federal Savings Bank of C-U. This is a very popular area of the Expo, with bounce houses, balloon animals, games, prizes, snacks and much more. We will be using some of the new adaptive games from Flaghouse in this area, as well.

Volunteers – Jen Knapp is coordinating the large number of volunteers who will help with various tasks at the Expo. She's actively recruiting now. We typically use between 80 and 100 volunteers for this event.

Public Safety – This year we have a new Public Safety Awareness Association as a part of the Expo. Urbana Police Chief Patrick Connolly has been active with the Steering Committee for several months now. He and Alejandra Coronel from Provena have put together a collaboration of all public safety entities within Champaign County to form the Association. This includes Champaign and Urbana PD's, County Sheriff's Dept., and METCAD to name a few. They will have a booth at the Expo to make attendees aware of these various resources and how they can assist persons with disabilities in the county.

Respectfully submitted

Barb Bressner
Consultant