



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

REMEMBER this meeting is being audio recorded. Please speak clearly into the microphone during the meeting.

Champaign County Mental Health Board (CCMHB)

WEDNESDAY, July 19, 2017

Brookens Administrative Center, John Dimit
Meeting Room

1776 E. Washington St. Urbana, IL
5:30 p.m.

1. Call to Order - Dr. Fowler, President
2. Roll Call
3. Citizen Input/Public Participation
The CCMHB reserves the authority to limit individual public participation to five minutes and limit total time to 20 minutes.
4. Approval of Agenda*
5. CCDDDB Information
6. Approval of CCMHB Minutes* (Pages 4-17)

*5/17/17 Minutes are included. Action is requested.
5/24/17 Minutes are included. Action is requested
6/28/17 Minutes are included. Action is requested.*
7. President's Comments
8. Executive Director's Comments
9. Staff Reports (Pages 18-43)
Staff reports from Kim Bowdry, Mark Driscoll, Stephanie Howard-Gallo, and Shandra Summerville are included in the packet.
10. Consultant Report (Page 44)
A report from Barb Bressner is included in the packet.

11. Board to Board Reports

12. Agency Information

The CCMHB reserves the authority to limit individual agency participation to five minutes and limit total time to 20 minutes.

13. Financial Information* (Pages 45-58)

A copy of the claims report is included in the packet. Action is requested.

14. New Business

A. Parenting with Love and Limits (PLL) Contracts* (Page 59)

Decision Memorandum to extend the PLL provider contracts and increase funding, and approval of the Savannah Family Institute PLL professional fees contract is included in the packet. Action is requested.

B. University of Illinois "Build Program Evaluation Capacity: Year 3" Proposal* (Page 60)

Decision Memorandum with proposal attached is included in the packet. Action is requested.

C. Anti-Stigma Community Event* (Page 61)

Decision Memorandum on sponsorship of an anti-stigma film and concurrent anti-stigma activities at the 2018 Roger Ebert's Film Festival is included in the Board packet. Action is requested.

D. CCMHB FY2018 Budget* (Pages 62-68)

Decision Memorandum on the CCMHB Fiscal Year 2018 Budget is included in the packet. Action is requested.

15. Old Business

A. Rosecrance JMHCP Match Amendment Request* (Pages 69-72)

Decision Memorandum on amendment request from Rosecrance concerning local matching funds for Department of Justice "Justice and Mental Health Collaboration Program (JMHCPC)" planning grant is included in the packet. Action is requested.

- B. CCMHB FY 2016 Annual Report* (Pages 73-94)
A revised copy of the FY16 Annual Report is included in the Board packet for review and approval. Action is requested.
- C. Multi-Year Contract Briefing Memo (Pages 95-97)
Briefing Memorandum recapping past discussions of applying multi-year contract term policy to select contracts is included in the Board packet.
- D. Application Review Process Debriefing
Discussion of the FY18 application review process.
- E. Meeting Schedule & Allocation Process Timeline (Pages 98-101)
An updated copy of the meeting schedule and allocation timeline is included in the Board packet.
- F. Agency Acronym List and Glossary (Pages 102-111)
List of agency and program name acronyms and glossary of terms is included in the Board packet.

16. Board Announcements

17. Adjournment

**Board action*

G.A.

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BOARD STUDY SESSION**

Minutes—May 17, 2017

DRAFT

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

5:30 p.m.

MEMBERS PRESENT: Judi O'Connor, Thom Moore, Elaine Palencia, Kyle Patterson, Julian Rappaport, Anne Robin, Margaret White

MEMBERS EXCUSED: Susan Fowler, Joe Omo-Osagie

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

OTHERS PRESENT: Juli Kartel, Sheila Ferguson, Rosecrance; Lisa Benson, Regional Planning Commission (RPC); Becca Obuchowski, Community Choices (CC); Gail Raney, Prairie Center Health Systems (PCHS); Adelaide Aime, RACES; Andy Kulczycki, Community Services Center of Northern Champaign County (CSCNCC); Christopher Morris, The UP Center; Chad Hoffman, Mahomet Area Youth Club (MAYC); Sam Banks, Don Moyer Boys and Girls Club (DMBGC); Angie Adams Martin, Cunningham Children's Home; Stephanie Record, Crisis Nursery (CN); Sheryl Bautch, Family Service (FS); Marlon Mitchell, Tammy Bond, First Followers (FF); Nancy Greenwalt, Promise Healthcare; Janice Mitchell, Urbana Neighborhood Connections (UNCC); Regina Crider, Youth and Family Peer Support Alliance

CALL TO ORDER:

Ms. Palencia called the meeting to order at 5:32 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

DRAFT

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CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

ADDITIONS TO AGENDA:

None.

STUDY SESSION:

Agency Responses to Board Questions and Program Summaries:

The Board packet contained a list of application questions raised by the Board at the April 26, 2017 meeting, the agency's responses, and other feedback on the program summaries that was received from the agencies. Board members gave a short verbal review of the answers received from the agencies.

During the course of Board discussion, the following points will require follow-up:

Dr. Rappaport stated the CCMHB and the Board of Health need a relationship and requested a future study session between the two Boards.

Mr. Mark Driscoll provided a brief history and review of the Parenting with Love and Limits (PLL) program. Board members agreed a future study session and presentation regarding PLL was needed in the near future in order to have a better understanding of the Board's investment with the program.

Dr. Rappaport would like to discuss Board policy in the future, in order to determine what the CCMHB should or should not be paying for, in regard to criminal justice programs and other funding collaborations.

Alignment of Program Applications with Priorities:

The Board meeting contained a list of applications organized by priority categories with total dollar amounts requested and current total investments for each category. Board primary and secondary reviewers were noted.

BOARD ANNOUNCEMENTS:

None.

ADJOURNMENT:

The meeting adjourned at 6:55 p.m.

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Respectfully
Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

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



**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
BOARD MEETING**

Minutes—May 24, 2017

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

DRAFT

5:30 p.m.

MEMBERS PRESENT: Judi O'Connor, Joe Omo-Osagie, Thom Moore, Elaine Palencia, Kyle Patterson, Julian Rappaport, Anne Robin, Margaret White

MEMBERS EXCUSED: Susan Fowler

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

OTHERS PRESENT: Juli Kartel, Sheila Ferguson, Monica Cherry, Rosecrance; Becca Obuchowski, Community Choices (CC); Gail Raney, Prairie Center Health Systems (PCHS); Kari May, Children's Advocacy Center (CAC); Brian Tison, U of I Police; Adelaide Aime, RACES; Andy Kulczycki, Community Services Center of Northern Champaign County (CSCNCC); Chad Hoffman, Mahomet Area Youth Club (MAYC); Angie Adams Martin, Cunningham Children's Home; Stephanie Record, Crisis Nursery (CN); Jenny Niebrugge, United Cerebral Palsy (UCP); Sheryl Bautch, Family Service (FS); Marlon Mitchell, James Kilgore, First Followers (FF); Nancy Greenwalt, Promise Healthcare; Tracy Parsons, City of Champaign; Brandi Granse, Head Start

CALL TO ORDER:

Ms. Palencia called the meeting to order at 5:32 p.m.

ROLL CALL:

Roll call was taken and a quorum was present.

DRAFT



CITIZEN INPUT / PUBLIC PARTICIPATION:

Brian Tison from The University of Illinois Police Department spoke regarding the uniqueness of the Co-Responder Team proposal. He encouraged CCMHB support for the program.

ADDITIONS TO AGENDA:

None.

CCDDB INFORMATION:

Ms. Canfield provided a recap of the last CCDDB meeting and their funding decisions process.

APPROVAL OF MINUTES:

Minutes from the April 26, 2017 Board meeting were included in the Board packet for approval.

MOTION: Dr. Robin made a motion to approve the minutes from the April 26, 2017 Board meeting. Dr. Moore seconded the motion. A voice vote was taken and the motion passed.

PRESIDENT’S COMMENTS:

None.

EXECUTIVE DIRECTOR’S COMMENTS:

None.

STAFF REPORTS:

Reports were deferred.

CONSULTANT’S REPORT:

Deferred.

BOARD TO BOARD:

Deferred.

AGENCY INFORMATION:

None.



FINANCIAL INFORMATION:

A list of financial claims was included in the packet.

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

NEW BUSINESS:

FY18 Allocation Decisions:

A Decision Memorandum and Tier sheet were included in the Board packet to present for the consideration of the Champaign County Mental Health Board (CCMHB) staff funding recommendations for FY18 contract year (July 1, 2017 through June 30, 2018.) Final funding decision authority rests with the CCMHB and their sole discretion and judgment concerning the most appropriate use of available dollars based on assessment of community needs, best value, alignment with decision support criteria, pricing and affordability, and reasonable distribution of funds across disability areas.

The criteria described in the Decision Memorandum were intended to be used as guidance by the Board in assessing applications for CCMHB funding. However, they are not the sole considerations in finalizing funding decisions. Other considerations include the judgment of the Board and its staff, evidence about the provider's ability to implement the services proposed, the soundness of the proposed methodology, and the administrative and fiscal capacity of the agency. Further, to be eligible to receive CCMHB funds, applications must reflect the Board's stated goals and objectives as well as operating principles and public policy positions taken by the Board. The final funding decisions rest with the CCMHB and their judgment concerning the most appropriate and efficacious use of available dollars based on assessment of community needs, equitable distribution across disability areas, and decision-support match up.

Many recommendations in the decision section of the memorandum are provisional, with funding contingent on the completion of successful contract negotiation, revision, and/or inclusion of special provisions. This can include significant modification of the budget, program plan, and personnel matrix in order to align the contract more closely with CCMHB planning, budget and policy specifications. If selected for contract negotiations, the applicant may be required to prepare and submit additional information prior to final contract execution, in order to reach terms for the provision of services that are agreeable to both parties. Failure to submit required information shall result in cancellation of the award of a contract.

The recommendations in the decision memorandum are based on revenue estimates which will not be finalized until the CCMHB budget is approved by the Champaign County Board in November 2017. For this reason all FY18 CCMHB contracts shall be subject to possible reductions in contract maximums necessary to compensate for any CCMHB revenue shortfall. These reductions shall be documented by contract amendment at the discretion of the CCMHB

executive director with every effort made to maintain the viability and integrity of prioritized contracts. The FY18 contract boilerplate shall also include the following provision:

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

Approved CCMHB funding has gone from \$3,189,290 in FY12 to \$3,709,799 in FY17. Last year, staff projected the amount to be approved in FY17 (i.e., the base) would increase by 1.5% each year for FY18. The actual amount recommended for FY18 is \$3,845,630, an increase of over 3.6%. The additional funds available for allocation result from a reduction in CCMHB administrative funds in addition to the anticipated increase in property tax levy. Just as this administrative cost savings is unique, other unusual circumstances, including a state property tax freeze and hospital tax settlement, could impact the CCMHB’s tax revenues this year. Future projections will be reevaluated and adjusted as necessary in response to changing economic conditions which effect property tax levies.

The staff recommendations are organized into tiers as a means of facilitating discussion and moving forward with decisions predicated on CCMHB commitments, set-asides, and priorities. “Tier One” is reserved for our commitments for I/DD allocations as identified under Priority #1: Collaboration with the Champaign County Developmental Disabilities Board. “Tier Two” represents set-asides associated with Priority #2 – System of Care for Youth and Families. “Tier Three” is tied to commitments associated with the criminal justice system and includes Priority #3: Behavioral Health Services and Supports for Adults with a Behavioral Health and Criminal Justice Interface as well as victim services and juvenile justice system related interventions and supports. “Tier Four” are those programs aligned with Priority #4: Innovative Practices to Support Access to Core Services and recommended for funding. “Tier Five” are programs and supports judged to be of moderate priority, comprising renewal of longstanding commitments, and recommended for funding. “Tier Six” are applications which are not recommended for funding due to Board priorities and fiscal constraints.

Note: Some programs recommended for funding are at FY17 levels due to funding constraints. The reduced funding level will be addressed during contract negotiations. All programs subject to contract negotiations or requiring revised program or financial plans will be notified through the award letter.

Tier One – Intellectual and Developmental Disabilities	SUBTOTAL \$657,294
CILA Expansion - CCMHB Commitment	\$ 50,000#
Champaign County Head Start – Social Emotional Disabilities Services	\$ 55,645
Community Choices - Community Living	\$ 63,000
Community Choices - Self-Determination Support	\$ 96,000
Developmental Services Center – Individual and Family Support	\$392,649

indicates previous approval



Tier Two – System of Care for Youth and Families _____ SUBTOTAL \$585,500

Champaign Urbana Area Project, CU Neighborhood Champions	\$ 20,000*
Community Foundation – DREAAM House	\$58,000*^
Don Moyer Boys and Girls Club – CU Change	\$100,000*
Don Moyer Boys and Girls Club, Coalition Summer Youth Initiatives	\$107,000*^
Don Moyer Boys and Girls Club - Youth and Family Services	\$160,000*
Mahomet Area Youth Club – BLAST	\$ 15,000*
Mahomet Area Youth Club – MAYC Members Matter!	\$ 12,000*
Prairie Center Health Systems, Youth Services (contract continues as fee for service)	\$ 75,000
UP Center of CC, Children, Youth, & Families Program	\$ 19,000
Urbana Neighborhood Connections Center - Community Study Center	\$ 19,500*

*Champaign Community Coalition
 ^Special Initiative/mid-year report required

Tier Three – Behavioral Health Services and Supports with a Criminal Justice Interface (Adult, Youth, and Victims) SUBTOTAL \$1,835,343

Adult Services (\$1,053,042)

CCRPC – Community Services, Justice System Diversion Services	\$ 62,755^
CCRPC – Community Services, DoJ Implementation Grant Match#	\$52,420#
Champaign Urbana Area Project, TRUCE	\$ 75,000*
First Followers – Peer Mentoring for Reentry (allocates funds to support drop-in center and employer recruitment/anti-stigma)	\$ 30,000
Prairie Center Health Systems – Criminal Justice Substance Use Treatment	\$ 10,600
Prairie Center Health Systems – Fresh Start	\$ 77,000*^
Prairie Center Health Systems – Specialty Courts	\$203,000
Rosecrance Champaign/Urbana, Co-Responder Team (does not fund law enforcement related expenses and MHFA training)	\$100,000^
Rosecrance Champaign/Urbana, Criminal Justice	\$266,580
Rosecrance Champaign/Urbana, Crisis, Access, & Benefits (allocates funds requested for Crisis Line Coordinator, Benefits Case Manager, and CCHCC subcontract plus proportional amount of other program expenses and indirect staff)	\$161,687
Rosecrance Champaign/Urbana, Transition Housing CJ (contract will be converted from fee-for-service to grant)	\$ 14,000

*Champaign Community Coalition
 ^Special Initiative/mid-year report required
 # indicates previous approval

Youth Services (\$659,673)

CCRPC-Community Services, Youth Assessment Center	\$ 76,350^
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(increases funding for support services staff targeted to youth and families; not to hire law enforcement trained staff)

Prairie Center Health Systems, PLL-Extended Care	\$300,660
Rosecrance Campaign/Urbana, PLL – Front End	\$282,663

Victims Services (\$122,628)

Champaign County Children’s Advocacy Center	\$ 37,080
Courage Connection	\$ 66,948
Rape Advocacy Counseling and Education Services, Counseling & Crisis	\$ 18,600

*Champaign Community Coalition

^Special Initiative/mid-year report required

Tier Four – Innovative Practices to Support Access to Core Services SUBTOTAL \$242,650

Family Service of Champaign County – Self-Help Center	\$ 28,428
Family Service of Champaign County – Senior Counseling & Advocacy	\$142,337
GROW in Illinois, Peer Support	\$ 20,000^
UCP Land of Lincoln, Vocational Training and Support	\$ 51,885^

^Special Initiative/mid-year report required

Tier Five – Other/Renewal - Moderate Priority and Criteria Alignment SUBTOTAL
\$524,843

Community Service Center of North. Champaign Co., Resource Connection	\$ 66,596
Crisis Nursery, Beyond Blue-Champaign County	\$ 70,000
ECIRMAC, Family Support & Strengthening	\$ 25,000
Family Service of Champaign County, Counseling (contract will be converted from fee-for-service to grant)	\$ 25,000
Prairie Center Health Systems, Prevention	\$ 58,247
Promise Healthcare, Mental Health Services with Promise	\$222,000
Promise Healthcare – Promise Healthcare Wellness & Justice	\$ 58,000

TOTAL FY18 FUNDING RECOMMENDED - \$3,845,630

(Amount includes the previously approved \$52,420 matching funds set-aside for Department of Justice JMHCP Implementation Grant and the previously approved \$50,000 annual commitment to the CILA Expansion. Release of the matching funds are contingent on the DoJ award and may be paid over a two year period.)

Tier Six – Exceeds Allocation Parameters

Intellectual and Developmental Disabilities applications not included in Tier One are subject to integrated planning with the Champaign County Developmental Disabilities Board (CCDDB).

All other applications, with four exceptions, are recommended for funding, although some are funded at lower than requested levels and some are subject to contract negotiation. Not

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recommended for funding are: Cunningham Children's Home - The Resiliency Project, Rosecrance Champaign/Urbana - Anti-Stigma Education & Recovery Partners and Substance Use Services Program; and the Rural Champaign County Special Education Cooperative - DisAbility Resource Expo.

Dr. Robin moved to approve CCMHB funding as recommended for Tier One, excluding the previously approved item. Ms. White seconded. A roll call vote was taken and the motion passed unanimously.

Approved
 Denied
 Modified
 Additional Information Needed

Ms. White moved to approve CCMHB funding as recommended for Tier Two. Dr. Rappaport seconded. A roll call vote was taken and the motion passed unanimously.

Approved
 Denied
 Modified
 Additional Information needed

Dr. Moore asked to pull the First Followers program from Tier 3 for separate review.

Dr. Moore moved to increase funding for First Followers up to the requested amount contingent on a review of available funds. Mr. Patterson seconded. Discussion followed. Dr. Rappaport expressed concern over the process of pulling out programs for review separately, when a budget has already been established. A roll call vote was taken. The following members voted aye: Moore, O'Connor, Omo-Osagie, Palencia, Patterson, Robin. The following members abstained from the vote: Rappaport, White. The motion passed.

Dr. Robin requested the Parenting with Love and Limits (PLL) programs from Rosecrance, Inc. and Prairie Center Health Systems (PCHS) be pulled from Tier 3 for separate review. She expressed that the cost of these programs is very high and more economic and local options should be explored. Discussion followed. Mr. Driscoll provided a brief history of the program. A study session on the Parenting with Love and Limits (PLL) program is being planned for June.

Dr. Robin moved the Rosecrance Inc. Parenting with Love and Limits program and the Prairie Center Health Systems Parenting with Love and Limits program be funded for 6 months at the recommended level and a review of the programs be conducted by staff and Board and community members and similar services be explored to lower the cost. Ms. White seconded the motion. PLL was discussed at length. A roll call vote was taken. All members voted aye and the motion passed.

Dr. Rappaport requested Rosecrance Inc. Co-Responder Team program be pulled from Tier 3 for discussion. The original request was \$219,000. Staff recommendation is to fund the program for

\$100,000. Mr. Driscoll detailed what staff felt was appropriate to fund within the program. The Board members discussed the program at length.

Dr. Rappaport moved to increase the funding for Rosecrance Inc. Co-Responder Team program to \$178,000 in order to accommodate the relationship between law enforcement and the CCMHB. Dr. Moore seconded. A roll call vote was taken. The following members voted aye: Moore, Rappaport. The following members voted nay: O'Connor, Omo-Osagie, Palencia, Patterson, Robin, White. The motion failed.

Dr. Robin moved to approve CCMHB funding as recommended for Tier Three, excluding the previously approved item, First Followers program, and Rosecrance Inc. Parenting with Love and Limits and Prairie Center Health Systems (PCHS) Parenting with Love and Limits programs. Ms. White seconded the motion. A roll call vote was taken. All members voted aye and the motion passed.

- Approved
- Denied
- Modified
- Additional Information needed

Ms. White moved to approve CCMHB funding as recommended for Tier Four. Ms. O'Connor seconded. A roll call vote was taken and the motion passed unanimously.

- Approved
- Denied
- Modified
- Additional Information needed

Mr. Patterson moved to approve CCMHB funding as recommended for Tier Five. Dr. Rappaport seconded. A roll call vote was taken and the motion passed unanimously.

- Approved
- Denied
- Modified
- Additional Information needed

Dr. Moore moved to authorize the executive director to conduct contract negotiation as specified in the memorandum. Mr. Patterson seconded the motion. A voice vote was taken and the motion passed.

- Approved
- Denied
- Modified
- Additional Information needed

Ms. White moved to authorize the executive director to implement contract maximum reductions as described in the "Special Notification Concerning FY18 Awards" section of the memorandum. Ms. O'Connor seconded. A voice vote was taken and the motion passed unanimously.

- Approved

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_____ Denied
_____ Modified
_____ Additional Information needed

OLD BUSINESS:

Meeting Schedule and Allocation Process Timeline:

An updated copy of the meeting schedule and allocation timeline was included in the Board packet for information only.

Agency Acronym List:

A list of agency name acronyms was included in the Board packet for information only.

BOARD ANNOUNCEMENTS:

The June 21st meeting will be canceled.

ADJOURNMENT:

The meeting adjourned at 7:25 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

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

**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
STUDY SESSION**

Minutes—June 28, 2017

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

DRAFT

5:30 p.m.

- MEMBERS PRESENT:** Susan Fowler, Thom Moore, Joe Omo-Osagie, Elaine Palencia, Kyle Patterson, Anne Robin, Julian Rappaport, Margaret White
- MEMBERS EXCUSED:** Judi O'Connor,
- STAFF PRESENT:** Lynn Canfield, Mark Driscoll, Stephanie Howard-Gallo, Shandra Summerville
- STAFF EXCUSED:** Kim Bowdry, Chris Wilson
- OTHERS PRESENT:** Juli Kartel, Sheila Ferguson, James Warren, Rosecrance; Becca Obuchowski, Community Choices (CC); Alex Campbell, Consultant; N. Chioneso, Psycholocial Services Center (PSC); Leon Bryson, Prairie Center Health Systems (PCHS); Teresa Zebe, Misty Bell, Joe Gordon, Court Services; Janice Mitchell, Urbana Neighborhood Connections Center (UNCC); Julia Rietz, State's Attorney;
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CALL TO ORDER:

Dr. Fowler called the meeting to order at 5:35 p.m.

ROLL CALL:

Roll call was taken.

CITIZEN INPUT / PUBLIC PARTICIPATION:

None.

DRAFT

APPROVAL OF AGENDA:

The agenda was approved.

PARENTING WITH LOVE AND LIMITS (PLL) STUDY SESSION:

Mr. John Burek from the Savannah Family Institute distributed a packet of materials regarding the PLL model. Mr. Burek provided a verbal overview of PLL and a Powerpoint presentation.

Mr. Leon Bryson, lead therapist from Prairie Center Health Systems (PCHS) PLL program introduced a family that has participated in the program. The family members provided information regarding their experience with the program and how their lives have changed because of it. Mr. Bryson described the process and the follow-up involved with the program. Board members were given an opportunity to ask questions.

Mr. Joe Gordon of Court Services and Ms. Julia Rietz, State’s Attorney of Champaign County discussed the importance of the PLL program with the criminal justice system.

Mr. Leon Bryson from Prairie Center Health Systems (PCHS) and James Warren from Rosecrance, Inc. are the two lead therapists for the PLL program. Board members were given the opportunity to ask the therapists questions regarding the PLL program.

Board members will consider extending the PLL contract and the contract with the Savannah Institute at the July 19th regular Board meeting.

ADJOURNMENT:

The meeting adjourned at 7:26 p.m.

Respectfully

Submitted by: Stephanie Howard-Gallo
CCMHB/CCDDB Staff

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

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**Kim Bowdry, Associate Director for Intellectual & Developmental Disabilities
Staff Report – July 12, 2017**

A Warm Reception: I was welcomed by the CCMHB/CCDDB staff and Board members on May 1, 2017. I would like to thank staff and members of both Boards for being so welcoming. I hit the ground running by attending funding allocation meetings with Lynn and Board members.

Prior to joining CCMHB/CCDDB, I spent the past nine years employed at the Champaign County Regional Planning Commission (CCRPC) with the Independent Service Coordination (ISC) team. During the last year of my tenure at CCRPC, I was the ISC Program Manager. Prior to my time at CCRPC, I worked at Developmental Services Center for three and a half years.

CCDDB Contracts & Reporting: FY18 contract negotiations were completed and contracts were finalized to include special provisions. Agency contracts were mailed out in the middle of June and signed contracts began coming in the following week. A special provision was put into most contracts that persons served under CCDDB contracts have been informed of the role of the ISC, enrolled in the PUNS database and identified by ISC or IDHS-DDD staff as eligible for IDHS-DDD services. Individuals deemed ineligible for PUNS enrollment will need to have an individual needs assessment completed by a third party to ensure that the individual is aware of available service options and has been able to choose these options.

The online reporting system has been modified to allow for monthly service activity reporting. This will include identifying all individuals receiving services, as well as the specific services received and whether the services were received on or off-site. Identifying individuals receiving services will allow for better tracking of duplication of services. Training will be provided for agency staff.

Alliance for Inclusion & Respect: I attended a special workshop on updating the Alliance for Inclusion and Respect (AIR) website. It is hoped that the website will be able to be used as an online marketplace (similar to Etsy) with each artist or group having a link or contact information for purchasing items posted on the website. I am looking forward to meeting the artists and working more closely with them in the future.

Association Activities: On May 17th, I participated in an Association of Community Mental Health Authorities of Illinois (ACMHAI) Medicaid-MCO conference call and on June 8th and 9th, I attended the ACMHAI Quarterly Membership Meeting held at the Champaign Hyatt.

Three presentations were given at the June 8th session. Donald Kauerauf, Assistant Director, IDPH gave the first presentation titled, “The Opioid Crisis in Illinois” and noted that in 2016, over 1900 people in Illinois died of opioid-related overdose, with a disproportionate number of those fatalities being white males between the ages of 25-44. The second presentation titled, “A Different Solution to Changing Lives,” was given by David Byram of Braeburn Pharmaceuticals. Mr. Byram presented information on

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Braeburn's long-acting implant for treatment of opioid addiction. The final presentation of the afternoon, "Beyond the Epidemic – A Shared Path to Recovery," was given by Ryan Springer, President/CEO Trident House International Lecturer. Mr. Springer shared information on Recovery Oriented Systems of Care (ROSC). A ROSC is a coordinated network of community-based services and supports that is person-centered and builds on the strengths and resiliencies of individuals, families and communities to achieve abstinence and improved health, wellness and quality of life for those with or at risk of alcohol and drug problems.

During the June 9th session, the ACMHAI business meeting was held and a presentation from Illinois Children's Healthcare Foundation (ILCHF) was given by Amy Starin, PhD, LCSW. ILCHF launched the Children's Mental Health Initiative: *Building Systems of Care, Community by Community* (CMHI) to enhance and integrate available resources to build community-wide systems of care that prevent, identify and treat children's mental and behavioral health problems throughout the state of Illinois. Implementation grants are available through ILCHF.

CCMHB/CCDDB Study Session: I attended the joint CCMHB/CCDDB Study Session on "Building Inclusive Communities" presented by David Wetherow on Friday, May 5, 2017. Mr. Wetherow presented on the Star Raft model, a field-tested pattern for building and sustaining individual support networks that are person-centered, family friendly and anchored in natural community connections.

Mr. Wetherow (and his wife, Faye) created the very first Microboards, and developed Prairie Housing Cooperative (inclusive cooperative housing), L'Avenir Cooperative (a family-and consumer-governed service co-op), the Open Access Resource Centre (a lending library of communications equipment), and some of Canada's earliest supported employment, individualized funding and personal support projects.

Other Activity: I attended a presentation by the Students Consulting for Nonprofit Organization (SCNO). The students researched nonprofit collaboration and resource sharing possibilities for CCMHB funded agencies. I attended two regular meetings of the Mental Health and Developmental Disabilities Agencies Council. I attended a Program Evaluation meeting with other staff, two members of the CCMHB and Mark Aber and Nicole Allen from UIUC. I participated in two National Association of County Behavioral Health & Developmental Disability Directors (NACBHDD) ID/DD Committee Conference Calls. I also participated in an Employment First webinar and call. I participated in an nTIDE Lunch n' Learn webinar and a PEAT Talk Webinar. I participated in the HHS Federal Partners webinar and a Guided Group Discovery: Paving the Way to Employment Webinar, hosted by the LEAD Center. I participated in a regular meeting of the Local Funders Group.

IAG Update: Currently the Individual Advocacy Group (IAG) homes are at near capacity. The all-female home is at capacity with four residents and the male home currently has three residents, with one available opening.

The IAG residents had a busy spring. The residents visited the Alan Strong Car Collection and have done nature walks at the Anita Purves Nature Center. The ladies were able to go for manicures or pedicures at a local nail salon and they also spent time painting on canvas. The residents were able to attend and participate in Champaign Public Library's Science Show. Residents toured the State Farm Center as well. The Champaign Flexible Day Experience has found a new location within the community at the Champaign Public Library.

I am working with IAG staff to get the IAG artists on the Alliance for Inclusion & Respect (AIR) website. A few of IAG's talented residents are in the greeting card business. These cards can be purchased through IAG.

April 2017 PUNS Selection and Unmet Need: In April 2017, there was a PUNS Selection of 917 individuals statewide. Champaign County had 16 individuals selected to apply for waiver-funded services, one individual had previously been awarded CILA placement, although he has yet to move and continues to reside in his family home while he awaits an agency willing to provide services. During the Pre-Admission Screening (PAS) individuals and their families are given the opportunity to select CILA placement or Home-Based Support Services. The ISC continues to work with these 15 individuals and their families to gather required documents for completion of the PAS.

PUNS data pulled from the DHS-DDD website for Champaign County can be found below. I have also included a breakdown of active and total PUNS clients for Champaign County.



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

June 06, 2017

County: Champaign

Reason for PUNS or PUNS Update

New	108
Annual Update	183
Change of category (Emergency, Planning, or Critical)	29
Change of service needs (more or less) - unchanged category (Emergency, Planning, or Critical)	16
Person is fully served or is not requesting any supports within the next five (5) years	183
Moved to another state, close PUNS	12
Person withdraws, close PUNS	20
Deceased	14
Individual Moved to ICF/DD	1
Individual Determined Clinically Ineligible	2
Unable to locate	28
Other, close PUNS	161

EMERGENCY NEED(Person needs in-home or day supports immediately)

1. Individual needs immediate support to stay in their own home/family home (short term - 90 days or less); e.g., hospitalization of care giver or temporary illness of an individual living in their own home.	7
2. Individual needs immediate support to stay in their own home/family home or maintain their employment situation (long term); e.g., due to the person's serious health or behavioral issues.	17
3. Care giver needs immediate support to keep their family member at home (short term - 90 days or less); e.g., family member recuperating from illness and needs short term enhanced supports.	2
4. Care giver needs immediate support to keep their family member at home (long term); e.g., care giver is permanently disabled or is terminally ill and needs long term enhanced supports immediately to keep their family member at home.	7

EMERGENCY NEED(Person needs out-of-home supports immediately)

1. Care giver is unable or unwilling to continue providing care (e.g., person has been abandoned).	21
2. Death of the care giver with no other supports available.	3
3. Person has been committed by the court or is at risk of incarceration.	2
4. Person is living in a setting where there is suspicion of abuse or neglect.	14
5. Person is in an exceedingly expensive or inappropriate placement and immediately needs a new place to live (for example, an acute care hospital, a mental health placement, a homeless shelter, etc.).	7
6. Other crisis. Specify:	105

CRITICAL NEED(Person needs supports within one year)

1. Individual or care giver will need support within the next year in order for the individual to continue living in their current situation.	97
2. Person has a care giver (age 60+) and will need supports within the next year.	56
3. Person has an ill care giver who will be unable to continue providing care within the next year.	22
4. Person has behavior(s) that warrant additional supports to live in their own home or family home.	62
5. Individual personal care needs cannot be met by current care givers or the person's health has deteriorated.	17
6. There has been a death or other family crisis, requiring additional supports.	2
7. Person has a care giver who would be unable to work if services are not provided.	47
8. Person or care giver needs an alternative living arrangement.	12
9. Person has graduated or left school in the past 10 years, or will be graduating in the next 3 years.	177
10. Person is living in an inappropriate place, awaiting a proper place (can manage for the short term; e.g., persons aging out of children's residential services).	5
11. Person moved from another state where they were receiving residential, day and/or in-home supports.	4
12. The state has plans to assist the person in moving within the next year (from a state-operated or private Intermediate Care Facility for People with Developmental Disabilities, nursing home or state hospital).	1
13. Person is losing eligibility for Department of Children and Family Services supports in the next year.	7
17. Person is residing in an out-of-home residential setting and is losing funding from the public school system.	2
20. Person wants to leave current setting within the next year.	7
21. Person needs services within the next year for some other reason, specify:	20

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

June 06, 2017

PLANNING FOR NEED(Person's needs for service is more than a year away but less than 5 years away, or the care giver is older than 60 years)	
1. Person is not currently in need of services, but will need service if something happens to the care giver.	121
2. Person lives in a large setting, and person/family has expressed a desire to move (or the state plans to move the person).	1
3. Person is dissatisfied with current residential services and wishes to move to a different residential setting.	1
4. Person wishes to move to a different geographic location in Illinois.	3
5. Person currently lives in out-of-home residential setting and wishes to live in own home.	2
6. Person currently lives in out-of-home residential setting and wishes to return to parents' home and parents concur.	1
7. Person is receiving supports for vocational or other structured activities and wants and needs increased supports to retire.	1
8. Person or care giver needs increased supports.	62
9. Person is losing eligibility for Department of Children and Family Services supports within 1-5 years.	2
13. Person is residing in an out-of-home residential setting and is losing funding from the public school system within 1-5 years.	1
14. Other, Explain:	7
EXISTING SUPPORTS AND SERVICES	
Respite Supports (24 Hour)	9
Respite Supports (<24 hour)	12
Behavioral Supports (includes behavioral intervention, therapy and counseling)	107
Physical Therapy	49
Occupational Therapy	107
Speech Therapy	123
Education	170
Assistive Technology	49
Homemaker/Chore Services	2
Adaptions to Home or Vehicle	10
Personal Support under a Home-Based Program, Which Could Be Funded By Developmental Disabilities, Division of Rehabilitation Services or Department on Aging (can include habilitation, personal care, respite, retirement supports, budgeting, etc.)	44
Medical Equipment/Supplies	35
Nursing Services in the Home, Provided Intermittently	8
Other Individual Supports	83
TRANSPORTATION	
Transportation (include trip/mileage reimbursement)	94
Other Transportation Service	228
Senior Adult Day Services	1
Developmental Training	95
"Regular Work"/Sheltered Employment	80
Supported Employment	61
Vocational and Educational Programs Funded By the Division of Rehabilitation Services	63
Other Day Supports (e.g. volunteering, community experience)	21
RESIDENTIAL SUPPORTS	
Community Integrated Living Arrangement (CILA)/Family	3
Community Integrated Living Arrangement (CILA)/Intermittent	4
Community Integrated Living Arrangement (CILA)/Host Family	1
Community Integrated Living Arrangement (CILA)/24 Hour	32
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 16 or Fewer People	1
Intermediate Care Facilities for People with Developmental Disabilities (ICF/DD) 17 or More People	1
Skilled Nursing Facility/Pediatrics (SNF/PEP)	3
Supported Living Arrangement	4
Shelter Care/Board Home	1



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

June 06, 2017

Nursing Home	2
Children's Residential Services	10
Child Care Institutions (Including Residential Schools)	6
Other Residential Support (including homeless shelters)	13
SUPPORTS NEEDED	
Personal Support (includes habilitation, personal care and intermittent respite services)	291
Respite Supports (24 hours or greater)	20
Behavioral Supports (includes behavioral intervention, therapy and counseling)	114
Physical Therapy	53
Occupational Therapy	90
Speech Therapy	106
Assistive Technology	64
Adaptations to Home or Vehicle	19
Nursing Services in the Home, Provided Intermittently	8
Other Individual Supports	56
TRANSPORTATION NEEDED	
Transportation (Include trip/mileage reimbursement)	273
Other Transportation Service	282
VOCATIONAL OR OTHER STRUCTURED ACTIVITIES	
Support to work at home (e.g., self employment or earning at home)	16
Support to work in the community	223
Support to engage in work/activities in a disability setting	159
Attendance at activity center for seniors	1
RESIDENTIAL SUPPORTS NEEDED	
Out-of-home residential services with less than 24-hour supports	129
Out-of-home residential services with 24-hour supports	74

Division of Developmental Disabilities Prioritization of Urgency of Needs for Services (PUNS)

Summary of Total and Active PUNS By Zip Code

Updated 06/06/17

<http://www.dhs.state.il.us/OneNetLibrary/27897/documents/DD%20Reports/PUNS/PUNSbyZipallandactivects05102016.pdf>

Zip Code	Active	Total PUNS
60949 Ludlow	2	4
61801 Urbana	38	78
61802 Urbana	36	81
61815 Bondville (PO Box)	1	1
61816 Broadlands	3	3
61820 Champaign	29	61
61821 Champaign	73	156
61822 Champaign	40	80
61840 Dewey	0	2
61843 Fisher	8	10
61845 Foosland	1	1
61847 Gifford	2	3
61849 Homer	1	6
61851 Ivesdale	0	1
61852 Longview	1	1
61853 Mahomet	27	55
61859 Ogden	3	10
61862 Penfield	1	2
61863 Pesotum	1	3
61864 Philo	5	10
61866 Rantoul	24	69
61871 Royal (PO Box)	--	-- no data on website

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Zip Code		Active	Total PUNS
61873	St. Joseph	14	24
61874	Savoy	4	10
61875	Seymour	1	2
61877	Sidney	3	6
61878	Thomasboro	1	2
61880	Tolono	8	28
Total		328	710

<http://www.dhs.state.il.us/page.aspx?item=56039>

Summary of PUNS by ISC Agency

Updated 06/06/17

ISC Agency	Individual Count	% of Total PUNS	Estimated Total Census for Agency	Estimated % of IL Census
*CCRPC Total	878	1.72%	244,880	1.90%
ISC Agency	Individual Count	% of Total PUNS	Estimated Total Census for Agency	Estimated % of IL Census
*CCRPC Active	361	1.89%	244,880	1.90%

*Totals include Ford & Iroquois Counties

DHS Definition of Closed PUNS Records

Death
Fully Served
Moved out of state
Withdrawn
Other Closed

8
25

Mark Driscoll

Associate Director for Mental Health & Substance Abuse Services

Staff Report – July 19, 2017 Board Meeting

Summary of Activity

CCMHB Contracts: As one would expect, much of my time has been spent completing contracts since the allocation decisions were made by the Board in May. To manage the contract process, a tracking sheet is prepared that details the various steps. Stephanie Howard-Gallo and I work together to develop the form and track status of contracts. The sheet notes whether a contract requires negotiation, if revisions to the application are necessary, or only signature is needed. Date contract is issued, returned, when negotiation was completed, and when revised forms have been resubmitted on the system are also tracked. Any special provisions or other notes specific to a contract is also referenced on the form. Seven agencies required some level of contract negotiation. Twenty two contracts required some revision or correction to the applications. In all, thirty six contracts were prepared and have been executed. Some agencies have completed the application revisions while other application changes are still in progress.

Contract negotiations were held with CCRPC, CUAP, DREAM House, First Followers, GROW in Illinois, Prairie Center, and Rosecrance. The most complicated of the negotiations was on the Rosecrance Co-Responder Team contract. The outcome was a redirection of the funds to two other Rosecrance contracts. To recap, in May the Board approved \$100,000 for the program following lengthy discussion. A few days after the CCMHB made award decisions, Sheila Ferguson met with Lynn Canfield and me about the funding decisions. Ms. Ferguson's preference was to redirect the co-responder team funds to support the crisis program rather than attempt to secure other funds to support law enforcement related expenses not funded by the Board. Also noted was that if the Board had funded the program at a higher level to support law enforcement that level of funding would have needed to be sustained by the Board. The following week a formal contract negotiation meeting was held between CCMHB staff and Rosecrance staff. What was proposed to Rosecrance staff was to add \$33,685 to fully fund the Criminal Justice program request. The additional funding would add a fulltime case manager working afternoons in the community and evenings in the jail. And then the balance of funds, \$66,315, would be redirected to the Crisis program. How the funds were allocated within the Crisis program to support the crisis team, be it fully dedicated staff or a percentage of multiple positions was discussed at length as was the addition of a new case manager for the jail. The redirected funds result in contract awards of \$300,265 for the Criminal Justice program and \$228,002 for the Crisis, Access, and Benefits program.

Other contract related activity included drafting the contract for the University of Illinois "Build Evaluation Capacity for Programs: Year 3" proposal. Execution of the contract is contingent on action by the Board per decision memo included in the Board packet. And then there was the work associated with coordinating the PLL study session and distribution of various documents in advance of the meeting. Follow-up to the study session has involved assisting with drafting the PLL Decision Memo that is included in the Board packet and communicating with Savannah Family Institute on the contract. RACES notified staff the organization has received other funds to support counseling services and asked to use CCMHB FY18 funds for prevention education. Request was approved and the application forms will be revised.

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Amendments to some FY17 contracts were also necessary. Family Services requested an amendment to redirect funds \$5,900 from the Senior Counseling and Advocacy program to the Counseling program. The East Central Illinois Area Agency on Aging reallocated funds to the Senior Counseling and Advocacy program enabling the CCMHB funds to be redirected. The Counseling program had billed out the fee for service contract in April. The influx of funds will pay for billable services provided in May and June. Rosecrance has requested an amendment to the FY17 Criminal Justice contract. The contract includes the matching funds for the Department of Justice "Justice Mental Health Collaboration Program (JMHCP)" two year planning grant that expires the end of September. The Criminal Justice contract amendment would extend the term to correspond with the end of JMHCP grant enabling Rosecrance to continue to spend down funds to meet the match requirement. Such an extension is necessary and justified. In addition, Rosecrance is requesting approval to use the excess revenue resulting from the unexpended matching funds for related program expenses not billable to the federal grant and by extension the local match. A decision memo seeking approval of the extension of the contract term and action on the request other grant related expenses is included in the packet. An announcement on whether Champaign County was awarded the Department of Justice JMHCP implementation grant is not expected until late September. The CCMHB committed to provide the matching funds for that grant. While funds have been set-aside for this purpose, no contract will be issued until the federal notice of award is issued.

Other Activity: After a fairly long hiatus, the Local Funders Group reconvened in late June. The Local Funders Group is as the name implies a meeting of various local funding bodies. Information shared at the no-so-frequent meetings varies but typically includes updates on funding decisions, application criteria, program performance related issues, and open discussion. At the most recent meeting, Lynn, Kim, and I shared the FY18 allocation decisions made by the CCMHB and CCDDDB. The City of Urbana/Cunningham Township also reported on recent allocation decisions as did the Community Foundation of East Central Illinois. Danielle Chynoweth, Cunningham Township Supervisor shared changes planned at the township, frequent needs of adults seeking assistance and barriers to employment and housing. Continuing the allocation decision theme of this report, I also gave a short presentation to the Child and Adolescent Local Area Network on the CCMHB allocations for FY18 and application process.

Stephanie Howard-Gallo

**Developmental Disabilities Contract Coordinator Staff Report –
July 2017 Board Meetings**

SUMMARY OF ACTIVITY:

Contracts:

Fifty-eight separate contracts for funding from the CCDDDB and the CCMHB have been drafted and sent with “award letters” to agencies. The award letter indicates the amount allocated by program and if negotiation or revised forms are necessary. An excel spreadsheet tracks the processing of contracts. The spreadsheet indicates which contracts require negotiations, if revised program and/or budget forms must be submitted; if a revised Cultural Competency Plan is needed; or if they only need to be signed. A Contract Process and Information Sheet is included with the award letter and contracts. The sheet provides a summary of the process, notes on revised plan requirements, references to special provisions, and a reminder to read the contract.

The date the contract is issued and the date it is returned is noted. Signed copies are provided to the Financial Manager and the Champaign County Auditor before payments can be issued. Contracts returned after the deadline usually mean payments will be delayed.

Issuing and completing the contract process is time consuming and is a group effort among staff members.

Accounts Payable:

Lynn and I continued to share accounting duties up until June 19th when we welcomed Chris Wilson to take over. I assisted in making July payments to the agencies.

Third Quarter Reporting:

Third Quarter financial and program reports were due at the end of April. Most agencies report on time or ask for a small extension. Several agencies were asked to revise and/or correct their reports. No letters of non-compliance were sent out for reports this quarter.

A few of the agencies forget to send us their approved Board minutes, but this is usually resolved by an informal email to them.

Records and Data Retention:

A new funding year means setting up new contract files for the programs. I have also been working toward a paper file purge of old records. Generally, we keep 10 years of paper files in the file room.

Other:

I have been participating in an organizational assessment, along with the other staff.

July 12, 2017- Monthly Staff Report- Shandra Summerville

Cultural and Linguistic Competence Coordinator

I attended small breakout group of the CU **Collaborative Conversations** about Race in CU. This was opportunity to begin to build relationships on a more intentional level outside of the large group. The meeting brought opportunities to build additional partnerships to look at how to continue to build bridges in the community to help address disparities. In addition to the groups, we were invited to break out into other groups in the community to begin looking at how we can make community impact. I was informed about the Community Benefit Fund that looks at ways to reduce disparities in technology for underserved and marginalized communities. I submitted names about being part of the collaboration.

Human Services Council of Champaign County: On May 6 and June 1 I co-facilitated a cultural diversity training with Kathy Rhodes of the Circle of Friends Adult Daycare. There were 22 people that participated in the training. This was offered by the HSC to ensure that CEU's were provided for MSW's and LCSW's. The CEU's were sponsored by the School of Social Work. The Objectives of the training were as follows:

- **Participants will become familiar with the National CLAS (Cultural and Linguistic Appropriate Services) Standards**
- **Participants will leave with practical ways of implementation of the CLAS Standards at their agency.**
- **Participants will develop a personal plan of action that will work toward providing care with CLAS Standards at their agency.**
- **Participants will have an interactive discussion with other providers about how the value of cultural competence is being implemented in their agency and others.**
- **Participants will leave with a deepened appreciation of cultural competence and its importance.**

CLC Training and Technical Assistance:

I met with the following organizations to provide technical assistance and CLC Support to promote the value of CLC

- Children's Advocacy
- Urbana Neighborhood Connection Center
- Champaign County Head Start Program
- Don Moyer's Boys and Girls Club

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- Elliot Counseling Group-
- First Followers- CLC Board Training
- University High School Laboratory School
- Centennial High School
- Youth and Family Peer Support Alliance
- Statewide Illinois Youth and Family Alliance
- Illinois Association of Microboards and Cooperatives
- Community Choices

FY 2018- CLC Plans:

I reviewed all of the CLC Plans and provided summaries for the CLC Plans that were submitted. During contract negotiations, there were 3 organizations that had revisions to their CLC Plans. They were to be uploaded to the system by June 30, 2017.

Transition in Champaign County:

Linda Tortorelli of The Autism Program agreed to host a collaboration meeting to discuss Transition in Champaign County with the DD/IDD Providers in Champaign County. The tentative meeting was scheduled March 30, 2017.

Training and Webinars Attended:

I attended the following trainings in person and on-line

- **ACHMAI Meeting June 8th & 9th**
- **WordPress and Website training for the Alliance for Inclusion and Respect**
- **Effectively Communicating with People on the Autism Spectrum**

NAACP Champaign County Branch-

I attended the NAACP meeting in March, April. The planning for the annual Freedom Fund Celebration has started and I will serve on the planning committee.

Anti-Stigma Activites/Community Outreach-

Ebert Festival 2017- Thank you to the support of the Alliance for Inclusion and Respect and CCMHB we were able to sponsor the Anti-Stigma Film "Mind Game-The Unquiet Journey of Chamique Holdsclaw." This year we provided Festival Passes to members of CCMHB, Retired Educators, Community People and Representatives of the Alliance for Inclusion and Respect. In addition to the festival passes, tickets were available to the sponsored film.

I coordinated the panel discussion of Mental Health Professionals as well faculty from the University of Illinois and Parkland College.

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Film Discussion Panel Included:

Juli Kartel, Rosecrance- Former Athlete

Joseph Omo-Osagie- Parkland College, CCMHB Board Member

Dr. Carla Hunter- University of Illinois, Urbana-Champaign, Associate Director of Clinical Training

(Please see photos at the end of the report)

In an effort to continue with Anti-Stigma activities for the year in connection with the Ebert Film Festival selection "Mind Game" the director Rick Gold Smith provided a copy of the film to be utilized for education in Champaign County. Mahomet Area Youth Club is the first agency that will screen Mind Game and there will be a short discussion.

Enhanced National CLAS(Culturally and Linguistically Appropriate Services) Standards Training was held on June 30, 2017 CEU's were provided in partnership with Prairie Center Health Systems. Special thanks to the Pavilion for allowing us to utilize the training space. There were 15 participants that signed up to attend the training.

African American Community Healing through Storytelling

I was invited to participate in a research cluster project in partnership with the University of Illinois Urbana-Champaign. It is looking community healing through story telling.

Healing on a community-level has the potential to promote resilience and foster relationships that can help sustain healing. A group of interdisciplinary scholars and community members, whose focus centers on the wellbeing of African Americans, propose to create an IPRH Research Cluster aimed at extending the wellness literature by exploring the concept of community healing through storytelling across various African American community groups within the Champaign-Urbana area. The goals of the research cluster are to: 1) build sustainable partnerships with community members, scholars, and professionals interested in African American community healing; 2) develop a model/framework of community healing through storytelling; and 3) create and capture the perceptions and process of community healing through digital storytelling.

Lead2017- Windsor Road Church is planning a leadership conference for community leaders to focus on being an intentional leader. I was invited to be part of the planning as a CLC expert to infuse the values in the planning of their annual conference.

Unit 4 School District- CU4SD Community Schools Initiative is a partnership to build capacity to support students and families populations that have been marginalized and disenfranchised. I met with Tony Maltbia and Lynn Canfield about serving on one of the Site Advisory Teams.

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Men's and Women's SAFE(Substance Abuse Free Environment) House

I attended the planning meeting for the Summer Activities for the SAFE Houses that will be held on August 27, 2017 at Hessel Park.

AIR- Alliance for Inclusion and Respect- Please continue to support the Artists and notice new artwork that has been submitted on the website www.champaigncountyair.com

Rotary Club of Champaign

I attend weekly meetings for the Rotary and serve on communications, music and membership committees. I attended the District Conference and 100 year celebration of the Champaign Rotary Club.



July

<https://www.youtube.com/watch?v=dZfeuYWDs0w>

<https://www.nami.org/Get-Involved/Awareness-Events/Minority-Mental-Health-Awareness-Month/Minority-Mental-Health-Stories>

National Minority Mental Health Month

https://www.nami.org/Get-Involved/Awareness-Events/Awareness-Messaging?utm_source=awareness&utm_medium=website&utm_campaign=intoMH

In May of 2008, the US House of Representatives announce July as Bebe Moore Campbell National Minority Mental Health Awareness Month.

The resolution was sponsored by Rep. Albert Wynn [D-MD] and cosponsored by a large bipartisan group to achieve two goals:

- Improve access to mental health treatment and services and promote public awareness of mental illness.
- Name a month as the Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness and mental illness among minorities.

About Bebe Moore Campbell

- Bebe Moore Campbell was an author, advocate, co-founder of NAMI Urban Los Angeles and national spokesperson, who passed away in November 2006. She received NAMI's 2003 Outstanding Media Award for Literature. Campbell advocated for mental health education and support among individuals of diverse communities. In 2005, inspired by Campbell's charge to end stigma and provide mental health information, longtime friend Linda Wharton-Boyd suggested dedicating a month to the effort.

Facts

- 1 in 5 adults in the United States lives with a mental health condition.
- African Americans and Hispanic Americans used mental health services at about half the rate of whites in the past year, and Asian Americans at about one-third the rate.
- GET INFOGRAPHIC

What is Stigma?

- People experiencing mental health conditions often face rejection, bullying and even discrimination. This can make their journey to recovery longer and more difficult. Stigma is when someone, or you yourself, views you in a negative way because you have a mental health condition. Some people describe stigma as shame that can be felt as a judgement from someone else or a feeling that is internal, something that confuses **feeling** bad with **being** bad.
- Stigma's effects: People experiencing mental health conditions often face rejection, bullying and discrimination. This can make their journey to recovery longer and more difficult. Mental health conditions

are the leading cause of disability across the United States. Even though most people can be successfully treated, less than half of the adults in the U.S. who need services and treatment get the help they need. The average delay between the onset of symptoms and intervention is 8-10 years. Suicide is the second leading cause of death of youth ages 15-24 and the tenth leading cause of death for all Americans.

- <https://www.nami.org/stigmafree>

<https://minorityhealth.hhs.gov/omh/content.aspx?ID=9447&lvl=2&lvlid=12>

- Minorities are less likely to receive diagnosis and treatment for their mental illness, have less access to and availability of mental health services
- nearly two-thirds of people with a diagnosable mental illness do not seek treatment, and racial and ethnic groups in the U.S. are even less likely to get help

African American

- Poverty level affects mental health status. African Americans living below the poverty level, as compared to those over twice the poverty level, are 3 times more likely to report psychological distress.
- African Americans are 10% more likely to report having serious psychological distress than Non-Hispanic whites.
- However, the suicide rate for African Americans is 70% lower than that of the non-Hispanic white population.

American Indians/Alaska Natives

- In 2014, suicide was the second leading cause of death for American Indian/Alaska Natives between the ages of 10 and 34.¹
- American Indian/Alaska Natives are 50% more likely to experience feelings of nervousness or restlessness as compared to non-Hispanic whites.

Asian Americans

- Southeast Asian refugees are at risk for post-traumatic stress disorder (PTSD) associated with trauma experienced before and after immigration to the U.S. One study found that 70% of Southeast Asian refugees receiving mental health care were diagnosed with PTSD.²
- For Asian Americans, the rate of serious psychological distress increases with lower levels of income, as it does in most other ethnic populations.
- The overall suicide rate for Asian Americans is half that of the White population.

Hispanic or Latino Americans

- Hispanics living below the poverty level, as compared to Hispanics over twice the poverty level, are over twice as likely to report psychological distress.
- However, the suicide rate for Hispanics is half that of the non-Hispanic white population.
- White Americans received mental health treatment 2 times more often than Hispanic Americans in 2014.

Percent of adults (18+) that have experienced serious psychological distress in the past 30 days, 2013-2014

Native Hawaiian or Other Pacific	American Indian/Alaska Native	Hispanic or Latino	Black or African American	Asian	White	Two or more races

Islander						
Info unavailable	5.4%	4.5%	3.5%	1.9%	3.4%	8.6%

CDC, 2016. Health United States, 2015. Table 46.


<http://www.cdc.gov/nchs/data/hus/hus15.pdf>

Percent of adults (18+) who received mental health treatment or counseling in 2015

Native Hawaiian or Other Pacific Islander	American Indian/Alaska Native	Hispanic or Latino	Black or African American	Asian	White	Two or more races
6.5%	15.6%	8.1%	8.7%	5.0%	17.3%	17.5%

SAMHSA, 2015. Center for Behavioral Health Statistics and Quality. Results from the 2015 National Survey on Drug Use and Health: Detailed Tables. Table 8.35B. Rockville, MD.

<http://www.samhsa.gov/data/population-data-nsduh/reports?tab=38>



Mental illness doesn't choose who is affected by it, but culture, race, gender or sexual orientation can affect access to treatment, support and quality of care for many.

Let's change this.

Minority Mental Health Month

Learn More at NAMI.org/mmh

#MinorityMentalHealth



1 IN 5 PEOPLE

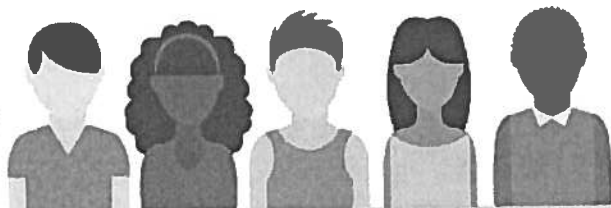
EXPERIENCE A MENTAL HEALTH CONDITION

Learn more, share your story and spread the word.

You can make a difference.

Learn more about National Minority Mental Health Awareness Month

MULTICULTURAL MENTAL HEALTH



Does Mental Health Matter?

Mental health directly and indirectly impacts all of us.



1 in every 5 adults
in the U.S. experiences a mental health condition.

1 in every 5 children
ages 13-18 have or will have a serious mental health condition.

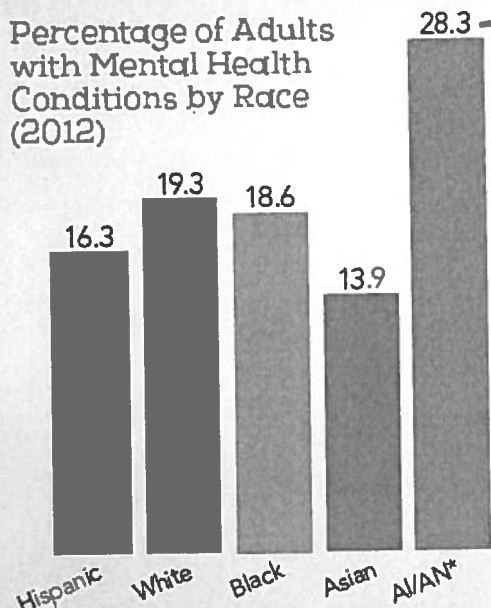
Mental health is part of overall health. Mental health conditions cause changes in thoughts, feelings and mood.

Mental health conditions can affect many areas of your life including: home, work, school, relationships with others, sleep, appetite, decision making and may worsen other medical problems.

Does Mental Health Affect My Community?

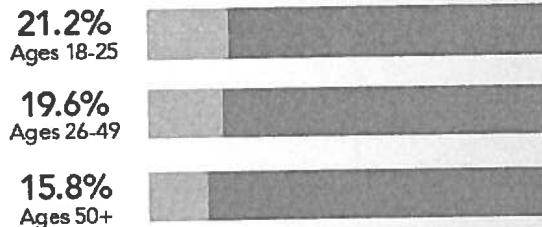
Culture, race, ethnicity, gender, age and sexual orientation influence mental health care rates, attitudes, access and treatment.

Percentage of Adults with Mental Health Conditions by Race (2012)



At 28.3%, American Indians and Alaska Natives have the highest rate of mental health conditions among all communities.

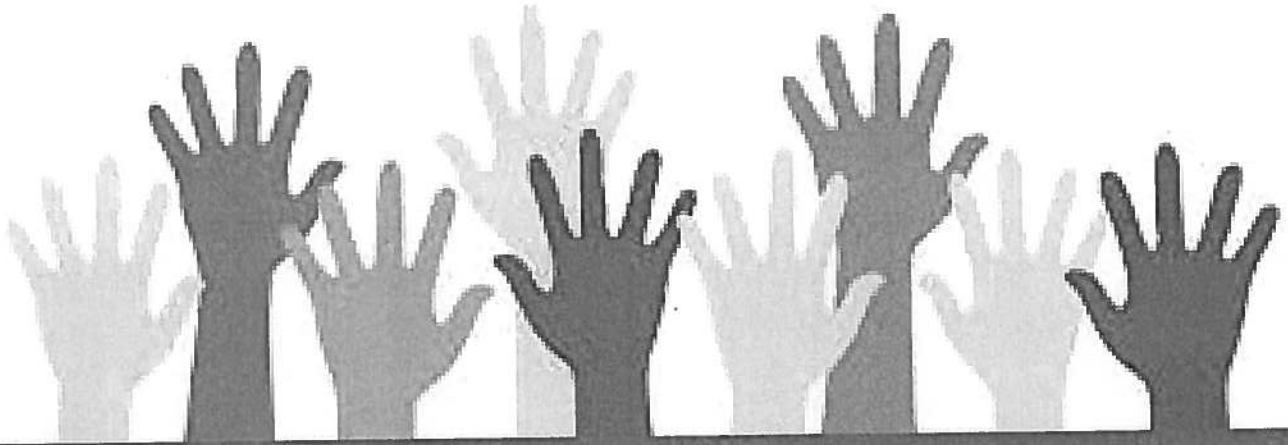
Percentage of Adults with Mental Health Conditions by Age



Lesbian, Gay, Bisexual, Transgender & Questioning (LGBTQ) youth are 2 to 3 times more likely to attempt suicide than straight youth.

LGBTQ individuals are 2 or more times more likely as straight individuals to have a mental health condition.





National Minority Health Awareness Month

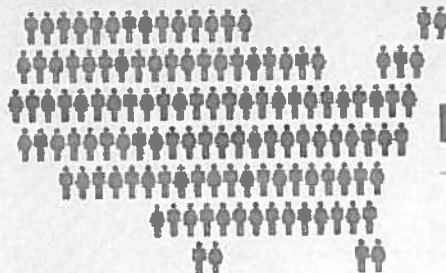
National Minority
Mental Health Awareness Month
JULY

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MENTAL HEALTH AND DIVERSE POPULATIONS AT-A-GLANCE

Mental Illness in the U.S. Affects:

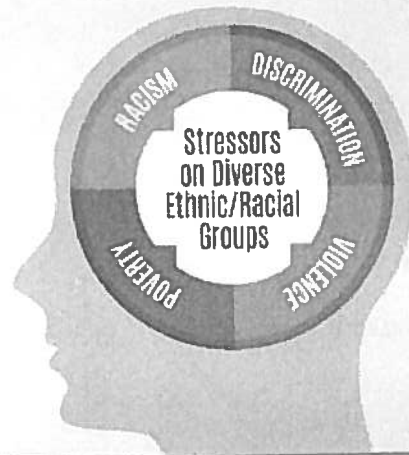
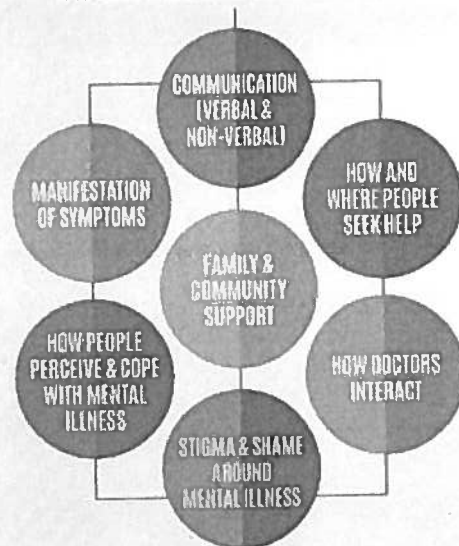


INCREASINGLY DIVERSE POPULATION

➔ **1 IN 3** PEOPLE IN THE U.S. identifies themselves as a member of an ethnic/racial group

4% OF THE U.S. POPULATION identify themselves as **LGBT**

How Can Race/Ethnicity/Culture INFLUENCE MENTAL HEALTH?



MENTAL HEALTH DISPARITIES FACTORS

Members of ethnic and racial minority groups in the U.S. "face a social and economic environment of inequality that includes greater exposure to racism, discrimination, violence, and poverty, all of which take a toll on mental health."

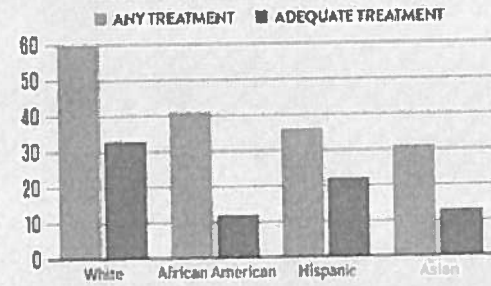
- U.S. SURGEON GENERAL



FACTS ON SUBSTANCE USE DISORDERS

- Hispanics are less likely to receive needed care than whites
- Blacks are less likely to complete treatment than whites
- The rate of substance use disorders among American Indians/Alaska Natives is twice that of other racial/ethnic groups

DEPRESSION TREATMENT: ACCESS & QUALITY



LGBT FACTS

- LGBT individuals are **MORE THAN TWICE AS LIKELY** as straight individuals to have a mental health disorder
- Suicide attempts are **3-TIMES MORE COMMON** among bisexual individuals than straight individuals
- Sexual minorities have a **GREATER RISK** of substance use disorders than straight individuals
- Compared to non-sexual minority youth, sexual minority youth are **TWICE AS LIKELY** to report being bullied

FOR MORE INFORMATION, RESOURCES, AND REFERENCES, PLEASE VISIT WWW.PSYCHIATRY.ORG/DIVERSITY

Social Wellness Month

Social Wellness Month is historically celebrated during the month of July. Social Wellness Month was created / sponsored by Words of Wellness and was put in place to assist people in their efforts to live a healthier life.

<https://www.takingcharge.csh.umn.edu/july-social-wellness-month>

Social wellness means nurturing yourself and your relationships.

It means giving and receiving social support - ensuring that you have friends and other people, including family, to turn to in times of need or crisis to give you a broader focus and positive self-image.

Social support enhances quality of life and provides a buffer against adverse life events. Social support can take different forms:

- **Emotional** (sometimes called non-tangible) support refers to the actions people take to make someone else feel cared for.
- **Instrumental** support refers to the physical, such as money and housekeeping.
- **Informational** support means providing information to help someone.

One of the earliest studies on the physical and psychological health benefits of social support was in 1905. Dr. Joseph Pratt, an internist from Boston, gathered a group of tuberculosis patients together to educate them about hygiene in relation to their illness. This "support group" provided early evidence of the power of psychological support in physical health and healing.

Why is Social Wellness Important?

Healthy relationships are a vital component of health. The health risks from being alone or isolated in one's life are comparable to the risks associated with cigarette smoking, blood pressure, and obesity.

Research shows that:

- People who have a strong social network tend to live longer.
- The heart and blood pressure of people with healthy relationships respond better to stress.
- Strong social networks are associated with a healthier endocrine system and healthier cardiovascular functioning.
- Healthy social networks enhance the immune system's ability to fight off infectious diseases.

Nurture Your Relationships

According to Drs. Gay and Kathlyn Hendricks, in their book *Lasting Love: The 5 Secrets of Growing a Vital, Conscious Relationship*, the following concepts are instrumental in attaining a healthy and lasting relationship.

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1. Become a master of commitment. It's important to be aware of precisely what you are committing to, so that you can realistically judge whether or not you have the capacity to follow through on the commitment.

2. Make commitments you can stand by. In a relationship, it is important to be honest and empathetic to each other's feelings, hopes, and dreams.

3. Break the cycle of blame and criticism. It is important to own your part in the relationship dynamics.

4. It can be helpful to shift your attention away from "fixing the other person" and onto more creative expressions for resolving conflict. Shifting the focus in this way will help to inject more positive energy into the relationship.

5. Become a master of verbal and nonverbal appreciation. Showing appreciation of others is critical to healthy relationships.

Learn more about nurturing relationships.

WAYS TO IMPROVE SOCIAL WELLNESS

- Reconnect with old friends, or reach out and try to develop new friendships. Are you letting yourself be open enough to allow others to approach you?
- Spend time really listening to other people. Find out what is important to them. What issues are they facing? Listening to someone else is one of the best things that we can do for them and it allows us to keep our own issues and challenges in perspective.
 - **Work out.** Joining a gym or an exercise group allows you to meet new people while exercising.
 - Take a walk with your pet. Starting a walking routine after dinner would not only give you another opportunity to be physically active, but it would also create more opportunities for you to meet your neighbors.
 - Volunteer. Donate some of your time and hard work to a charity. You'll feel good about the cause, and you'll meet others with similar passions.
 - Find others who share a hobby, such as hiking, painting, scrapbooking, running, etc.
 - **Talk to a friend.** Call or visit someone you may not have spoken to in a while and have a positive interaction. Really listen and find out what is important or what issues the person has been facing. Practice empathy by putting yourself in the person's shoes.
 - **Know your needs.** Get to know your own personal needs, and find people who can help nurture those needs. While pursuing your own needs, help others with theirs. Talk to people who are supportive of your needs.
 - **Allow others to care for you.** Sometimes it can be difficult to admit when there's something you can no longer accomplish on your own. When you need assistance with something, even if it's just going to the grocery store or household chores, allow the people who care about you to help you. There's no shame in admitting you can't do it all on your own.
 - **Develop a new friendship.** You're never too old to make a new friend, so don't be afraid to go up and talk to a peer. Enjoy being with others. Social interactions help improve your mood and enhance your self-esteem. Remember, sometimes laughter really is the best medicine.
 - **Relax and find inner peace.** Relaxation is a great way to clear your mind and find inner happiness. Rest and get a good night's sleep- sleep is just as important as leading an active life to keep you alert and healthy.

• **7. Get some sun (and vitamin D).**

▪ **11. Get a good night's sleep.**

- *Practice self disclosure*
- *Get to know your personal needs and pursue things and people who nurture those needs*
- *Contact and make a specific effort to talk to the people who are supportive in your life*
- *Attend a Wellness Forum*
- *Join a club or organization that interests you*

<http://definitionofwellness.com/dimensions-of-wellness/social-wellness/>

The social dimension of wellness encourages contributing to one's human and physical environment to the common welfare of one's community. Social Wellness emphasizes the interdependence with others and nature. It includes the pursuit of harmony in one's family.' As you travel a wellness path, you'll become more aware of your importance in society as well as the impact you have on nature and your community. You'll take an active part in improving our world by encouraging a healthy living environment and initiating better communication with those around you. You'll actively seek ways to preserve the beauty and balance of nature along the pathway.

Social wellness is having positive interactions with and enjoying being with others. It is having comfort and ease during work and leisure situations and communicating feelings and needs to others. It involves developing and building close friendships and intimacy, practicing empathy and effective listening, caring for others and for the common good, and allowing others to care for you. It is recognizing the need for leisure and recreation and budgeting time for those activities.

As you proceed on your social wellness journey, you'll discover many things-you'll discover that you have the power to make willful choices to enhance personal relationships, important friendships, your community, the environment and, ultimately, the world. As you travel the wellness path, you'll begin to believe that – socially.

Social Wellness Assessment

The social dimension of wellness involves developing, nourishing and encouraging satisfying relationships. Read each statement carefully and respond honestly by using the following scoring:

Almost always = 2 points **Sometimes/occasionally = 1 point** **Very seldom = 0 points**

- _____ 1. I contribute time and/or money to social and community projects.
- _____ 2. I am committed to a lifetime of volunteerism.
- _____ 3. I exhibit fairness and justice in dealing with people.
- _____ 4. I have a network of close friends and/or family.
- _____ 5. I am interested in others, including those from different backgrounds than my own.
- _____ 6. I am able to balance my own needs with the needs of others.
- _____ 7. I am able to communicate with and get along with a wide variety of people.
- _____ 8. I obey the laws and rules of our society.

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____ 9. I am a compassionate person and try to help others when I can.

____ 10. I support and help with family, neighborhood, and work social gatherings.

_____ Total for Social Wellness Dimension

Score: **15 to 20 Points** – Excellent strength in this dimension.

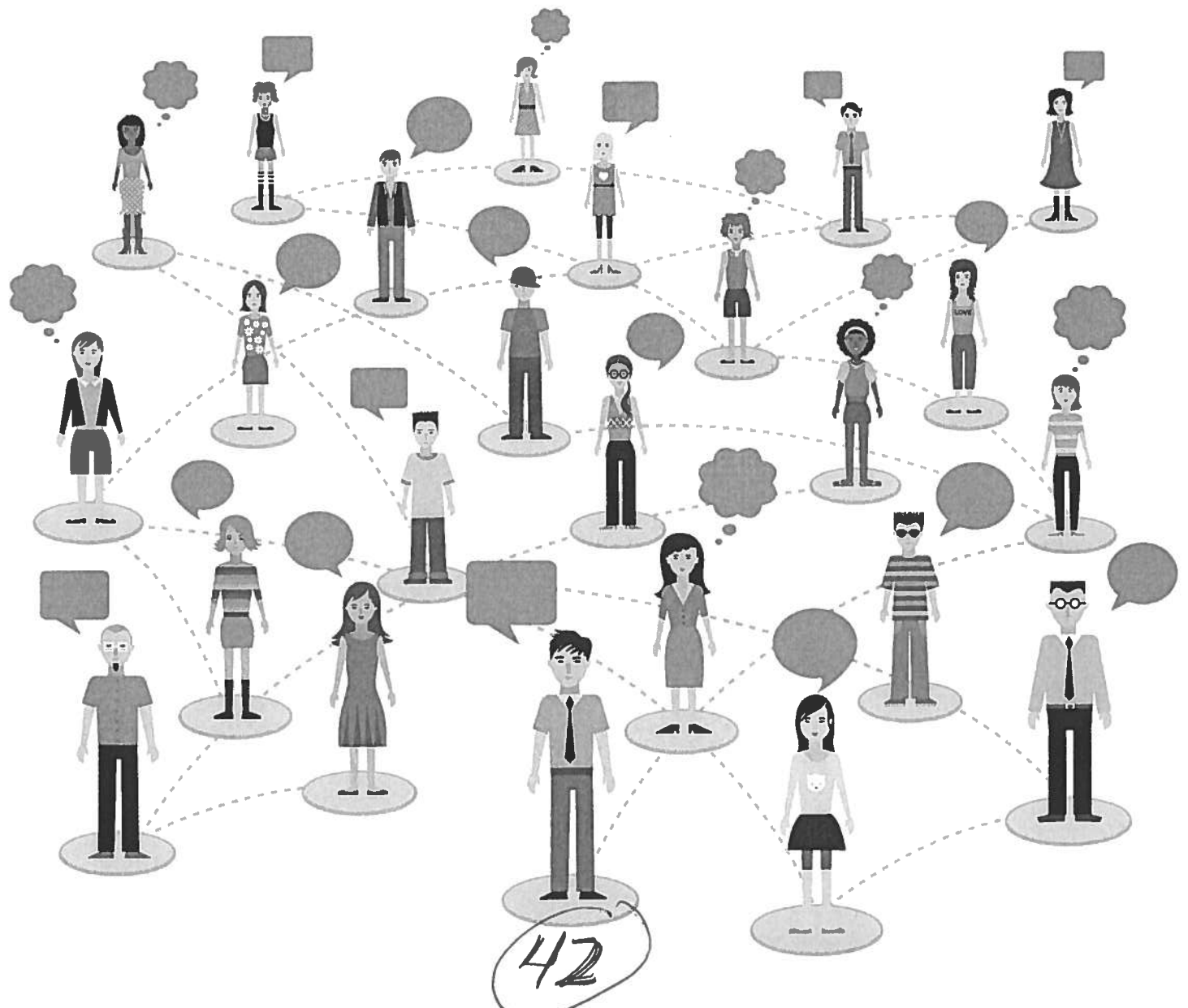
Score: **9 to 14 Points** – There is room for improvement. Look again at the items in which you scored 1 or 0. What changes can you make to improve your score?

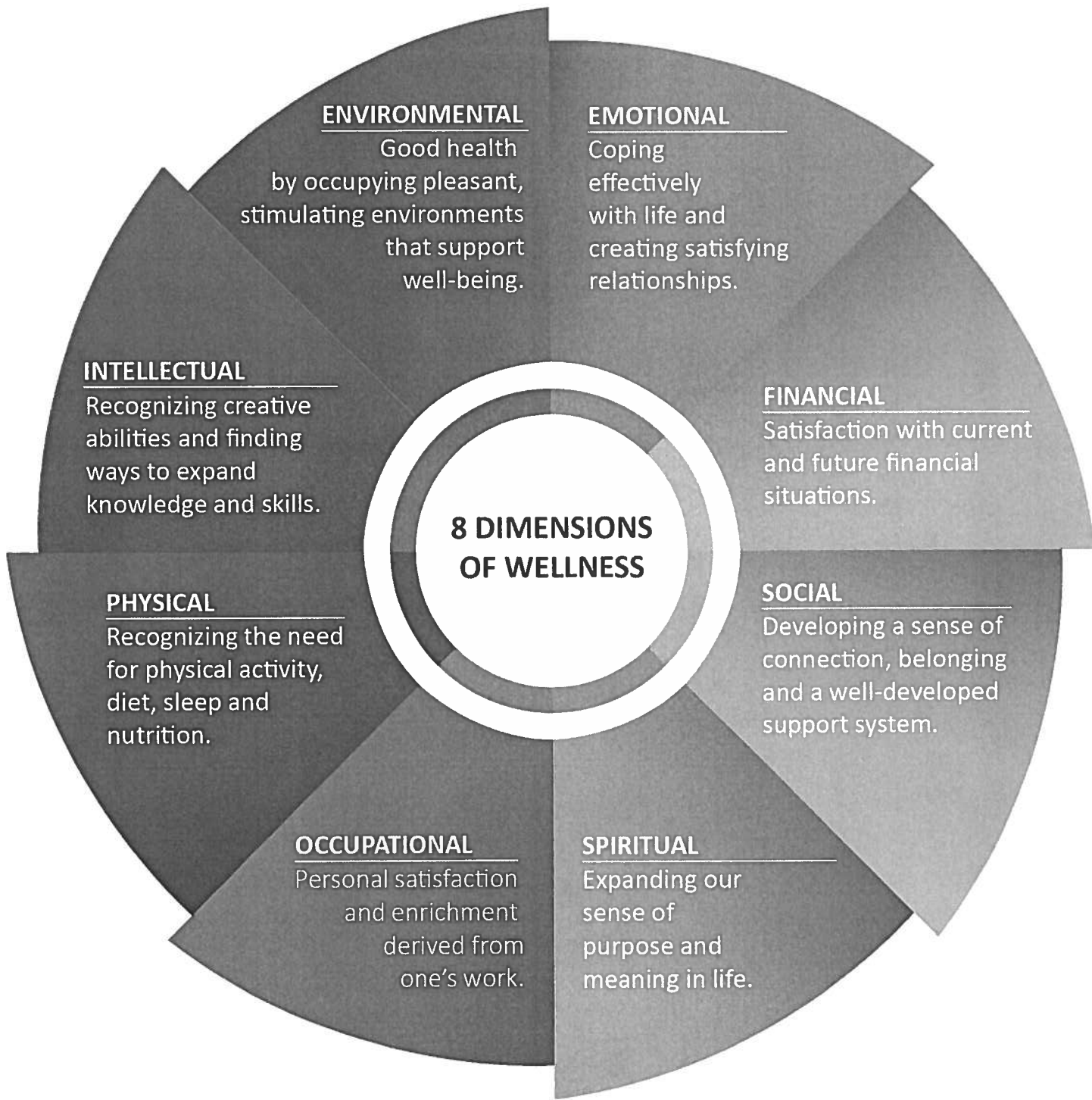
Score: **0 to 8 Points** – This dimension needs a lot of work. Look again at this dimension and challenge yourself to begin making small steps toward growth here. Remember: The goal is balanced wellness.

Source:

Six Dimensions of Wellness Model ©1976 by Bill Hettler, MD

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disABILITY Resource Expo: Reaching Out For Answers
Board Report
July, 2017

The 11th disABILITY Resource Expo has been scheduled for Saturday, April 7, 2018. Jim Mayer and Barb Bressner have been working with our new venue, The Vineyard Church in Urbana. This new site should nicely accommodate the 100 plus exhibitors we expect to host. We have met with The Vineyard's new Events Director regarding contract specifics for our event, and should have a contract ready for signature very soon.

An Exhibitor Meet and Greet was held at The Vineyard on May 4, with approximately 40 in attendance. During this event, exhibitors were given an opportunity to tour the new venue and hear from State Treasurer Michael Frerichs about the implementation of the ABLE Act in Illinois. We received very positive feedback on the new Expo venue from those in attendance.

Barb & Jim attended the annual Abilities Expo in Schaumburg on June 23 and 24. We were very pleased to have the opportunity to not only chat with several of our previous exhibitors, but also spoke with 4-6 exhibitors who were new to the Abilities Expo who expressed their interest in our event in April. We have attended the Abilities Expo for the past several years, and it has proven to be an invaluable resource to us in terms of recruiting new resources and technology. We have also benefited from the expertise of the owners of the Abilities Expo, who have been great advisors to us over the years.

Jim Mayer has been working on some revision to our current website. He has expanded the resources listed to be a more comprehensive accounting of the disability resources in our area. He is also including some additional category buttons to allow for easier access to information provided (ie. About Us, How To Volunteer). Future plans are to work with CCMHB staff to make the site more disability access friendly per county regulations.

Barb and several Expo Committee members participated in Unity East Elementary Schools' "We All Come In Different Packages" day on April 21. Barb participated in the planning of this event with Unity staff. She and Expo Planning Committee representatives spoke with children and answered their questions on various disabilities to help them have a better understanding and reduce stigma related to persons with a disability. This school-wide event culminated in an assembly where students got to participate in role-plays relative to the information contained in our Expo bookmark, and then watch an expedition scrimmage with members of the Illini Wheelchair Basketball Teams. We commend Unity East for their forward thinking and steps to assist their students in the way they view persons with disabilities. I'm also told we made their local newspaper!

The Human Factors and Aging Laboratory at UIUC, in collaboration with Georgia Institute of Technology, is conducting an interview study that explores the challenges older adults with long-term sensory and mobility impairments have with everyday activities. They were experiencing difficulty in recruiting participants for this study and requested our assistance. Barb provided some potential resources to them, and participated in the study, as well. We will receive feedback, which may assist in our future resource recruitment for the Expo.

Respectfully submitted
Barb Bressner & Jim Mayer
Consultants

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VENDOR NO	VENDOR NAME	TRN B	TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO. 090 MENTAL HEALTH											
*** DEPT NO. 053 MENTAL HEALTH BOARD											
25	CHAMPAIGN COUNTY TREASURER	6/06/17	01 VR 53-194			561080	6/08/17	090-053-533.50-00	RENT-GENERAL CORP FACILITY/OFFICE RENTALS	JUN OFFICE RENT VENDOR TOTAL	1,739.64 1,739.64 *
41	CHAMPAIGN COUNTY TREASURER	5/26/17	05 VR 620-74			560774	5/31/17	090-053-513.06-00	HEALTH INSUR FND 620 EMPLOYEE HEALTH/LIFE INS	MAY HI & LI VENDOR TOTAL	2,984.20 2,984.20 *
88	CHAMPAIGN COUNTY TREASURER	5/23/17	04 VR 88-26			560482	5/25/17	090-053-513.02-00	I.M.R.F. FUND 088 IMRF - EMPLOYER COST	IMRF 5/12 P/R	965.84
		6/01/17	04 VR 88-31			561084	6/08/17	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 5/26 P/R VENDOR TOTAL	1,062.55 2,028.39 *
104	CHAMPAIGN COUNTY TREASURER	6/06/17	01 VR 53-171			561086	6/08/17	090-053-533.92-00	HEAD START FUND 104 CONTRIBUTIONS & GRANTS	MAY/JUN SOC/EMOT SV VENDOR TOTAL	9,275.00 9,275.00 *
161	CHAMPAIGN COUNTY TREASURER	6/06/17	01 VR 53-170			561089	6/08/17	090-053-533.92-00	REG PLAN COMM FND075 CONTRIBUTIONS & GRANTS	MAY/JUN YTH ASMT CT VENDOR TOTAL	4,330.00 4,330.00 *
176	CHAMPAIGN COUNTY TREASURER	5/05/17	03 VR 119-31			559795	5/11/17	090-053-513.04-00	SELF-FUND INS FND476 WORKERS' COMPENSATION	INSWKMP 4/13,28 PR	118.12
		6/07/17	01 VR 119-37			561090	6/08/17	090-053-513.04-00	WORKERS' COMPENSATION	INSWORK COMP 5/12,26 P VENDOR TOTAL	137.01 255.13 *
179	CHAMPAIGN COUNTY TREASURER	6/06/17	01 VR 53-169			561092	6/08/17	090-053-533.92-00	CHLD ADVC CTR FND679 CONTRIBUTIONS & GRANTS	MAY/JUN CAC VENDOR TOTAL	6,180.00 6,180.00 *

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VENDOR NO	VENDOR NAME	TRN B TR	TRN NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
188	CHAMPAIGN COUNTY TREASURER						SOCIAL SECUR FUND188			
	5/23/17 04 VR 188-	45			560488	5/25/17	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA 5/12 P/R		874.40
	6/01/17 04 VR 188-	49			561093	6/08/17	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA 5/26 P/R		961.94
								VENDOR TOTAL		1,836.34 *
544	AAIM EMPLOYERS ASSOCIATION									
	5/23/17 06 VR 53-	163			560490	5/25/17	090-053-533.93-00	DUES AND LICENSES	INV 271030 5/16	1,021.00
	6/06/17 01 VR 53-	198			561095	6/08/17	090-053-533.07-00	PROFESSIONAL SERVICES	INV 25769 5/31	186.00
								VENDOR TOTAL		1,207.00 *
4990	ASSN OF COMMUNITY MENTAL HLTH AUTH OF IL ACMHAI									
	6/06/17 01 VR 53-	199			561103	6/08/17	090-053-533.93-00	DUES AND LICENSES	FY17 DUES REMAIN BA	8,000.00
								VENDOR TOTAL		8,000.00 *
12250	CARIBBEAN GRILL									
	5/17/17 02 VR 53-	161			560116	5/19/17	090-053-533.89-00	PUBLIC RELATIONS	INV 170105 4/26	29.50
								VENDOR TOTAL		29.50 *
15495	CHAMPAIGN URBANA AREA PROJECT									
	6/06/17 01 VR 53-	172			561115	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN NGHBRHD CHM	3,199.00
	6/06/17 01 VR 53-	172			561115	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN TRUCE	12,500.00
								VENDOR TOTAL		15,699.00 *
18052	COMCAST CABLE - MENTAL HEALTH ACCT									
	5/23/17 02 VR 53-	164			560519	5/25/17	090-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010773527 MA	103.51
	5/23/17 02 VR 53-	164			560519	5/25/17	090-053-534.37-00	FINANCE CHARGES,BANK FEES	8771403010773527 MA	9.50
								VENDOR TOTAL		113.01 *
18203	COMMUNITY CHOICE, INC									
	5/15/17 02 VR 53-	160			560139	5/19/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CUSTM EMPLO	11,670.00
	5/15/17 02 VR 53-	160			560139	5/19/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN SELF DETERM	11,670.00
								VENDOR TOTAL		23,340.00 *

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VENDOR NO	VENDOR NAME	TRN B	TR	DTE N	CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY	6/06/17	01	VR	53-	174	561123	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN RESRC CONNC	10,880.00	
											VENDOR TOTAL	10,880.00 *	
18430	CONSOLIDATED COMMUNICATIONS	5/23/17	05	VR	28-	47	560523	5/25/17	090-053-533.33-00	TELEPHONE SERVICE	AC 99790003460	33.90	
		5/23/17	05	VR	28-	61	560523	5/25/17	090-053-533.33-00	TELEPHONE SERVICE	AC 99790003460	28.73	
		5/23/17	05	VR	53-	144	560523	5/25/17	090-053-533.33-00	TELEPHONE SERVICE	AC 99790003460	50.00	
											VENDOR TOTAL	112.63 *	
19260	COURAGE CONNECTION	6/06/17	01	VR	53-	175	561126	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN COUR CONNEC	11,158.00	
											VENDOR TOTAL	11,158.00 *	
19346	CRISIS NURSERY	6/06/17	01	VR	53-	176	561128	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN BEYOND BLUE	11,670.00	
											VENDOR TOTAL	11,670.00 *	
22300	DEVELOPMENTAL SERVICES CENTER OF CHAMPAIGN COUNTY INC	6/06/17	01	VR	53-	177	561134	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN INDIV/FAM	64,568.00	
											VENDOR TOTAL	64,568.00 *	
22730	DON MOYER BOYS & GIRLS CLUB	6/06/17	01	VR	53-	178	561135	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CU CHANGE	16,670.00	
		6/06/17	01	VR	53-	178	561135	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN YOUTH/FAM	26,670.00	
		6/06/17	01	VR	53-	196	561135	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUN COALTN SUM PRG	42,800.00	
											VENDOR TOTAL	86,140.00 *	
24095	EMK CONSULTING LLC	5/23/17	06	VR	53-	167	560534	5/25/17	090-053-533.07-00	PROFESSIONAL SERVICES	INV 167 5/20	314.40	
											VENDOR TOTAL	314.40 *	

*** FUND NO. 090 MENTAL HEALTH

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VENDOR NO	VENDOR TRN B TR	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
24215	EAST CNTRL IL REFUGEE MUTUAL ASSIST CTR	53-179		561142	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN FAM SUPPORT	3,170.00
								VENDOR TOTAL	3,170.00 *
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY						GRANTS		
	6/06/17 01 VR 53-184	184		561146	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN SELF HELP	4,818.00
	6/06/17 01 VR 53-184	184		561146	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN SENIOR COUN	23,727.00
	6/06/17 01 VR 53-184	184		561146	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	APR-JUN FAM COUNSEL	4,997.00
								VENDOR TOTAL	33,542.00 *
26760	FIRST FOLLOWERS								
	6/06/17 01 VR 53-185	185		561152	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN PEER MENTOR	4,964.00
								VENDOR TOTAL	4,964.00 *
44570	MAHOMET AREA YOUTH CLUB								
	6/06/17 01 VR 53-186	186		561187	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN BLAST	2,500.00
	6/06/17 01 VR 53-186	186		561187	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN MEMBER MATT	2,000.00
								VENDOR TOTAL	4,500.00 *
47690	MINUTEMAN PRESS								
	5/15/17 02 VR 53-157	157		560200	5/19/17	090-053-533.89-00	PUBLIC RELATIONS	INV 44784 4/28	1,394.24
								VENDOR TOTAL	1,394.24 *
56750	PRAIRIE CENTER HEALTH SYSTEMS								
	6/06/17 01 VR 53-187	187		561204	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CJ SUB TREA	1,720.00
	6/06/17 01 VR 53-187	187		561204	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN FRESH START	12,500.00
	6/06/17 01 VR 53-187	187		561204	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN PLL EXTEND	50,110.00
	6/06/17 01 VR 53-187	187		561204	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN PREVENTION	9,707.00
	6/06/17 01 VR 53-187	187		561204	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN SPEC COURTS	33,170.00
								VENDOR TOTAL	107,207.00 *
57196	PROMISE HEALTHCARE								
	6/06/17 01 VR 53-188	188		561208	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN WELL/JUSTIC	9,670.00

*** FUND NO. 090 MENTAL HEALTH

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VENDOR NO	VENDOR NAME	TRN B TR DTE N CD	TRANS NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
*** FUND NO.	090	MENTAL HEALTH								
61780	ROSECRANCE, INC.	6/06/17 01 VR 53- 173	53- 173		561221	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CRIM JUSTIC	47,350.00
61780	ROSECRANCE, INC.	6/06/17 01 VR 53- 173	53- 173		561221	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CRISIS/ACCS	42,570.00
61780	ROSECRANCE, INC.	6/06/17 01 VR 53- 173	53- 173		561221	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN PLL FRNT EN	47,113.00
61780	ROSECRANCE, INC.	6/06/17 01 VR 53- 173	53- 173		561221	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN TIMES CENTE	11,670.00
									VENDOR TOTAL	148,703.00 *
74550	TROPHYTIME, INC.	5/23/17 06 VR 53- 165	53- 165		560569	5/25/17	090-053-533.72-00	DEPARTMENT OPERAT EXP	INV 123942 5/16	9.40
									VENDOR TOTAL	9.40 *
76867	UNIV OF IL SPONSORED PROG & RESEARCH ADM	6/06/17 01 VR 53- 193	53- 193		561243	6/08/17	090-053-533.07-00	PROFESSIONAL SERVICES	MAY/JUN MHB17-039	9,088.00
									VENDOR TOTAL	9,088.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY	6/06/17 01 VR 53- 191	53- 191		561246	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN CHILD/FAM	3,170.00
									VENDOR TOTAL	3,170.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER	6/06/17 01 VR 53- 190	53- 190		561247	6/08/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	MAY/JUN STUDY CENTE	2,000.00
									VENDOR TOTAL	2,000.00 *
78868	VINEYARD CHURCH	5/15/17 02 VR 53- 158	53- 158		560244	5/19/17	090-053-533.89-00	PUBLIC RELATIONS	BUILDING RENTAL 5/4	150.00
									VENDOR TOTAL	150.00 *

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*** FUND NO. 090 MENTAL HEALTH											
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH							AC#4798510049573930			
	5/23/17	02	VR	53- 168		560582	5/25/17	090-053-533.89-00	PUBLIC RELATIONS	3930 HENDRICK 4/22	137.00
	5/23/17	02	VR	53- 168		560582	5/25/17	090-053-522.02-00	OFFICE SUPPLIES	3930 STAPLES 4/22	71.99
	5/23/17	02	VR	53- 168		560582	5/25/17	090-053-522.06-00	POSTAGE, UPS, FED EXPRESS	3930 STAPLES 4/21	68.64
	5/23/17	02	VR	53- 168		560582	5/25/17	090-053-522.02-00	OFFICE SUPPLIES	3930 STAPLES 4/21	339.95
	5/23/17	02	VR	53- 168		560582	5/25/17	090-053-522.02-00	OFFICE SUPPLIES	3930 STAPLES 5/3	67.95
										VENDOR TOTAL	685.53 *
81610	XEROX CORPORATION										
	5/15/17	02	VR	53- 159		560255	5/19/17	090-053-533.85-00	PHOTOCOPY SERVICES	INV 147664699 4/4	246.29
	5/15/17	02	VR	53- 159		560255	5/19/17	090-053-533.85-00	PHOTOCOPY SERVICES	INV 147664700 4/4	39.60
										VENDOR TOTAL	285.89 *
602880	BRESSNER, BARBARA J.										
	5/23/17	05	VR	53- 166		560604	5/25/17	090-053-533.07-00	PROFESSIONAL SERVICES	JUN PROFESSIONAL FE	2,260.00
	5/23/17	05	VR	53- 166		560604	5/25/17	090-053-533.89-00	PUBLIC RELATIONS	REIM EXPO SUPPLY	94.30
										VENDOR TOTAL	2,354.30 *
604568	CANFIELD, LYNN										
	5/17/17	02	VR	53- 162		560273	5/19/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	67 MILE 3/6-4/27	35.85
	5/17/17	02	VR	53- 162		560273	5/19/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	PARKING 3/6-4/27	13.25
										VENDOR TOTAL	49.10 *
611802	DRISCOLL, MARK										
	5/15/17	02	VR	53- 156		560288	5/19/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	80 MILE 3/1-4/25	42.80
	5/15/17	02	VR	53- 156		560288	5/19/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	PARKING 3/28-29	.50
										VENDOR TOTAL	43.30 *
619548	HOWARD-GALLO, STEPHANIE										
	5/15/17	02	VR	53- 155		560309	5/19/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	38 MILE 3/13-4/27	20.33
										VENDOR TOTAL	20.33 *

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630360	MAYER, JAMES	6/06/17 01 VR	53- 192	561304	6/08/17	090-053-533.07-00	PROFESSIONAL SERVICES	JUN PROFESSIONAL FE	VENDOR TOTAL	906.00
										906.00 *
									DEPARTMENT TOTAL	633,872.33 *
									FUND TOTAL	633,872.33 *

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***	FUND NO. 090											
***	FUND NO. 090											
***	DEPT NO. 053											
25	CHAMPAIGN COUNTY TREASURER											
	7/05/17	05	VR	53-	243		562322	7/07/17	090-053-533.50-00	FACILITY/OFFICE RENTALS	JUL OFFICE RENT	1,739.64
											VENDOR TOTAL	1,739.64 *
41	CHAMPAIGN COUNTY TREASURER											
	6/26/17	07	VR	620-	87		561993	6/30/17	090-053-513.06-00	EMPLOYEE HEALTH/LIFE INS	JUN HI & LI	2,984.20
											VENDOR TOTAL	2,984.20 *
52	CHAMPAIGN COUNTY TREASURER											
	6/22/17	01	VR	88-	33		561739	6/23/17	090-053-513.02-00	IMRF - EMPLOYER COST	IMRF 6/9 P/R	1,062.55
											VENDOR TOTAL	1,062.55 *
104	CHAMPAIGN COUNTY TREASURER											
	7/05/17	05	VR	53-	213		562325	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SOC/EMOT SVCS	4,637.00
											VENDOR TOTAL	4,637.00 *
108	CHAMPAIGN COUNTY TREASURER											
	6/16/17	02	VR	53-	207		561741	6/23/17	090-053-571.08-00	TO DEV DISABILITY FUND108TFR	EXPO REV 090	216.03
	6/16/17	02	VR	53-	207		561741	6/23/17	090-053-571.08-00	TO DEV DISABILITY FUND108TFR	POSTG RFND 090	6,849.38
											VENDOR TOTAL	7,065.41 *
140	CHAMPAIGN COUNTY TREASURER											
	6/16/17	02	VR	53-	195		561743	6/23/17	090-053-534.70-00	BROOKNS BLDG REPAIR-MAINTMHB	WALL PROJ LABOR	1,685.00
	6/16/17	02	VR	53-	195		561743	6/23/17	090-053-534.70-00	BROOKNS BLDG REPAIR-MAINTMHB	WALL PROJ MATLS	903.17
											VENDOR TOTAL	2,588.17 *
161	CHAMPAIGN COUNTY TREASURER											
	7/05/17	05	VR	53-	214		562327	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL JUSTICE DIVERSN	5,229.00
	7/05/17	05	VR	53-	215		562327	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL YOUTH ASSMNT CT	6,362.00
											VENDOR TOTAL	11,591.00 *

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179	CHAMPAIGN COUNTY TREASURER	7/05/17	05 VR	53- 212		562329	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CAC	3,090.00
										VENDOR TOTAL	3,090.00 *
188	CHAMPAIGN COUNTY TREASURER	6/22/17	01 VR	188- 54		561745	6/23/17	090-053-513.01-00	SOCIAL SECURITY-EMPLOYER FICA	FICA 6/9 P/R	961.96
										VENDOR TOTAL	961.96 *
544	AAIM EMPLOYERS ASSOCIATION	7/05/17	05 VR	53- 223		562331	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	INV 286900 6/21	350.00
										VENDOR TOTAL	350.00 *
5268	BP COMPUTER SERVICES	7/05/17	05 VR	53- 238		562341	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	3RD QTR COMPUTER SV	750.00
										VENDOR TOTAL	750.00 *
15495	CHAMPAIGN URBANA AREA PROJECT	7/05/17	05 VR	53- 216		562351	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL NGBRHD CHAMPIO	1,667.00
						562351	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL TRUCE	6,250.00
										VENDOR TOTAL	7,917.00 *
16930	CHRISP MEDIA, LLC	7/05/17	05 VR	53- 240		562355	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	JUL PROFESSIONAL FE	117.00
										VENDOR TOTAL	117.00 *
18052	COMCAST CABLE - MENTAL HEALTH	6/26/17	07 VR	53- 210		562031	6/30/17	090-053-533.29-00	COMPUTER/INF TCH SERVICES	8771403010773527 61	110.97
										VENDOR TOTAL	110.97 *
18203	COMMUNITY CHOICE, INC	7/05/17	05 VR	53- 217		562361	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COMMUNITY LIVIN	5,250.00
						562361	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SELF DETERMINAT	8,000.00
										VENDOR TOTAL	13,250.00 *

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18210	COMMUNITY FOUNDATION - DREAM HOUSE	7/05/17	05	VR	53- 218	562363	7/07/17	FIRST PRESBYTERIAN	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL DREAM HOUSE	4,833.00
											VENDOR TOTAL	4,833.00 *
18230	COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY	7/05/17	05	VR	53- 219	562364	7/07/17	CONTRIBUTIONS & GRANTS	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL RESOURCE CONNEC	5,550.00
											VENDOR TOTAL	5,550.00 *
18430	CONSOLIDATED COMMUNICATIONS	6/09/17	03	VR	28- 71	561502	6/15/17	TELEPHONE SERVICE	090-053-533.33-00	TELEPHONE SERVICE	AC 99790003460 6/1	31.49
											VENDOR TOTAL	31.49 *
19260	COURAGE CONNECTION	7/05/17	05	VR	53- 220	562366	7/07/17	CONTRIBUTIONS & GRANTS	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COURAGE CONNECT	5,579.00
											VENDOR TOTAL	5,579.00 *
19346	CRISIS NURSERY	7/05/17	05	VR	53- 221	562368	7/07/17	CONTRIBUTIONS & GRANTS	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL BEYOND BLUE	5,833.00
											VENDOR TOTAL	5,833.00 *
22730	DON MOYER BOYS & GIRLS CLUB	7/05/17	05	VR	53- 224	562374	7/07/17	CONTRIBUTIONS & GRANTS	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CU CHANGE	8,333.00
											JUL COALTN SUM PRG	64,200.00
											JUL YOUTH/FAMILY OR	13,333.00
											VENDOR TOTAL	85,866.00 *
24095	EMK CONSULTING LLC	6/22/17	01	VR	53- 201	561786	6/23/17	PROFESSIONAL SERVICES	090-053-533.07-00	PROFESSIONAL SERVICES	INV 173 6/15	1,487.50
											INV 172 6/8	7,125.00
											INV 174 6/15	250.00
											VENDOR TOTAL	8,862.50 *

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*** FUND NO. 090 MENTAL HEALTH											
26000	FAMILY SERVICE OF CHAMPAIGN COUNTY							GRANTS			
	7/05/17	05 VR	53-	227		562380	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SELF HELP	2,369.00
	7/05/17	05 VR	53-	227		562380	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL SENIOR COUNSEL	11,861.00
	7/05/17	05 VR	53-	227		562380	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COUNSELING	2,083.00
										VENDOR TOTAL	16,313.00 *
26760	FIRST FOLLOWERS										
	7/05/17	05 VR	53-	228		562383	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PEER MENTORING	2,500.00
										VENDOR TOTAL	2,500.00 *
30550	GROW IN ILLINOIS										
	7/05/17	05 VR	53-	229		562391	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PEER SUPPORT	1,667.00
										VENDOR TOTAL	1,667.00 *
44570	MAHOMET AREA YOUTH CLUB										
	7/05/17	05 VR	53-	230		562409	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL BLAST	1,250.00
	7/05/17	05 VR	53-	230		562409	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL MEMBERS MATTER	1,000.00
										VENDOR TOTAL	2,250.00 *
51341	NEOPOST USA INC										
	6/16/17	02 VR	53-	206		561809	6/23/17	090-053-533.51-00	EQUIPMENT RENTALS	INV 54896191 6/1	744.50
										VENDOR TOTAL	744.50 *
54650	PEPSI COLA CHAMPAIGN-URBANA BOTTLING										
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100028 1/17	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100183 1/30	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100368 2/13	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100543 2/27	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100728 3/13	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81100897 3/27	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81101080 4/10	6.20
	6/26/17	07 VR	53-	209		562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES	INV 81101270 4/24	6.20

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***	FUND NO. 090	MENTAL HEALTH										
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES		INV 81101466	5/8	6.20
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES		INV 81101635	5/22	12.40
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES		INV 81101904	6/13	18.60
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-522.02-00	OFFICE SUPPLIES		INV 81101990	6/19	6.20
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-533.51-00	EQUIPMENT RENTALS		INV 10002477	2/21	6.95
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-533.51-00	EQUIPMENT RENTALS		INV 10003740	3/10	6.95
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-533.51-00	EQUIPMENT RENTALS		INV 10006234	4/19	6.95
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-533.51-00	EQUIPMENT RENTALS		INV 10008150	5/25	6.95
	6/26/17	07 VR	53-	209	562104	6/30/17	090-053-533.51-00	EQUIPMENT RENTALS		INV 10010191	6/15	6.95
										VENDOR TOTAL		127.75 *

56750	PRAIRIE CENTER HEALTH SYSTEMS	GRANTS										
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL CJ CUB TREATMEN		883.00
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL FRESH START		6,417.00
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL PLL EXTENDED		25,055.00
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL PREVENTION		4,854.00
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL SPECIALTY COURT		16,917.00
	7/05/17	05 VR	53-	231	562422	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL YOUTH SERVICES		6,250.00
										VENDOR TOTAL		60,376.00 *

57196	PROMISE HEALTHCARE											
	7/05/17	05 VR	53-	232	562423	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL WELLNESS/JUSTIC		4,833.00
	7/05/17	05 VR	53-	232	562423	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL MH SERVICES		18,500.00
										VENDOR TOTAL		23,333.00 *

59434	RAPE, ADVOCACY, COUNSELING & EDUC SRVCS											
	7/05/17	05 VR	53-	233	562425	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL COUNSEL/CRISIS		1,550.00
										VENDOR TOTAL		1,550.00 *

61780	ROSECRANCE, INC.											
	7/05/17	05 VR	53-	234	562430	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL CRIMINAL JUSTIC		25,022.00
	7/05/17	05 VR	53-	234	562430	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS		JUL CRISIS/ACCESS		19,000.00

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***	FUND NO. 090	MENTAL HEALTH								
74550	TROPHYTIME, INC.	6/16/17 02 VR 53-	202		561824	6/23/17	090-053-533.72-00	DEPARTMENT OPERAT EXP	INV 124127 6/12 VENDOR TOTAL	9.40 9.40 *
76107	UNITED CEREBRAL PALSY LAND OF LINCOLN	7/05/17 05 VR 53-	234		562430	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL PLL FRONT END	23,557.00
		7/05/17 05 VR 53-	234		562430	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL TRANS HOUSING VENDOR TOTAL	1,167.00 68,746.00 *
76609	UNITED WAY OF CHAMPAIGN COUNTY	7/05/17 05 VR 53-	242		562449	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	1ST QTR 211 PATH SV VENDOR TOTAL	4,516.00 4,516.00 *
77280	UP CENTER OF CHAMPAIGN COUNTY	7/05/17 05 VR 53-	237		562451	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL CHILD/FAM/YOUTH VENDOR TOTAL	1,583.00 1,583.00 *
78120	URBANA NEIGHBORHOOD CONNECTION CENTER	7/05/17 05 VR 53-	236		562453	7/07/17	090-053-533.92-00	CONTRIBUTIONS & GRANTS	JUL COM STUDY CENTE VENDOR TOTAL	1,625.00 1,625.00 *
78888	VISA CARDMEMBER SERVICE - MENTAL HEALTH	6/20/17 03 VR 53-	208		561841	6/23/17	090-053-522.02-00	OFFICE SUPPLIES	3930 STAPLES 5/17	76.10
		6/20/17 03 VR 53-	208		561841	6/23/17	090-053-522.44-00	EQUIPMENT LESS THAN \$50003930	ADOBE 5/10 VENDOR TOTAL	11.90- 64.20 *
81610	XEROX CORPORATION	6/16/17 02 VR 53-	203		561853	6/23/17	090-053-533.85-00	PHOTOCOPY SERVICES	INV 148189877 5/4	246.29
		6/16/17 02 VR 53-	203		561853	6/23/17	090-053-533.85-00	PHOTOCOPY SERVICES	INV 148189878 5/4 VENDOR TOTAL	39.60 285.89 *

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CHAMPAIGN COUNTY

EXPENDITURE APPROVAL LIST

7/07/17

VENDOR NO	VENDOR NAME	TRN B TR	TRN NO	PO NO	CHECK NUMBER	CHECK DATE	ACCOUNT NUMBER	ACCOUNT DESCRIPTION	ITEM DESCRIPTION	EXPENDITURE AMOUNT
602880	BRESSNER, BARBARA J.	VR 53-	239	562466	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	JUL PROFESSIONAL FE	2,260.00	
								VENDOR TOTAL	2,260.00 *	
611802	DRISCOLL, MARK	VR 53-	225	562473	7/07/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	96 MILE 5/2-6/28	51.36	
				562473	7/07/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	PARKING 5/9-10	.50	
								VENDOR TOTAL	51.86 *	
630360	MAYER, JAMES	VR 53-	241	562488	7/07/17	090-053-533.07-00	PROFESSIONAL SERVICES	JUL PROFESSIONAL FE	906.00	
								VENDOR TOTAL	906.00 *	
641810	SUMMERVILLE, SHANDRA A	VR 53-	204	561885	6/23/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	142 MILE 3/1-4/26	75.97	
								VENDOR TOTAL	75.97 *	
646620	WILSON, CHRIS	VR 53-	205	561891	6/23/17	090-053-533.12-00	JOB-REQUIRED TRAVEL EXP	PARK 6/8-9 CHAMFGN	7.25	
								VENDOR TOTAL	7.25 *	
							MENTAL HEALTH BOARD	DEPARTMENT TOTAL	368,085.71 *	
							MENTAL HEALTH	FUND TOTAL	368,085.71 *	

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14.A

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

DECISION MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board
FROM: Lynn Canfield, Executive Director
SUBJECT: FY2018 Funding for Parenting with Love and Limits

Background:

To present, for the consideration of the Champaign County Mental Health Board (CCMHB), staff funding recommendations for FY18 contract year (July 1, 2017 through June 30, 2018) related to contracts for Parenting with Love and Limits, an evidence-based treatment designed to improve outcomes for young people who are at risk for or already have juvenile justice involvement.

On May 24, 2017, the CCMHB met for discussion and decision of allocations for the FY18 contract year. Board members requested more information about the cost and outcomes of the two agency programs, Prairie Center Health Systems' Parenting with Love and Limits Extended Care and Rosecrance's Parenting with Love and Limits Front-End, and the clinical support contract with Savannah Family Institute. In order to provide full answers to these questions before committing to a full year of funding, a study session was held on June 28th. Information on contracted services, collaborations, and community impact was presented at the study session by John Burek, Savannah Family Institute, Julia Reitz, Champaign County State's Attorney, Joe Gordon, Champaign County Court Services, Leon Bryson, Prairie Center PLL-Extended Care Lead Therapist and James Warren, Rosecrance PLL-Front End Lead Therapist.

Recommendations:

Originally presented as part of Tier Three – Behavioral Health Services and Supports with a Criminal Justice Interface, as two of three programs focusing on youth, the two agency contracts were approved for half-year funding at the May 24, 2017 CCMHB meeting. The staff recommendation was for funding at the FY2017 level, as follows:

Table with 2 columns: Agency Name and Amount. Rows include Prairie Center Health Systems, PLL-Extended Care (\$300,660) and Rosecrance, PLL – Front End (\$282,663).

Also on May 24, staff and Savannah Family Institute negotiated a contract for clinical supervision of the PLL model, data analysis and evaluation of provided services, and licensing use of the SFI proprietary information used by the local providers, with a contract maximum of \$143,900 and term of July 1, 2017 to June 30, 2018.

DECISION SECTION

Motion to approve amending the amount of the FY2018 Parenting with Love and Limits Extended Care contract with Prairie Center Health Systems to \$300,660 for a term ending June 30, 2018 and the amount of the Parenting with Love Limits Front End contract with Rosecrance to \$282,663 for a term ending June 30, 2018, and to award Savannah Family Institute a professional fees contract in the amount of \$143,900 and term of July 1, 2017 to June 30, 2018.

- Approved
Denied
Modified
Additional Information Needed

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14.B

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

DECISION MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Mark Driscoll, Associate Director
SUBJECT: University of Illinois "Building Evaluation Capacity: Year 3" Proposal

Background

For the last two years, the Champaign County Mental Health Board has contracted with the University of Illinois to assist agencies to build evaluation capacity within funded programs.

The consultants under contract are Drs. Nicole Allen and Mark Aber. They are well qualified to engage in this work, have worked with CCMHB funded agencies in the past, and are familiar with the mission and work of the Board.

Year three is an extension of the work undertaken in year two. A copy of the proposal is attached. Cost is slightly lower than the previous two years.

Recommendation

The first year was an assessment of current evaluation requirements and agency reports. Year two focused on developing evaluation capacity within programs with four programs targeted for more intensive supports.

Decision Section:

Motion to authorize the Executive Director to execute a contract with the University of Illinois in the amount \$52,976 to implement the scope of work presented in Capacity Building Evaluation: Year 3 proposal.

- Approved
Denied
Modified
Additional Information Needed

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

DECISION MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Anti-Stigma Community Event – Roger Ebert’s Film Festival 2018

Recommended Action: The purpose of this memorandum is to seek approval for the Executive Director to commit to working with the Alliance for Inclusion and Respect to sponsor an anti-stigma film at the 2018 Roger Ebert’s Film Festival and related concurrent anti-stigma activities. Allocation of \$15,000 to sponsor a film and support concurrent anti-stigma activities is requested.

Issue: The Roger Ebert’s Film Festival is the centerpiece of our anti-stigma efforts in Champaign County. Our status as a primary sponsor has grown over the years, reaping increased exposure and media coverage, special attention from Chaz Ebert and festival staff, high-profile concurrent art exhibits, and increased collaboration with Alliance members, university students, and community stakeholders in various ‘pro-inclusion’ partnerships. The anti-stigma effort supports Mental Health, Developmental Disabilities, and Substance Use Disorder community awareness and education related goals and objectives.

During and after the 2017 festival, we held additional screenings and discussions of the sponsored film, primarily for a youth audience, staged and promoted an art show/sale, and launched a website to promote the artists and the Alliance’s mission. See ChampaigncountyAIR.com and facebook.com/allianceforAIR.

Fiscal/Budget Impact: While past support was a combined effort between the CCMHB and CCDDDB, the CCDDDB made the decision to not be a sponsor of the film event. The total cost for the event/sponsorship was initially anticipated to be \$30,000, divided proportionally based on the percentage of the administrative fee between the CCMHB and CCDDDB. Prior to a final decision by either Board, a lower sponsorship fee of \$15,000 was negotiated.

In 2017 the cost of film sponsorship was offset by \$4,185 from contributions by Alliance members (\$3,675) and ticket sales (\$510).

Decision Section:

Motion to approve up to \$15,000 as the CCMHB share, to sponsor an anti-stigma film at the 2018 Roger Ebert’s Film Festival.

- Approved
Denied
Modified
Additional Information Needed

Handwritten signature/initials in a circle



14.D.

DECISION MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: FY2018 Champaign County Budget Submission

Recommended Action:

The purpose of this memorandum is to seek approval of the preliminary budget managed by the Champaign County Mental Health Board (CCMHB) for County Fiscal Year 2018 (January 1, 2018 through December 31, 2018.)

Issue:

All Champaign County Departments are required to submit their proposed operating budgets to the Champaign County Administrator in July and to the Champaign County Board in August for review, comment, and disposition. In November, final budgets for county departments are formally approved by the Champaign County Board.

Programs:

The attached document is the proposed FY2018 budget for the Champaign County Mental Health Board. The Proposed budget for the Champaign County Developmental Disabilities Board is included for information only. Additional information is provided in three attached documents.

Fiscal/Budget Impact:

Approval of this budget by the CCMHB and the Champaign County Board will allow us to conduct business and meet our contracted obligations as specified in the FY2018 allocation decisions made by the CCMHB in May and July 2017.

Decision Section:

Motion to approve the attached budget document for County Fiscal Year 2018 for the Champaign County Mental Health Board.

- Approved
- Denied
- Modified
- Additional Information Needed

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Draft 2018 CCMHB Budget

LINE ITEM	BUDGETED REVENUE	
311.24	Property Taxes, Current	\$4,542,542
313.24	Back Property Taxes	\$500
314.10	Mobile Home Tax	\$4,000
315.10	Payment in Lieu of Taxes	\$700
336.23	CCDDB Revenue	\$338,515
361.10	Investment Interest	\$500
363.10	Gifts & Donations	\$20,000
369.90	Other Miscellaneous Revenue	\$0
TOTAL REVENUE		\$4,906,757

LINE ITEM	BUDGETED EXPENDITURES	
511.02	Appointed Official	\$101,000
511.03	Regular FTE	\$307,826
511.09	Overtime Wages	\$1,500
513.01	FICA	\$31,388
513.02	IMRF	\$36,599
513.04	W-Comp	\$2,257
513.05	Unemployment	\$4,200
513.06	Health/Life Insurance	\$63,586
513.20	Retirement Events	\$200
		Personnel Total \$548,556
522.01	Printing	\$1,000
522.02	Office Supplies	\$3,600
522.03	Books/Periodicals	\$400
522.04	Copier Supplies	\$1,000
522.06	Postage/UPS/Fed Ex	\$1,000
522.44	Equipment Under \$1000	\$6,000
		Commodities Total \$13,000
533.01	Accounting Fees	\$10,000
533.07	Professional Fees	\$300,000
533.12	Travel	\$6,000
533.20	Insurance	\$11,000
533.29	Computer Services	\$7,300
533.33	Telephone	\$2,500
533.42	Equipment Maintenance	\$500
533.50	Office Rental	\$21,660
533.51	Equipment Rental	\$900
533.70	Legal Notices/Ads	\$300
533.72	Department Operating	\$400
533.84	Business Meals/Expense	\$250
533.85	Photocopy Services	\$3,800
533.89	Public Relations	\$50,000
533.92	Contributions & Grants	\$3,833,761
533.93	Dues & Licenses	\$22,600
533.95	Conferences/Training	\$16,000
534.37	Finance Charges/Bank Fees	\$30
534.70	Brookens Repair	\$200
		Services Total \$4,287,201
571.08	Payment to CCDDB (Share of Gifts, Donations, Misc Rev)	\$8,000
571.11	Payment to CILA Fund	\$50,000
		Interfund Expenditures TOTAL \$58,000
TOTAL EXPENSES		\$4,906,757

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Draft 2018 CCDDB Budget

LINE ITEM	BUDGETED REVENUE	
311.19	Property Taxes, Current	\$3,736,959
313.19	Back Property Taxes	\$500
314.10	Mobile Home Tax	\$1,000
315.10	Payment in Lieu of Taxes	\$1,000
361.10	Investment Interest	\$300
371.90	Interfund Transfer of Gifts, Donations, Revenue	\$8,000
369.90	Other Miscellaneous Revenue	\$0
TOTAL REVENUE		\$3,747,759

LINE ITEM	BUDGETED EXPENDITURES	
533.07	Professional Fees (42.15% of an adjusted set of CCMHB Admin Expenses)	\$338,515
533.92	Contributions & Grants	\$3,359,244
571.11	Payment to CILA Fund	\$50,000
TOTAL EXPENSES		\$3,747,759

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Background for 2018 CCMHB Budget, with 2017 Projections and Earlier Actuals

2018 BUDGETED REVENUE	2017 PROJECTED REVENUE	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Property Taxes, Current	\$4,453,473	\$4,246,055	\$4,161,439	\$4,037,720
Back Property Taxes	\$500	\$2,486	\$2,861	\$1,612
Mobile Home Tax	\$4,000	\$3,903	\$3,995	\$3,861
Payment in Lieu of Taxes	\$700	\$2,970	\$2,869	\$2,859
CCDDDB Revenue	\$338,916	\$377,695	\$330,637	\$337,536
Investment Interest	\$500	\$3,493	\$1,385	\$1,015
Gifts & Donations	\$20,000	\$18,822	\$26,221	\$28,192
Other Miscellaneous Revenue	\$0	\$21,340	\$67,599	\$85,719
TOTAL REVENUE	\$4,879,699	\$4,676,764	\$4,597,006	\$4,498,514

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2018 BUDGETED EXPENDITURES	2017 PROJECTED EXPEND	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
Personnel	\$491,000	\$577,548	\$502,890	\$532,909
Commodities	\$18,000	\$7,998	\$11,237	\$9,282
Services (not Contributions & Grants)	\$510,779	\$410,157	\$382,870	\$375,735
Contributions & Grants	\$3,668,301	\$3,428,015	\$3,335,718	\$3,673,966
Interfund Expenditures	\$58,000	\$60,673	\$0	\$0
TOTAL EXPENSES	\$4,746,080	\$4,484,391	\$4,232,715	\$4,591,892

Additional Information about Expenses

Personnel 2018 v 2017

PERSONNEL	2018	2017
Appointed Official	\$101,000	\$101,000
Regular FTE*	\$307,826	\$261,222
Overtime Wages	\$1,500	\$2,505
FICA	\$31,388	\$27,175
IMRF	\$36,599	\$36,599
W-Comp	\$2,257	\$1,954
Unemployment	\$4,200	\$4,200
Health/Life Insurance	\$63,586	\$55,845
Retirement Events	\$200	\$500
	\$548,556	\$491,000

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Commodities 2018 v 2017

COMMODITIES	2018	2017
Printing	\$1,000	\$1,000
Office Supplies	\$3,600	\$4,000
Books/Periodicals	\$400	\$500
Copier Supplies	\$1,000	\$1,500
Postage/UPS/Fed Ex	\$1,000	\$1,000
Equipment Under 5000	\$6,000	\$10,000
	\$13,000	\$18,000

Services (not Contributions and Grants)

SERVICES	2018	2017
Accounting Fees	\$10,000	\$10,000
Professional Fees**	\$300,000	\$350,000
Travel	\$6,000	\$7,500
Insurance	\$11,000	\$10,000
Computer Services	\$7,300	\$8,200
Telephone	\$2,500	\$3,500
Equipment Maintenance	\$500	\$500
Office Rental	\$21,660	\$20,768
Equipment Rental	\$900	\$840
Legal Notices/Ads	\$300	\$1,707
Department Operating	\$400	\$200
Business Meals/Expense	\$250	\$250
Photocopy Services	\$3,800	\$4,000
Public Relations***	\$50,000	\$50,000
Dues/Licenses	\$22,600	\$24,961
Conferences/Training	\$16,000	\$15,394
Finance Charges/Bank Fees	\$30	\$19
Brookens Repair	\$200	\$3,000
	\$453,440	\$510,779

Interfund Expenditures 2018 v 2017

INTERFUND TRANSFERS	2018	2017
CCDDDB Share of Donations & Miscellaneous Revenue	\$8,000	\$8,000
Payment to CILA Fund	\$50,000	\$50,000
	\$58,000	\$58,000

*Regular FTE:

- not fully staffed during 2017

**Professional Fees:

- legal services, Expo consultants, website development and ongoing support, human resource services, Triad shredding, graphic designer, ADA compliance consultant, independent audit reviewer, application reviewers, organizational assessment, 211 support with United Way, UIUC Evaluation Capacity Project (not shared with CCDDDB,) and Savannah Family Institute-PLL (not shared with CCDDDB)

- 85% of this line is program support rather than Management & General.

***Public Relations:

- Ebertfest (not shared with CCDDDB), Expo expenses, community education/awareness; many are program support.

Additional Information about Services

Approval of 2018 Budgets does not obligate the boards to all expenditures described; many are estimates based on previous years.

SERVICES	2018	2017
Professional Fees**	\$300,000	\$350,000
	\$143,900 Savannah Family Institute (PLL), not shared with CCDDDB. \$52,976 UI Evaluation, not shared with CCDDDB. \$40,000 Expo Coordinators (Mayer/Bressner). \$18,066 United Way for 211/Path. \$250 human resources services (AAIM). \$3,000 IT services (BPC). \$2,000 organizational assessment (Smith/Campbell). \$1,500 website accessibility testing (Falling Leaf). \$7,000 online application/reporting systems (EMK). \$750 expanded online resource directory (ChrispMedia). \$450 graphic design. \$1,000 shredding services (Triad). \$4,000 legal fees (Barb Weiner, Meyer Capel). \$2,000 individual assessments (per Equip for Equality)	\$146,950 Savannah Family Institute (PLL), not shared with CCDDDB. \$53,757 UI Evaluation, not shared with CCDDDB. \$40,000 Expo Coordinators (Mayer/Bressner). \$18,066 United Way for 211/Path. \$750 human resources services (AAIM). \$3,000 IT services (BPC). \$30,000 organizational assessment (Smith/Campbell). \$1,500 website accessibility testing (Falling Leaf). \$4,000 application reviewers (Knepp/Matheny). \$4,000 CPA review of independent audits (Bruveen). \$500 online reporting (Proviso FTS). \$19,100 online application/reporting systems (EMK). \$2200 expanded online resource directory (ChrispMedia) - under discussion. \$1000 shredding services (Triad). \$4,000 legal fees (Barb Weiner, Meyer Capel). \$2,000 individual assessments (per Equip for Equality)
Public Relations***	\$50,000	\$50,000
	\$15,000 Eberfest firm sponsorship, offset by Alliance member dues and other contributions of \$3k-\$6k/year. \$2,000 estimated for year-round anti-stigma events and trainings. \$2,000 anti-stigma art show(s), promotion, \$468 anti-stigma artists website support (ChrispMedia.) All other items charged here support the Expo, including venue, supplies, food, interpreters, advertising, secondary Expo events. Expo costs are offset by exhibitor/vendor fees and contributions from sponsors (\$20k-\$26k per year)	\$15,000 Eberfest firm sponsorship, offset by Alliance member dues and other contributors of \$4,185. \$901 anti-stigma artists website, with training for supporters (ChrispMedia) \$1,921 print promotion of artists, supplies for art show. \$1,500 estimated for year-round anti-stigma events and trainings. All other items charged here support the Expo and related events, with costs offset by exhibitor/vendor fees and contributions from sponsors. With no 2017 Expo, expenses and revenues will be lower than budgeted. Related events: 'Meet & Greet' with new venue and presentation on ABLE Act; fall art show in lieu of Expo.
Contributions & Grants	\$3,833,761	\$3,668,301
	Estimated payments to agencies from January 1 to June 30, 2018, as authorized in May and July 2017, plus 1/2 of estimated FY19 annual allocation amount, with agency contract maximums to be authorized by July 1, 2018.	Actual payments to agencies from January 1 to June 30, 2017, as authorized in May 2016, plus payments authorized in May and July 2017, to be made from June through December 2017.
Dues/Licenses	\$22,600	\$24,961
	\$825 national trade association (NACBHDD) dues (\$900 in 2019). \$16,000 state trade association (ACMHA) dues. \$250 Rotary membership dues (Summerville). \$25 Human Services Council membership dues. \$7 for any new membership, e.g., Arc of IL, NCBH, NADD.	\$1,021 AAIM membership (paid up to 2020). \$750 national trade association (NACBHDD) dues. \$16,000 state trade association (ACMHA) dues. \$250 Rotary membership dues (Summerville). \$25 Human Services Council membership dues. \$7 for any new membership, e.g., Arc of IL, NCBH, NADD.
Conferences/ Training	\$16,000	\$15,334
	\$500-\$700 registration for NACBHDD Legislative and Policy Conference. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 1-2 NACBHDD meetings. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 2-3 quarterly ACMHA meetings. Costs of one other conference/training for 1-2 staff/board members.	\$500 registration for NACBHDD Legislative and Policy Conference. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 1-2 NACBHDD meetings. Costs of travel (plus lodging and food) for 2-3 staff/board members for each of 2-3 quarterly ACMHA meetings. Costs of one other conference/training for 1-2 staff/board members.
Expect the Unexpected		
	The following would require redirection from one expense line to another, best if within the category: need to move staff offices to a different location; payout of accrued benefits (time) upon staff resignation or retirement; legal expenses; changes in costs; etc. County Board approval to use fund balance would be needed for liability associated with hospital tax revenue (previously deposited.)	The following would require redirection from one expense line to another, best if within the category: need to move staff offices to a different location; payout of accrued benefits (time) upon staff resignation or retirement; legal expenses; changes in costs; etc. County Board approval to use fund balance would be needed for liability associated with hospital tax revenue (previously deposited.)

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Calculation of the CCDDB Administrative Share ("Professional Fees")

	2018	2017
Adjustments:		
CCMHB Contributions & Grants	\$3,833,761	\$3,668,301
Savannah Family Institute - PLL	\$143,900	\$146,950
UI Evaluation Capacity Project	\$52,976	\$53,757
Eberfest	\$15,000	\$15,000
Payment to CILA fund	\$50,000	\$50,000
CCDDB Share of Donations & Misc Rev	\$8,000	\$8,000
Adjustments Total:	\$4,103,637	\$3,942,008
CCMHB Total Expenditures:	\$4,906,757	\$4,746,080
Total Expenditures less Adjustments:	\$803,120	\$804,072

	2018	2017
CCDDB Share	\$803,120.00	\$804,072
Adjusted Expenditures less Adjustments	\$338,515	\$338,916
Monthly Total for CCDDB Admin	\$28,210	\$28,243

Total Expenditures less Adjustments
Adjusted Expenditures x 42.15%
Monthly Total for CCDDB Admin

Toward the end of the County Fiscal Year, actual expenses will be updated, with possible adjustment of the CCDDB current year share.

Background for 2018 CCDDB Budget, with 2017 Projections and Earlier Actuals

	2017 PROJECTED REVENUE	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
2018 BUDGETED REVENUE				
Property Taxes, Current	\$3,736,959	\$3,545,446	\$3,545,446	\$3,501,362
Back Property Taxes	\$500	\$2,437	\$2,437	\$1,398
Mobile Home Tax	\$1,000	\$3,404	\$3,404	\$3,348
Payment in Lieu of Taxes	\$1,000	\$2,445	\$2,445	\$2,479
Investment Interest	\$300	\$1,488	\$1,488	\$812
Gifts & Donations	\$8,000	\$10,673	\$0	\$0
Other Miscellaneous Revenue	\$0	\$0	\$0	\$11,825
TOTAL REVENUE	\$3,747,759	\$3,565,893	\$3,555,220	\$3,521,224

	2017 PROJECTED EXPEND	2016 ACTUAL	2015 ACTUAL	2014 ACTUAL
2018 BUDGETED EXPENDITURES				
Professional Fees (42.15% of some CCMHB exoenses, as above)	\$338,515	\$379,405	\$330,637	\$337,536
Contributions & Grants	\$3,359,244	\$3,206,389	\$3,069,122	\$3,224,172
Interfund Expenditure - CILA	\$50,000	\$50,000	\$50,000	\$0
TOTAL EXPENSES	\$3,747,759	\$3,635,794	\$3,449,759	\$3,561,708

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15.A.

DECISION MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Mark Driscoll, Associate Director
SUBJECT: Rosecrance JMHCP Matching Funds Amendment Request

Recommended Action: The purpose of this memorandum is to present the request by Rosecrance (copy attached) for an amendment to the FY17 Criminal Justice contract as it relates to use of CCMHB funds allocated as local match to the Department of Justice "Justice and Mental Health Collaboration Program" grant award. Two separate issues are addressed within the request: extension of the contract term through September 30, 2017 to maintain spending authority for the local matching funds tied to the federal award, and; approve funding for expenses related to but not eligible for payment under the federal grant or associated local matching funds. At this time, staff has a neutral position on the question of paying costs incurred but not billable under the terms of the federal grant award and recommends that portion of the request be deferred until the September Board meeting. Staff strongly supports extension of the term of the contract to maintain spending authority for the local match of the federal grant award.

Issue: Rosecrance is a sub-recipient to the Department of Justice "Justice and Mental Health Collaboration Program" planning grant award to Champaign County. The CCMHB committed \$37,500 as the local match to leverage \$149,999 in federal funds over a two year period. The two year term ends September 30, 2017. Expenses billed under the contract are allocated 80% to the federal grant and 20% to the local match. As the sub-recipient, the majority of the funds for the JMHCP planning grant are to pay costs incurred by Rosecrance to implement the scope of work. The local match has been included as part of the FY16 and FY17 Criminal Justice contracts with a special provision. The FY17 Special Provision reads: *contract maximum includes \$17,500 to be used for the sole purpose of matching funds required under the Department of Justice-Bureau of Justice Assistance "Justice and Mental Health Collaboration Program" grant award (#2015-MO-BX-0017). The Provider is to maintain records sufficient to document the receipt and disbursement of matching funds as required under the federal award and meet all associated reporting requirements.* The special provision match ties the local match to the federal grant award and federal requirements. Payment of expenses incurred outside of what is billable as match under the federal award requires an amendment to the contract.

Financial reports by Champaign County to the Department of Justice document expenditures of federal funds and corresponding local match. The grant is under expended. Rosecrance requests approval to use unexpended match funds, what we refer to as excess revenue, to cover other costs related to the project but not billable to the grant. These expenses are identified in the letter as "708 program match" that fall outside the purview of the federal grant award. A brief statement of these other costs is included in the Rosecrance letter. One item cited is preparation of grant applications which presumably include the JMHCP implementation grant and the Second Chance Act grant that have the potential to benefit adults with mental illness and substance use disorders involved in the criminal justice system in Champaign County. In the past the CCMHB has assisted with paying the cost for preparing such applications. It is not clear why the other expenses

mentioned would not be eligible for payment under the federal grant. More detail on all the other costs referred to in the letter is needed.

Overall, the work performed by Rosecrance under the JMHCP planning grant has achieved many of the goals required of the federal award. The accomplishments of the Crisis Response Planning Committee with the support of Rosecrance staff has moved Champaign County forward so performance is not an issue. The JMHCP implementation grant application would not have been possible without the foundation established under the planning grant. The question is whether to approve the other expenses incurred by Rosecrance. Deferring on that question until the September Board meeting may be the best approach. Virtually all expenses paid as local federal match will be known at that time and more detail on the amounts not billable under the federal award can be provided by Rosecrance. It is also possible that an extension to the term of the federal grant will be requested by the County.

With the current term of the federal award running through the end of September, the end date of the FY17 Criminal Justice contract does need to be extended for Rosecrance to maintain spending authority of the local matching funds as part of the federal grant award.

Fiscal/Budget Impact: The CCMHB original commitment was \$37,500 as the 20% match required to leverage \$149,999 in federal funds. The match has been paid to Rosecrance. Projected local matching funds expended through the end of September on the federal grant is \$22,213. The difference being excess revenue in the amount of \$15,287. Rosecrance has identified additional costs equal to the amount of excess revenue.

Decision Section:

Motion: Move to approve extending the term of the FY17 Criminal Justice contract term to September 30, 2017.

- Approved
- Denied
- Modified
- Additional Information Needed

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July 10, 2017

Lynn Canfield, Executive Director
Champaign County Mental Health Board
Brookens Administration Center
1771 W. Washington
Urbana, IL 61801

Dear Lynn,

We find ourselves at the end of FY17 and approaching the close out of the Justice Mental Health Collaboration Project (JMHCPC) grant on September 30, 2017 (which occurs at the end of the first three months of FY18). In order to continue to do everything that was promised in the grant, cover program costs, prepare the recommendations of the Crisis Response Planning Committee, communicate with stakeholders, and close out the JMHCPC program, we are requesting approval for the following:

1. An extension of the current CCMHB FY17 grant funding for program costs and federal grant match in FY18 until the closure date of September 30, 2017.
And,
2. Approval to use the CCMHB JMHCPC Match funds for expenses that were not covered by the Federal grant. We expect the amount of CCMHB funding for both program and federal match to be \$27,292.96 in FY17 and \$4,211.82 in FY18. Please see the chart on page two for a full breakdown of the use of the CCMHB funding for JMHCPC.

In 2015, the CCMHB committed a maximum of \$20,000 for year one and, in 2016, \$17,500 for year two of the JMHCPC grant, for a total of \$37,500. When awarded, the two year federal grant period covered three Rosecrance fiscal years: FY16, FY17, and FY18. During FY16 and FY17, the County provided financial updates to the CCMHB for the federal portions of the grant, while Rosecrance provided quarterly updates on the use of the match for both program and federal match.

In FY17, there were increasing program costs in large part from increases in staff salaries, staff time to seek and prepare additional grants for the County related to justice and mental health collaboration, and increases in the amount of staff time spent on JMHCPC related activities. This created a difference between what the total program costs were versus what the federal grant allowed for reimbursement. As you can see from the chart, the total program costs and the federal match will not exceed the original two year commitment of \$37,500 made by the CCMHB.

rosecrance
life's waiting®

Rosecrance Champaign/Urbana
1801 Fox Drive
Champaign, IL 61820

T 217.398.8080
F 217.398.8568

rosecrancecu.org

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To assist us with fully covering the costs of the JMHCP, we are requesting greater flexibility for how the match funds are used in FY17 and for the first three months of FY18. This grant is due to close out on September 30, 2017 and at that point in time, we are hoping to hear about the status of the application the Regional Planning Commission submitted for the JMHCP Implementation grant to continue the work of this project.

The JMHCP project and planning committee has played a critical role in moving Champaign County toward the goal of reducing the number of persons with mental illness in the County Jail, reducing the length of incarceration, ensuring linkage to treatment services, and reducing recidivism. The JMHCP staff resources mentioned above have assisted the County in its completion of a comprehensive sequential intercept analysis, initiation of mental health and substance use screening at booking in the jail, development of data tools to initiate a data-based decision making structure for the collaboration, and pursuit of additional technical assistance and program funding. While the total match expenses have exceeded what was originally projected in 2015, the program products have consistently exceeded the expectations of our technical assistance providers. We have pursued the project goals in good faith with guidance from the Crisis Response Planning Group.

If you have any questions about this request, please let me know. Thank you for your consideration.

Sincerely,



Sheila Ferguson, MSW, LCSW
Executive Director RCU

708 JMHCP MATCH RECONCILIATION				
	708 PROGRAM MATCH	708 FEDERAL MATCH	TOTAL	NOTES
Fiscal Year 2016		\$5,995.22	\$5,995.22	
Fiscal Year 2017	\$12,375.00 \$2,000.00	\$11,832.96 \$1,085.00	\$24,207.96 \$3,085.00	Through May Estimated for June
Anticipated FY2018	\$911.82	\$3,300.00	\$4,211.82	
TOTALS	\$15,286.82	\$22,213.18	\$37,500.00	

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CHAMPAIGN COUNTY MENTAL HEALTH BOARD

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

DECISION MEMORANDUM

DATE: July 19, 2017
TO: CCMHB Members
FROM: Mark Driscoll, Associate Director
SUBJECT: Approve FY2016 Annual Report

Attached for review and approval is the Annual Report for Fiscal Year 2016. A preface to the Service Tables has been added in an attempt to explain what the data represents. A few typos have also been corrected.

Regarding the format of the Annual Report, the attached document has blank pages omitted that will be inserted prior to distribution. The table of contents may be adjusted to reflect the added pages but no change to content of the material presented will be made following approval by the Board.

Decision Section

Motion: Move to approve the Champaign County Mental Health Board Fiscal Year 2016 Annual Report.

- _____ Approved
- _____ Denied
- _____ Modified
- _____ Additional Information Needed

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Champaign County Mental Health Board

In fulfillment of our responsibilities under the Community Mental Health Act, the Champaign County Mental Health Board (CCMHB) presents the following documents for public review:

The CCMHB's Annual Report provides an accounting to the citizens of Champaign County of the CCMHB's activities and expenditures during the period of January 1, 2016 through December 31, 2016.

The CCMHB's Three-Year Plan for the period January 1, 2016 through December 31, 2018 presents the CCMHB's goals for development of Champaign County's system of community mental health, intellectual and developmental disabilities, and substance use disorder services and facilities, with One-Year Objectives for January 1, 2017 through December 31, 2017.

Any questions or comments regarding the CCMHB's activities or the county's mental health services can be directed to the Champaign County Mental Health Board; 1776 E. Washington; Urbana, IL 61802; phone (217) 367-5703, fax (217) 367-5741.

Champaign County Mental Health Board

Fiscal Year 2016 Annual Report & Three-Year Plan 2016-2018

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Service Demographics Charts	10
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Three-Year Plan with FY15 Objectives	15

LISTING OF 2016 BOARD MEMBERS AND STAFF

BOARD MEMBERS

Dr. Deborah Townsend
(President)

Dr. Susan Fowler
(Vice President)

Dr. Astrid Berkson

Dr. Thom Moore

Ms. Elaine Palencia

Ms. Judi O'Connor

Dr. Julian Rappaport

Dr. Anne Robin

Ms. Margaret White

STAFF

Peter Tracy
Executive Director

Lynn Canfield
Associate Director for Developmental Disabilities

Nancy K. Crawford
Business Unit Comptroller

Mark J. Driscoll
Associate Director for Mental Health & Substance Abuse Services

Stephanie Howard-Gallo
Developmental Disabilities Contract Specialist

Shandra Summerville
Cultural & Linguistic Competence Coordinator

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CCMHB President's Report

The past year has been one of significant change for the Champaign County Mental Health Board (CCMHB) amidst continuing challenges at the state level and uncertainty regarding the future of the Affordable Care Act at the federal level. As the incoming President of the Champaign County Mental Health Board I want to take this opportunity to thank Board member Dr. Deborah Townsend for her many years of service and leadership and to our county board representative Dr. Astrid Berkson. In their place, I welcome Mr. Joseph Omo-Osagie and Mr. Kyle Patterson, our new county board representative, and member Dr. Julian Rappaport who was reappointed for another term. The Board also experienced significant changes at the staff level. Mr. Peter Tracy, Executive Director, and Ms. Nancy Crawford, Business Unit Comptroller both retired in 2016. While the fiscal position is yet to be filled, the Board following an extensive search process chose to promote Ms. Lynn Canfield to Executive Director.

As we enter 2017, the State of Illinois continues to operate without a budget. A stop-gap budget expired at the end of December 2016 that itself was out of balance by up to \$8 billion. The state's backlog of unpaid bills continues to grow while human service agencies with signed state contracts continue to deliver services in good faith to our most vulnerable citizens. While the November election did not significantly alter the balance of power within Illinois, the resulting change in administration at the national level, particularly the commitment to repeal and replace the Affordable Care Act and the implications for states such as Illinois that expanded Medicaid coverage, compounds the chaotic operating environment for agencies and for families that rely on the healthcare coverage made accessible through the Act. In contrast to ongoing state budget crisis, delayed payments, and potential shifts in healthcare coverages, the CCMHB is fiscally responsible and accountable to the citizens of the Champaign County. The Board in County FY2016, received \$4,246,055 as part of the county property tax levy and awarded \$3,428,015 to social service agencies and out of the administrative services line provided \$283,882 in other support to programs and community events.

As the new Board President, it is my pleasure to present the Champaign County Mental Health Board 2016 Annual Report. The Annual Report includes information on the Board's finances, funding allocated to a wide range of programs, service data reported by funded programs for the term of the contract, and various charts presenting data on those served and allocation of funds. The second section of the report includes the Three-Year Plan with Objectives for 2017.

With the level of change that has occurred at the board and staff level, the Board in collaboration with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDB) and the Executive Director have undertaken an organizational assessment to review various policies and procedures as well as staff responsibilities. Close collaboration with the CCDDB is a hallmark of the intergovernmental agreement between the two boards. In addition to the organizational assessment, the Boards are re-evaluating its approach to anti-stigma activities such as the support for Ebertfest and the disAbility Resource Expo. These actions as well as the annual allocation process reflect the Board's long-standing commitment to ensure the funds entrusted to the Board by the taxpayers of Champaign County are used effectively and efficiently.

Respectfully,

Dr. Susan Fowler
CCMHB President, 2017

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SECTION I: Financial Reports and Service Data

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

ANNUAL FINANCIAL REPORT

12/01/15 - 12/31/16

	2015	2016
Beginning of the Year Fund Balance	\$ 1,971,236	\$2,335,528
REVENUE		
General Property Taxes	\$ 4,161,439	\$ 4,246,055
Back Taxes, Mobile Home Tax & Payment in Lieu of Taxes	9,725	9,360
Local Government Revenue		
Champ County Developmental Disabilities Board	330,637	377,695
Interest Earnings	1,385	3,493
Gifts and Donations	26,221	18,822
Miscellaneous	67,600	21,340
TOTAL REVENUE	\$ 4,597,007	\$ 4,676,764
EXPENDITURES		
Administration & Operating Expenses:		
Personnel	\$ 502,890	\$ 577,548
Commodities	11,237	7,998
Services	382,870	410,156
Interfund Transfers*	-	60,673
Capital Outlay	-	-
Sub-Total	\$ 896,997	\$ 1,056,375
Grants and Contributions:		
Program	3,335,718	3,428,015
Capital	-	-
Sub-Total	\$ 3,335,718	\$ 3,428,015
TOTAL EXPENDITURES	\$ 4,232,715	\$ 4,484,390
Fund Balance at the End of the Fiscal Year	\$ 2,335,528	\$ 2,527,902

*to CILA fund and to CCDDDB fund for share of revenue from Expo/Ebertfest donations

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**CHAMPAIGN COUNTY MENTAL HEALTH BOARD
PROGRAM ALLOCATIONS -- FY2016**

01/01/2016 - 12/31/16

AGENCY/PROGRAM	TOTAL PAID
CHAMPAIGN COUNTY CHILDREN'S ADVOCACY CENTER	37,080.00
CHAMPAIGN COUNTY REGIONAL PLANNING COMMISSION	
Youth Assessment Center	26,000.00
Headstart - Social/Emotional Disabilities (6 months)**	27,822.00
Agency Total	<u>53,822.00</u>
CHAMPAIGN URBANA AREA PROJECT	
CU Neighborhood Champions (6 months)	9,594.00
TRUCE (6 months)	37,500.00
Agency Total	<u>47,094.00</u>
COMMUNITY CHOICES - Self Determination**	62,500.00
Community Living (6 months)**	29,962.50
Customized Employment**	62,500.00
Agency Total	<u>154,962.50</u>
COMMUNITY ELEMENTS, now ROSECRANCE C-U	
Criminal Justice	302,446.00
Crisis, Access, Benefits & Engagement	227,720.00
Early Childhood Mental Health	75,500.00
Parenting with Love and Limits - Front End Services	257,103.00
Psychiatric/Primary Care Services (4 months)	37,176.00
TIMES Center	74,885.50
Agency Total	<u>974,830.50</u>
COMMUNITY SERVICE CENTER OF NORTHERN CHAMPAIGN COUNTY - Resource Connection	65,290.00
COURAGE CONNECTION - Courage Connection	66,948.00
CRISIS NURSERY - Beyond Blue - Rural	70,000.00
DEVELOPMENTAL SERVICES CENTER	
Individual & Family Support**	381,790.00
DON MOYER BOYS & GIRLS CLUB	
Community Coalition Summer Youth Programs	107,000.00
CU Change (6 months)	49,998.00
Engagement & Social Marketing (6 months)	39,000.00
Youth and Family Organization (6 months)	79,998.00
Youth Engagement (6 months)	84,998.00
Agency Total	<u>360,994.00</u>

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EAST CENTRAL ILLINOIS REFUGEE ASSISTANCE CENTER	
Family Support and Strengthening	16,000.00
EASTERN ILLINOIS FOOD BANK	
Donation on Behalf of Retiring CCMHB Member, Deloris Henry	100.00
FAMILY SERVICE - Self Help Center	28,680.00
Family Counseling	14,660.66
Family Counseling return of unused revenue CY15	(10,171.00)
Senior Counseling and Advocacy	152,508.00
Agency Total	<u>185,677.66</u>
FIRST FOLLOWERS - Peer Mentoring for Re-entry (6 months)	14,880.00
MAHOMET AREA YOUTH CLUB - BLAST	15,000.00
Members Matter (6 months)	6,000.00
Universal Screening (6 months)	5,002.00
Agency Total	<u>26,002.00</u>
PRAIRIE CENTER HEALTH SYSTEMS - CJ Substance Use Treatment	10,150.00
Fresh Start (6 months)	37,500.00
Parenting with Love and Limits - Extended Care	272,203.00
Prevention	57,402.00
Specialty Courts	200,439.00
Vivitrol Pilot Program (6 months)	5,098.00
Youth Services	95,869.57
Agency Total	<u>678,661.57</u>
PROMISE HEALTHCARE - Mental Health Services	193,500.00
Wellness/Justice	49,000.00
Agency Total	<u>242,500.00</u>
RAPE ADVOCACY COUNSELING EDUCATION SERVICES (6 months)	9,300.00
TAP IN LEADERSHIP ACADEMY	
Kickback Lounge (5 months)	14,585.00
*Kickback Lounge Return of Unused Revenue CY16	(14,585.00)
Agency Total	<u>-</u>
UP CENTER OF CHAMPAIGN COUNTY	15,498.00
URBANA NEIGHBORHOOD CONNECTION-Community Study Center	12,000.00
GRAND TOTAL	<u><u>3,413,330.23</u></u>

* CY16 Payments returned by Tap In Leadership Academy are deducted here but not reflected in the Financial Report Grants and Contributions total; these funds were deposited into fund balance.

** Per Intergovernmental Agreement with the Champaign County Developmental Disabilities Board, approximately 18% of annual allocations are invested in programs for people with ID/DD.

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Service Totals – Brief Narrative of What the Service Categories Represent

The Champaign County Mental Health Board funds a wide range of services through local human service providers of varying size and sophistication. The CCMHB invests in services that range from helping mothers and families with newborn babies into early childhood to supporting youth through adolescence and young adulthood to assisting adults and families dealing with life's challenges to helping the elderly with activities of daily living. The not for profit and government agencies that provide services with CCMHB funds range from small agencies with only a few employees and volunteers to large multi-million dollar agencies with over a hundred employees. Descriptions of the service activities supported in current and previous years are available at <http://www.co.champaign.il.us/MHBDDDB/PublicDocuments.php> and <http://ccmhddbrds.org>.

Regardless of their size, agencies are required to report on services delivered using four categories. Those categories must be broad enough to provide a certain amount of flexibility to account for how and to whom the programs delivered services. The four categories are Community Service Event (CSE), Service Contact (SC), Non-Treatment Plan Client (NTPC), and Treatment Plan Client (TPC). Each agency is allowed to define within each category what will be reported. Definitions of CSEs and SCs relate to types of activities. Definitions of TPCs and NTPCs relate to who has been served and require a certain level of documentation associated with the service. Some programs may only report under one of the categories, others may report on all four. Which and how many categories an agency reports activity under depends on the services provided by the program.

Community Service Events (CSEs) can be public events, work associated with a news interview or newspaper article, consultations with community groups and caregivers, classroom presentations, and small group workshops and training to promote a program or educate the community. Meetings directly related to planning such events may also be counted here. Examples are the Family Service Self-Help Center planning and hosting of a self-help conference or newsletters published by the East Central Illinois Refugee Mutual Assistance Center.

A Service Contact (SC), also referred to as a screening contact or service encounter, represents the number of times a program has contact with consumers. Sometimes this can be someone who is being served by the program. Or it can be sharing of information, fielding a call about services, or doing an initial screenings or assessment. An example of a service contact would be the volume of calls answered by the Crisis Line at Rosecrance.

A Non-Treatment Plan Client (NTPC) is someone to whom services are provided and there is a record of the service but does not extend to a clinical level where a treatment plan is necessary or where one would be done but does not get completed. An example is a person who comes into the domestic violence shelter at Courage Connection but leaves within a few days before fully engaging in services.

A Treatment Plan Client (TPC) has traditionally meant people engaged in services where an assessment and treatment plan have been completed and case records are maintained. This applies to agencies such as Prairie Center, Promise Healthcare, and Rosecrance among others. It can also represent an individual receiving a higher level of care within the spectrum of services provided within a program.

Most contracts are funded as grants while a few are paid on a fee for service basis. Those operating on a fee for service basis have additional detail included in the table. Fee for service detail includes number and type of units of service the program delivered to clients.

SERVICE TOTALS FOR CONTRACT YEAR 2016 (7/1/15 - 6/30/16)

BY TYPE OF SERVICE UNIT

CSE = Community Service Event. Non-client specific service, e.g. public presentation, consultation advocacy for a target population, media event, workshop or community development activity.

SC = Service Contact/Screening Contact. Encounter to provide information, referral, assessment, crisis intervention or general service.

TPC = Treatment Plan Client. Client has a written assessment and service plan.

NTPC = Non-Treatment Plan Client. Brief service is provided without a written service plan.

FFS = Fee for Service. Pre-determined fee paid for defined unit of service.

CONTRACTED AGENCIES & PROGRAMS

	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>	<u>FFS Units</u>	<u>Type</u>
<u>Champaign County Children's Advocacy Ctr.</u>	8	156	240	12	----	----
<u>Champaign County Regional Planning Commission Social Services</u>						
Youth Assessment Center	42	55	104	16		
<u>Community Choices</u>						
Community Living	2		19		1519 hours plus 4 classes	
Customized Employment	4	835	43			
Self-Determination Support	4	1114	----	154		
<u>Community Elements, now Rosecrance C-U</u>						
AI Parenting with Love & Limits - Front End	----	----	52	----	----	----
Criminal Justice			195	419		
Crisis, Access, Benefits & Engagement	28	4481	----	315	----	----
Early Childhood Mental Health and Dev.	184	140	138	----	----	----
Psychiatric/Primary Care Services		605	113			
				<i>plus 270 clients served by nurse</i>		
TIMES Center (Screening MI/SA)	----	168	----	252	5934	1/4 hrs
<u>Community Service Center of Northern CC</u>						
Resource Connection	----	6498	----	1423	----	----
<u>Courage Connection</u>						
Courage Connection	194	663	311	11	----	----
<u>Crisis Nursery</u>						
Beyond Blue	142	1323	40	119	----	----
<u>Developmental Services Center</u>						
Individual and Family Support	2	18	20	17	----	----
<u>Don Moyer Boys and Girls Club</u>						
Community Engagement & Social Marketing	10	47	----	----	----	----
Youth and Family Engagement Services	43	424	----	155	----	----
<u>East Central Illinois Refugee Assistance Center (ECIRMAC)</u>						
Family Support and Strengthening	88	----	----	----	----	----
	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>	<u>FFS Units</u>	<u>Type</u>
<u>Family Service of Champaign County</u>						
Counseling	----	199	37	----	802	1/4 hrs
Self-Help Center	344	----	----	----	----	----
Senior Counseling and Advocacy	----	12291	324	1558	----	----

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Mahomet Area Youth Club

BLAST	331	286	---	504		
Members Matter!	81	162	---	81		

Prairie Center Health Systems

Criminal Justice Substance Use Treatment	----	20	10	160		
Drug Court Vivitrol Pilot	----	38	7	---		
Parenting with Love & Limits - Extended Care	----	----	60	----	----	----
Prevention Program	1301	----	----	----	----	----
Specialty Courts	5	4379	99	---		
Youth Services	52	115	74	67	4058	1/4 hrs

Promise Healthcare

Mental Health Services at Frances Nelson	----	1683	342	53	----	----
Wellness and Justice	36	1339	76	1148		

RACES Counseling & Crisis Services

178	23	28	8		
-----	----	----	---	--	--

UP Center Children, Youth, & Families Program

34	108	16	59		
----	-----	----	----	--	--

Urbana Neighborhood Connections Center

Community Study Center	----	----	----	432		
------------------------	------	------	------	-----	--	--

	<u>CSEs</u>	<u>SCs</u>	<u>TPCs</u>	<u>NTPCs</u>		
TOTAL GENERIC SERVICE UNITS	3,113	37,170	2,348	6,963		

	<u>Days</u>	<u>Hours</u>
TOTAL FEE BASED UNITS		3,203

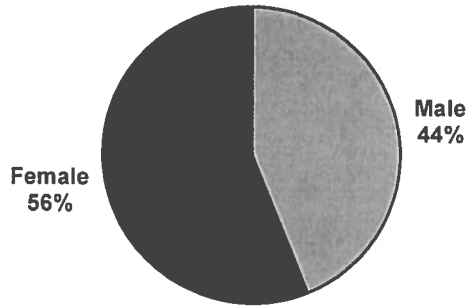
Notes on Service Data

Data are for the period of Contract Year 2016: July 1, 2015 to June 30, 2016.

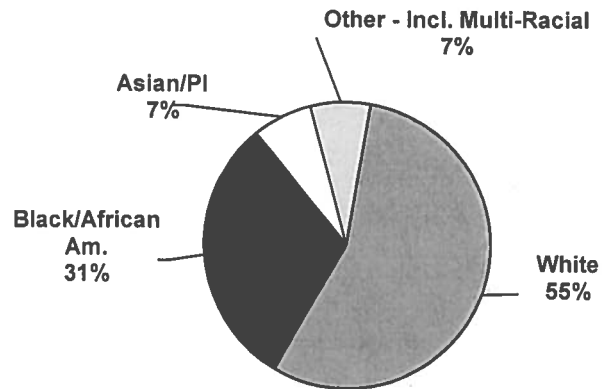
84

DEMOGRAPHIC AND RESIDENCY DATA FOR PERSONS SERVED IN CY2016

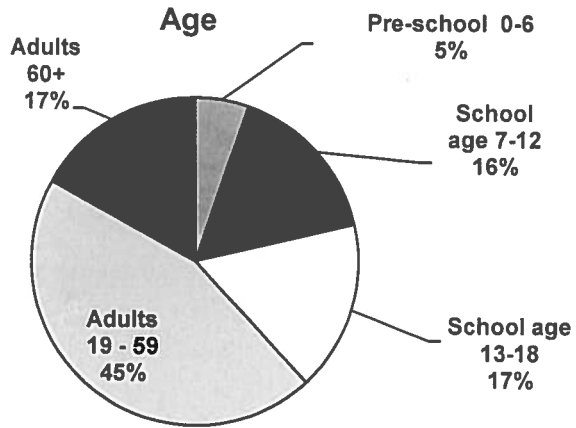
Gender



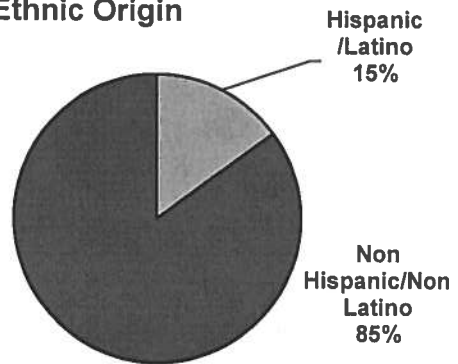
Race



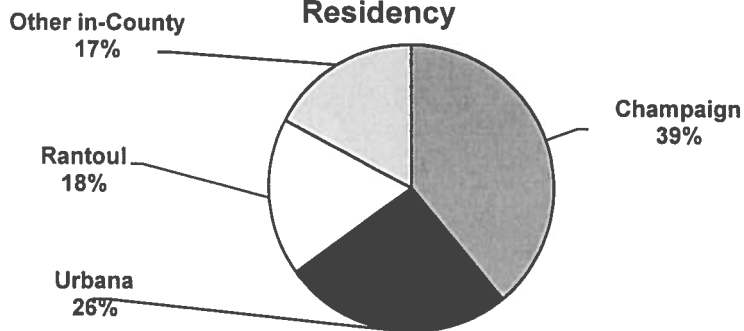
Age



Ethnic Origin

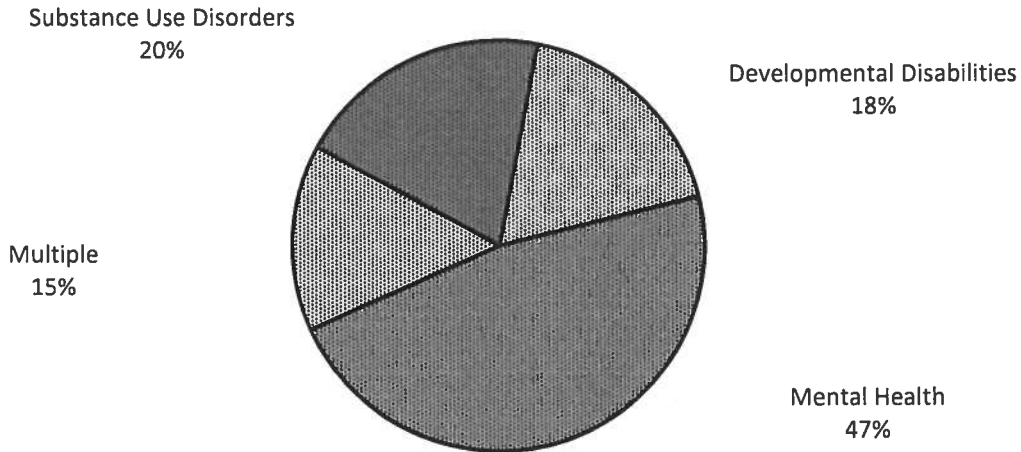


Residency

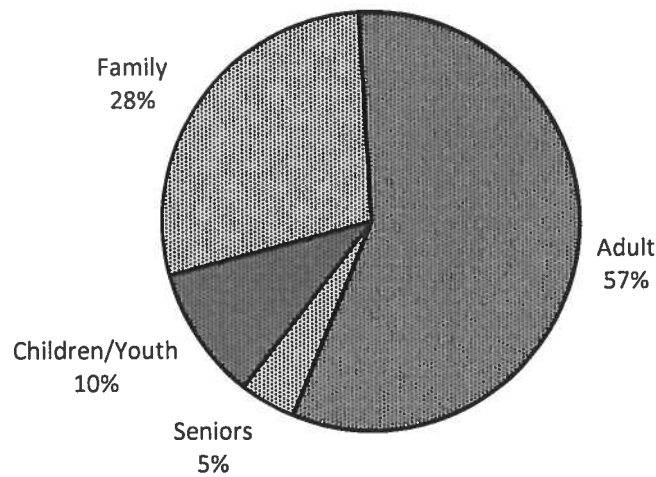


Funding by Sector, Population, and Service in Contract Year 2016 (CY16)

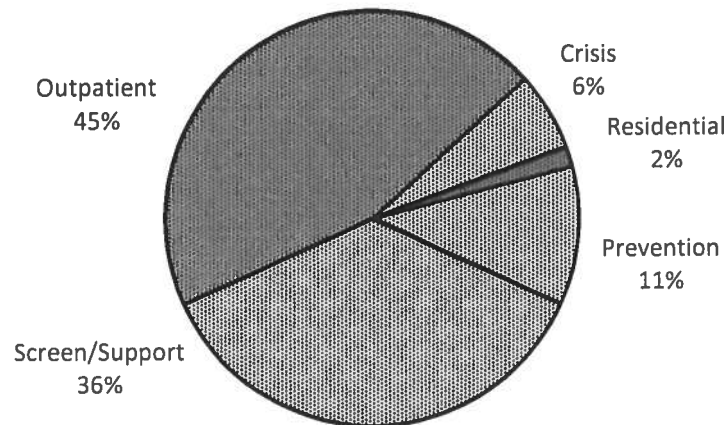
CCMHB CY16 Allocation by Community Mental Health Sector



CCMHB CY16 Allocation by Target Population



CCMHB CY2016 Allocation by Type of Service



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SECTION II: Three-Year Plan 2016-2018
with FY 2017 One-Year Objectives

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CHAMPAIGN COUNTY MENTAL HEALTH BOARD

THREE-YEAR PLAN

FOR

FISCAL YEARS 2016 - 2018
(1/1/16 – 12/31/18)

WITH

ONE YEAR OBJECTIVES

FOR

FISCAL YEAR 2017
(1/1/17 – 12/31/17)



CHAMPAIGN COUNTY MENTAL HEALTH BOARD

WHEREAS, the Champaign County Mental Health Board has been established under Illinois Revised Statutes (405 ILCS – 20/Section 0.1 et. seq.) 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, intellectual or 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, intellectual disabilities and 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.

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SYSTEMS OF CARE

Goal #1: Support a continuum of services to meet the needs of individuals with mental and/or emotional disorders, addictions, and/or intellectual or developmental disabilities and their families residing in Champaign County.

Objective #1: Under established policies and procedures, solicit proposals from community based providers in response to Board defined priorities and associated criteria using a competitive application process.

Objective #2: Hold a study session on multi-year contracts including potential impact on the budget of extending contract term for select programs and contingent on action by the Board, implement multi-year contracts for select programs.

Objective #3: Expand use of evidenced informed, evidenced based, best practice, and promising practice models appropriate to the presenting need, in an effort to improve outcomes for individuals across the lifespan and for their families and supporters.

Objective #4: Promote wellness for people with mental illnesses, substance use disorders, intellectual disabilities, or developmental disabilities to prevent and reduce early mortality, through support services including access to services addressing basic needs, enrollment in benefit plans and coordinated access to primary care.

Objective #5: Pursue, as feasible, development or expansion of residential and/or employment supports for persons with behavioral health diagnosis not supported through expansion of Medicaid or the Affordable Care Act.

Objective #6: As enrollment in health insurance and Medicaid managed care plans reduce the uninsured population, realign CCMHB dollars to fund services and supports outside the realm of Medicaid, e.g. Peer Supports.

Objective #7: Build evaluation capacity of contracted providers utilizing expertise of evaluators from the Department of Psychology at the University of Illinois.

Goal #2: Sustain commitment to addressing the need for underrepresented and diverse populations access to and engagement in services.

Objective #1: Support culturally responsive and family driven support networks for underrepresented populations, underserved populations, and general populations of Champaign County.

Objective #2: Require a cultural competence and linguistic competence plan, with bi-annual reports, as evidence of the provider's capacity to provide services to meet the needs of the population served.

Objective #3: Encourage providers and other community based organizations to allocate resources to provide training, seek technical assistance, and pursue other professional development activities for staff and governing and/or advisory boards to advance cultural and linguistic competence.

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Objective #4: Use the Culturally and Linguistically Appropriate Services Standards (CLAS) as a blueprint to strengthen funded agencies' Cultural and Linguistic Competence.

Goal #3: Improve consumer access to and engagement in services through increased coordination and collaboration between providers, community stakeholders, and consumers.

Objective #1: Encourage development of collaborative agreements between providers to increase or maintain access and coordination of services for consumers throughout Champaign County.

Objective #2: Participate in various coordinating councils whose mission aligns with the needs of the various populations of interest to the Board with the intent of strengthening coordination between providers in the delivery of services.

Objective #3: Explore at the Board level potential for collaboration on issues of mutual interest with the C-U Public Health District and the Champaign County Board of Health.

Objective #4: In conjunction with the United Way of Champaign County, monitor implementation of the 211 information and referral system.

Goal #4: Continue the collaborative working relationship with the Champaign County Board for Care and Treatment of Persons with a Developmental Disability (CCDDDB).

Objective #1: Coordinate integration, alignment, and allocation of resources with the CCDDDB to ensure the efficacious use of resources within the intellectual disability and developmental disability (ID/DD) service and support continuum.

Objective #2: Assess alternative service strategies that empower people with ID/DD and increase access to integrated settings as exemplified by the collaborative approach to the Employment First Act.

Objective #3: Concurrent with the CCDDDB, continue financial commitment to expand the availability of Community Integrated Living Arrangement (CILA) housing opportunities for people with ID/DD from Champaign County.

Objective #4: Collaborate with the Champaign County Board for the Care and Treatment of Persons with a Developmental Disability on issues of mutual interest as exemplified by the expansion of CILA housing and joint sponsorship of events promoting acceptance, inclusion, and respect for people with ID/DD.

MULTI-AGENCY INVOLVED YOUTH AND FAMILIES

Goal #5: Building on progress achieved through the six Year Cooperative Agreement between the Federal Substance Abuse and Mental Health Services Administration (SAMHSA), the Illinois Department of Human Services (IDHS), and the Champaign County Mental Health Board (CCMHB) implement a plan to sustain the SAMHSA/IDHS system of care model.

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Objective #1: Support the efforts of the Champaign Community Coalition and other system of care initiatives.

Objective #2: Continue community based partnerships and coordination of evidence based services and supports for youth and families such as occurring through CHOICES.

Objective #3: Ongoing support of Champaign County family-run organizations that incorporate family-driven and youth-guided principles. In recognition of the importance of multi-system involved families and youth, maintain direct involvement and input about decisions that are made. Encourage organizations' focus on peer support specialists, peer-to-peer support, advocacy at the local level, and statewide expansion of family-run organizations.

CRIMINAL JUSTICE AND MENTAL HEALTH SYSTEM COLLABORATION

Goal #6: Support infrastructure development and investment in services along the five criminal justice intercept points to divert from the criminal justice system, as appropriate, persons with behavioral health needs or developmental disabilities.

Objective #1: Continue involvement in the Crisis Intervention Team Steering Committee in support of increased collaboration between law enforcement and crisis team response in the community.

Objective #2: Sustain efforts to engage persons with behavioral health diagnoses re-entering the community from jail or prison or with recent involvement with the criminal justice system, in treatment and other support services.

Objective #3: Maintain commitment to the Problem Solving Courts operating in Champaign County including continued participation on the Specialty Court Steering Committee.

Objective #4: Support integrated planning and service coordination for adults involved in the criminal justice system through participation in the Champaign County Re-Entry Council.

Objective #5: Through the National Association of County Behavioral Health and Developmental Disability Directors (NACBHDD), in its partnership with the National Association of Counties (NACo,) pursue opportunities for technical assistance and support through the "Decarceration Initiative," "Stepping Up: A National Initiative to Reduce the Number of People with Mental Illnesses in Jails," and the "Data Driven Justice Initiative." Encourage and participate in other similar collaborative opportunities aimed at improving outcomes for those with behavioral health needs involved with the criminal justice system.

Goal #7: In conjunction with the Champaign County Sheriff's Office and other community stakeholders provide an alternative to incarceration and/or overutilization of local Emergency Departments for persons with behavioral health needs or developmental disabilities.

Objective #1: Serve on the Crisis Response Planning Committee, the planning body established under the Justice and Mental Health Collaboration award

from the Department of Justice, and commit resources necessary to meet the matching funds requirement of the DoJ award.

Objective #2: Identify options for developing jail diversion services including a center to provide behavioral health assessments, crisis stabilization and detoxification from alcohol and/or other substances as may be necessary to serve Champaign County.

Objective #3: Secure commitment to support and sustain the development of a diversion center from vested stakeholders in the public and private sectors.

Objective #4: Use public input gathered through these collaborations to guide advocacy for planning and policy changes at the state and federal levels, local system redesign and enhancement, and in the consideration of future funding priorities for the CCMHB.

Goal #8: Support interventions for youth who have juvenile justice system involvement to reduce contact with law enforcement or prevent deeper penetration into the system.

Objective #1: Support continued implementation of the Parenting with Love and Limits (PLL) program based on positive evaluation and feedback from community partners and stakeholders.

Objective #2: Monitor local utilization of PLL and pursue options as necessary to address potential excess capacity.

Objective #3: Through participation on the Youth Assessment Center Advisory Board advocate for community and education based interventions contributing to positive youth development and decision-making.

Objective #4: Through participation and engagement in the Champaign Community Coalition and other community focused initiatives, promote and encourage multi-collaborative approaches for prevention and reduction of youth violence trends and activities.

Objective #5: Promote and support those targeted interventions that specifically address historical trauma experienced by African American and other minority youth disproportionately impacted in multiple systems.

Objective #6: Utilize the principles from "Models for Change" to reduce the disproportionate minority contact with law-enforcement and involvement with the juvenile justice system.

COMMUNITY ENGAGEMENT & ADVOCACY

Goal #9: Address the need for acceptance, inclusion and respect associated with a person's or family members' mental illness, substance use disorder, intellectual disability, 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 efforts to challenge stigma and discrimination, such as the Champaign County Alliance for the Promotion of Acceptance, Inclusion and Respect signature event at Roger Ebert's Film Festival and other community education events including

disABILITY Resource Expo: Reaching Out for Answers and the National Children's Mental Health Awareness Day.

Objective #2: Promote substance use disorder prevention initiatives as a community education tool targeting youth and young adults.

Objective #3: Participate in behavioral health community education initiatives, such as national depression screening day, to encourage individuals to be screened and seek further assistance where indicated.

Objective #4: Encourage and support efforts to more fully integrate people with behavioral health disorders and/or intellectual or developmental disabilities into community life in Champaign County.

Goal #10: 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 and the expansion of Medicaid 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 intellectual disabilities or 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 or seeking fuller integration in their communities.

Objective #3: Continue broad based advocacy efforts at the state and local levels to respond to continued reductions in state funding and delays in payment for local community based mental health, substance use disorder, and intellectual disability and developmental disability services and supports and to the broader human services network under contract with the State of Illinois. As opportunities arise, participate in planning and policy development with state agencies such as IDHS, and use these opportunities to advocate for the needs of Champaign County residents.

Objective #4: Through the National Association of County Behavioral Health and Developmental Disability Directors, monitor the federal rulemaking process applying parity to Medicaid Managed Care and associated benefit plans and on the Institutions for Mental Disease (IMD) Medicaid Exclusion. Use opportunities for public comment on proposed rules and legislative action to advocate for the needs of our community.

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15.C.

BRIEFING MEMORANDUM

DATE: July 19, 2017
TO: Members, Champaign County Mental Health Board (CCMHB)
FROM: Lynn Canfield, Executive Director
SUBJECT: Two-Year Contracts

Background

The issue of extending the term of a subset of agency contracts was discussed at October 19 and November 16, 2016 meetings of the Champaign County Mental Health Board (CCMHB.) Agencies had expressed an interest in extended terms, and board members had indicated that reducing the number of applications to review each year would strengthen their work. The CCMHB Three Year Plan includes language acknowledging the interest in an extended term, and the FY2018 Funding Priorities document and CCMHB Standard Operating Procedures both allow for Multi-Year contracts with a maximum term of two years.

The following concerns were raised and addressed:

- 1. Do other county behavioral health authorities use multi-year funding?**
Members of the Association of Community Mental Health Authorities of Illinois responded to the question through email. Many shared cautions about the loss of flexibility by contracting for any term beyond a single year, especially in communities with many providers. Others contracted with agencies for a period longer than one year where these contracts/programs tended to have few or no changes from one year to the next. One 708 board used 18 month contracts and another was considering three year contracts, to stabilize funding and identify best outcomes for people served. A third 708 used three year contracts broadly but required some level of re-application each year.
- 2. How does the proposed action align with initial findings of the UIUC Evaluation Capacity study?**
From page 24 of the June 17, 2016 report by UIUC Department of Psychology researchers: “Consider Two-Year Contracts to Encourage Innovation and Evaluation. One of the challenges in the use of evaluation is that it takes time to implement and see results. It is likely that agencies would be pursuing funding for the following year *before* they have learned anything from their current year of implementation. In instances in which people are actively engaged in a new, innovative, evidence-based or highly desired effort (i.e., in strong alignment with CCMHB priorities) two-year funding might facilitate more

deliberate data driven practices. These contracts could be reserved for high priority areas for the Board and/or when programs are engaged in considerable innovation. Two year contracts would require an evaluation plan with a logic model (see #3) that clearly indicated what data would be gathered and how it would be used.”

3. What criteria determine whether a contract is appropriate for this extension?

It has been our experience that some priorities continue from year to year and that some programs perform consistently to expectation, so that offering a second year to the current term may cause little disruption to the priority-setting and allocation processes. We asked agencies to let us know which contracts they would like to have considered for a longer term. From that set, staff discussion of best contracts for second year extension focused on those contracts with a longer history of CCMHB award and no serious compliance issues upon monitoring or desk review.

4. Would it be better to focus on new programs/special initiatives, with two years of funding to provide some stability for implementation? Should we wait for the final recommendations of the UIUC Evaluation Capacity study before defining a two-year contracting approach?

At the November 16, 2016, CCMHB members asked that no action be recommended on the issue of multi-year contracting until the results of the Evaluation Capacity project could be considered. At the May 15, 2017 meeting of the Program Evaluation Committee, the topic was raised, and researchers stated that they had no further recommendations on this matter.

Recommendation

While the stability of a two-year contract may be helpful to Special Initiative projects, young programs may learn during their first year that the need for revisions to the original proposed plan or budget are so great that the second year warrants a significantly different plan.

Further, we continue to plan and predict within a very unstable funding environment, now including the uncertain future of Medicaid itself. Single year contract terms allow flexibility for both the board and providers, as funding priorities may change in response to the needs and preferences of individuals seeking or using behavioral health or intellectual/developmental disabilities services in Champaign County. Provider organizations are responding to a variety of changes in state and federal service delivery and payment systems. As a protection, all contracts contain language allowing for termination or redirection of effort when warranted by circumstances such as change in federal regulation or insufficient levy fund.

These considerations underlie the staff recommendation to proceed as suggested in the fall of 2016. While the value to board members, board staff, and agency staff may only be a matter of convenience - in the reduction of time needed to review and evaluate applications in the spring of 2018 - this now seems very valuable. We may learn from the first round of multi-year contracts, we may develop a rationale for a second set, with terms of July 1, 2018 to June 30, 2020.

A handwritten signature or set of initials, possibly '9/6', enclosed within a hand-drawn oval shape.

Agencies would still be required to update program and financial forms on the online system prior to the start of the second year of the contract. All forms required for the annual application process would still be submitted, allowing for relevant updates and monitoring, and the year-end performance outcomes, quarterly program and financial report, and CLC progress reports would capture mid-term results.

A preliminary list of contracts considered well-suited for extension of term to June 30, 2019 has been drafted based on staff analysis and agency interest from last fall. A review of the list and confirmation of continued interest in a multi-year term for select contracts by agencies would be necessary if the Board plans to move forward with multi-year contracts.

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DRAFT

July 2017 to June 2018 Meeting Schedule with Subject and Allocation Timeline*

The schedule provides the upcoming dates and subject matter of board meetings through June 2018 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 with potential dates listed. Study session topics will be based on issues raised at board meetings, brought to the CCMHB by staff, or in conjunction with the Champaign County Developmental Disabilities Board.

Included with the meeting dates is a tentative schedule for the CCMHB allocation process for Contract Year 2018 (July 1, 2018 – June 30, 2019).

Timeline	Tasks
6/28/17	Study Session Parenting with Love and Limits
7/19/17	Regular Board Meeting Approve Draft Budget 2016 Approve Annual Report
7/26/17	Tentative Study Session/Regular Meeting
9/20/17	Regular Board Meeting
9/27/17	Study Session
10/18/17	Regular Board Meeting Release Draft Three Year Plan 2016-2018 with FY18 Objectives Release Draft Contract Year 2019 Allocation Criteria
10/25/17	Study Session
11/15/17	Regular Board Meeting Approve Three Year Plan with One Year Objectives Allocation Decision Support – CY19 Allocation Criteria
11/29/17	Study Session

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12/13/17	<i>Public Notice to be published on or before this date, giving at least 21-day notice of application period.</i>
12/13/17	Regular Board Meeting (tentative)
01/05/18	<i>Open CCMHB/CCDDB Online System access to CCDDB CY 2019 Agency Program and Financial Plan Application forms.</i>
1/17/18	Regular Board Meeting Election of Officers
1/24/18	Study Session
2/2/18	<i>Online System Application deadline – System suspends applications at 4:30PM (CCMHB close of business).</i>
2/9/18	<i>List of Requests for CY19 Funding</i>
2/21/18	Regular Board Meeting List of Requests for CY19 Funding
2/28/18	Study Session
3/21/18	Regular Board Meeting 2017 Annual Report
3/28/18	Study Session
4/11/18	<i>Program summaries released to Board, copies posted online with CCMHB April 18, 2018 meeting agenda</i>
4/18/18	Regular Board Meeting Program Summaries Review and Discussion
4/25/18	Study Session Program Summaries Review and Discussion
5/9/18	<i>Allocation recommendations released to Board, copies posted online with CCMHB May 16, 2018 meeting agenda.</i>
5/16/18	Study Session Allocation Decisions
5/23/18	Regular Board Meeting Allocation Decisions

Authorize Contracts for CY19

6/20/18

Regular Board Meeting
Approve FY19 Draft Budget

6/27/18

CY19 Contracts completed/First Payment Authorized

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CCMHB 2017-2018 Meeting Schedule

**First Wednesday after the third Monday of each month--5:30 p.m.
Brookens Administrative Center
Lyle Shields Room
1776 E. Washington St., Urbana, IL (unless noted otherwise)**

July 19, 2017

July 26, 2017 – tentative

September 20, 2017

September 27, 2017 – study session

October 18, 2017

October 25, 2017 – study session

November 15, 2017

November 29, 2017 – study session

December 13, 2017 - tentative

January 17, 2018

January 24, 2018 – study session

February 21, 2018

February 28, 2018 – study session

March 21, 2018

March 28, 2018 – study session

April 18, 2018

April 25, 2018 – study session

May 16, 2018 – study session

May 23, 2018

June 20, 2018

****This schedule is subject to change due to unforeseen circumstances. Please call the CCMHB-CCDDB office to confirm all meetings.***

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Agency and Program acronyms

BLAST – Bulldogs Learning and Succeeding Together. A Mahomet Area Youth Club program.

CAC - Children's Advocacy Center

CC – Community Choices

CCDDB – Champaign County Developmental Disabilities Board

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

CCMHB – Champaign County Mental Health Board

CCRPC – Champaign County Regional Planning Commission

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

CN - Crisis Nursery

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

Courage Connection – agency previously known as The Center for Women in Transition

DMBGC - Don Moyer Boys & Girls Club

DSC - Developmental Services Center

ECIRMAC – East Central Illinois Refugee Mutual Assistance Center

ECMHD - Early Childhood Mental Health and Development, a program of Rosecrance Champaign/Urbana

FDC – Family Development Center

FS - Family Service of Champaign County

FN - Frances Nelson previously known as Frances Nelson Health Center Health Center. Healthcare facility operated by Promise Healthcare

GAP – Girls Advocacy Program, a program component of the Psychological Service Center.

MAYC - Mahomet Area Youth Club

MRT – Moral Reconciliation Therapy, a systematic treatment strategy that seeks to decrease recidivism among juvenile and adult criminal offenders by increasing moral reasoning.

PEARLS - Program to Encourage Active Rewarding Lives

PCHS - Prairie Center Health Systems

PHC – Promise Healthcare

PSC - Psychological Services Center (University of Illinois)

RAC or ECIRMAC – East Central Illinois Refugee Mutual Assistance Center

RACES – Rape Advocacy, Counseling, and Education Services

RCU – Rosecrance Champaign/Urbana

RPC – Champaign County Regional Planning Commission

TIMES Center – Transitional Initiative Men’s Emergency Shelter Center, a program of Rosecrance Champaign/Urbana

UCP – United Cerebral Palsy

UNCC – Urbana Neighborhood Community Connections Center

UP Center – Uniting in Pride Center

UW – United Way of Champaign County

YAC – Youth Assessment Center. Screening and Assessment Center developed by the Champaign County Regional Planning Commission-Social Services Division with Quarter Cent funding.

Glossary of Other Terms and Acronyms

211 – Similar to 411 or 911. Provides telephone access to information and referral services.

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

ACA – Affordable Care Act

ACMHAI – Association of Community Mental Health Authorities of Illinois

APN – Advance Practice Nurse

ARMS – Automated Records Management System. Information management system used by law enforcement.

ASAM – American Society of Addiction Medicine. May be referred to in regards to assessment and criteria for patient placement in level of treatment/care.

ASD – Autism Spectrum Disorder

ASQ – Ages and Stages Questionnaire. Screening tool used to evaluate a child's developmental and social emotional growth.

ATOD – Alcohol, Tobacco and Other Drugs

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

CANS – Child and Adolescent Needs and Strengths. The CANS is a multi-purpose tool developed to support decision making, including level of care, service planning, and monitoring of outcomes of services.

CBCL – Child Behavior Checklist.

CC – Champaign County

CCBoH – Champaign County Board of Health

C-GAF – Children's Global Assessment of Functioning

CILA – Community Integrated Living Arrangement

CIT – Crisis Intervention Team; law enforcement officer trained to respond to calls involving an individual exhibiting behaviors associated with mental illness.

CLC – Cultural and Linguistic Competence

CLST – Casey Life Skills Tool

CQL – Council on Equality and Leadership

CRT – Co-Responder Team; mobile crisis response intervention coupling a CIT trained law enforcement officer with a mental health crisis worker.

CSEs - Community Service Events. Is a category of service measurement on the Part II utilization form and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section of the application/program plan. It relates to the number of public events (including mass media and articles), consultations with community groups and/or caregivers, classroom presentations, and small group workshops to promote a program or educate the community. Activity (meetings) directly related to planning such events may also be counted here. Actual direct service to clientele is counted elsewhere.

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

CY – Contract Year, runs from July to following June. For example CY08 is July 1, 2007 to June 30, 2008. (Also may be referred to as Program Year – PY). Most contract agency Fiscal Years are also from July 1 to June 30 and may be interpreted as such when referenced in a Program Summary e.g. FY07

CYFS – Center for Youth and Family Solutions (formerly Catholic Charities)

DASA – Division of Alcoholism and Substance Abuse in the Illinois Department of Human Services.

DCFS – Illinois Department of Children and Family Services.

Detox – abbreviated reference to detoxification. It is a general reference to drug and alcohol detoxification program or services, e.g. Detox Program.

DD – Developmental Disability

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

funding with locally generated funds. The required local match is 25 percent of the total DFI award.

DHFS – Illinois Department of Healthcare and Family Services. Previously known as IDPA (Illinois Department of Public Aid)

DHS – Illinois Department of Human Services

DMHARS – Division of Mental Health and Addiction Recovery Services. This is the new division at the Department of Human Services that brings together the Division of Alcohol and Substance Abuse and the Division of Mental Health.

DSM – Diagnostic Statistical Manual.

DSP – Direct Support Professional

DT – Developmental Training

EI – Early Intervention

EPDS – Edinburgh Postnatal Depression Scale – Screening tool used to identify mothers with newborn children who may be at risk for prenatal depression.

EPSDT – Early Periodic Screening Diagnosis and Treatment. Intended to provide comprehensive and preventative health care services for children under age 21 who are enrolled in Medicaid.

ER – Emergency Room

FACES – Family Adaptability and Cohesion Evaluation Scale

FAST – Family Assessment Tool

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

FOIA – Freedom of Information Act.

FQHC – Federally Qualified Health Center

FTE – Full Time Equivalent is the aggregated number of employees supported by the program. Can include employees providing direct services (Direct FTE) to clients and indirect employees such as supervisors or management (Indirect FTE).

FY – Fiscal Year, for the county runs from December to following November. Changing in 2015 to January through December.

GAF – Global Assessment of Functioning. A subjective rating scale used by clinicians to rate a client's level of social, occupational and psychological functioning. The scale included in the DSM-IV has been replaced in the DSM-V by another instrument.

GAIN-Q - Global Appraisal of Individual Needs-Quick. Is the most basic form of the assessment tool taking about 30 minutes to complete and consists of nine items that identify and estimate the severity of problems of the youth or adult.

GAIN Short Screen - Global Appraisal of Individual Needs, is made up of 20 items (four five-item subscales). The GAIN-SS subscales identify: internalizing disorders, externalizing disorders, substance use disorders, crime/violence.

HRSA – Health Resources and Services Administration. The agency is housed within the federal Department of Health and Human Resources and has responsibility for Federally Qualified Health Centers.

ICADV – Illinois Coalition Against Domestic Violence

ICASA – Illinois Coalition Against Sexual Assault

ICDVP - Illinois Certified Domestic Violence Professional

ICFDD – Intermediate Care Facility for the Developmentally Disabled

ICJA - Illinois Criminal Justice Authority

ID – Intellectual Disability

IDOC – Illinois Department of Corrections

I&R – Information and Referral

ISC – Independent Service Coordination

ISP – Individual Service Plan

ISSA – Independent Service & Support Advocacy

JDC – Juvenile Detention Center

JJ – Juvenile Justice

JJPD – Juvenile Justice Post Detention

LCPC – Licensed Clinical Professional Counselor

LCSW – Licensed Clinical Social Worker

LGBTQ – Lesbian, Gay, Bi-Sexual, Transgender, Queer

LPC – Licensed Professional Counselor

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

MH – Mental Health.

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

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

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

NMT – Neurodevelopmental Model of Therapeutics

NTPC -- NON - Treatment Plan Clients – This is a new client engaged in a given quarter with case records but no treatment plan - includes: recipients of material assistance, non-responsive outreach cases, cases closed before a plan was written because the client did not want further service beyond first few contacts or cases assessed for another agency. It is a category of service measurement providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II utilization form application/program plan and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section of the application. Similar to TPCs, they may be divided into two groups – Continuing NTPCs - clients without treatment plans served before the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which this data is reported. Essentially it is a case carried from one program year into the next. The other is New TPCs that is the number of new clients in a given quarter of the program year.

NREPP – National Registry of Evidence-based Programs and Practices maintained by Substance Abuse Mental Health Services Administration (SAMHSA)

OMA – Open Meetings Act.

PAS – Pre-Admission Screening

PCI – Parent Child Interaction groups.

PCP – Person Centered Planning

PLAY – Play and Language for Autistic Youngsters. PLAY is an early intervention approach that teaches parents ways to interact with their child who has autism that promotes developmental progress.

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

PPSP – Parent Peer Support Partner

PTSD – Post-Traumatic Stress Disorder

PUNS – Prioritization of Urgency of Need for Services. PUNS is a database implemented by the Illinois Department of Human Services to assist with planning and prioritization of services for individuals with disabilities based on level of need. An individuals' classification of need may be emergency, critical or planning.

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

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

QIDP – Qualified Intellectual Disabilities Professional

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

SA – Substance Abuse

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

SASS – Screening Assessment and Support Services is a state program that provides crisis intervention for children and youth on Medicaid or uninsured.

SBIRT – Screening, Brief Intervention, Referral to Treatment. SAMHSA defines SBIRT as a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders.

SCs - Service Contacts/Screening Contacts. This is the number of phone and face-to-face contacts with consumers who may or may not have open cases in the program. It can include information and referral contacts or initial screenings/assessments or crisis services. May sometimes be referred to as a service encounter (SE). It is a category of service measurement providing a picture of the volume of activity in the prior program year and a projection for the coming program year on the Part II utilization form of the application/program plan and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section of the application.

Seeking Safety - a present-focused treatment for clients with a history of trauma and substance abuse.

SEL – Social Emotional Learning

SFI – Savannah Family Institute. Manages the Parenting with Love and Limits (PLL) model.

SUD – Substance Use Disorder

TALKS - TALKS Mentoring (Transferring A Little Knowledge Systematically)

TPCs - Treatment Plan Clients – This is the number of service recipients with case records and treatment plans. It is a category of service measurement providing an actual number of those served in the prior program year and a projection for the coming program year on the Part II utilization form of the application/program plan and the actual activity to be performed should also be described in the Part I Program Performance Measures-Utilization section of the application. Treatment Plan Clients may be divided into two groups – Continuing TPCs - clients with treatment plans written prior to the first day of July and actively receiving services within the first quarter of the new program year. The first quarter of the program year is the only quarter in which this data is reported. Essentially it is a case carried from one program year into the next. The other is New TPCs that is the number of new clients with treatment plans written in a given quarter of the program year.

WHODAS – World Health Organization Disability Assessment Schedule. It is a generic assessment instrument for health and disability and can be used across all diseases, including mental and addictive disorders. The instrument covers 6 domains: Cognition, Mobility; Self-care; Getting along; Life activities; and Participation. Replaces the Global Assessment of Functioning in the DSM-V.

WRAP – Wellness Recovery Action Plan, is a manualized group intervention for adults that guides participants through the process of identifying and understanding their personal wellness resources and then helps them develop an individualized plan to use these resources on a daily basis to manage their mental illness.

YASI – Youth Assessment and Screening Instrument. Instrument assesses risks, needs, and protective factors in youth. Instrument is used in Champaign County by the Youth Assessment Center, Juvenile Detention Center, and Parenting with Love and Limits programs.